Peer Support for People with Personality Disorder

A Peer and Clinician Co-Facilitated Group Program

Facilitator Manual
Project Air Strategy acknowledges the major support of the NSW Ministry of Health. The Project works with mental health clinicians, consumers and carers to deliver effective treatments, implements clinical strategies supported by scientific research and offers high quality training and education.

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Peer Support for People with Personality Disorder: A Peer and Clinician Co-Facilitated Group Intervention – Facilitator Manual


The Project Air Strategy for Personality Disorders acknowledges the clinicians and researchers who assisted in the development process (Nicholas Day, Elizabeth Huxley, Kate Lewis, Denise Meuldijk and Caitlin Miller).


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Definitions

Facilitator

A facilitator is a person who is responsible for running and leading an activity or program. The term is used in the Peer Support Group manuals (facilitator manual and participant workbook) to describe both the peer facilitator and the mental health clinician.

Peer Facilitator

In the Peer Support Group manuals the ‘peer facilitator’ refers to the facilitator who has lived experience of personality disorder (specifically traits of borderline personality disorder) and identifies with being ‘in recovery’ or ‘recovered’. The peer facilitator is trained in the Peer Support Group model.

Mental Health Clinician

The term ‘mental health clinician’ refers to any clinician who has tertiary qualifications in mental health. This includes; psychologists, social workers, mental health nurses, psychiatrists or other qualified health workers.

Personality Disorder

Personality disorder is a mental health disorder recognized by the International Classification of Diseases (ICD), and the Diagnostic and Statistical Guide for Mental Disorders (DSM). Personality disorder refers to personality traits that are maladaptive and pervasive in a number of contexts over an extended duration of time, causing significant distress and impairment.

Borderline Personality Disorder

Borderline Personality Disorder (BPD) is a mental health disorder recognized under the categorical systems of the International Classification of Diseases (ICD) and the Diagnostic and Statistical Guide for Mental Disorders (DSM). BPD is characterised by patterns of interpersonal conflict, emotional dysregulation including anger and impulsivity and difficulties with identity or a healthy sense of self.
Introduction to the Manual

Impetus of this Peer Support Intervention

Specialist psychotherapies have been developed for the treatment of personality disorder, where research evidence have demonstrated good outcomes for individuals who engage in these therapies (Cristea et al., 2017). Despite this, the capacity of mainstream mental health services to provide longer-term therapies have resulted in long waiting lists and calls for alternative forms of support. This coincides with calls from individuals with lived experience for greater amounts of community-based supports.

Parallel to the need for more support services for personality disorder are the desires of individuals with personality disorder who identify with being in recovery or recovered to ‘give back’ or offer learnings from their experiences to provide hope to others. This aligns with calls from policy for the development of the peer workforce, presenting a unique opportunity for the growth of new models of care for individuals with personality disorder.

Development of this manual

The development of this manual was initiated through consultation with individuals with lived experience of personality disorder and the concerns over the difficulties with accessing treatment and services. The high demand for services in the treatment of personality disorder has been recognised internationally, where there is a growing need to develop new models of care (Grenyer et al., 2017).

Peer Support

Policy surrounding mental health service design and delivery have increasingly called for services to be recovery-oriented (Commonwealth of Australia, 2013a, 2013b). Approaches to recovery-oriented mental health servicing have recognised the lived experiences of individuals with mental health issues and their family and carers, the need for person-centred care and the consideration of personally meaningful outcomes beyond the realms of symptom change (Ng, Bourke & Grenyer, 2016).

Peer support is one approach to recovery-oriented servicing, which utilises the experiential knowledge and expertise of individuals with lived experience who are in recovery or recovered from mental health concerns (Stratford et al., 2017). Additionally, this has been reflected in policy documents which advocate for the development of the peer workforce (Mental Health Commission of New South Wales, 2014).

Peer support is an approach which deflects from traditional forms of mental health service delivery. Individuals who undertake a peer support role have experience of mental ill health and are in recovery or have recovered, where their knowledge and experiences are utilised to provide services or support for others (Davidson, Chinman, Sells, & Rowe, 2006). Peer support services are increasingly being adopted by mainstream mental health services, where the principles and values underpinning the practice of peer support have been argued to distinguish peer support from other types of helping relationships (such as psychotherapeutic or friendships). Various papers have sought to understand the underlying principles and values of peer support (Gillard et al., 2017; Stratford et al., 2017). The international charter for peer support identified principles including:

- Focusing on empowering individuals to take an active central role in working towards recovery and wellbeing
- Promotion of dignity and social inclusion of all people with personality disorder
- The peer supporter role derives credibility through the lived experiences of individuals
- The reciprocal nature of the peer support relationship
Several studies have contributed to the understanding of values underpinning peer support, however all studies have included elements associated with equality, hope, trust, respect, acceptance and understanding, shared experiences and responsibility (Gillard et al., 2017; Stratford et al., 2017).

These principles and values of peer support have been closely tied to understanding the mechanisms of change. In a qualitative study of 10 peer workers, three core processes were identified to be a facilitator for change (Gillard et al., 2015):

1. Development of trusting relationships that is based on lived experience, through connecting with others and also the building of relationships
2. Having a role model to understand personal recovery and how to live well with mental health issues, which assist in providing a sense of hope
3. Facilitate engagement with the community and mental health services

Studies evaluating services provided by peer support workers have demonstrated mixed findings in the effectiveness of peer support across multiple studies. Yet, a Cochrane systematic review concluded that ‘involving consumer-providers (peer facilitators) in mental health teams results in psychosocial, mental health symptom and service use outcomes for clients that were no better or worse than those achieved by professionals employed in similar roles’ (Pitt et al., 2013). Similarly, in comparing three types of peer support (peers added to traditional services, peers in existing clinical roles and peers delivered structured curricula), Chinman and colleagues (2014) identified that services involving peers were as effective as those that did not involve peers. The differences in outcomes between cross sectional studies and randomised control trials have also been identified, where outcomes in cross sectional studies are more favourable (Chinman et al., 2014; Pitt et al., 2013).

Arguments have been made to suggest that the outcomes and measures used to understand the effectiveness and efficacy of peer support services needs to be more aligned with the principles and values of peer support. However, given the calls within policy for the development of the peer workforce, the evidence base for peer services and interventions need to be further developed.

Theoretical orientation of the Peer Support Intervention

This Peer Support Group program was developed in accordance to the relational model, as advocated by the Project Air Strategy (Project Air Strategy, 2015). The relational model recommends care to be provided in an integrative and collaborative manner, focusing not only on individuals with personality disorder but also on their family, carers, clinicians and the health service. The relational model acknowledges that the development of personality disorder stems from problematic and dysfunctional relationship patterns that have been developed over time, where relational difficulties are intrapersonal (relationship with oneself) and interpersonal (relationship with others) (Grenyer, 2012). As such, within the context of the peer support intervention as described in this manual, the relational model refers to the relationships the individual has with themselves, with other group members, with the facilitators, the health service or organisation, family and carers, and the wider the community.

Studies in personality disorder have established an individual’s capacity to mentalise is associated with attachment style (Fonagy & Luyten, 2009). Having a secure attachment with a caregiver during childhood can assist an individual to understanding themselves and other people (Fonagy & Luyten, 2009), such that the curious stance of the caregiver provides the opportunity for the processing of information and emotions. While the relationships between group members and facilitators are constrained by the boundaries of the therapeutic frame, they act to provide the experience of support and secure attachment. This mimics the effective therapeutic stance in the treatment of personality disorders, with facilitators encouraged to play an active role and take on a ‘curious stance’ in fostering learning. The open curious stance refers to facilitators understanding group members and taking a genuine interest in the experiences and welfare of group members and to provide a safe space for exploring difficulties. This can assist in the development of the capacity of group members to mentalise, that is the capacity to understand their own and others’ mental states (Fonagy, Campbell & Bateman, 2017). The mentalising capacity of group members may be further developed through the shared lived experiences between group members and the peer facilitator. Furthermore, the
combination of the curious stance of facilitators with peer support principles can assist in creating a space which not only allows individuals to learn skills on managing symptoms but also provides a role model who is able to demonstrate personal recovery and living well with or without mental health concerns.

Difficulties with trust are commonly associated with BPD. These may manifest in the context of relationships and are thought to relate to differences in the processing and interpretation of social information observed in BPD. The relational dynamics between group members and facilitators contribute to developing epistemic trust and reducing epistemic vigilance in group members. The lived experiences of the peer facilitator and the group members and the knowledge of mental health professionals, provide a new source of information and knowledge base for learning about oneself and others. The peer support intervention capitalizes upon these sources through the inclusion of group member sharing and psychoeducation and skills development components. The collaborative nature of the intervention reinforces the notion that facilitators are not viewed to be ‘teachers’ or ‘experts’ but rather people who foster learning.

While this intervention includes skills development, a crucial component relates to the development of these skills in the context of relational interaction and learning, with other group members and with facilitators. The peer facilitator plays the important role of modelling personal recovery and the capacity for living well with or without mental health concerns. A unique aspect of this intervention is focused on creating a space for relational interaction, learning about oneself and others through shared experiences, and in-the-moment practise of skilful responses to potential distress.

**Effective treatment for personality disorder**

Common elements of effective treatments for personality disorder have been identified in the literature (Bateman, Gunderson & Mulder, 2015), comprising of five main principles. This manual has adopted these five principles into the design of the peer support intervention. The five common elements as reflected in this manual include:

1. Structured (manual directed) approach
2. Group members are encouraged to assume control/take responsibility of themselves
3. Facilitators help to connect feelings with situations and actions
4. Facilitators are active, responsive, and validating
5. Facilitators take part in supervision with their supervisor to debrief and discuss group processes and personal reactions
Key principles in supporting people with personality disorder

Project Air Strategy through its Treatment Guidelines promotes the following key principles for supporting people with personality disorder (Project Air Strategy, 2015). Adopting and maintaining these key principles throughout the program helps to engage and foster a belief that services provided are valuable, consistent, and beneficial. These guidelines also promote non-judgemental, stigma-free and respectful communication and relationships between facilitators and group members.

### Key Principles for Supporting People with Personality Disorders

- Be compassionate
- Demonstrate empathy
- Listen to the person’s current experience
- Validate the person’s current emotional state
- Take the person’s experience seriously, noting verbal and non-verbal communication
- Maintain a non-judgemental approach
- Stay calm
- Remain respectful
- Remain caring
- Engage in open communication
- Be human and be prepared to acknowledge both the serious and funny side of life where appropriate
- Foster trust to allow strong emotions to be freely expressed
- Be clear, consistent, and reliable
- Remember aspects of challenging behaviours have survival value given past experiences
- Convey encouragement and hope about their capacity for change while validating their current emotional experience.

### A note about personality disorder

Changes to the conceptualisation of personality disorders have been proposed by expert researchers in the field, where a dimensional model of personality disorder has been proposed. This dimensional model captures the presence or absence of personality disorder, the severity and traits exhibited by individuals (Bach et al., 2017; Tyrer, Red & Crawford, 2015). This has been reflected in changes to the International Classification of Diseases – 11 (ICD-11) and in the emerging measures and models section of the Diagnostic and Statistical Manual – 5th edition (DSM-5; American Psychiatric Association, 2013). The introduction of the dimensional model of personality disorders, will replace the existing categorical model which describes 10 specific personality disorders (for example borderline personality disorder). The dimensional model will assist in addressing the high rates of comorbidity (Grenyer, 2017) common in personality disorders. It is acknowledged that much existing knowledge and the evidence-base in personality disorders has derived from the categorical conceptualisation, therefore this manual has been developed for people with personality disorder with a focus on difficulties experienced in borderline personality disorder.
Who should use this manual?

This manual is for peer workers, mental health professionals and services who are interested in providing co-facilitated programs for individuals with personality disorder. It is recommended that peer workers involved in the program have lived experience of personality disorder (with traits resembling borderline personality disorder) and have undergone the training associated with delivering and using this intervention manual. Clinicians delivering the intervention should be adequately qualified and both peer workers and mental health clinicians should be engaged in regular supervision, peer consultation, and other continuous professional development.
Overview of the Peer Support Group Program

The Peer Support for People with Personality Disorder: A Peer and Clinician Co-Facilitated Group Intervention (from now on referred to as “Peer Support Group Program”) was developed to:

- Help individuals with lived experience of personality disorder (particularly individuals with traits associated with borderline personality disorder),
- Who identify with being ‘in recovery’ or ‘recovered’ and
- Are interested in participating in Peer Support Groups in the capacity of a group member or a peer facilitator.

The Peer Support Group is a co-facilitated program where the support group is co-facilitated by a peer facilitator (an individual with lived experience of borderline personality disorder) and a mental health clinician.

This manual was developed with peer facilitators in mind, however can be used as a guide by mental health clinicians as well. The manual offers an overview on the Peer Support Group program, how to create and maintain boundaries and detailed session plans and resources for use in the support group.

Aims of the Intervention
The Peer Support Group Intervention aims to:

- Improve individual group members’ capacity to manage their symptoms and improve functioning
- Provide individuals with BPD a safe space for sharing experiences with others
- Provide evidence-based psychoeducation and skills development
- Provide opportunities for support including group members and facilitators learning from each other

Duration/Alternative Formats
The program has been designed as a 10 week program, with two hour weekly sessions, however this format is flexible.

Examples of alternative formats could include:

- Setting aside the first two weeks for individual assessment and pre-group commitment and orientation sessions, making this a 12-week program in total.
- Extending the amount of time taken to cover the topics (E.g. taking two weeks to cover all the material in each topic, making this a 20 week program).
- Going through all the material twice, i.e. one whole group is then repeated from the beginning again.
- Shortening the group by running it as a day program - with a session in the morning and afternoon, for example. The whole program could therefore be covered in a week or two weeks of a residential program.
- Modifying this program into a structured individual therapy treatment. The individual therapist and participant follow the same curriculum and structure, with half the session on homework review and half the session on psychoeducation - meaning it could be fitted into a 50 minute individual session with short grounding/mindfulness/relaxation exercises at the start and finish.

Group Members
The Peer Support Group Program has been designed for individuals who have a diagnosis of BPD. It is essential that all group members will have concurrent individual therapy whilst participating in the group and will have prior experiences of treatment for BPD (within an individual or group setting). The Peer Support Group will provide an additional opportunity to access less intensive support. It is envisioned that this Peer Support Group will not act as a ‘pre-group’ for specialist interventions, but will support current treatment experiences.
Group Size

Group sizes are recommended to be a maximum of 8, and optimally 6 group members. The initial intake of group members may be a little larger, to account for non-attendance and possible drop-out later in the program.
<table>
<thead>
<tr>
<th>Session number</th>
<th>Topic</th>
<th>Objectives of the psychoeducation component</th>
</tr>
</thead>
</table>
| 1              | Introduction to the Peer Support Group Program | - Introduction of facilitators and group members  
- Build rapport between facilitators and group members  
- Identify the goals of the Peer Support Group  
- Be aware of the group rules and expectations of group members  
- Foster a sense of safety in the group environment and rapport with other group members |
| 2              | What is Personality Disorder?              | - Understand the diagnostic criteria for BPD and how it develops (biopsychosocial model)  
- Identify health services and schemes which can be accessed for assistance for personality disorder |
| 3              | Understanding Triggers and Planning for Wellness | - Learn about the differences between triggers and warning signs  
- How to identify triggers and warning signs  
- Develop a distress tolerance toolbox  
- Discuss tools participants may use to keep themselves well  
- Develop a wellness plan |
| 4              | Emotions                                   | - Develop an understanding of the role of emotions  
- Normalise the experience of many individuals with BPD who experience intense and rapidly changing emotions  
- Identify emotions and how they affect you and others  
- Learn about managing emotions |
| 5              | Relationships                               | - Identify different types of relationships  
- Recognise challenges in balancing needs of self and others, and maintaining healthy boundaries in relationships  
- Develop an understanding of effective communication including assertive communication, and how to apply this to different relationships |
| 6              | Identity, Beliefs and Values                | - Explore the concepts of identity, beliefs, and values  
- Develop understanding of factors that influence identity, beliefs, and values  
- Establish the importance of self-reflection  
- Increase capacity for self-reflection  
- Initiate process of identifying individual values  
- Develop understanding of barriers to living out values  
- Strengthen motivation to put values into action |
| 7              | Self-Care and Self-Compassion             | - Develop understanding surrounding concepts of self-care and self-compassion  
- Establish the importance of self-care and self-compassion  
- Highlight that the process of self-care and self-compassion will be unique for each individual |
| 8              | Wellness and Recovery                      | - Develop understanding of what wellness and recovery personally means  
- Highlight the possibility of recovery  
- Identify the importance of goal setting  
- Develop SMART goals for wellness |
| 9              | Special Topics                             | - Review topics group members have expressed interest in  
- Reflect on the take home messages from the program |
| 10             | Review of Program Sessions                 | - Review topics group members have requested  
- Reflect upon group process and experiences  
- Reflect upon the benefits and challenges associated with attending the group program |
Structure of Group Sessions

Group sessions are 2 hours in duration, where each session follows a similar structure. This provides consistency and security for group members.

Each group session consists of six parts:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction to the Group Session</td>
<td>10 minutes</td>
</tr>
<tr>
<td>Grounding, Mindfulness and Relaxation Exercise</td>
<td>10 minutes</td>
</tr>
<tr>
<td>Reflections of Previous Session and Group Member Sharing</td>
<td>40 minutes</td>
</tr>
<tr>
<td>Short Break</td>
<td>10 minutes</td>
</tr>
<tr>
<td>Psychoeducation and Skills Development</td>
<td>40 minutes</td>
</tr>
<tr>
<td>Debrief and Grounding/Mindfulness/Relaxation</td>
<td>10 minutes</td>
</tr>
<tr>
<td>Documenting the Session, Facilitator Self-Reflection, Debriefing and Supervision</td>
<td></td>
</tr>
</tbody>
</table>

NB: Session 1 follows the above structure, except the individual sharing component is replaced with an ice-breaker exercise to increase rapport between members and facilitators.

Introduction to the Group Session

- Provide a brief overview of the topic of the session. The topic primarily pertains to the psychoeducation and skills development component of the session.
- In session one, this section also includes a ‘meet and greet’.
- The introduction to the session aims to provide group members with an indication of what is going to happen and what will be covered in the specific session.

Grounding, Mindfulness or Relaxation Exercise

- Grounding, mindfulness or relaxation exercises at the start of the session provides group members with the opportunity to reorient themselves to the group environment and prepare themselves for the group session.
- Group members should be advised that they are going to engage in a grounding, mindfulness or relaxation exercise and what they will be asked to do.
- Group members are encouraged to take part, however can also be given the choice to not participate or participate in a similar activity.
- Check in with the group following the grounding/mindfulness/relaxation exercise.
- Some examples of grounding/mindfulness/relaxation exercises are provided at the end of the manual. Facilitators are encouraged to source their own exercises to match the interest of the group. It is encouraged that a range of grounding, mindfulness or relaxation exercises are used flexibly and not only in their traditional form, which often features a focus on the breath (some people may not find this particularly helpful and may prefer to focus on other objects of attention).

Reflections of Previous Session and Group Member Sharing
- Remind group members of the group rules at the start of sharing, and emphasise that the rules are in place to keep the group safe
- Prompt group members to reflect on the previous week’s topic and to share additional thoughts they may have had during the week
- Each group member should be encouraged to share and allocated approximately 4 minutes each
- Ask group members to share:
  o One success they have experienced in the past week (regardless of how small or big it is)
  o One challenge they have experienced in the past week
- A benefit associated with sharing within a group setting is that other group members can provide feedback and support. It is important to allocate some time for other group members to offer support after each group member shares about their week.

Break

- Usually in the middle of the 2 hour session
- Provides an opportunity for facilitators to debrief with any group member who may be having a difficult time following the sharing component of the group
- If the group does not want a break, additional time can be allocated to the psychoeducation and skills development part of the group session.

Psychoeducation and Skill Development

- A different topic is addressed each week in the group
- Session plans are provided as part of the facilitator manual
- This section may consist of:
  o Psychoeducation information
  o Skills training
  o Reflective practice
  o Art based exercises
  o Homework activities

Debrief and Grounding/Mindfulness/Relaxation

- Check in with group members with how they received the information covered in the session and also how they are feeling.
- Ask for a take-home message from the session and encourage group members to reflect upon something positive about themselves that they are willing to share with the group
- Debrief with group members who may be feeling distressed
- Give group members the autonomy of choosing the grounding/mindfulness/relaxation exercise they engage in. Encourage group members to take part in the exercise for at least 5 minutes.

Facilitator Self-Reflection and Checklist

- At the end of each session, facilitators are encouraged to reflect upon what happened in the session. This also acts as an opportunity for facilitators to identify their own feelings about the group processes and to identify if they have been triggered in any way. These experiences can then be discussed when debriefing or in supervision with their allocated supervisor.
- A checklist of the session is also provided for facilitators to identify whether individual components of the session were completed.

Documenting the Session

- Both facilitators to document the session in accordance with professional and organisational requirements.
Creating and Maintaining Boundaries in the Peer Support Group

Creating and maintaining boundaries in the Peer Support Group helps to create a safe environment for the group. Boundaries also clearly set out the expectations of group members and provides group members with an idea of what to expect in the group setting. These boundaries need to be established at the commencement of the support group and clearly understood by all group members. All participants in the group (including the facilitators) need to be agreeable to the boundaries in order to participate in the group.

Creating and maintaining boundaries is facilitated by:

- Informing group members of the goals of the Peer Support Group
- Housekeeping issues
- Group rules and expectations of group members
- Establishing guidelines around discussion about past trauma, self-harm or suicide
- Relationships between group members and facilitators
- Relationships between group members

Establishing the Goals of the Peer Support Group Program

Establishing the goals of the Peer Support Group Program provides group members with an explanation of what the aims of the group are and what people can expect to gain from the group.

The Peer Support Group program aims to provide a safe environment for individuals with BPD to gain support, learn treatment skills and strategies, and increase motivation for recovery within a supportive group environment. The Peer Support Program also provides opportunities for individuals already further along on their recovery journey to assist others by providing support through being a peer facilitator.

Housekeeping Issues

Time and Day of the Group Session

For the duration of the peer support program, it is recommended that the sessions are held at the same time and on the same day of the week, as this promotes a sense of consistency for group members. Decisions surrounding the time and day of the group session should be determined according to the availability of the peer facilitator and the clinician, practical issues such as access to appropriate space, and where possible the preferences of the group program members. Efforts should be made to determine the arrangements prior to the advertisement and commencement of the Peer Support Group.

Length and Frequency of the Group Session

The Peer Support Program runs weekly over a 10-week period, with each session running for two hours each. However, depending upon the organisational context, the model is flexible and can be adapted.

Eligibility for the Peer Support Group Intervention

The organisational context and policies will play a major role in determining the eligibility criteria for engaging in the peer support program. Eligibility criteria should be discussed and determined prior to the establishment of the group. It is expected however, that individuals who take part in the peer support program are currently engaged in treatment with an individual clinician.

Engaging in an intake assessment process will assist to identify:

- Eligibility to take part in the Peer Support Group (e.g. does the individual have BPD and is the individual currently in treatment?)
- Motivations for engaging in the Peer Support Group
- Risk to the individual and the group as a whole
- Treatments currently and previously received
- Issues which may preclude them from taking part in the support group
- The placement of individuals in groups

**Attendance and Participation**

Many programs designed specifically for the treatment of BPD have rigorous and strict attendance and participation requirements. The Peer Support Program was developed with a support group framework, therefore does not prescribe a strict attendance requirement. It is encouraged that group members attend the program in its entirety. The flexibility of the program is dependent upon the organisational context and structure and should be negotiated during the implementation phases of the group.

Participation from all group members is important as it may assist:

- To build rapport and trust between group members and facilitators
- Group members to gain more from attending the group
- The group to run smoothly
- To create a sense of ownership of the group in group members

The Peer Support Group Program requires interpersonal learning and communication and the facilitators will work to ensure the group is safe for both the individual and other group members.

All members of the group should agree to participate actively to facilitate their and others’ recovery and maintenance of health. Attendance is considered one part of active participation. Within the group, minimal evidence of active participation is also required. Examples of participation include one or more of the following: making verbal statements, eye contact, looking at the manual, listening to others, and being involved in non-verbal activities such as art and using the sensory box.

Facilitators will actively intervene if participants are unable to tolerate being in the group or make an active contribution (e.g. being silent, dissociative, disruptive, aggressive or destructive). Participants who dominate the group verbally or non-verbally, or who make no active contribution, will come to the attention of the facilitators who will try to address the issues directly in the group, or between groups if it is unable to be resolved directly.

While attending the group, individuals (group members and facilitators) should not be under the influence of drugs or alcohol and should aim to be psychologically available, in order to engage with the content and activities of the group. Use of headphones and other devices during the group is not allowed. Phones should be switched off or put on silent.

Participation requirements can be adapted for different organisational settings.

**Informed Consent**

The ability to provide informed consent involves potential group members being provided with sufficient information to make a decision as to whether they would like to engage in the Peer Support Group. Information that potential group members may require:

- Duration of the program
- The length and date of each group session
- The aims of the program
- Topics covered in the program
- Expectations of group members
- Eligibility criteria

Potential group members should be provided with information about the peer support program prior to the start of the group. This can occur in the context of an intake assessment, however it is recommended to be repeated within the first session of the program.
Confidentiality

It is expected that ‘what is discussed in the room, stays in the room.’ Therefore, it is expected that group members, peer facilitators, and clinicians do not share personal discussions had in the group with people beyond the group.

There are some circumstances in which confidentiality may be broken by a clinician such as (taken from the APS Code of Ethics, p. 15):

- With the consent of the relevant client or a person with legal authority to act on behalf of the client
- Where there is a legal obligation to do so
- If there is an immediate and specific risk of harm to an identifiable person or persons that can be averted only by disclosing information or
- When consulting colleagues or in the course of supervision or professional training, provided by the psychologist/health professional
  - Conceals the identity of clients and associated parties involved or
  - Obtains the clients consent, and gives prior notice to the recipients of the information that they are required to preserve the client's privacy and obtains an undertaking from the recipients of the information that they will preserve the client’s privacy

If risk is disclosed to the peer facilitator it is recommended that the clinician is notified and the clinician use their judgement about the next steps.

Although this peer support program allows for group members to support each other outside the group setting, it is recommended that the above rules surrounding the discussion of other group members are applied.

Leaving the Session Early or Leaving the Program Early

Facilitators should encourage group members to stay for the entire group session, however it is acknowledged that this may not always be possible. Situations such as being triggered by content or other group members’ sharing may result in the group member wishing to leave the group session early.

The following protocol should be followed when a group member wishes to leave the group early due to being distressed:

1. Group member expresses to a group facilitator desire to leave the group session early
2. The group facilitator needs to make a judgement on whether it is appropriate for them to leave the group to debrief with the group member at that moment in time. This may be dependent upon the dynamic of the group.
   a. If it is possible, leave the group and go to a quiet space to debrief with the group member.
   b. If not possible, ask the group member to wait outside the group but not leave until they have debriefed with the group facilitator.
3. Encourage the group member to stay and reflect upon skills which they can use to help them remain in the support group setting
   a. If the group member is unwilling, allow them to leave the group. The group member should be provided with emergency contact numbers.
   b. The group facilitator should aim to follow up with the group member 1 or 2 days following the group session
4. The group facilitator handling the situation should debrief with their supervisor.
5. Such issues should be documented in the record of the group, including the reasons why decisions were made or actions taken.
Discussion about Past Trauma, Self-Harm or Suicide

To maintain the group as a safe environment, discussion about past trauma, self-harm, suicide (including suicidal ideation) should be avoided as much as possible in the Peer Support Group. Discussion about these topics may trigger other group members and disrupt the dynamic of the group. Despite this, it is difficult to remove all triggers from the group setting. It is also acknowledged that utilising skills in the group context to appropriately respond to triggers, where possible, is encouraged and represents an opportunity for growth.

Group members should be encouraged to advise facilitators if they have been triggered and advised of the procedures to follow during these circumstances. These can follow a similar procedure for leaving half way through the group session or leaving the program early. Therefore, group members that are triggered or experience distress during the group are encouraged to raise this with the facilitators (not other group members).

The following protocol may be useful in managing group members who become triggered or distressed during the support group:

1. Group member expresses to a group facilitator that they feel distressed or are triggered
   a. Clinical judgement in managing crisis and risk is required, therefore the clinician should take responsibility in handling the situation
2. The clinician makes a judgement on whether it is appropriate to leave the group to debrief with the group member at that moment in time. This may be dependent upon the dynamic of the group.
   a. If it is possible, leave the group and go to a quiet space to debrief with the group member.
   b. If not possible, ask the group member to wait outside the group but not leave until they have debriefed with the clinician
3. Listen to the group member about what is going on for them. Prompt the group member to reflect on their emotions and thoughts.
4. Encourage group member to reflect upon strategies which have helped them in the past, that they are willing to try
5. If the group member is unable or unwilling to engage with the clinician, a decision surrounding the level of risk needs to be made.

Depending on the level of risk, group members can be referred to crisis hotlines or their individual clinician for more support. 24/7 telephone counselling and crisis services include:

<table>
<thead>
<tr>
<th>Service</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency assistance</td>
<td>000</td>
</tr>
<tr>
<td>Lifeline</td>
<td>13 11 14</td>
</tr>
<tr>
<td>Suicide Call Back Service</td>
<td>1300 659 467</td>
</tr>
<tr>
<td>Kids Helpline (5-25 years)</td>
<td>1800 55 1800</td>
</tr>
<tr>
<td>MensLine Australia</td>
<td>1300 78 99 78</td>
</tr>
<tr>
<td>Veterans and Veterans Families Counselling Service</td>
<td>1800 011 046</td>
</tr>
<tr>
<td>National Sexual Assault, Domestic Family Violence Counselling Service</td>
<td>1800 737 732</td>
</tr>
<tr>
<td>Beyond Blue</td>
<td>1300 224 636</td>
</tr>
</tbody>
</table>

A factsheet with other Australian mental health support, information and referral hotline numbers is available on the Project Air Strategy website (www.projectairstrategy.org). (Factsheet: Mental Health Support Services)
Relationship between Group Members and Facilitators

Contact with Facilitators Outside of Group Meetings

Group members may want to contact facilitators outside of group meetings for a variety of reasons. These could include:

- Clarification of information or skills learnt in the group
- Socialising (E.g. Wanting to have a chat with someone)
- Crisis intervention

It is recommended that group members do not contact facilitators outside of group sessions. Guidelines surrounding contact should be provided in the initial session of the peer support program. Contact with facilitators is discouraged as it may affect the dynamic of the peer support group.

Group members should be given time at the start of each session to ask questions about the previous session’s content. Additionally, emphasis and clarification of group details during the first session may alleviate confusion surrounding the logistics of the group and expectations of group members.

Group members should be advised at the start of the peer support program that during crisis situations, group members should contact their individual treating clinician, crisis hotlines or present to the local emergency department. See section on ‘discussion about past trauma, self-harm or suicide’ for details of 24/7 telephone counselling services and the ‘Mental Health Support Services’ factsheet.

Contact with Group Members Outside of Group Meetings

Group members can offer support to each other outside of the group meetings, when it is mutually agreed upon between the group members. Support from others outside of group sessions can reduce feelings of isolation and provide opportunities for new relationships to form. Although this can be beneficial for a number of reasons (e.g. social interaction, opportunities for skill practice), individuals with BPD have interpersonal difficulties and may find this challenging. Members with pre-existing or developing sexual partnerships should not attend group together and should inform the facilitators of their relationship. Facilitators may need to intervene to create greater safety and preserve group dynamics if these issues become a problem.
Group Rules and Expectations of Group Members

The boundaries stated above inform the following group rules and expectations of group members

<table>
<thead>
<tr>
<th></th>
<th>Group Rules and Expectations of Group Members</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>'What is discussed in the room, stays in the room': Maintain confidentiality, therefore what is discussed in group should not be repeated or shared with others beyond the group</td>
</tr>
<tr>
<td>2</td>
<td><strong>Talk about yourself and your experiences.</strong> Share feelings and experiences. Avoid giving advice or trying to 'fix' another group member’s problems. Although sharing is encouraged, it is not compulsory</td>
</tr>
<tr>
<td>3</td>
<td><strong>It is the group's job to make the group work</strong>: Arrive on time, participate, and try to attend for the duration of the session and program. Show respect towards the facilitators and follow their instructions</td>
</tr>
<tr>
<td>4</td>
<td><strong>Tell a facilitator if you need to leave early</strong>: If feeling distressed and want to leave, check in and debrief with a facilitator</td>
</tr>
<tr>
<td>5</td>
<td><strong>Don't discuss past trauma, self-harm or suicide during the group</strong>: This can be triggering for other group members and is more appropriate for individual therapy</td>
</tr>
<tr>
<td>6</td>
<td><strong>Listen to others</strong>: When other group members are sharing or talking, show respect and support them by actively listening to their experiences</td>
</tr>
<tr>
<td>7</td>
<td><strong>Avoid interrupting others</strong>: Have one person speak at a time and avoid having other conversations whilst group members are talking</td>
</tr>
<tr>
<td>8</td>
<td><strong>Accept people as they are</strong>: Everyone has their own unique experiences and opinions. Try to accept all group members as they are and avoid making judgements</td>
</tr>
<tr>
<td>9</td>
<td><strong>Use of language</strong>: Abusive or offensive language will not be tolerated</td>
</tr>
<tr>
<td>10</td>
<td><strong>Turn off mobile phones or switch to silent</strong></td>
</tr>
<tr>
<td>11</td>
<td><strong>Group members can offer support to other group members outside of the group</strong>: Mutual consent from both group members is required when group members want to support each other outside the group</td>
</tr>
<tr>
<td>12</td>
<td><strong>Advise facilitators of any intimate relationships you have with another group member</strong>: This includes siblings, family members, partners and friends</td>
</tr>
</tbody>
</table>
Responding Effectively to Challenging Behaviour

Establishing rules and boundaries and enforcing them in a consistent manner is important in creating a safe environment for group members. Yet, some group members may try to challenge the rules and boundaries that are in place. It is a part of the facilitator’s role to manage behaviours which may disrupt the dynamics of the group. A variety of scenarios may present themselves during the peer support sessions, the onus is particularly placed on the clinician to use clinical judgement on how best to manage the situation. The context in which situations occur, the environment, group dynamics and the perspectives of other group members should be considered when making decisions on how to manage a situation.

Examples of scenarios and possible ways of responding are presented below.

<table>
<thead>
<tr>
<th>Possible scenario</th>
<th>Possible ways of managing the situation</th>
</tr>
</thead>
</table>
| A group member consistently arrives late to the group | - Ask group member to provide a reason privately rather than in front of the group. Doing this within the group can be seen as shaming.  
- Asking other group members to communicate their thoughts and feelings about lateness may also be useful in helping the group member understand the perspectives of others. (Discretion is required for this, as this may be viewed as shaming by some individuals). |
| A group member arrives under the influence of drugs or alcohol | - If facilitators suspect a group member is under the influence of drugs or alcohol, have a conversation (outside from the group) with the group member to determine whether they are under the influence.  
- If the group member is under the influence, the clinician will need to make a judgement about the capacity of the group member to benefit from the group and whether their behaviour will be triggering or disruptive to other group members. |
| Group members dominate the sharing part of the group | - Facilitators to keep track of time during sharing and starting wrap up when it is close to the end of the allocated time.  
- Thank group members for providing input and move onto the next group member  
- Advise group members they can continue discussions during the break |
| Group members discussing or displaying instances of self-harm | - Remind group members of the rules and the reasons why discussing self-harm is not appropriate for the support group setting  
- Displaying self-harm: consideration needs to be made in regards to whether the group member is displaying recent incidences of self-harm or old scars.  
  - Group members displaying recent instances of self-harm can be asked to cover up wounds prior to attending the group  
  - Discretion should be exercised in relation to showing old scars or wounds. |
Overview of Group Sessions

Session One: Introduction to the Peer Support Group

For a more detailed session plan, please see page 32

<table>
<thead>
<tr>
<th>Step</th>
<th>Activity Description</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Introduction to the Session and Each Other&lt;br&gt;- Orient group members to the group setting&lt;br&gt;- Facilitator and group member introductions</td>
<td>20 minutes</td>
</tr>
<tr>
<td>2</td>
<td>Grounding, Mindfulness or Relaxation Exercise</td>
<td>10 minutes</td>
</tr>
<tr>
<td>3</td>
<td>Sharing&lt;br&gt;- Ice breaker activity&lt;br&gt;- Handout participant workbooks</td>
<td>30 minutes</td>
</tr>
<tr>
<td>4</td>
<td>Short Break</td>
<td>10 minutes</td>
</tr>
<tr>
<td>5</td>
<td>Psychoeducation and Skills Development&lt;br&gt;- Introduce the Peer Support Group Program&lt;br&gt;- Introduce group rules and expectations of group members&lt;br&gt;- Discussion about group rules</td>
<td>40 minutes</td>
</tr>
<tr>
<td>6</td>
<td>Debrief and Grounding/Mindfulness/Relaxation</td>
<td>10 minutes</td>
</tr>
</tbody>
</table>

Resources required:
- Project Air Strategy Treatment Guidelines for Personality Disorders (2015): Section on Key Principles for Working with People with Personality Disorder
- Facilitator slides: Session One
- Participant workbook: Session One
- Shifting Angles Ice-Breaker Instruction Sheet
Session Two: What is a Personality Disorder?

For a more detailed session plan, please see page 39

<p>| | |</p>
<table>
<thead>
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<tbody>
<tr>
<td>1.</td>
<td><strong>Introduction to the Session</strong></td>
</tr>
<tr>
<td>2.</td>
<td><strong>Grounding, Mindfulness or Relaxation Exercise</strong></td>
</tr>
<tr>
<td>3.</td>
<td><strong>Sharing</strong>&lt;br&gt;- Reflections on previous session&lt;br&gt;- Individual sharing: 4 - 5 minutes per group member</td>
</tr>
<tr>
<td>4.</td>
<td><strong>Break</strong></td>
</tr>
<tr>
<td>5.</td>
<td><strong>Psychoeducation and Skills Development</strong>&lt;br&gt;- Develop understanding about the diagnostic criteria, the prevalence, development and the course of BPD&lt;br&gt;- Identify myths surrounding BPD&lt;br&gt;- Develop understanding surrounding the treatment options available for BPD</td>
</tr>
<tr>
<td>6.</td>
<td><strong>Debrief and Grounding/Mindfulness/Relaxation</strong>&lt;br&gt;- GLAD technique handout</td>
</tr>
</tbody>
</table>

**Resources required:**

- Facilitator slides – Session Two
- Participant workbook – Session Two
- What is a Personality Disorder factsheet
- What is Borderline Personality Disorder factsheet
- The GLAD technique handout
Session Three: Understanding Triggers and Planning for Wellness

For a more detailed session plan, please see page 48

| 1. Introduction to the Session | 10 minutes |
| 2. Grounding, Mindfulness or Relaxation Exercise | 10 minutes |
| 3. Sharing  
  - Reflections on previous session  
  - Individual sharing: 4 - 5 minutes per group member | 40 minutes |
| 4. Break | 10 minutes |
| 5. Psychoeducation and Skills Development  
  - Develop understanding of the difference between triggers and warning signs  
  - Develop understanding on how to identify triggers and warning signs  
  - Highlight the benefits of using distress tolerance tools  
  - Discuss strategies and tools for maintaining wellbeing  
  - Develop a wellness plan | 40 minutes |
| 6. Debrief and Grounding/Mindfulness/Relaxation | 10 minutes |

Resources required:

- Facilitator slides – Session Three  
- Participant workbook – Session Three  
- Videos - Lived experience stories  
- Wellness plan
Session Four: Emotions

For a more detailed session plan, please see page 56

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<table>
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<tbody>
<tr>
<td><strong>1. Introduction to the Session</strong></td>
<td>10 minutes</td>
</tr>
<tr>
<td><strong>2. Grounding, Mindfulness or Relaxation Exercise</strong></td>
<td>10 minutes</td>
</tr>
<tr>
<td><strong>3. Sharing</strong></td>
<td>40 minutes</td>
</tr>
<tr>
<td>- Reflections on previous session</td>
<td></td>
</tr>
<tr>
<td>- Individual sharing: 4 - 5 minutes per group member</td>
<td></td>
</tr>
<tr>
<td><strong>4. Break</strong></td>
<td>10 minutes</td>
</tr>
<tr>
<td><strong>5. Psychoeducation and Skills Development</strong></td>
<td>40 minutes</td>
</tr>
<tr>
<td>- Develop an understanding of what emotions are and why they are important</td>
<td></td>
</tr>
<tr>
<td>- Identify the link between BPD diagnostic criteria and emotions</td>
<td></td>
</tr>
<tr>
<td>- Develop skills to identify and name emotions, interpret emotions and manage emotions</td>
<td></td>
</tr>
<tr>
<td><strong>6. Debrief and Grounding/Mindfulness/Relaxation</strong></td>
<td>10 minutes</td>
</tr>
</tbody>
</table>

**Resources required:**

- Facilitator slides – Session Four
- Participant workbook – Session Four Managing Emotions factsheet
- Improving how you feel factsheet (Centre of Clinical Interventions, Western Australia)
- Thinking and feeling (Centre of Clinical Interventions, Western Australia)
- Emoji faces (available in session appendix)
Session Five: Relationships

For a more detailed session plan, please see page 68

<p>| | |</p>
<table>
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<tbody>
<tr>
<td>1.</td>
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<td>Sharing</td>
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<tr>
<td></td>
<td>Reflections on previous session</td>
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<td></td>
<td>Individual sharing: 4 - 5 minutes per group member</td>
</tr>
<tr>
<td>4.</td>
<td>Break</td>
</tr>
<tr>
<td>5.</td>
<td>Psychoeducation and Skills Development</td>
</tr>
<tr>
<td></td>
<td>Develop skills in making and maintaining relationships</td>
</tr>
<tr>
<td></td>
<td>Identify challenges associated with making and maintaining relationships – boundaries and balancing needs</td>
</tr>
<tr>
<td></td>
<td>Identify boundary similarities and differences in different relational contexts</td>
</tr>
<tr>
<td></td>
<td>Explore what a healthy relationship is</td>
</tr>
<tr>
<td></td>
<td>Discuss what it means to have balance in a relationship</td>
</tr>
<tr>
<td></td>
<td>Develop effective communication skills - including assertive communication</td>
</tr>
<tr>
<td>6.</td>
<td>Debrief and Grounding/Mindfulness/Relaxation</td>
</tr>
</tbody>
</table>

**Resources required:**

- Facilitator slides – Session Five
- Participant workbook- Session Five
- Finding the balance worksheet
- Communication styles factsheet
- Effective communication
- Effective communication: for families, partners and carers
- Strategies for effective communication and health relationships: for families, partners and carers
Session Six: Identity, Beliefs and Values

For a more detailed session plan, please see page 79

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<tbody>
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<td>Sharing</td>
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<tr>
<td></td>
<td>- Reflections on previous session</td>
</tr>
<tr>
<td></td>
<td>- Individual sharing: 4 - 5 minutes per group member</td>
</tr>
<tr>
<td>4.</td>
<td>Break</td>
</tr>
<tr>
<td>5.</td>
<td>Psychoeducation and Skills Development</td>
</tr>
<tr>
<td></td>
<td>- Define concepts of identity, beliefs, and values</td>
</tr>
<tr>
<td></td>
<td>- Identify factors that influence identity, beliefs, and values</td>
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<tr>
<td></td>
<td>- Develop an understanding surrounding motivations that underlie an individual’s values</td>
</tr>
<tr>
<td></td>
<td>- Initiate a process of identifying individual values and explore barriers to value-expression</td>
</tr>
<tr>
<td>6.</td>
<td>Debrief and Grounding/Mindfulness/Relaxation</td>
</tr>
</tbody>
</table>

Resources required:

- Facilitator slides – Session Six
- Participant workbook – Session Six
- Value cards
Session Seven: Self-Care and Self-Compassion

For a more detailed session plan, please see page 89

<p>| | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>1. Introduction to the Session</td>
<td>10 minutes</td>
</tr>
<tr>
<td>2. Grounding, Mindfulness or Relaxation Exercise</td>
<td>10 minutes</td>
</tr>
<tr>
<td>3. Sharing</td>
<td>40 minutes</td>
</tr>
<tr>
<td>- Reflections on previous session</td>
<td></td>
</tr>
<tr>
<td>- Individual sharing: 4 - 5 minutes per group member</td>
<td></td>
</tr>
<tr>
<td>4. Break</td>
<td>10 minutes</td>
</tr>
<tr>
<td>5. Psychoeducation and Skills Development</td>
<td>40 minutes</td>
</tr>
<tr>
<td>- Introduce concepts of self-care and self-compassion</td>
<td></td>
</tr>
<tr>
<td>- Establish the importance of self-care and self-compassion</td>
<td></td>
</tr>
<tr>
<td>- Highlight that the process of self-care and self-compassion will be unique for each individual</td>
<td></td>
</tr>
<tr>
<td>6. Debrief and Grounding/Mindfulness/Relaxation</td>
<td>10 minutes</td>
</tr>
</tbody>
</table>

Resources required:

- Facilitator slides – Session Seven
- Participant workbook - Session Seven
Session Eight: Wellness and Recovery

For a more detailed session plan, please see page 95

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<tbody>
<tr>
<td>1.</td>
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<tr>
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<td>Sharing</td>
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<tr>
<td></td>
<td>Reflections on previous session</td>
</tr>
<tr>
<td></td>
<td>Individual sharing: 4 - 5 minutes per group member</td>
</tr>
<tr>
<td>4.</td>
<td>Break</td>
</tr>
<tr>
<td>5.</td>
<td>Psychoeducation and Skills Development</td>
</tr>
<tr>
<td></td>
<td>Develop an understanding of what wellness and recovery personally means, whilst reinforcing the possibility of wellness and recovery</td>
</tr>
<tr>
<td></td>
<td>Identify the importance of goal setting</td>
</tr>
<tr>
<td></td>
<td>Develop SMART goals for wellness and plan for wellness</td>
</tr>
<tr>
<td>6.</td>
<td>Debrief and Grounding/Mindfulness/Relaxation</td>
</tr>
</tbody>
</table>

Resources required:

- Facilitator slides – Session Eight
- Participant workbook – Session Eight
- Videos – individuals with lived experience of BPD discuss wellness and recovery
Session Nine: Special Topics

For a more detailed session plan, please see page 102

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<thead>
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<tbody>
<tr>
<td>1. Introduction to the Session</td>
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<tr>
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</tr>
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</tr>
<tr>
<td>- Reflections on previous session</td>
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<tr>
<td>- Individual sharing: 4 - 5 minutes per group member</td>
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<td></td>
</tr>
<tr>
<td>4. Break</td>
<td>10 minutes</td>
<td></td>
</tr>
<tr>
<td>5. Psychoeducation and Skills Development</td>
<td>40 minutes</td>
<td></td>
</tr>
<tr>
<td>- Provide group members with autonomy in determining the focus of the psychoeducation and skills component of the group</td>
<td></td>
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<tr>
<td>- Review topics group members have expressed interest in</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Reflect on the take-home messages from the program</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Debrief and Grounding/Mindfulness/Relaxation</td>
<td>10 minutes</td>
<td></td>
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</tbody>
</table>

Resources required:

- Participant workbook – Session Nine
Session Ten: Review of Program Sessions

For a more detailed session plan, please see page 107

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<tbody>
<tr>
<td>1.</td>
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<tr>
<td>3.</td>
<td><strong>Sharing</strong>&lt;br&gt;- Reflections on previous session&lt;br&gt;- Individual sharing: 4 - 5 minutes per group member</td>
</tr>
<tr>
<td>4.</td>
<td><strong>Break</strong></td>
</tr>
<tr>
<td>5.</td>
<td><strong>Psychoeducation and Skills Development</strong>&lt;br&gt;- Provide group members with autonomy in determining the focus of the psychoeducation and skills component of the group&lt;br&gt;- Reflect upon group process and experiences&lt;br&gt;- Reflect upon the benefits and challenges associated with attending the group program&lt;br&gt;- Celebrate completion - graduation certificates presented</td>
</tr>
<tr>
<td>6.</td>
<td><strong>Debrief and Grounding/Mindfulness/Relaxation</strong></td>
</tr>
</tbody>
</table>

**Resources required:**
- Participant workbook – Session Ten
- Program evaluation forms
- Certificate of participation
Session One: Introduction to the Peer Support Group Program

Objectives:

- Build rapport between facilitator and group members;
- Identify the goals of the Peer Support Group
- Receive housekeeping information about the group
- Develop an awareness of the group rules and expectations of group members

Outline:

1. Introduction to the session and each other
   a. Orient group members to the group setting
   b. Facilitator and group member introductions
2. Grounding, mindfulness and relaxation exercise
3. Play ice-breaker activity
4. Psychoeducation and skill development
   a. Explain the structure of the program and the sessions to the group members
   b. Introduce and develop rules for the group
   c. Open discussion about the group and answer questions from group members
5. Debrief and grounding/mindfulness/relaxation

Resources:

- Project Air Strategy Treatment Guidelines for Personality Disorders (2015): Section on Key Principles for Working with People with Personality Disorder
- Facilitator Slides: Session One Introduction to the Peer Support Group
- Participant workbook: Session One Introduction to the Peer Support Group
- Shifting Angles Ice-Breaker Instruction Sheet
Steps to follow for Session One:

1. Introduction to the Session and Each Other (20 mins)
   a. Orient group members to the group setting, focus on building rapport with group members and a positive relationship between facilitators and group members (5 mins)

   Welcome group members to the group and acknowledge their efforts in attending the session. For example ‘I’m really glad everyone could make it to this session today. For some of you it must have been very difficult, particularly as this is a new situation with people you do not know.’

   Refer to the Key Principles for Working with People with Personality Disorder for guidance on how to communicate and work with people with BPD.

   b. Introduce yourself and ask group members to introduce themselves as well (15 mins)

   This can be done by going around the room and asking each group member to introduce themselves by saying their name. It might help group members if facilitators introduce themselves first.

   For example; ‘Hi, my name is Jack and this is my colleague Christine. We will be co-facilitating the group together’

   Depending on the dynamics of the group, it might be worthwhile to ask group members to also:
   - Give a brief description of what they would like to get out of the group
   - Any interesting fact about themselves

2. Grounding, Mindfulness and Relaxation Exercise (10 mins)

   Engage in a grounding/mindfulness/relaxation activity together as a group.

   Discuss in general what a grounding/mindfulness/relaxation exercise is and why engage in these exercises.

   ‘Everyone in society is busier than ever and it is often easy to forget about the here and now. Taking part in a grounding/mindfulness/relaxation exercise is one way of bringing our attention to the present moment.’

   Inform the group prior to engaging in the exercise what it will require group members to do. Group members may have prior experiences with grounding or mindfulness exercises and pre-formed ideas about their effectiveness. Remind group members to engage in the exercise non-judgmentally. Ask group members if they have any questions or concerns, and address these prior to starting the grounding/mindfulness/relaxation exercise. If group members feel uncomfortable with engaging in the grounding/mindfulness/relaxation exercise, give them the option to opt out. Instead they could be asked to sit quietly.

   ‘The grounding/mindfulness/relaxation exercise we are going to do is called _____ and in the exercise you will be asked to _______. Although everyone may have different thoughts about grounding/mindfulness/relaxation, let’s try to put those judgements aside and have a go. How does that sound? Does anyone have any questions or concerns?’

   Guide group members through the grounding/mindfulness/relaxation exercise.

   ‘Let’s take a bit of time to bring our minds to the group environment and prepare ourselves for the group.’
Ask group members about their thoughts on the exercise. This may provide an indication of what has and what hasn’t worked in the past for different group members.

3. Group Member Sharing (30 mins)

As the group is still getting to know each other in the first session, individual sharing is replaced with an ice-breaker exercise. This may help group members feel more comfortable being in the group environment. This should be explicitly stated to group members.

‘Usually there will be time for everyone to share how their week is going and share successes and challenges they have experienced. But as this is the first week and everyone is still getting to know each other, we are going to play an ice-breaker activity.’

a. Engage in an ice-breaker activity

Resource: Shifting Angles Ice-Breaker Instruction Sheet

Follow instructions on Shifting Angles Ice-Breaker handout in session appendix.

b. Handout participant workbooks

Mention that the workbook should be brought to each group session, as the activities for the group correspond with the workbook.

4. Short Break (10 mins)

Advise group members what time they should return to the group.

5. Psychoeducation and Skills Development (40 mins)

Resource to use: Participant workbook – Session 1

Introduce the Peer Support Group Program

Provide group members with an overview of what the goals of the program are and orient group members to the structure of each of the sessions. Emphasise that each of the group sessions take on a similar structure.

Clearly stating what to expect from the group will assist to set the frame and introduce boundaries for group members. The following should be specifically addressed:

- The time and day of the group session
- Length and frequency of the program and each group session
- Attendance and participation requirements
- Confidentiality issues
- Leaving a group session early or leaving the program early
- Discussion about past trauma, self-harm and suicide
- Contacting group facilitators and members outside of session

More in-depth information about the above can be found in the Creating and Maintaining Boundaries in Peer Support Groups section of the facilitator manual

Discussion surrounding what to expect from the group will lead into discussion about the group rules. Facilitators can also ask group members about what they expect of the group.
**Introduce the group rules and expectations of group members**

Introduce the group rules and expectations to group members by emphasising the role of the rules in keeping the group a safe place for all members. It is recommended that the facilitators go through each of the rules individually. Greater details surrounding the rationale of the rules can be found in the *Creating and Maintaining Boundaries in Peer Support Groups* section of the facilitator manual.

<table>
<thead>
<tr>
<th>Group Rules and Expectations of Group Members</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <em>What is discussed in the room, stays in the room</em>: Maintain confidentiality, therefore what is discussed in group should not be repeated or shared with others beyond the group</td>
</tr>
<tr>
<td>2. <em>Talk about yourself and your experiences</em>. Share feelings and experiences. Avoid giving advice or trying to ‘fix’ another group member’s problems. Although sharing is encouraged, it is not compulsory.</td>
</tr>
<tr>
<td>3. <em>It is the group’s job to make the group work</em>: Arrive on time, participate, and try to attend for the duration of the session and program. Show respect towards the facilitators and follow their instructions.</td>
</tr>
<tr>
<td>4. <em>Tell a facilitator if you need to leave the group early</em>: If feeling distressed and want to leave, check in and debrief with a facilitator</td>
</tr>
<tr>
<td>5. <em>Don’t discuss past trauma or self-harm during the group</em>: This can be triggering for other group members and is more suitable for individual therapy.</td>
</tr>
<tr>
<td>6. <em>Listen to others</em>: When other group members are sharing or talking, show respect and support them by actively listening to their experiences</td>
</tr>
<tr>
<td>7. <em>Avoid interrupting others</em>: Have one person speak at a time and avoid having other conversations whilst group members are talking</td>
</tr>
<tr>
<td>8. <em>Accept people as they are</em>: Everyone has their own unique experiences and opinions. Try to accept all group members as they are and avoid making judgements.</td>
</tr>
<tr>
<td>9. <em>Use of language</em>: Abusive or offensive language will not be tolerated</td>
</tr>
<tr>
<td>10. <em>Turn off mobile phones</em> or turn mobile phones to silent</td>
</tr>
<tr>
<td>11. <em>Group members can offer support to other group members outside of the group</em></td>
</tr>
<tr>
<td>12. <em>Advise facilitators of any intimate relationships you have with another group member</em>: This includes siblings, family members, partners, and sexual relationships.</td>
</tr>
</tbody>
</table>

The group rules above are non-negotiable and need to be agreed upon by all members of the group (including facilitators). However, group members should be given opportunity to provide feedback on the rules.

Discuss any additional rules the group feels should be included. There is space in the participant workbook for group members to add in additional rules.

6. **Debrief and Grounding/Mindfulness/Relaxation (10 mins)**

Check in with the group members to see how they received the information and ask if there are any questions.

   *“How did you find that? Are there parts of it that you agree or don’t agree with?”*

Encourage group members to engage in a grounding/mindfulness/relaxation activity for 5 minutes before leaving the group.

7. **Documenting the session**

Document the session in accordance to professional and organisational requirements.
### Session One: Checklist

Have the following been completed?

<p>| | |</p>
<table>
<thead>
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</table>
| 1. | **Introduction to the Program and Each Other**  
- Orient group members to the group setting  
- Facilitator and group member introductions |
| 2. | **Grounding, Mindfulness and Relaxation Exercise** |
| 3. | **Sharing**  
- Ice breaker activity  
- Handout participant workbooks |
| 4. | **Break** |
| 5. | **Psychoeducation and Skills Development**  
- Introduce the Peer Support Program  
- Introduce group rules and expectations of group members  
- Discussion about group rules |
| 6. | **Debrief and Grounding/Mindfulness/Relaxation** |
| 7. | **Document the Session** |
Facilitator Self-Reflection

Session One: Introduction to the Peer Support Group Intervention

What worked well for the group?

Were there any challenges experienced? What were they?

How do I feel about how the group went?

Is there anything I would change in regards to how I ran the group?

Are there any risk related situations that need to be followed up on?

Other Notes

Location of the group: ____________________ Date of group: ____________________
Facilitator name: ______________________
Appendix for Session One

Shifting Angles Ice-Breaker Instruction Sheet

Materials needed:
- Paper
- Pens or pencils
- Stopwatch

Instructions:
1. Explain to group members that they will be engaging in a team drawing activity.
2. Hand out a piece of paper and pens to all group members and make sure that everyone has something to lean on whilst drawing.
3. Ask group members to fold the piece of paper into three equal sections (as if you were folding a letter which will be placed in an envelope).
4. Using the piece of paper, group members will be asked to draw a person. In the top section, draw the head, face and neck. In the middle section, draw the torso and arms. In the bottom section, draw the legs. Don’t forget to give the person clothes!
5. Each group member will be given 3 minutes to draw a section.
6. Once the 3 minutes is up, fold over the section that has been drawn and pass on the paper to another group member (doesn’t matter who you give it to). The person you are passing it to, should not be able to see what has previously been drawn. Continue this process until all 3 segments has been completed.
7. Once the drawing is complete, pass the paper along to the next person on your left and ask that person to reveal the finished drawing and describe what they see.
Session Two: What is a Personality Disorder?

Objectives:
- Continue to build rapport between facilitators and group members
- Understand the diagnostic criteria for BPD, how BPD develops (biopsychosocial model) and treatment options
- Identify health services and schemes which can be accessed for assistance for personality disorder

Outline:
1. Provide an introduction and overview of the session
2. Engage in a grounding/mindfulness/relaxation activity
3. Encourage sharing amongst group members
4. Provide psychoeducation regarding personality disorder, development and treatment options
5. Debrief and grounding/mindfulness/relaxation

Resources:
- Project Air Factsheets:
  o What is a Personality Disorder?
  o What is Borderline Personality Disorder?
  o NB: Factsheets about other personality disorders are available on the Project Air Strategy website:
    ▪ What is Narcissistic Personality Disorder?
    ▪ What is Antisocial Personality Disorder?
    ▪ What is Avoidant Personality Disorder?
    ▪ What is Obsessive-Compulsive Personality Disorder?
    ▪ What is Schizotypal Personality Disorder?
- The GLAD technique handout
Steps to follow in Session Two:

1. Introduction to the Session (10 mins)
   a. Orient group members to the group setting and how the group runs (5mins)

   Welcome group members and acknowledge the group members’ efforts in attending the group session. For example, “It is great to see everyone come back for another group session. Today’s session will be in a similar format to last week, we will start with a mindfulness/relaxation exercise, take turns sharing how our week was, then go into the skills component of the program and finally debrief, to see what everyone thought and how you feel. We will take a break at about one hour into the session. How does that sound?”

   Wait for group members’ response and answer any questions they may have.

   b. Provide an overview of the session (5 mins)

   Orient the group members to the topic of today’s session. This could be achieved through providing group members with an outline of the content of the session, such as ‘Later in the session we will be talking about what personality disorder is’

2. Grounding, Mindfulness and Relaxation Exercise (10 mins)

   Engage in a grounding/mindfulness/relaxation activity together as a group.

   Inform the group prior to engaging in the exercise what it will require group members to do and remind group members to engage in the exercise non-judgmentally. Ask group members if they have any questions or concerns, and address these prior to starting the grounding/mindfulness/relaxation exercise.

   Following the activity, ask group members about their thoughts on the exercise. This may provide an indication of what has and what hasn’t worked in the past for different group members.

3. Reflections of Previous Session and Group Member Sharing (5 minutes + 4-5 minutes per group member ~ 40 mins)

   Encourage group members to reflect on the previous week’s content/discussion and share if they have additional thoughts or comments. It is best to have this as a group conversation.

   “In last week’s group session we talked about ____ (insert the previous week’s topic here)____, did anyone have more thoughts during the week about what was discussed?”

   Then encourage group members to share one success and one challenge they have experienced in the past week. Suggested script:

   “Perhaps we can go around the room and share one success that you had and one challenge that you experienced last week? Just keep in mind the group rules and please do not discuss any instances of self-harm or trauma. We want to keep this group as safe as possible. I will give each person about four to five minutes but do let me know if you feel you are unable to contribute today”

   Facilitators will need to keep track of the time and set boundaries for this.

4. Short Break (10 minutes)
Advise group members when they should re-join the group.

5. Psychoeducation and Skills Development (40 minutes)

Everyone has a personality. However, this may become a personality disorder when personality traits become ongoing, inflexible, and differ markedly from cultural norms, causing significant impairment or distress for the individual. These traits often emerge in adolescence or early adulthood and affect most areas of life, including relationships, work, and study. There are several different types of traits and while all of them have different features, they also share some common elements.

Emotions and expressing feelings

People with personality disorders may experience difficulties managing their emotions and communicating these feelings to other people. Some people experience very intense emotions that are hard to manage and can change suddenly. Some may experience intense anger, feel very nervous, or be highly suspicious. It can be hard to manage these distressing emotions alone and people with personality disorders may hurt themselves or others as a way to cope with overwhelming feelings.

Relationship difficulties

People with personality disorders can find it difficult to manage relationships with other people. This can include intense on-and-off relationships and strong fears of being abandoned and high sensitivity to others. Some may want to have relationships but intensely fear them at the same time. They might avoid social gatherings because they always worry that people will make fun of them and so they feel very ashamed. Some may only feel good in relationships when they behave in ways to make sure they always outshine others in order to feel strong. Some may feel a complete lack of interest in relationships or have difficulty understanding or showing care for those around them, and some may act in a hurtful way towards others. Though these problems might appear different, they all mean that people with personality disorders can find it challenging to maintain meaningful and satisfying relationships.

Sense of self and identity

People with personality disorders may struggle with their sense of self and may have difficulties knowing who they are and what they want out of life. While some might feel empty inside or strongly rely on other people to make them feel like they’re worth something as a person. Some people may be very rigid in the way they interact with the world, becoming overly focused on work, rules, and doing things perfectly. These difficulties may make it harder to set and follow long-term goals and have a meaningful sense of direction in life.

It is estimated that around 6.5% of the Australian population experience these types of problems at any given point in time. The exact causes of personality disorders are unknown but they are thought to involve several contributing factors:

- Biological or genetic factors (inherited from family) including extreme sensitivity to emotions
- Relationships with caregivers in early childhood that were problematic
- Traumatic early life experiences (e.g., abuse, neglect, death of parents, peer-victimisation)
- Ways of thinking and coping with feelings – often learnt during childhood and through experiences with other people
- Stressful social circumstances – financial, work, relationship, or family

Diagnosis Key Points:
Personality disorders: Recognising and understanding behaviour

This session explores the diagnostic criteria for personality disorders and the key characteristics of borderline personality disorder (BPD) - one of the most common disorders.

**Personality disorders** are defined in American Psychiatric Association (2013) Diagnostic and Statistical Manual, 5th Edition, (DSM-5) as:

1. An enduring pattern of inner experience and behaviour that deviates markedly from the individual's culture. This pattern is manifested in two (or more) of the following areas:
   - Cognition (i.e. ways of perceiving and interpreting self, other people, and events)
   - Affectivity (i.e. the range, intensity, lability, and appropriateness of emotional response)
   - Interpersonal functioning
   - Impulse control
2. The enduring pattern is inflexible and pervasive across a broad range of personal and social situations
3. The enduring pattern leads to clinically significant distress or impairment in social, occupational, or other important areas of functioning
4. The pattern is stable and of long duration, and its onset can be traced back at least to adolescence or early adulthood
5. The enduring pattern is not attributable to the physiological effects of a substance abuse or another medical condition

**Borderline personality disorder** is one of the most common personality disorders, and people with this disorder display many (but not necessarily all) of these features:

1. Frantic efforts to avoid real or imagined abandonment
2. A pattern of unstable and intense interpersonal relationships characterised by alternating between extremes of idealisation and devaluation
3. Identity disturbance: Markedly and persistently unstable self-image and sense of self
4. Impulsivity in at least two areas that are potentially self-damaging (e.g. spending, sex, substance abuse, reckless driving, binge eating)
5. Recurrent suicidal behaviour, gestures, threats, or self-mutilating behaviour
6. Affective instability due to a marked reactivity of mood
7. Chronic feelings of emptiness
8. Inappropriate, intense anger or difficulty controlling anger
9. Transient, stress-related paranoid ideation or severe dissociative symptoms

At least five of the above criteria need to be present for a diagnosis to be made. The DSM-5 is used by clinicians to diagnose mental illnesses. It is important to highlight that the purpose of including this information is to assist understanding of the disorder and what makes people different from their peers. Diagnosis should only be made by a qualified health professional.

It can also be helpful to explain issues such as comorbidity and differential diagnosis. Personality disorder diagnosis can be challenging as it often occurs alongside or presents similar to other diagnosis. Sometimes this is why people are diagnosed with other disorders before being diagnosed with personality disorder.

There are many types of personality disorders with each having distinctive differences in the pattern of relating.

**Prevalence key points**

6.5% of the Australian population will experience this pattern of problems during their lifetime. The age of onset for personality disorders is typically late adolescence to early adulthood, although the development of traits can usually be traced back into childhood.
**Development key points**

The likelihood of a person experiencing personality disorder is dependent on a combination of risk and protective factors. Figure 1 summarises this in relation to the development of personality disorder.

![Risk and protective factors associated with personality disorder development](image)

*Figure 1. Risk and protective factors associated with personality disorder development*

**Biopsychosocial model of personality disorder development**

Many factors, such as biological, heritability and psychosocial experiences such as adverse childhood experiences (actual or perceived), temperament and fit may contribute to personality disorder development. Therefore, no one factor causes personality disorder. In some studies, the genetic component of borderline personality disorder has been estimated to be as strong as 40%.

**Course of personality disorder key points**

Research studies that have examined people with BPD over time and have identified that remission (or no longer meeting diagnostic criteria) for BPD is possible. Therefore, there is much hope for recovery.

**Treatment key points**

Psychological treatments for personality disorders are effective and often include group and individual therapy. Early intervention is often the most effective.

Medication is sometimes used to treat co-occurring disorders (such as depression), however there is no medication that specifically treats personality disorder.

Inpatient (or hospitalisation) treatment is not recommended for people with personality disorders unless this is for short-term crisis management.

6. Debrief and Grounding/Mindfulness/Relaxation (10 minutes)

*Resource: The GLAD technique handout*

Check in with the group members to see how they received the information and ask if there are any questions.
‘What was everyone’s thoughts on the session today? Was there information that you didn’t agree with? How does everyone feel?’

Introduce the GLAD technique handout.

7. Document the session

Document the session in accordance to your organisational and legal requirements.
Session Two: Checklist

Have the following been completed?

<p>| | |</p>
<table>
<thead>
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<tbody>
<tr>
<td>1.</td>
<td><strong>Introduction to the Session</strong></td>
</tr>
</tbody>
</table>
| 2. | **Grounding, Mindfulness and Relaxation Exercise**  
  - Rhythms and sounds mindfulness factsheet |
| 3. | **Reflections of Previous Session and Group Member Sharing**  
  - Reflections on previous session  
  - Individual sharing: 4 - 5 minutes per group member |
| 4. | **Break** |
| 5. | **Psychoeducation and Skills Development**  
  - Develop understanding about the diagnostic criteria, the prevalence, development and the course of BPD  
  - Identify myths surrounding BPD  
  - Develop understanding surrounding the treatment options available for BPD  
  - Navigating the mental health system resource |
| 6. | **Debrief and Grounding/Mindfulness/Relaxation**  
  - GLAD technique handout |
| 7. | **Document the Session** |
Facilitator Self-Reflection

Session Two: What is a Personality Disorder?

What worked well for the group?

Were there any challenges experienced? What were they?

How do I feel about how the group went?

Is there anything I would change in regards to how I ran the group?

Are there any risk related situations that need to be followed up on?

Other Notes

Location of the group: ___________________ Date of group:________________________
Facilitator name: _________________________
Appendix for Session Two

GLAD Technique

**Essential Information**

**The GLAD Technique**

GLAD is an acronym for ways of finding joy and balance. It works by paying attention to certain positive aspects of life that are around you all the time, but which frequently go unnoticed. GLAD stands for:

G – One Gratitude that you’re thankful for today
   - This can represent the most basic gratitude, such as having food and water, sunlight, a body that works well enough, a roof over your head
   - Your gratitude might also be about appreciating those truly significant things in your life – such as a devoted relationship, meaningful work, a caring community of friends, and robust health

L – One new thing you Learned today
   - This can be something you learned about yourself or in general today, such as noticing an insight or wisdom that you possess or a random fact
   - It could mean having an open attitude so that you can discover something new and interesting about another person

A – One small Accomplishment you did today
   - These can be small and include simple acts of self-care that you did for yourself or another. For example: Getting enough sleep or nourishment, getting dressed in the morning, doing anything that moves you towards a long-term goal

D – One thing of Delight that touched you today
   - Consider anything that makes you laugh, smile, or brings you joy
   - This can be a thing of beauty that you notice during the day. For example; being in nature, laughing, tasting food, returning a smile

**GLAD Practice Guidelines:**

Keep track of your GLAD items that you notice and record them on the tracker. Try do this each day for the next week. If possible, try to notice a new and unique gratitude, learning, accomplishment and delight for each day. While you can do this daily, you can also do a GLAD practice on a weekly basis. The important thing is that you write these down and keep them to look at in the future. At the end of the week, look over your GLAD writings and answer the following questions:

**Reflection questions:**

1. What was it like to focus your attention in this way? How did it make you feel to start noticing these aspects of daily life?
2. Name one small way in which this practice benefited you or someone in your life
3. How could you share your GLAD ideas with others? What is the most effective method (daily or weekly) for you to continue using the GLAD technique?

This has been adapted from *The Mindfulness Toolbox: 50 Practical Tips, Tools and Handouts for Anxiety, Depression, Stress and Pain* by Donald Altman, 2014
Session Three: Understanding Triggers and Planning for Wellness

Objectives:
- Learn about the differences between triggers and warning signs
- How to identify triggers and warning signs
- Introduce concept of distress tolerance
- Discuss tools participants may use to keep themselves well
- Develop a distress tolerance toolbox and wellness plan

Outline:
1. Provide an introduction and overview to the session
2. Engage in a grounding/mindfulness/relaxation activity
3. Encourage sharing amongst group participants
4. Psychoeducation and skill development
   a. Develop an understanding of triggers vs. warning signs, and how to identify these
   b. Highlight the benefits of using distress tolerance tools
   c. Discuss how participants may keep themselves well
   d. Develop a wellness plan
5. Debrief and grounding/mindfulness/relaxation

Resources:
- Project Air Strategy Treatment Guidelines for Personality Disorders (2015) including sections on the Relational Model of Treatment and the Key Principles for Working with People with Personality Disorder
- Participant handout
- Peer Support Program Wallet Card
- Stories and videos from people with lived experience (These can be accessed via www.projectairstrategy.org)
Steps to follow in Session Three:

1. Introduction to the group session (10 mins)
   a. Orient group members to the group setting and how the group runs (5mins)

   Welcome group members and acknowledge the group members’ efforts in attending the group session. For example, “It is great to see everyone come back for another group session. Today’s session will be in a similar format to last week, we will start with a mindfulness/relaxation exercise, take turns sharing how our week was, then go into the skills component of the program and finally debrief, to see what everyone thought and how you feel. We will take a break at about one hour into the session. How does that sound?”

   Wait for group members’ response and answer any questions they may have.

   b. Provide an overview of the session (5 mins)

   Orient the group members to the topic of today’s session. This could be achieved through providing group members with an outline of the content of the session, such as “In the skills part of today’s group, we will be discussing triggers and warning signs, and how we can identify these and learn how to respond to them effectively. We will also be working on developing a distress tolerance toolbox and wellness plan.”

2. Grounding, Mindfulness and Relaxation Exercise (10 mins)

   Engage in a grounding/mindfulness/relaxation activity together as a group.

   Inform the group prior to engaging in the exercise what it will require group members to do and remind group members to engage in the exercise non-judgmentally. Ask group members if they have any questions or concerns, and address these prior to starting the grounding/mindfulness/relaxation exercise.

   Following the activity, ask group members about their thoughts on the exercise. This may provide an indication of what has and what hasn’t worked in the past for different group members.

   Exercise choice: See examples of grounding/mindfulness/relaxation exercises at the end of the manual or identify an exercise which may be useful for the group.

3. Reflections of Previous Session and Group Member Sharing (5 minutes + 4-5 minutes per group member ~40 mins)

   Encourage group members to reflect on the previous week’s content/discussion and share if they have additional thoughts or comments. It is best to have this as a group conversation.

   “In last week’s group session we talked about ____ (insert the previous week’s topic here) ____, did anyone have more thoughts during the week about what was discussed?”

   Then encourage group members to share one success and one challenge they have experienced in the past week. Suggested script:

   “Perhaps we can go around the room and share one success that you had and one challenge that you experienced last week? Just keep in mind the group rules and please do not discuss any instances of self-harm or trauma. We want to keep this group as safe as possible. I will give each person about four to five minutes but do let me know if you feel you are unable to contribute today”
Facilitators will need to keep track of the time and set boundaries for this.

4. Short Break

Advise group members when they should re-join the group.

5. Psychoeducation and Skills Development (40 mins)

What is a trigger?

Triggers are things that occur in our environments that we may find distressing. Everyone in the room will have different triggers. This is because we’ve all had different experiences in our past that have shaped who we are today. People who have had upsetting or traumatic things happen in their past might be especially sensitive to feeling triggered by something that reminds them of the past situation. So although it’s uncomfortable to feel triggered by something, it is a normal reaction. The most important thing is to learn how we can deal with our triggers without letting things get out of hand.

Discuss how participants can identify when they’ve been triggered by something. Keep the focus on how participants might know – not specific triggers. This could involve discussing what are the a) behaviours b) thoughts, c) emotions, and d) bodily sensations that participants experience when they’ve been triggered by something.

What are warning signs?

Compared to triggers, warning signs tend to be things that are a part of our personalities that can indicate we might be becoming unwell. Just like triggers, everyone will have a different set of warning signs. Some people, for example, might have learnt that if they aren’t able to get as much sleep as usual, it might be a sign that they need to attend to so that they can stay well. Others might find that they have a short temper, they aren’t doing the things they usually do to take care of themselves, or they become really stressed about doing things perfectly. All of these things could be important signs that tell us that something is wrong. If we can learn to identify our warning signs early on, it can help us to do the things we need to do to be able to look after our wellbeing.

- Activity: Warning Signs
  o Aim of the activity: Participants to identify their warning signs.
  o Resources required: Discussion and participants may record their responses on the Participant Handout.
  o Important notes: Important to highlight that triggers are external and warning signs are internal. So while triggers are things that happen in the environment, warning signs are part of our individual characteristics. Make sure participants focus on warning signs and not triggers during this activity.

What is distress tolerance?

Distress tolerance is all about learning skills that help us get through tough times or when we’re going through a crisis. These skills are very helpful for us to use when we experience triggers or warning signs. Sometimes we can’t change the events happening around us but we can change how we respond and cope with difficult situations.

Distress tolerance is all about learning the skills and strategies that work for us when we need to handle a tough situation in the short-term.
- **Group activity: The group sensory box**
  - **Aim of the activity:** To introduce the group members to the idea of a sensory box and start the development of the box that will be used in each of the group sessions.
  - **Resources required:** A box; visually and texturally stimulating materials which are self-soothing (e.g., hand crème, stress ball, cuddly toys, picture books, mints, pieces of fabric such as velvet, coloured pencils, paper, pipe cleaners or play dough).
  - **Notes:**
    - 1. Facilitators to start compiling items for the sensory box prior to the start of the session and bring it to the group.
    - 2. Introduce the idea of the sensory box to the group members.
    - 3. Ask group members to add to the group sensory box if they are able to.
    - 4. Advise the group that the sensory box will be available every session for them to use.

- **Group activity: Distress tolerance strategies**
  - **Aim of the activity:** To brainstorm potential distress tolerance strategies group members currently use or would like to use.
  - **Resources required:** Whiteboard/paper – facilitator to record responses.
  - **Note:** this group activity is linked to the next activity.

- **Activity: My distress tolerance toolkit**
  - **Aim of the activity:** Group members begin developing a distress tolerance toolkit (see Participant Handout).
  - **Instructions:**
    - 1. Discuss tools that participants may use to keep themselves well – these are things that are particularly helpful in the case that participants are triggered or experience warning signs (e.g., looking after our health, behaviours, activities, attitudes, important relationships, etc.)

- **Activity: Wellness Plan**
  - **Aim of the activity:** To introduce the plan to group members.
  - **Resources required:** Wellness plan (in participant workbook and session appendix).
  - **Instructions:**
    - 1. Introduce the wellness plan to group members.
    - 2. Encourage group members to work on “physical health” and “wellbeing tools” sections during group.
    - 3. Remind group members that there may be other components which they would like to add to the wellness plan. Encourage group members to customise their plans.
    - 4. The wellness plan can be completed for homework.

- **Homework task:**
  - Finish/complete wellness plan and develop individual sensory box.
    - Remind group members that the wellness plan can be completed in conjunction with their individual therapist, peer support worker, family or carers (if applicable).
  - Based on activities done in the group session, encourage group members to complete the peer support program wallet card. Explain that this can be kept with them to remind them of useful skills and emergency contact details. (NB: the wallet card also asks group members to list three personal values – explain to group members that this will be completed later in the program).
  - If possible ask participants to get a shoe box and make their own sensory box at home. Use examples from the group sensory box. Ask group members to take a photo and share in the next group, if comfortable. A factsheet on
‘Making and Using a Sensory Box’ can be found on the Project Air Strategy website

6. Reflections and Grounding/Mindfulness/Relaxation (10 mins)

Check in with the group members to see how they received the information and ask if there are any questions. For example; “How did you find that? Are there parts of it that you agree or don’t agree with?”

Encourage group members to engage in a grounding/mindfulness/relaxation activity for 5 minutes before leaving the group.

7. Document the session

Document the session in accordance to professional and organisational requirements.
Session Three: Checklist

Have the following been completed?

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<td>Introduction to the Session</td>
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<td>Grounding, Mindfulness and Relaxation Exercise</td>
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<td>3.</td>
<td>Sharing</td>
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<td>- Reflections on previous session</td>
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<td>- Individual sharing: 4-5 minutes per group member</td>
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<td>4.</td>
<td>Break</td>
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<td>5.</td>
<td>Psychoeducation and Skills Development</td>
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<td></td>
<td>- Develop understanding of the difference between triggers and warning signs</td>
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<td></td>
<td>- Develop understanding on to identify triggers and warning signs</td>
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<td></td>
<td>- Highlight the benefits of using distress tolerance tools</td>
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<td>- Discuss strategies and tools for maintaining wellbeing</td>
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<td>- Develop a wellness plan</td>
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<td>6.</td>
<td>Debrief and Grounding/Mindfulness/Relaxation</td>
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<td>7.</td>
<td>Document Session</td>
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Facilitator Self-Reflection

Session Three: Understanding Triggers and Planning for Wellness

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<tr>
<th>Question</th>
<th>Response</th>
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<td>What worked well for the group?</td>
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<tr>
<td>Were there any challenges experienced? What were they?</td>
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<td>How do I feel about how the group went?</td>
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<td>Is there anything I would change in regards to how I ran the group?</td>
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<tr>
<td>Are there any risk related situations that need to be followed up on?</td>
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</tbody>
</table>

Other Notes

Location of the group: ______________________  Date of group: ______________________
Facilitator name: ______________________
Appendix for Session Three

NSW Health

Wellness Plan

Name:

What would I like to improve in my life?
(1) In the short term
(2) In the long term

Planning for wellness
What are my main triggers and warning signs?

What can I do to look after my physical health?

What are the "tools" I can use to increase my sense of wellbeing? (e.g., enjoyable activities, behaviours, attitudes)

Places and people I can contact in a crisis:
- Lifeline 13 11 14
- Emergency 000
- NSW Mental Health Line 1800 011 511
- Kids Helpline 1800 551 800

My support people (e.g., partner, family members, friends, psychologist, psychiatrist, teacher, school counsellor, social worker, case worker, GP)

<table>
<thead>
<tr>
<th>Name</th>
<th>Contact Details</th>
<th>Role in My Care</th>
</tr>
</thead>
</table>

Signature:
Date:
Session Four: Emotions

Objectives:
- Develop an understanding of what emotions are and why they are important
- Identify the link between BPD diagnostic criteria and emotions
- Develop skills to identify and name emotions, interpret emotions and manage emotions

Outline
1. Provide an introduction and overview of the session
2. Engage in a grounding/mindfulness/relaxation activity
3. Encourage sharing amongst group members
4. Psychoeducation and skills component
   a. Develop an understanding of what emotions are and why they are important
   b. Identify the link between BPD diagnostic criteria and emotions
   c. Develop skills to identify and name emotions, interpret emotions and manage emotions
5. Debrief and grounding/mindfulness/relaxation exercise

Resources
- Session 4 of the participant workbook
- Emoji faces (in session appendix)
- Improving how you feel factsheet (Centre of Clinical Interventions, Western Australia)
- Thinking and feeling (Centre of Clinical Interventions, Western Australia)
Steps to follow in Session Four:

1. Introduction to the session (10 mins)

   a. Orient group members to the group setting and how the group runs (5 mins)

   Welcome group members and acknowledge the group member’s efforts in attending the group session.

   If needed, advise group members on the structure of the group.

   b. Provide an overview of the session (5 mins)

   Orient the group members to the topic of today’s session. This could be achieved through providing group members with an outline of the content of the session, such as “In the skills part of today’s group, we will be talking about what emotions are, how emotions are linked to our thoughts and behaviours; and start thinking about strategies to help with regulating our emotions.”

2. Grounding, Mindfulness and Relaxation Exercise (10 mins)

   Engage in a grounding/mindfulness/relaxation activity together as a group.

   Inform the group prior to engaging in the exercise what it will require group members to do and remind group members to engage in the exercise non-judgmentally. Ask group members if they have any questions or concerns, and address these prior to starting the grounding/mindfulness/relaxation exercise.

   Following the activity, ask group members about their thoughts on the exercise. This may provide an indication of what has and what hasn’t worked in the past for different group members.

   Exercise choice: See examples of grounding/mindfulness/relaxation exercises at the end of the manual or identify an exercise which may be useful for the group.

3. Reflections of Previous Session and Group Member Sharing (5 minutes + 4-5 minutes per group member ~40 mins)

   Encourage group members to reflect on the previous week’s content/discussion and share if they have additional thoughts or comments. It is best to have this as a group conversation.

   “In last week’s group session we talked about _____ (insert the previous week’s topic here) ___, did anyone have more thoughts during the week about what was discussed?”

   Then encourage group members to share one success and one challenge they have experienced in the past week. Suggested script:

   “Perhaps we can go around the room and share one success that you had and one challenge that you experienced last week? Just keep in mind the group rules and please do not discuss any instances of self-harm or trauma. We want to keep this group as safe as possible. I will give each person about four to five minutes but do let me know if you feel you are unable to contribute today”

   Facilitators will need to keep track of the time and set boundaries for this.
4. Short Break (10 mins)

Advise group members when they should re-join the group

5. Psychoeducation and Skills Development (40 mins)

a. What are emotions?

Useful resources:
- Improving how you feel factsheet (Centre of Clinical Interventions, Western Australia)
- Thinking and feeling (Centre of Clinical Interventions, Western Australia)

There are different emotions that come in different intensities and frequencies. They are often reactions to thoughts and behaviours we and others have. Emotions have a functional purpose and are important in assisting us in:
- Understanding a situation
- Communicate to other people our needs
- Motivate us to act
- Alert us to what we think is important

People with BPD experience emotions more intensely than other people and they can often change quite rapidly. When everyone experiences an emotion, they become more alert, however over time this level of alertness decreases to a point which is similar to their baseline levels. However when people with BPD experience emotion, their level of alertness may increase significantly more than individuals without BPD and take a longer period of time to return to their baseline levels. This may be connected to the development of BPD, such that:
- Some people are just born more emotionally sensitive (genetic component)
- The environment that you grew up in can affect your experiences with emotion (environmental component)

Our emotions, thoughts and behaviours are linked – therefore what we feel can influence what we think and in turn how we act and what we do. This means that emotions can impact upon other people and get in the way of living a meaningful life.

Reflection questions: (these are in the participant workbook)
- Have there been times when you acted on your emotions recently? Was it helpful?
- Do you ever just want to not experience emotions? What would life be like?

b. How are emotions and the BPD diagnostic criteria linked?

Link to DSM-IV diagnostic criteria:
- The experience of emotions can look different between individuals and is expressed differently between individuals
- Some ways emotions may be expressed can be reflected in the diagnostic criteria, for example;
  o Criteria 6: Affective instability due to marked reactivity of mood
  o Criteria 7: Chronic feelings of emptiness
  o Criteria 8: Inappropriate, intense anger or difficulty controlling anger
- This may lead to behaviours such as:
  o Criteria 1: Frantic efforts to avoid real or imagined abandonment
c. Managing emotions

Useful resources:
- Managing emotions factsheet (see www.projectairstrategy.org)

Managing our emotions can have positive benefits for our wellbeing, relationships and life in general. Learning to manage our emotions can be a difficult and complex process, but can have benefits for our wellbeing and relationships. We can break down the process of managing emotions into three different components:

- 1. Identifying and naming emotions
- 2. Interpretations and the experience of emotion
- 3. Emotion expression

i. Identify and name what you are feeling

Identifying and naming emotions is one of the first steps in learning to manage emotions better, as this can help to understand what you are feeling and differentiate between different emotional states. Learning to identify emotions can be difficult, especially when you are not sure as to what you are feeling and because emotions exist on a continuum in terms of their intensity.

Group activity: Identifying emotions and their intensity

See session Appendix A for emoji faces

- **Aim of the activity:** To further develop the ability of group members to identify emotions and increase understanding that similar emotions can be weighted differently in intensity along a continuum
- **Resources required:** emoji faces (in participant workbook), whiteboard/wall, blue tac, signs to visualise the continuum – which indicate the ‘high’ and ‘low’ aspects
- **Instructions:**
  - 1. Refer group members to their workbook and go through each emoji face to identify the emotion
  - 2. On the whiteboard or wall, ask group members to discuss where the emoji faces would fit on the continuum of emotional intensity – from ‘high’ to ‘neutral’ to ‘low’
  - 3. Facilitate the discussion surrounding why a specific emotion would fit into a specific spot on the continuum.
- **Discussion questions:**
  - How did the group find the process of identifying emotions?
  - What are some new thoughts the group had about emotional intensity?
  - Are there times when you notice a particular emotion to be more intense and other times the emotion being less intense?

ii. Interpretations of the emotional experience

Useful resources:

- Thinking and feeling factsheet (Centre for Clinical Interventions, Western Australia)
- Improving how you feel factsheet (Centre for Clinical Interventions, Western Australia)

In addition to what you are feeling, understanding why you are feeling the way that you are helps to put into context your emotions and feelings. Interpretations of emotions refer to the thoughts, beliefs, judgements and meaning that we place on a specific situation or emotion. These in turn have the ability to influence how we feel and think about a situation. Our interpretations may be influenced by:
- **Thoughts:** The thoughts we have may be linked to our triggers and warning signs (discussed in the previous session), because we hold pre-existing interpretations to situations that occur externally or internally. The manner in which we view an external or internal situation can lead us to make interpretations about the present situation. However our interpretations about what is going on does not always match with reality.
  
  - For example: Seeing someone laughing whilst looking at you and thinking that they are laughing at you. An alternative interpretation may be that the person who is laughing at something someone else said and they so happened to be looking in your direction.
  
  - Our thoughts and interpretations have the ability to shape our behaviours and experience of the world. Therefore the choices that we make might not match other people around us: How another person responds or reacts to a situation can influence our interpretations.
  
  - For example; Rennie and his friends Jerry and Bob are about to head off on a road trip down the coast for the weekend. Bob, whose car you will be travelling in, suddenly informs Rennie and Jerry that he will be unable to attend because he needs to meet a major deadline for work. You are unsure as to how you feel about this situation, as on one hand you understand the demands of Bob’s work, yet you were looking forward to going away. Jerry reacts negatively to the situation by calling Bob ‘irresponsible and inconsiderate’. After this conversation with Jerry, you start to feel upset and angry about missing the road trip and put all the blame on Bob.

- **Vulnerabilities:** Refers to aspects which may increase our sensitivity to intense emotions (e.g. not taking care of ourselves, not sleeping, forgetting to eat, being stressed, being sick)

- **Other:** What other factors could influence our interpretations?

**Self-Reflection Activity:** *What was influencing my emotions?*

  - See handout in session Appendix B

- **Aim of the activity:** Ask group members to reflect upon a situation which left them feeling upset or placed the group member in a negative emotional state and to identify the contributing factors which influenced their interpretations.

- **Resources required:** Participant workbook has the guiding questions

- **Instructions:**
  
  - 1. Introduce the activity to the participants
  
  - 2. Ask participants to go through the activity themselves and if they are happy, to share with the group.

iii. **Emotion expression**

Re-iterate to group members the importance and the function of emotions. Acknowledge there are many ways in which emotion can be expressed, some of which can be considered as helpful, whilst others less helpful. Emotion expression refers to the behavioural component of managing emotions, where the situation or context in which a person is in can determine whether the expression of specific emotion may be appropriate. For example, it may be less helpful to have an argument over the phone with your flatmate about unpaid bills at work, compared to when you are at home.

Emotion expression and emotion regulation come hand in hand – particularly when emotions are strong and intense. However learning to regulate strong and intense emotions can be difficult. Therefore, having a variety of strategies which work for you is important.

**Self-Reflection Activity:** *Emotion regulation strategies I currently use*

- What are some strategies do you currently use to manage your emotions? Would you consider these helpful or unhelpful? (Ask group members to share – if they feel comfortable – so that other group members can gain from their experiences)
  
  - See session appendix C for activity
It is also important to remember that being able to regulate emotions doesn’t mean that emotions go away or are less intense. Emotion regulation assists with being able to cope and manage the emotions that come up.

After effects of emotion expression or non-expression could potentially include: self-doubt, feeling comfortable, frustration, anger, relief, empowerment, or happiness. However, even if you decide to express the emotions you are feeling, it does not necessarily mean they will go away straight away. They may linger and contribute to a slower return to your normal baseline.

iv. Bringing it all together

Consider this scenario

‘Max has waited for an hour for his girlfriend to pick him up after his football training session. Max does not have his phone and all his training mates have left. He is alone at the football field and the sun is starting to set. The longer Max waited for his girlfriend the more agitated and angry he was felt towards his girlfriend. He believed that because his girlfriend was late, it meant that she did not care about him and no longer wanted to be in a relationship with him. Max also thought about the times that he picked her up on time and the errands that he did for her. When his girlfriend arrived to pick him up, Max was angry that she had forgotten him and decided to ignore her until she apologised and reconfirmed her commitment to the relationship. Max’s girlfriend explained that there was an accident on the road which contributed to major traffic delays and resulted in her being 1.5 hours late.’

Discuss this scenario with the group – these discussion questions are available in the participant workbook and there is space for group members to take notes.

- What emotions do you think Max was feeling whilst waiting for his girlfriend?
- What are some possible reasons as to why Max was feeling this way whilst waiting for his girlfriend?
- What emotions do you think Max felt when his girlfriend explained what happened?
- What are some possible reasons as to why Max was feeling this way after his girlfriend explained what happened?
- Discussion prompts:
  - What was the underlying emotions associated with what Max was feeling?
  - Why are underlying emotions more difficult to identify compared to emotions which are more obvious?

6. Debrief and grounding/mindfulness/relaxation (10 mins)

Check in with the group members to see how they received the information and ask if there are any questions.

‘How did you find that? Are there parts of the session that you agree or disagree with?’

Encourage group members to engage in a grounding/mindfulness/relaxation activity for 5 minutes before leaving the group.

7. Document the session

Document the session in accordance to your organisational and legal requirements.
Session Four: Checklist

Have the following been completed? (Place a tick in the box)

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<td>2.</td>
<td>Grounding, Mindfulness and Relaxation Exercise</td>
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</table>
| 3. | Sharing  
   - Reflections on previous session  
   - Individual sharing: 4-5 minutes per group member |
| 4. | Break |
| 5. | Psychoeducation and Skills Development  
   - Develop an understanding of what emotions are and why they are important  
   - Identify the link between BPD diagnostic criteria and emotions  
   - Develop skills to identify and name emotions, interpret emotions and manage emotions |
| 6. | Debrief and Grounding/Mindfulness/Relaxation |
| 7. | Document the Session |
Facilitator Self-Reflection

Session Four: Emotions

What worked well for the group?

Were there any challenges experienced? What were they?

How do I feel about how the group went?

Is there anything I would change in regards to how I ran the group?

Are there any risk related situations that need to be followed up on?

Other Notes

Location of the group:____________________    Date of group:________________________

Facilitator name: _________________________
### Appendix A: Identifying Emotions and their Intensity – Emoji Faces with Potential Emotion Labels

<table>
<thead>
<tr>
<th>Happy</th>
<th>Shame</th>
<th>Silly</th>
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<tbody>
<tr>
<td>Smug</td>
<td>Joyous</td>
<td>Neutral</td>
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<tr>
<td>Angry</td>
<td>Love</td>
<td>Disgusted</td>
</tr>
<tr>
<td>Scared</td>
<td>Embarrassed</td>
<td>Hopeless</td>
</tr>
<tr>
<td>Shocked</td>
<td>Depressed</td>
<td>Content</td>
</tr>
<tr>
<td>Worried</td>
<td>Sad</td>
<td>Astonished</td>
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Emoji created by Ibrandify – Freepik.com
Place the identified emotions from the emoji faces on the continuum based on the intensity of the emotion.
Appendix B: What was influencing my emotions?

Think back to a recent situation that left you feeling upset or placed you in a negative emotional state.

Give a brief description of what happened and what you thought about the situation

How did this make you feel?

Reflecting on the situation, what are some for the contributing factors which influenced your interpretations.
Appendix C: Emotion Regulation Strategies I Currently Use

What strategies do you currently use to manage your emotions?

<table>
<thead>
<tr>
<th>Strategy – e.g. Listen to music or go for a walk</th>
<th>Is this strategy helpful (✔ or ☒)</th>
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Session Five: Relationships

Objectives:
- Develop skills in making and maintaining relationships
- Identify challenges associated with making and maintaining relationships – boundaries and balancing needs
  - Identify boundary similarities and differences in different relational contexts
- Explore what a healthy relationship is
- Discuss what it means to have balance in a relationship
- Develop effective communication skills - including assertive communication

Outline:
1. Introduction to the Session
2. Grounding, Mindfulness or Relaxation exercise
3. Reflections of previous session and group member sharing
4. Short break
5. Psychoeducation and skill development
   a. Making and maintaining relationships
      i. The challenges
      ii. Healthy relationships
      iii. Similarities and differences of relationships in different contexts
   b. Finding the balance
      i. Effective communication
6. Debrief and grounding/mindfulness/relaxation

Resources:
- Session Five of the participant handbook
- Effective Communication Factsheet
- Effective Communication: For Families, Partners & Carers Factsheet
Steps to follow in Session Five

1. Introduction to the session (10 mins)
   a. Orient group members to the group setting (5 mins)
   Welcome group members and acknowledge the group members’ efforts in attending the group session.
   b. Provide an overview of the session (5 mins)
   Orient the group members to the topic of today’s session. This could be achieved through providing group members with an outline of the content of the session, such as “In the skills part of the today’s session, we will be talking about relationships – making and maintaining relationships, the challenges associated with relationships, how relationships can differ in different situations and how to find balance”.

2. Grounding, Mindfulness and Relaxation Exercise (10 mins)
   Engage in a grounding/mindfulness/relaxation activity together as a group.
   Inform the group prior to engaging in the exercise what it will require group members to do and remind group members to engage in the exercise non-judgmentally. Ask group members if they have any questions or concerns, and address these prior to starting the grounding/mindfulness/relaxation exercise.
   Following the activity, ask group members about their thoughts on the exercise. This may provide an indication of what has and what hasn’t worked in the past for different group members.
   Exercise choice: See examples of grounding/mindfulness/relaxation exercises at the end of the manual or identify an exercise which may be useful for the group.

3. Reflections of Previous Session and Group Member Sharing (5 minutes + 4-5 minutes per group member ~40 mins)
   Encourage group members to reflect on the previous week’s content/discussion and share if they have additional thoughts or comments. It is best to have this as a group conversation.
   “In last week’s group session we talked about ____ (insert the previous week’s topic here)____, did anyone have more thoughts during the week about what was discussed?”
   Then encourage group members to share one success and one challenge they have experienced in the past week. Suggested script:
   “Perhaps we can go around the room and share one success that you had and one challenge that you experienced last week? Just keep in mind the group rules and please do not discuss any instances of self-harm or trauma. We want to keep this group as safe as possible. I will give each person about four to five minutes but do let me know if you feel you are unable to contribute today”
   Facilitators will need to keep track of the time and set boundaries for this.

4. Short Break (10 mins)
   Advise group members when they should re-join the group
5. Psychoeducation and Skill Development (40 mins)

Key points about relationships

- Positive relationships can be difficult to establish and maintain
- Different types of relationships call for different styles of relating
- Effective communication helps us to get our needs met and nurture our important relationships

a. Making and maintaining relationships

Relationships when experiencing BPD can be challenging. The difficulties associated with developing and maintaining relationships can be attributed to the interpersonal nature of personality disorders. Interpersonal difficulties are a core feature of BPD and this is reflected in the diagnostic criteria which can be identified in:

- **Criteria 1:** Frantic efforts to avoid real or imagined abandonment
- **Criteria 2:** A pattern of unstable and intense interpersonal relationships characterised by alternating between extremes of idealisation and devaluation

For example;

- **Mary and Stephanie are best friends who recently graduated from high school. Stephanie has decided to go to university, whilst Mary has decided to enter the workforce.** Mary is concerned about their friendship as she believes that Stephanie will not have as much time for her. Stephanie ensures Mary that their friendship will remain unchanged. As the university semester progresses, Stephanie makes a large group of friends, who she often makes plans with. Mary frequently contacts Stephanie asking whether she would like to go out for coffee, however Stephanie often declines the offer as she is busy with her new network of friends. As the year progresses, Mary becomes resentful and begins to blame Stephanie for her social isolation and intense emotional experiences.

Some people with BPD may find relationships difficult to navigate and choose instead to not engage in relationships at all.

**Group discussion:** What are the benefits and challenges associated with not being involved in any relationships?

b. Challenges associated with making and maintaining relationships:

   i. Maintaining boundaries:

In relationships, boundaries refer to the limits that we place on other people in regards to what they are allowed to say or do towards us. These boundaries differ depending on the type of relationship at question.

For example: a therapist may set boundaries on when their clients can contact them, whilst they may not have the same boundaries for members of their family.

Having boundaries can assist to nurture healthy relationships where both parties are treated fairly. Not having boundaries may lead to:

- Exhaustion,
- Feeling manipulated, frustrated or angry,
- Doing more than you would like to do,
- Lack of respect for self/other,
- Resentment of self/other,
- An increase of instances of ineffective emotional expression
Some people find setting boundaries difficult and this may be associated with:

- Not having learnt how to set boundaries
- Abusive relationships where boundaries were unclear

It is important to note that despite putting up boundaries, people will not always respect them. People may try to push or test your boundaries. This may be associated with the characteristics of the person or the type of relationship you have with the person.

Our emotions are a good indicator of whether our boundaries have been violated. Feelings could potentially include; discomfort, anger, frustration, shame or disgust.

Boundaries also exist in the context of the type of relationship — That is, you can have different boundaries for different people depending on the type of relationship it is.

**Group Brainstorm Activity:** *Similarities and differences in relationships*

- **Aim of the activity:** To help group members to identify boundary differences in different relational contexts
- **Resources required:** Participant workbook – Session 5
- **Instructions:**
  1. Go through the scenario about Gemma with the group
  2. Go through each of the columns (friends, work colleagues, therapist) to consider what boundaries are important to consider. *Suggestions are provided in the box*

**Scenario:**

*As part of Gemma’s safety plan, she agreed with her therapist that she would call someone when she felt unsafe. Gemma has been feeling down and anxious for the past few days and wants to talk to someone about what is going on. She considers who to call from her wider support network – friends, work colleagues, and therapist.***

What boundaries would be important to consider?

<table>
<thead>
<tr>
<th>Friends</th>
<th>Work Colleagues</th>
<th>Therapist</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Availability</td>
<td>- Availability</td>
<td>- Availability</td>
</tr>
<tr>
<td>- What is happening in their personal life</td>
<td>- Type of content and whether this is appropriate for the work setting</td>
<td>- Don’t need to consider what is happening in their personal life</td>
</tr>
<tr>
<td>- Extent of disclosure of mental health problems</td>
<td>- Relationship type</td>
<td>- Extent of disclosure of mental health problems</td>
</tr>
<tr>
<td>- Type of content</td>
<td>- Extent of disclosure of mental health problems</td>
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</tbody>
</table>

**ii. Balancing your needs with the needs of others**

Everyone has needs. There are two (or more sides) to a relationship, therefore multiple needs need to be balanced at the same time. Balance in relationships is important in maintaining the dynamics between two parties. Balance refers to:

- Connection between people in a relationship
- Sharing of experiences
- Working towards shared goals.

The needs of people change depending upon the situation and context. There will be times when others may have demanding needs. We find ourselves in relationships where we are giving a lot more to the other person than they’re giving to us or the other person is giving a lot but we are not willing to do the same. Consequences of having unbalanced needs include:

- Conflicts
- Relational difficulties

Decision surrounding your capacity to manage this needs to be made,

- Setting boundaries plays a role in balancing your needs and others
Group discussion: How do we find the right balance in relationships?

iii. Communication style

Communication is the key to satisfying relationships and assists people to feel valued and that their needs are being heard and responded to. However, there are different communication styles – the style that is used can impact upon the manner in which a person responds to you.

- See ‘Communication Style’ resource (See session appendix A)

Effective Communication

- See ‘Effective communication’ and ‘Effective communication: for families, partners & carers’ resource (www.projectairstrategy.org.au)

Important questions to ask when trying to communicate in relationships:

- What do I need to know?
  - What do I notice about them?
  - What do I need?
- How can I communicate my needs and balance them with their needs?
  - How do I feel?
  - What do I want?
  - What’s their position?
  - How can I say what I need in a healthy way (assertive communication)?
  - What can I use in my own life?

Activity: Effective Communication

- Aim of activity: To systematically think through a scenario to develop greater understanding of how to get needs met through effective communication.
- Resources required: Participant workbook – Session 5 (See session appendix B)
- Instructions:
  - 1. Ask group members to think about a current or past relationship that is personally meaningful and to recall a time when they were trying to effectively communicate their needs or feelings
  - 2. Discuss the table as outlined in the participant workbook.

What is a healthy relationship?

Healthy relationships are what we strive towards – this applies to everyone.

Characteristics of a healthy relationship may include:

- Mutual trust and acceptance of each other
- Consideration of each other’s needs
- Effective and assertive communication
- Consideration and balancing of each other’s needs
- Open, effective and assertive communication
- Have clear and explicit boundaries but also allows for flexibility
- Personal identity
- Quality time together
- Ability to provide and receive feedback from each other
- Ability to identify each other’s points of view
- Balance between having own time/space and being together
- Having responsibility over own thoughts, behaviours and emotions, rather than blaming the other person
- Physical safety or not being financially restrained by others

Group discussion: What are your thoughts on the above characteristics and are there other characteristics that you consider as part of a healthy relationship?

Group activity: Is this healthy or unhealthy? (Activity adapted from Western Health NL

- Aim of the activity: To provide group members with an opportunity to explore different scenarios to identify whether they are healthy or unhealthy characteristics of relationships
- **Resources required:** Relationship scenario cards (24 cards), Whiteboard/Wall, Participant workbook
- **Instructions:**
  - 1. Divide the relationship characteristic cards amongst the group members
  - 2. Ask group members to reflect upon whether the cards they received are reflective of a healthy or unhealthy relationship
  - 3. Then go around the group and ask each group member to read out their card and to say whether they think the card characteristic is ‘healthy’ or ‘unhealthy’. Ask other group members if they agree or disagree.
  - 4. Stick the cards on the whiteboard/wall.
  - 5. Remind group members that unhealthy relationship patterns can occur outside the context of BPD

6. **Debrief and Grounding/Mindfulness/Relaxation (10 minutes)**

Check in with the group members to see how they received the information and ask if there are any questions.

‘What was everyone’s thoughts on the session today? Was there information that you didn’t agree with? How does everyone feel?’

Encourage group members to engage in a grounding/mindfulness/relaxation activity for 5 minutes before leaving the group.

7. **Document the session**

Document the session in accordance to professional and organisational requirements.
# Session Five Checklist

Have the following been completed? *(Place a tick in the box)*

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>1.</td>
<td>Introduction to the Session</td>
</tr>
<tr>
<td>2.</td>
<td>Grounding, Mindfulness and Relaxation Exercise</td>
</tr>
</tbody>
</table>
| 3. **Sharing** |  - Reflections on previous session  
  - Individual sharing: 4-5 minutes per group member |
| 4. | Break |
| 5. **Psychoeducation and Skills Development** |  - Develop skills in making and maintaining relationships  
  - Identify challenges associated with making and maintaining relationships – boundaries and balancing needs  
    - Identify boundary similarities and differences in different relational contexts  
  - Discuss what it means to have balance in a relationship  
  - Develop effective communication skills - including assertive communication  
  - Explore what a healthy relationship is |
| 6. | Debrief and Grounding/Mindfulness/Relaxation |
| 7. | Document the Session |
Facilitator Self-Reflection

Session Five: Relationships

What worked well for the group?

Were there any challenges experienced? What were they?

How do I feel about how the group went?

Is there anything I would change in regards to how I ran the group?

Are there any risk related situations that need to be followed up on?

Other Notes

Location of the group:____________________ Date of group:________________________
Facilitator name:________________________
Appendix for Session Five

Appendix A: Communication Style

Communication Styles

<table>
<thead>
<tr>
<th></th>
<th>Passive</th>
<th>Assertive</th>
<th>Aggressive</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>General</strong></td>
<td>Compliant, submissive, talks little,</td>
<td>Actions and expressions fit with</td>
<td>Sarcastic, harsh, always right,</td>
</tr>
<tr>
<td></td>
<td>vague non-committal communication, puts</td>
<td>words spoken, firm but polite and clear</td>
<td>superior, know it all, interrupts,</td>
</tr>
<tr>
<td></td>
<td>self down, praises others</td>
<td>messages, respectful of self and others</td>
<td>talks over others, critical, put-</td>
</tr>
<tr>
<td></td>
<td>&quot;I don't mind...that's fine...yes alright&quot;</td>
<td>&quot;That's a good idea, and how about if we</td>
<td>downs, patronising, disrespectful</td>
</tr>
<tr>
<td></td>
<td></td>
<td>did this too...&quot; or &quot;I can see that,</td>
<td>of others</td>
</tr>
<tr>
<td></td>
<td></td>
<td>but I'd really like...&quot;</td>
<td></td>
</tr>
<tr>
<td><strong>Beliefs</strong></td>
<td>You're okay, I'm not</td>
<td>I'm okay, you're okay</td>
<td>I'm okay, you're not</td>
</tr>
<tr>
<td></td>
<td>Has no opinion other than that the other</td>
<td>Believes or acts as if all the</td>
<td>Believe they are entitled to have</td>
</tr>
<tr>
<td></td>
<td>person/s are always more important, so it</td>
<td>individuals involved are equal, each</td>
<td>things done their way, the</td>
</tr>
<tr>
<td></td>
<td>doesn't matter what they think anyway</td>
<td>deserving of respect, and no more</td>
<td>way they want it to be done,</td>
</tr>
<tr>
<td></td>
<td></td>
<td>entitled than the other to have things</td>
<td>because they are right, and others</td>
</tr>
<tr>
<td></td>
<td></td>
<td>done their way</td>
<td>(and their needs) are less</td>
</tr>
<tr>
<td><strong>Eyes</strong></td>
<td>AVOIDS EYE CONTACT, looks down, tearful,</td>
<td>Warm, welcoming, friendly, comfortable</td>
<td>Narrow, emotion-less, staring,</td>
</tr>
<tr>
<td></td>
<td>pleading</td>
<td>eye contact</td>
<td>expressionless</td>
</tr>
<tr>
<td><strong>Posture</strong></td>
<td>Makes body smaller – stooped, leaning,</td>
<td>Relaxed, open, welcoming</td>
<td>Makes body bigger – upright, head</td>
</tr>
<tr>
<td></td>
<td>hunched shoulders</td>
<td></td>
<td>high, shoulders out, hands on hips,</td>
</tr>
<tr>
<td><strong>Hands</strong></td>
<td>Together, fidgety, clumsy</td>
<td>Open, friendly and appropriate gestures</td>
<td>hands on hips</td>
</tr>
<tr>
<td><strong>Consequences</strong></td>
<td>Give in to others, don't get what we</td>
<td>Good relationships with others, happy</td>
<td>Make enemies, upset others and self,</td>
</tr>
<tr>
<td></td>
<td>want or need, self-critical thoughts,</td>
<td>with outcome and to compromise</td>
<td>feel angry and resentful</td>
</tr>
<tr>
<td></td>
<td>miserable</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Appendix B: Activity – Effective Communication

Think about a current or past relationship that was important in your life. Try to recall a time during this relationship when it was important for you to clearly communicate something to the other person (perhaps you wanted to ask them for something that you needed or they did something that upset you and you wanted to express this). Use the following template as a guide to help you think through the situation:

| How did I feel in this situation?  
  What were my thoughts and feelings? |
<table>
<thead>
<tr>
<th></th>
</tr>
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<tbody>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>What did I want to achieve?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

| What were my long-term hopes for this relationship?  
  How did they relate to the current situation? |
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>What were some of the ways that I could understand the other person’s actions or perspective?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>How could I have most effectively communicated what I needed to say without doing any harm to the relationship?</th>
</tr>
</thead>
</table>
## Appendix C: Relationship characteristic cards for ‘Is this healthy or unhealthy?’ exercise
(Activity adapted from Western Health NL

<table>
<thead>
<tr>
<th>Uses alcohol or drugs as an excuse for hurtful behaviour</th>
<th>Acts controlling or possessive – like you own your partner</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goes back on promises</td>
<td>Tries to make the other feel crazy or plays mind games</td>
</tr>
<tr>
<td>Makes all the decisions and does not relinquish control</td>
<td>Tries to keep the other from having a job or going to school</td>
</tr>
<tr>
<td>Becomes physically abusive</td>
<td>Psychologically abusive – calls the other names or belittles the other person</td>
</tr>
<tr>
<td>Threatens to hurt the other person</td>
<td>Pressures the other for sex</td>
</tr>
<tr>
<td>Criticises the personally meaningful aspects of a person’s life</td>
<td>Yells at the other person</td>
</tr>
<tr>
<td>Acts jealously towards another person or accuses another person of cheating</td>
<td>Communication about sex and doesn’t pressure a person for sex</td>
</tr>
<tr>
<td>Have close relationships with other people other than your partner</td>
<td>Able to have personal space and not have that personal space violated</td>
</tr>
<tr>
<td>All involved in the relationship contribute towards making decisions</td>
<td>Forgive each other when someone does something that the other person doesn’t appreciate</td>
</tr>
<tr>
<td>Encourage each other to engage in activities that they are passionate about</td>
<td>Being able to speak their mind about needs, thoughts and feelings</td>
</tr>
<tr>
<td>Accepts responsibility for actions and emotions</td>
<td>Feel safe with each other</td>
</tr>
<tr>
<td>Trust each other</td>
<td>Consistently points out the negative characteristics of a person</td>
</tr>
<tr>
<td>Makes judgements about a person’s appearance, even when the other person has asked them to stop</td>
<td>Consistently puts blame on another person without consideration of their role in a situation</td>
</tr>
</tbody>
</table>
Session Six: Identity, Beliefs and Values

Objectives:

- Define concepts of identity, beliefs, and values
- Identify factors that influence identity, beliefs, and values
- Develop understanding surrounding motivations that underlie an individual’s values
- Initiate process of identifying individual values and explore barriers to value-expression

Outline:

1. Introduction to the Session
2. Grounding, Mindfulness or Relaxation exercise
3. Reflections of Previous Session and Group Member Sharing
4. Psychoeducation and skills component
   a. Psychoeducation on concepts of identity, beliefs, and values
   b. Brainstorming activity: factors that influence identity, beliefs, and values
   c. Vignettes discussion: Potential motivations/underlying values for behavior
   d. Psychoeducation of barriers to living according to values
   e. Value card activity: Rank values around the room
   f. Take home/summary activity: Personal value cards
5. Debrief and grounding/mindfulness/relaxation exercise

Resources:

- Session Six of the participant handbook
- Value cards (can be downloaded from https://goo.gl/dYWjO4)

Materials required:

- Sticky tape or blue tack
- A4 paper
- Thick permanent marker
- Sheets of A4 paper labelled as “not important to me”, “important to me”, and “very important to me”
- Values reminder card
Steps to follow in Session Six:

1. Introduction to the Session (10 mins)
   a. Orient group members to the group setting and how the group runs (5 mins)

   Welcome group members and acknowledge the group member’s efforts in attending the group session.
   
   If needed, advise group members on the structure of the group.
   
   b. Provide an overview of the session (5 mins)

   Orient the group members to the topic of today’s session. This could be achieved through providing group members with an outline of the content of the session, such as “In the skills part of today’s group, we will be talking about values and how they impact on behavior. We will also be working on identifying values that are important to you.”

   Answer questions group members may have.

2. Grounding, Mindfulness and Relaxation Exercise (10 mins)

   Engage in a grounding/mindfulness/relaxation activity together as a group.

   Inform the group prior to engaging in the exercise what it will require group members to do and remind group members to engage in the exercise non-judgmentally. Ask group members if they have any questions or concerns, and address these prior to starting the grounding/mindfulness/relaxation exercise.

   Following the activity, ask group members about their thoughts on the exercise. This may provide an indication of what has and what hasn’t worked in the past for different group members.

   Exercise choice: See examples of grounding/mindfulness/relaxation exercises at the end of the manual or identify an exercise which may be useful for the group.

3. Reflections of Previous Session and Group Member Sharing (5 minutes + 4-5 minutes per group member ~40 mins)

   Encourage group members to reflect on the previous week’s content/discussion and share if they have additional thoughts or comments. It is best to have this as a group conversation.

   “In last week’s group session we talked about ____ (insert the previous week’s topic here) ____, did anyone have more thoughts during the week about what was discussed?”

   Then encourage group members to share one success and one challenge they have experienced in the past week. Suggested script:

   “Perhaps we can go around the room and share one success that you had and one challenge that you experienced last week? Just keep in mind the group rules and please do not discuss any instances of self-harm or trauma. We want to keep this group as safe as possible. I will give each person about four to five minutes but do let me know if you feel you are unable to contribute today”

   Facilitators will need to keep track of the time and set boundaries for this.
4. Short Break (10 mins)

Advise group members when they should re-join the group.

5. Psychoeducation and Skill Development (40 mins)

**What is the difference between identity, beliefs and values and how do they link together?**

Identity refers to the unique characteristics of a particular person. It is shaped over time as people develop and may be influenced by factors such as family background, culture, friends, and the media. While lots of people go on to develop a strong sense of their identity (i.e., *who they are as a person*), others might find difficulties along the way. Having a strong sense of identity can also depend on how safe you feel inside and in close attachment relationships, having a strong understanding your history, where you and your family come from, and what makes you feel uniquely you. It can take time to work this all out. All of us have core beliefs that influence how we see the world – how we understand what has happened in the past and what we expect to happen in the future. Core beliefs are formed from an early age and sometimes have been present for such a long time that we might not even notice how they influence our lives. Core beliefs are important to reflect on because they also have a powerful effect on our identity – how we view ourselves and how secure we feel in our own skin.

Beliefs are learned assumptions about our world – they are what we have internalised to be true about ourselves and the world around us. Another important concept related to beliefs is that of “values”. Rather than just being what we have learnt from past experience and expect from the world, values refer to the things that we want in the future – things that are important and meaningful in our lives. You can think of the analogy of values being like lighthouses that can guide us towards making choices to help us live a more satisfying and meaningful life. Just as everyone is a unique individual, everyone will have a different set of values. It’s also very common to feel unsure about what your values are, especially if you’ve never taken the chance to think about them before. It can really be worth taking the time to reflect on our values as knowing them can help with strengthening our sense of identity, and starting to do more things in life that help us feel truly satisfied.

**Identity, beliefs, and values and the BPD diagnostic criteria**

Difficulties with identity is part of the diagnostic criteria for BPD and can be identified in:

- Criteria 3: Identity disturbance: Markedly and persistently unstable self-image or sense of self
- Criteria 7: Chronic feelings of emptiness

Although it is possible that not all people with a diagnosis of BPD will experience difficulties with identity, some may struggle with their view of themselves and may have difficulties knowing who they are and what they want out of life. Their goals, aspirations and values may shift dramatically depending upon the context/situation they are in or they may not be sure of what their goals, aspirations or values are in general.

Having difficulties with understanding who you are or not knowing what you want out of life may contribute to a sense of emptiness.

**What influences identity, beliefs and values?**

**Brainstorm group activity:** Factors influencing identity, beliefs and values

- **Aim of the activity:** To increase awareness of different factors which may contribute to a person’s identity, beliefs and values
- **Resources required:** Whiteboard/paper, participant workbook session 6
  - See session appendix A for activity
- **Instructions:**
  - 1. Ask group members to brainstorm factors that influence identity, beliefs, and values.
  - 2. Facilitator to record responses on paper or whiteboard, if available.
    Encourage group members to record responses in their workbooks

**Activity: How do values influence behaviour? – Values vignette**

- **Aim of the activity:** To reflect upon the potential motivations and underlying values that influence a person to engage in a specific behaviour or act in a specific manner
- **Resources required:** Participant workbook – Session Six – Sally Vignette
  - See session appendix B for activity – Question 1
- **Instructions:**
  - 1. Present vignettes of Sally to group members
  - 2. Ask question from activity ‘What are some of the values that you can identify for Sally based on this vignette?’
  - 3. Open discussion about potential motivations/underlying values.

**Barriers to living a values based life**

Advise group members that although living a values-based life may seem easy in theory, there may be barriers associated with this. Some common challenges may include:

- Not having a clear idea of who you are as a person
- Not spending enough time thinking about your values
- Being very busy with the tasks and routines of daily life and finding it hard to schedule tasks and goals that will help you live according to your values.
- Finding that some of your values are in conflict with each other or that other people do not agree with your beliefs or values. This may lead to feelings that it is difficult to choose the best course of action in a particular situation.
- Feeling guilt, shame, or regret about the times in your life when you didn’t live according to your values. Finding that these feelings make it hard to focus on making positive changes.

**Quick Activity:**

- Look at the vignettes presented in the previous activity again and identify various barriers to living out values
- **Resources required:** Participant workbook – Session 6 – Sally Vignette
  - See session appendix B for activity – Question 2
  - There is space in the participant workbook for group members to take notes

**Group Activity: What are my values?**

- **Aim of the activity:** To reflect upon values people may hold and to rate their importance for the group member
- **Resources required:** Value cards, signs with ‘very important to me’, ‘important to me’ and ‘not important to me’
  - See session appendix C for activity
- **Instructions:**
  - 1. Facilitators to set up the room with three spaces that correspond to the values ratings mentioned in the ‘resource required’ section above
  - 2. Provide group members with value cards and ask group members to place around the room in terms of ‘very important to me’, ‘important to me’ and ‘not important to me’.
  - 3. Give group members 5 minutes to walk around the room and stick their values cards in the place corresponding with how important they consider them to be. The facilitator will lead the group in reflecting the diversity of values and importance as placed around the room.
    - Don’t worry if participants aren’t able to get through all the values – in this case encourage them to take their values cards home and take some time to think about how they would rate the importance of
these values (or any others that are important to them and aren’t on the list).

Take home summary activity:

- **Aim of the activity:** To provide opportunity for group members to be reminded of what their values are
- **Resources required:** Distress tolerance/emergency contacts and personal values wallet card
- **Instructions:**
  o 1. Ask group members to fill out card with up to 5 values they feel are very important to them.
  o 2. Encourage group members to keep the card with them (put it in their wallet or purse) so they can consult it in the future
  o 3. If group members need further assistance, ask them to have a discussion with their individual clinician.

6. Debrief and Grounding/Mindfulness/Relaxation (10 minutes)

Check in with the group members to see how they received the information and ask if there are any questions.

‘What was everyone’s thoughts on the session today? Was there information that you didn’t agree with? How does everyone feel?’

Encourage group members to engage in a grounding/mindfulness/relaxation activity for 5 minutes before leaving the group.

7. Document the session

Document the session in accordance to professional and organisational requirements.
Session Six: Checklist

Have the following been completed? *(Place a tick in the box)*

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>1.</td>
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</tr>
<tr>
<td>2.</td>
<td><strong>Grounding, Mindfulness and Relaxation Exercise</strong></td>
</tr>
</tbody>
</table>
| 3. | **Sharing**  
- Reflections on previous session  
- Individual sharing: 4-5 minutes per group member |
| 4. | **Break** |
| 5. | **Psychoeducation and Skills Development**  
- Define concepts of identity, beliefs, and values  
- Identity factors that influence identity, beliefs, and values  
- Develop understanding surrounding motivations that underlie an individual's values  
- Initiate process of identifying individual values and explore barriers to value-expression |
| 6. | **Debrief and Grounding/Mindfulness/Relaxation** |
| 7. | **Document the Session** |
Facilitator Self-Reflection

Session Six: Identity, Beliefs and Values

What worked well for the group?

Were there any challenges experienced? What were they?

How do I feel about how the group went?

Is there anything I would change in regards to how I ran the group?

Are there any risk related situations that need to be followed up on?

Other Notes

Location of the group:____________________    Date of group:________________________
Facilitator name: _________________________
Appendix for Session Six

Appendix A: Factors influencing identity, beliefs and values
Appendix B: How do values influence behaviour? – Values vignette

Sally Vignette

Sally (age 32) is a vegetarian and has a deep concern for environmental and animal rights issues. Sally purchases organic food whenever she can, however sometimes she cannot afford to do so. She also loves gardening, but over the last few weeks her schedule has been very busy which has prevented her from doing this activity.

Sally has very strong opinions and she always tries to be open about her beliefs when talking to others. She often describes herself as ‘authentic’ and is not afraid of conflict. However, due to this she sometimes finds herself in arguments with others who hold different beliefs than she does – for example her cousin, Dave, who works as a butcher. Sally has mixed feelings as she cares a lot about her family and recognises that this is his only source of income, however she still feels obligated to express her animal rights concerns.

Sally enjoys hiking and feels most happy when she is in nature, going on adventures. If she has the money, she loves to travel overseas when possible. However, she also often feels guilty about the environmental impact of her travel. Recently, Sally has not gone travelling for a while due to her commitment to a new relationship with Alex, her partner, to whom she is starting to develop very strong feelings. While the relationship is going well and she enjoys it a lot, she is slightly concerned about how this developing relationship will impact on her lifestyle and independence.

Question 1. What are some of the values that you can identify for Sally based on this vignette?

Values include:

- Adventure – to have new and exciting experiences
- Autonomy – To be self-determined and independent
- Beauty – to appreciate the beauty in the world
- Ecology – to live in harmony with the environment
- Genuineness – to be true to who you are, authentic
- Travel – to explore the world
- Relationships – To have meaningful relationships
- Independence – To be autonomous, free from dependence on others
- Family – To have concern and care for familial relationships

Question 2. What are some of the barriers you can identify that prevent Sally from living out her values?

Barriers include:

- Limited resources – Limited money preventing Sally from travelling or buying organic food.
- Values in conflict:
  - Genuineness vs. Family
  - Ecology vs. Family
  - Adventure, beauty, travel vs. Ecology, Relationships
  - Relationships vs. Independence
- Time constraints – Limited time prevents her from doing activities, such as gardening, that are important to her.
Appendix C: What are my values?

Download the full set of value cards from: [https://goo.gl/dYWjO4](https://goo.gl/dYWjO4)

<table>
<thead>
<tr>
<th>PERSONAL VALUES Card Sort</th>
<th>IMPORTANT TO ME</th>
</tr>
</thead>
<tbody>
<tr>
<td>W.R. Miller, J. C' de Baca, D.B. Matthews, P.L. Wilbourne</td>
<td>University of New Mexico, 2001</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>VERY IMPORTANT TO ME</th>
<th>NOT IMPORTANT TO ME</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACCEPTANCE</td>
<td>ACCURACY</td>
</tr>
<tr>
<td>to be accepted as I am</td>
<td>to be accurate in my opinions and beliefs</td>
</tr>
</tbody>
</table>

<table>
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<th>1</th>
<th>2</th>
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<tbody>
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<tr>
<th>ACHIEVEMENT</th>
<th>ADVENTURE</th>
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<tr>
<td>to have important accomplishments</td>
<td>to have new and exciting experiences</td>
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<th>3</th>
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<thead>
<tr>
<th>ATTRACTIVENESS</th>
<th>AUTHORITY</th>
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<tr>
<td>to be physically attractive</td>
<td>to be in charge of and responsible for others</td>
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Session Seven: Self-Care and Self-Compassion

Objectives:
- Introduce concepts of self-care and self-compassion
- Establish the importance of self-care and self-compassion
- Highlight that the process of self-care and self-compassion will be unique for each individual

Outline:
1. Introduction to the Session
2. Grounding, Mindfulness or Relaxation exercise
3. Reflections of previous session and group member sharing
4. Short break
5. Psychoeducation and skill development
   a. Discuss what self-compassion and self-care mean, and why they’re important
   b. Highlight the ways that these concepts will mean different things to different people
   c. Participants to develop a plan for self-care
6. Debrief and grounding/mindfulness/relaxation

Resources:
- Participant handout – Session Seven
Steps to follow for Session Seven

1. Introduction to the Session (10 mins)

   a. Orient group members to the group setting and how the group runs (5 mins)

   Welcome group members and acknowledge the group member’s efforts in attending the group session. For example, “It is great to see everyone come back for another group session. Today’s session will be in a similar format to last week, we will start with a mindfulness/relaxation exercise, take turns sharing how our week was, then go into the skills component of the program and finally debrief, to see what everyone thought and how you feel. We will take a break at about one hour into the session. How does that sound?”

   Wait for group members’ response and answer any questions they may have.

   b. Provide an overview of the session (5 mins)

   Orient the group members to the topic of today’s session. This could be achieved through providing group members with an outline of the content of the session, such as “In the skills part of today’s group, we will be talking about self-care and self-compassion, and what these things mean to you personally. We’ll also put some thought to how you might start to do things to help you care for and feel more compassionate towards yourself.”

   Answer any questions group members may have.

2. Grounding, Mindfulness and Relaxation Exercise (10 mins)

   Engage in a grounding/mindfulness/relaxation activity together as a group.

   Inform the group prior to engaging in the exercise what it will require group members to do and remind group members to engage in the exercise non-judgmentally. Ask group members if they have any questions or concerns, and address these prior to starting the grounding/mindfulness/relaxation exercise.

   Following the activity, ask group members about their thoughts on the exercise. This may provide an indication of what has and what hasn’t worked in the past for different group members.

   Exercise choice: See examples of grounding/mindfulness/relaxation exercises at the end of the manual or identify an exercise which may be useful for the group.

3. Reflections of Previous Session and Group Member Sharing (5 minutes + 4-5 minutes per group member ~40 mins)

   Encourage group members to reflect on the previous week’s content/discussion and share if they have additional thoughts or comments. It is best to have this as a group conversation.

   “In last week’s group session we talked about ____ (insert the previous week’s topic here) ___. did anyone have more thoughts during the week about what was discussed?”

   Then encourage group members to share one success and one challenge they have experienced in the past week. Suggested script:
“Perhaps we can go around the room and share one success that you had and one challenge that you experienced last week? Just keep in mind the group rules and please do not discuss any instances of self-harm or trauma. We want to keep this group as safe as possible. I will give each person about four to five minutes but do let me know if you feel you are unable to contribute today.”

Facilitators will need to keep track of the time and set boundaries for this.

4. Short Break (10 mins)

Advise group members when they should re-join the group.

5. Psychoeducation and Skills Development (40 mins)

Begin by discussing the definitions of self-compassion and self-care, and why they might be important. Highlight the personal nature of self-compassion and self-care – Different people will find different strategies and approaches that work for them.

**Self-compassion**

Self-compassion means that we first see that everyone in the world has some degree of suffering – and then realise that this includes us too! It’s painful to suffer and taking on an attitude of self-compassion means we recognise how difficult life can be and treat ourselves with kindness.

Discuss the opposite of self-compassion - self-criticism. It’s easy to be judgemental of ourselves when we’re feeling difficult emotions or have made a mistake. A lot of us have learnt this from a very young age. We might be feeling terrible about ourselves for whatever reason but then we judge ourselves for feeling that way and end up feeling even worse. Learning to identify the ways that we’re self-critical can be very helpful for us to begin to notice, mindfully observe these thoughts, and do our best to comfort ourselves instead.

One of the reasons that self-compassion is so important is because research has found that people with higher levels of self-compassion have greater levels of wellbeing and resilience, and show less symptoms of depression and anxiety.

**Self-care**

Self-care simply means what we can do to help us act with more compassion to ourselves.

While distress tolerance is often about doing things that distance or distract us from difficult situations, self-care is about doing things that soothe us and make us feel better. This can help us calm down during a crisis in the short-term, but doing things like this also has long-term benefits and may increase our feelings of self-compassion and, therefore, wellbeing.

**Activity: Self-compassion to me**

- **Aim of the activity:** To encourage group members to identify and express the meaning placed on and understanding of self-compassion.
- **Resources required:** A4 sheets of paper, pens, coloured markers/pencils, old magazines, glue, scissors.
- **Instructions:**
  - Participants to draw a picture or make a collage of what self-compassion means to them. This could be absolutely anything. Important to emphasise that participants are free to express whatever images come to them.
  - Some people might feel embarrassed or ashamed about drawing whereas others might readily take to the activity. Work with what comes up in the room and, if possible, model self-compassion during this process and help participants to respond to the activity (and whatever thoughts and feelings come up) with compassion for themselves.

*Take home summary activity*

- Challenge participants to mindfully engage in a chosen self-care activity over the next week.
- The task will be to share this experience in group the following week.
- Inform participants that they are free to choose how they will express their experience — through words, a drawing, picture, photo, object, etc. (anything that is meaningful to them)
  OR create a sensory box (and bring to group next week if group members are willing)

6. **Debrief and grounding/mindfulness/relaxation (10 minutes)**

Check in with the group members to see how they received the information and ask if there are any questions.

> ‘What was everyone’s thoughts on the session today? Was there information that you didn’t agree with? How does everyone feel?’

Encourage group members to engage in a grounding/mindfulness/relaxation activity for 5 minutes before leaving the group.

7. **Document the session**

Document the session in accordance to professional and organisational requirements.
Session Seven: Checklist

Have the following been completed? *(Place a tick in the box)*

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<td>1</td>
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<td>2</td>
<td><strong>Grounding, Mindfulness or Relaxation Exercise</strong></td>
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</table>
| 3 | **Sharing**
  - Reflections on previous session
  - Individual sharing: 4-5 minutes per group member |
| 4 | **Break**                                                                                 |
| 5 | **Psychoeducation and Skills Development**
  - Introduce concepts of self-care and self-compassion
  - Establish the importance of self-care and self-compassion
  - Highlight that the process of self-care and self-compassion will be unique for each individual |
| 6 | **Debrief and Grounding/Mindfulness/Relaxation**                                          |
| 7 | **Document the Session**                                                                  |
Facilitator Self Reflection

Session Seven: Self-Care and Self-Compassion

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<td>How do I feel about how the group went?</td>
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Other Notes

Location of the group:____________________    Date of group:________________________
Facilitator name: _________________________
Session Eight: Wellness and Recovery

Objectives:
- Develop understanding of what wellness and recovery personally means, whilst reinforcing the possibility of wellness and recovery
- Identify the importance of goal setting
- Develop SMART goals for wellness

Outline:
1. Introduction to the Session
2. Grounding, Mindfulness, Relaxation exercise
3. Reflections of Previous Session and Group Member Sharing
4. Short break
5. Psychoeducation and skills component:
   a. Activity: Discuss participant’s understanding of wellness and recovery
   b. Discuss the different conceptualisations of wellness and recovery
   c. Introduce and explain the concept of SMART goals. Work through example provided in the participant handbook
   d. Homework activity: Complete SMART goals worksheet
6. Debrief and grounding/mindfulness/relaxation

Resources:
- Participant workbook – Session Eight
- Stories from people with lived experience (can be accessed via [www.projectairstrategy.org](http://www.projectairstrategy.org))
- Video about recovery
Steps to follow in Session Eight:

1. Introduction to the session (10 mins)
   a. Orient group members to the group setting and how the group runs (5 mins)

   Welcome group members and acknowledge the group members’ efforts in attending the group session.
   If needed, advise group members on the structure of the group.

   b. Provide an overview of the session (5 mins)

   Orient the group members to the topic of today’s session. This could be achieved through providing group members with an outline of the content of the session, such as “In the skills part of today’s group, we will be talking about recovery and what that means to you. We will also be working on developing some recovery goals.”

2. Grounding, Mindfulness and Relaxation Exercise (10 mins)

   Engage in a grounding/mindfulness/relaxation activity together as a group.

   Inform the group prior to engaging in the exercise what it will require group members to do and remind group members to engage in the exercise non-judgmentally. Ask group members if they have any questions or concerns, and address these prior to starting the grounding/mindfulness/relaxation exercise.

   Following the activity, ask group members about their thoughts on the exercise. This may provide an indication of what has and what hasn’t worked in the past for different group members.

   Exercise choice: See examples of grounding/mindfulness/relaxation exercises at the end of the manual or identify an exercise which may be useful for the group.

3. Reflections of Previous Session and Group Member Sharing (5 minutes + 4-5 minutes per group member ~40 mins)

   Encourage group members to reflect on the previous week’s content/discussion and share if they have additional thoughts or comments. It is best to have this as a group conversation.

   “In last week’s group session we talked about _____ (insert the previous week’s topic here) ______, did anyone have more thoughts during the week about what was discussed?”

   Then encourage group members to share one success and one challenge they have experienced in the past week. Suggested script:

   “Perhaps we can go around the room and share one success that you had and one challenge that you experienced last week? Just keep in mind the group rules and please do not discuss any instances of self-harm or trauma. We want to keep this group as safe as possible. I will give each person about four to five minutes but do let me know if you feel you are unable to contribute today”

   Facilitators will need to keep track of the time and set boundaries for this.
4. Short Break (10 mins)

Advise group members when they should re-join the group

5. Psychoeducation and Skills Development (40 mins)

Key points about wellness and recovery:

- Wellness and recovery looks different to different people
- Recovery is not about ‘changing your personality’, but it is a process of learning about oneself, self-management of symptoms, development of skills, and expanding upon naturally occurring resources and support networks to support wellbeing.
- Wellness and recovery in BPD is possible

**What does wellness and recovery mean to you?**

Emphasise the individualistic nature of recovery and that there is not one definition of what wellness or recovery means.

Research examining the lived experiences of people with personality disorder have suggested that recovery may be a journey of ‘self-discovery’, where through engaging in relationships and society you learn more about yourself. However, there are many ways of doing this and the nature of wellness and recovery may be fluctuating.

*Instil message of hope for the possibility for wellness and recovery.*

Have a discussion about what the group thinks wellness and recovery means to them

- Specifically ask group members: ‘What wellness and recovery means to you?’
- If the peer facilitator is comfortable, share what recovery means to them and lessons learnt on the journey.

Watch video on recovery

  - **Aim of the video:** Demonstrate the possibility of recovery from individuals with lived experience of BPD.

**Goals that are SMART**

Introduce concept of SMART goals:

- Tool for goal setting
- Can be used as a tool for setting long and short term goals

Describe and explain the individual components of the SMART acronym and questions to ask oneself when thinking about SMART goals.

- Use example in the participant handout as an example.
  - **See session appendix A for handout**

<table>
<thead>
<tr>
<th>What does it stand for?</th>
<th>Questions to ask yourself</th>
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<tbody>
<tr>
<td>S</td>
<td>What do I want to achieve?</td>
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<tr>
<td></td>
<td>Why do I want to achieve this?</td>
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<td></td>
<td>What do I need in order to achieve this goal?</td>
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<tr>
<td>M</td>
<td>How will I know if I am progressing with this goal?</td>
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<tr>
<td></td>
<td>How will I know when I have achieved this goal?</td>
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<tr>
<td>A</td>
<td>Achievable</td>
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<td>R</td>
<td>Realistic</td>
</tr>
<tr>
<td>T</td>
<td>Timed</td>
</tr>
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</table>

**Activity: SMART goal planning**

- **Aim of activity:** To develop own plan to achieve short or long term goals for wellness and recovery
- **Resources required:** Participant workbook – Session 8
- **Instructions:**
  - 1. Go through what SMART goals are with group members
  - 2. Ask group members to reflect upon what they consider important goals for their wellness and recovery
  - 3. Use guide questions to prompt group members through the SMART goal table
  - *This can be completed/finished for homework. Facilitators can check in with group members the following week.*

6. **Debrief, Open Discussion and Grounding/Mindfulness/Relaxation (10 minutes)**

Check in with the group members to see how they received the information and ask if there are any questions.

> *‘What was everyone’s thoughts on the session today? Was there information that you didn’t agree with? How does everyone feel?’*

**Open Discussion:** Advise group members that the group is time limited and that there are 2 sessions left in support group program. The following sessions (session 9 and 10) will be ‘group member guided’. The topic for the sessions has been left for the group to decide. Ask group members if there was content that was previously presented that they feel needs to be repeated. This could span over multiple sessions, however it is important to emphasise that the decision is ultimately for the group to make. Have an agreed upon topic(s) to be focused on in the following session prior to ending Session 8.

Encourage group members to engage in a grounding/mindfulness/relaxation activity for 5 minutes before leaving the group.

7. **Document the session**

Document the session in accordance to professional and organisational requirements.
## Session Eight Checklist

Have the following been completed? *(Place a tick in the box)*

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<tr>
<td>1.</td>
<td>Grounding, mindfulness or relaxation exercise</td>
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<tr>
<td>2.</td>
<td>Introduction to the Session</td>
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</tbody>
</table>
| 3. | **Sharing**  
  - Reflections on previous session  
  - Individual sharing: 4-5 minutes per group member |
| 4. | Break |
| 5. | **Psychoeducation and Skills Development**  
  - Develop understanding of what wellness and recovery personally means, whilst reinforcing the possibility of wellness and recovery  
  - Identify the importance of goal setting  
  - Develop SMART goals for wellness |
| 6. | Debrief and grounding/mindfulness/relaxation |
| 7. | Document the Session |
Facilitator Self-Reflection

Session Eight: Self-Care and Self-Compassion

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<th>Question</th>
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Other Notes

Location of the group:____________________    Date of group:________________________
Facilitator name:________________________
### Appendix for Session Eight

**Appendix A: SMART Goals Worksheet – Example**

**What goal am I currently working on?**

*I want to be less anxious in social settings so that I can hang out with my friends more often*

<table>
<thead>
<tr>
<th>Questions to ask yourself</th>
<th>Example of SMART goal</th>
<th>Who can help me accomplish this goal?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>S</strong> Specific</td>
<td>I want to work on developing skills to help me reduce my anxiety when I am out in public. This will help me to be more relaxed and be better able to hang out with my friends more often. I will need to develop some skills and opportunities to hang out with friends.</td>
<td>My health professional to help me develop skills that I can use when I feel anxious in public. I will need to ask my friends to hang out with me.</td>
</tr>
<tr>
<td><strong>M</strong> Measurable</td>
<td>I will keep track of my anxiety levels when in public, by journaling about how I felt and rate my level of anxiety out of 10 after each time I meet with my friends. I will know that I am progressing with this goal by counting how many times I hang out with my friends and by my level of anxiety.</td>
<td></td>
</tr>
<tr>
<td><strong>A</strong> Achievable</td>
<td>In order to achieve this goal, I need to: 1. Talk to my health professional about my anxiety in social settings 2. Work with my health professional to develop skills to reduce my anxiety 3. Contact my friends and ask them hang out 4. Actually go and hang out with my friends in public</td>
<td>Health professional Friends</td>
</tr>
<tr>
<td><strong>R</strong> Relevant</td>
<td>This goal will be worthwhile because I will feel less socially isolated and I will be more confident within social settings.</td>
<td>Health professional Friends</td>
</tr>
<tr>
<td><strong>T</strong> Timely</td>
<td>I will talk to my health professional next time I see them to discuss learning some skills.</td>
<td>Health professional</td>
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Session Nine: Special Topics

Objectives:
- Provide group members with autonomy in determining the focus of the psychoeducation and skills component of the group
- Review topics group members have expressed interest in
- Reflect on the take home messages from the program

Outline:
1. Introduction the Session
2. Grounding, Mindfulness or Relaxation Exercise
3. Reflections of Previous Session and Group Member Sharing
4. Short break
5. Psychoeducation and skills component:
   a. Provide psychoeducation and skills training based on the ‘group member guided’ topics from Session Eight
   b. Discuss the final week of the group program
6. Debrief and grounding/mindfulness/relaxation

Resources:
- Dependent upon agreed upon topics in Session Eight
Steps to follow in Session Nine:

1. Introduction to the session (10 mins)
   a. Orient group members to the group setting and how the group runs (5 mins)

   Welcome group members and acknowledge the group members’ efforts in attending the group session.

   If needed, advise group members on the structure of the group.

   b. Provide an overview of the session (5 mins)

   Orient the group members to the topic of today’s session. This could be achieved through providing group members with an outline of the content of the session, such as “In the skills part of today’s group, we will be talking about ________.”

2. Grounding, Mindfulness and Relaxation Exercise (10 mins)

   Engage in a grounding/mindfulness/relaxation activity together as a group.

   Inform the group prior to engaging in the exercise what it will require group members to do and remind group members to engage in the exercise non-judgmentally. Ask group members if they have any questions or concerns, and address these prior to starting the grounding/mindfulness/relaxation exercise.

   Following the activity, ask group members about their thoughts on the exercise. This may provide an indication of what has and what hasn’t worked in the past for different group members.

   Exercise choice: See examples of grounding/mindfulness/relaxation exercises at the end of the manual or identify an exercise which may be useful for the group.

3. Reflections of Previous Session and Group Member Sharing (5 minutes + 4-5 minutes per group member ~40 mins)

   Encourage group members to reflect on the previous week’s content/discussion and share if they have additional thoughts or comments. It is best to have this as a group conversation.

   “In last week’s group session we talked about _____(insert the previous week’s topic here)_____, did anyone have more thoughts during the week about what was discussed?”

   Then encourage group members to share one success and one challenge they have experienced in the past week. Suggested script:

   “Perhaps we can go around the room and share one success that you had and one challenge that you experienced last week? Just keep in mind the group rules and please do not discuss any instances of self-harm or trauma. We want to keep this group as safe as possible. I will give each person about four to five minutes but do let me know if you feel you are unable to contribute today”

   Facilitators will need to keep track of the time and set boundaries for this.
4. Short Break (10 mins)

Advise group members when they should re-join the group

5. Psychoeducation and Skills Development (40 mins)

*Group member guided topics (30 mins)*

The psychoeducation and skills component of session nine is ‘group member guided’, where group members can choose which topics are of focus.

Asking yourself the following questions may help you to prepare for the session:

- What are the specific topics that the group members would like covered?
- What resources will I need to prepare prior to next session?
- How many topics can be realistically covered in one session?

Note: There is also some time in the final session allocated to providing further information on group member identified topics.

*Group discussion for the final session (10 mins)*

There are some group members that may feel uncomfortable with the ending of the program.

Frame the ending of the group as a celebration of the group's achievements.

Discuss with the group whether they would like to have a celebration at next week’s session.

- What would the group like?
- How will the group make it happen?

6. Debrief and Grounding/Mindfulness/Relaxation (10 minutes)

Check in with the group members to see how they received the information and ask if there are any questions.

‘What was everyone’s thoughts on the session today? Was there information that you didn’t agree with? How does everyone feel?’

Encourage group members to engage in a grounding/mindfulness/relaxation activity for 5 minutes before leaving the group.

7. Document the session

Document the session in accordance to professional and organisational requirements.
Session Nine Checklist

Have the following been completed? *(Place a tick in the box)*

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| **3.** Sharing  
- Reflections on previous session  
- Individual sharing: 5 – 6 minutes per group member |   |
| **4.** Break |   |
| **5.** Psychoeducation and Skills Development  
- Provide group members with autonomy in determining the focus of the psychoeducation and skills component of the group  
- Review topics group members have expressed interest in  
- Reflect on the take home messages from the program |   |
| **6.** Debrief and Grounding/Mindfulness/Relaxation |   |
| **7.** Document the Session |   |
Facilitator Self-Reflection

Session Nine: Special Topics

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Location of the group:____________________    Date of group:________________________
Facilitator name: _________________________
Session Ten: Review of Program Sessions

Objectives:

- Provide group members with autonomy in determining the focus of the psychoeducation and skills component of the group
- Reflect upon group process and experiences
- Reflect upon the benefits and challenges associated with attending the group program

Outline:

1. Introduction to the Session
2. Grounding, Mindfulness or Relaxation Exercise
3. Reflections of Previous Session and Group Member Sharing
4. Break
5. Psychoeducation and Skill Development
   a. Provide psychoeducation and skills training on topics identified by group members in Session Eight
   b. Reflect on the take-home messages of group members
   c. Discuss the benefits and challenges experienced in taking part in the peer support group
   d. Provide group members with evaluation sheets
6. Debrief and Grounding/Mindfulness/Relaxation exercise

Resources:

- Participant handout – Session Ten
Steps to follow for Session Ten

1. Introduction to the Session (10 mins)

a. Orient group members to the group setting and how the group runs (5 mins)

Welcome group members and acknowledge the group members’ efforts in attending the group session.

If needed, advise group members on the structure of the group.

b. Provide an overview of the session (5 mins)

Orient the group members to the topic of today’s session. Remind group members that this session is the last for the Peer Support Group program.

Be aware that some group members may feel uncomfortable about the group ending.

Answer any questions group members may have.

2. Grounding, Mindfulness and Relaxation Exercise (10 mins)

Engage in a grounding/mindfulness/relaxation activity together as a group.

Inform the group prior to engaging in the exercise what it will require group members to do and remind group members to engage in the exercise non-judgmentally. Ask group members if they have any questions or concerns, and address these prior to starting the grounding/mindfulness/relaxation exercise.

Following the activity, ask group members about their thoughts on the exercise. This may provide an indication of what has and what hasn’t worked in the past for different group members.

Exercise choice: See examples of grounding/mindfulness/relaxation exercises at the end of the manual or identify an exercise which may be useful for the group.

3. Reflections of Previous Session and Group Member Sharing (5 minutes + 4-5 minutes per group member ~40 mins)

Encourage group members to reflect on the previous week’s content/discussion and share if they have additional thoughts or comments. It is best to have this as a group conversation.

“In last week’s group session we talked about ____ (insert the previous week’s topic here) ___, did anyone have more thoughts during the week about what was discussed?”

Then encourage group members to share one success and one challenge they have experienced in the past week. Suggested script:

“Perhaps we can go around the room and share one success that you had and one challenge that you experienced last week? Just keep in mind the group rules and please do not discuss any instances of self-harm or trauma. We want to keep this group as safe as possible. I will give each person about four to five minutes but do let me know if you feel you are unable to contribute today.”

Facilitators will need to keep track of the time and set boundaries for this.
4. Short Break (10 mins)

Advise group members when they should re-join the group

5. Psychoeducation and Skills Development (40 mins)

**Group member guided topics**

- Continue with psychoeducation and skills on topics identified by the group in Session Eight, which were not covered in Session Nine.
  - See Session 9 for guidance on how to prepare for this.

**Program reflections/Celebrations**

- Provide an overview of the sessions that were covered in the program
- Leave approximately 30 minutes for group members to provide their reflections on the program. Encourage group members to share their experiences of the group, however remind group members that this is optional.
  - Discussion prompts:
    - What are your thoughts of the program?
    - What worked?
    - What could be improved?
- Be aware that some group members may be uncomfortable with the group ending. Allow group members to express their concerns, however facilitators will need to contain this.
- Hand out evaluation forms and graduation certificates towards the end of the session

6. Debrief and Grounding/Mindfulness/Relaxation (10 minutes)

Check in with the group members to see how they received the information and ask if there are any questions.

‘**What was everyone’s thoughts on the session today? Was there information that you didn’t agree with? How does everyone feel?’**

Encourage group members to engage in a grounding/mindfulness/relaxation activity for 5 minutes before leaving the group.

7. Document the session

Document the session in accordance to professional and organisational requirements.
### Session Ten Checklist

Have the following been completed? *(Place a tick in the box)*

<p>| | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td><strong>1.</strong></td>
<td><strong>Introduction to the Session</strong></td>
</tr>
<tr>
<td><strong>2.</strong></td>
<td><strong>Grounding, Mindfulness or Relaxation Exercise</strong></td>
</tr>
</tbody>
</table>
| **3.** | **Sharing**  
| | - Reflections on previous session  
| | - Individual sharing: 4 – 5 minutes per group member |
| **4.** | **Break** |
| **5.** | **Psychoeducation and Skills Development**  
| | - Provide group members with autonomy in determining the focus of the psychoeducation and skills component of the group  
| | - Reflect upon group process and experiences  
| | - Reflect upon the benefits and challenges associated with attending the group program |
| **6.** | **Debrief and Grounding/Mindfulness/Relaxation** |
| **7.** | **Document the Session** |
Facilitator Self-Reflection

Session Ten: Review of Program Sessions

What worked well for the group?

Were there any challenges experienced? What were they?

How do I feel about how the group went?

Is there anything I would change in regards to how I ran the group?

Are there any risk related situations that need to be followed up on?

Other Notes

Location of the group:____________________    Date of group:________________________
Facilitator name: _________________________
Appendix for Session Ten

Appendix A: Graduation Certificate

This is to certify that

__________________________

has completed the

Peer Support Group Intervention for
Borderline Personality Disorder

www.projectairstrategy.org
Many peer support facilitators have commented on the benefits and rewarding nature of the work, however providing services to people who share a common lived experience of personality disorder may be challenging and emotionally draining. It is common to feel a number of emotional reactions when working with individuals with personality disorder or personality disorder traits. Some emotional reactions you may experience include:

- Feeling manipulated, frustrated or angry
- Intense like or dislike for a person
- Feeling pulled to the rescue of the person and becoming emotionally invested in their wellbeing
- Feeling incompetent and overwhelmed by the person’s presenting complexities
- Doing more than you usually would, for example: disclosing a lot of personal information or giving out private mobile numbers
- Difficulty providing consistent responses

It is important to recognise that these emotional reactions are normal and to be aware of and monitor the emotional responses you experience. It is okay to ask for support or debrief with the group’s co-facilitator or people outside of the group about these feelings (whilst maintaining the confidentiality of the group). Remember to keep in mind that although we wish to help other people, our own self-care is vital as well.
Activity:
What are some signs that might indicate that you may need to engage in self-care?

List the self-care habits you engage in that help you cope and stay well?

What are some obstacles which prevent you from engaging in self-care?

What are some solutions to overcoming these obstacles?
Reflective practice

Reflective practice acts as an internal monitoring system to manage reactions and feelings in a healthy manner. Reflective practice requires active engagement in tasks involving:

- **Critical inquiry:** The consideration of the moral and ethical implications and consequences
- **Self-reflection:** The reflection of our own values and beliefs
- **Reframing:** Adjusting our perception of a situation by seeing it from a different perspective

Facilitating a support group involves continuously learning. Without growth and development, it may inhibit our ability to work effectively. Some advantages of reflective practice include:

- Increased confidence in your role
- Facilitates proactive work-ethic and motivation
- Minimises risk-factors for stress and burn out
- Promotes work-life enrichment and balance
- Creates a necessary sense of self-efficacy
- Allows us to monitor our belief system

Engaging in reflective practice is not a luxury; it is a vital part of being able to work effectively. We understand that schedules can be busy, but it is important to set aside time to engage in reflection – even if it is just 5 minutes before the group. The strategies below are examples to get you started:

- **Self-care:** Looking after your own mental wellbeing will facilitate reflective practice while minimising negative consequences
- **Talking to your group co-facilitator or someone outside the group:** Getting advice from someone else when support is needed
- **Non-reactive stance:** Being aware of your thoughts and feelings in a non-reactive way
- **Reflective journal:** Keeping a journal can be a helpful way to keep track of your thoughts, feelings and experiences
- **Professional development:** Continuously updating your skills and knowledge

**Grounding/mindfulness/relaxation tips**

- Your breath is like an anchor to the present moment. If you notice yourself becoming overwhelmed or your thoughts wandering, gently bring yourself back to your breath
- Choose a common activity you do throughout the day, for example, opening a door. Each time you do this activity, take a moment to notice your breath and be mindful of the present moment
- Notice what you are doing as you are doing it and tune into your senses. When you are eating, notice the colour, texture and taste of the food
- When you are walking, tune into how your weight shifts and the sensations in the bottom of your feet. Focus less on where you are headed
- Don’t feel that you need to fill up all your time with doing. Take some time to simply be
- Listen to the sounds in the room, feel your body, see the space you are in, notice the temperature and smells
- Recognise that thoughts are simply thoughts; you don’t need to believe them or react to them
- Practice truly listening without making judgements or thinking ahead about your own dialogue in the conversation
- Notice where you tend to zone out (e.g. driving, emailing or texting, brushing teeth). Practice bringing more awareness to that activity
- Spend time in nature. This will give your mind an opportunity to rest from the day, allowing space for body and mind rejuvenation
- Bring attention to the top three priorities of your day. Break work time into small blocks for higher levels of efficiency and take short breaks in-between
Project Air Strategy Factsheets Mentioned in the Manual

These factsheets are accessible through the Project Air Strategy website (under the ‘factsheets’ tab) [www.projectairstrategy.org/mpafactsheets/index.html](http://www.projectairstrategy.org/mpafactsheets/index.html)

Factsheets which are specifically mentioned in this peer support intervention manual include:

- Mental Health Support Services
- Mindfulness exercise: Leaves
- What is a Personality Disorder
- What is Borderline Personality Disorder
- Mindfulness exercise: Sounds
- Wellness Plan
- Managing emotions
- Making and Using a Sensory Box
- Effective communication
- Effective communication: for families, partners and carers
# Resources from External Organisations
Mentioned in the Manual

These resources are accessible at the following links:

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<thead>
<tr>
<th>Session</th>
<th>Resource Title</th>
<th>Organisation</th>
<th>Web Link</th>
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<tbody>
<tr>
<td>2</td>
<td>GLAD Technique Handout</td>
<td>Book: The Mindfulness Tool Box: 50 Practical Tips for Anxiety, Depression, Stress and Pain by Donald Altman</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Thinking and feeling</td>
<td>Centre of Clinical Interventions, Western Australia</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Communication Styles</td>
<td></td>
<td><a href="https://www.getselfhelp.co.uk/communication.htm">https://www.getselfhelp.co.uk/communication.htm</a></td>
</tr>
<tr>
<td>6</td>
<td>Value cards</td>
<td>Motivational Interviewing Network of Trainers</td>
<td><a href="http://www.motivationalinterviewing.org/sites/default/files/valuescardsort_0.pdf">http://www.motivationalinterviewing.org/sites/default/files/valuescardsort_0.pdf</a></td>
</tr>
</tbody>
</table>
Examples of Grounding/Mindfulness/Relaxation Exercises

Examples of exercises can be found on the Project Air Strategy website (under the ‘factsheets’ tab)  
www.projectairstrategy.org/mpafactsheets/index.html

Factsheets which may be useful as a grounding, mindfulness or relaxation exercise include:

- Mindfulness exercise: balloons
- Mindfulness exercise: sushi train
- Mindfulness exercise: leaves
- Mindfulness exercise: sounds
- Mindfulness exercise: walking
- Five things

Facilitators are encouraged to develop or search for alternative exercises online to suit the needs of the group.


