



## **Paying Attention to Self (PATS): Programme Guide 2006**

Introduction .....	4
What is PATS? .....	4
Aims and Objectives .....	4
Target group: .....	5
The importance of the PATS program .....	5
The fundamentals of PATS .....	7
Peer Support .....	7
Aims of Peer Support .....	7
Youth Participation .....	8
Advocacy / Changing Perceptions / Awareness Raising .....	9
Mental Health Promotion And Prevention Principles .....	9
The PATS Model .....	10
Peer Support Groups .....	10
Social Events .....	10
Leadership Training And Advocacy .....	10
Co- Leadership .....	11
PATS – The Program Guide .....	11
Planning the Program .....	11
Who can run a peer support program such as PATS? .....	11
Recruiting a Peer Leaders .....	11
Roles of the PATS worker in the 8 week group .....	13
Choosing a Venue for the PATS program .....	14
Food .....	15
Transport Arrangements .....	15
Promoting your PATS program .....	16
PATS referral process .....	17
Step 1 – The Initial enquiry .....	17
Step 2 – The Referral Form .....	17
Step 3 – The pre-program interview .....	18
Location for pre-program interview .....	18
Discussions with parents/ and legal guardians .....	19
Things to think about when meeting the young person for the first time .....	19
Dealing with parental concerns around the PATS program .....	21
Eligibility Criteria .....	21
Exclusion Criteria .....	22
Setting up the group .....	22
Stages and processes of groups .....	22
Activities and Themes .....	25
The importance of games .....	25
Checklist for a successful games session .....	27
The PATS Activity Guide .....	28
Sessions .....	28
Ideas for themes .....	29
Unstructured time .....	29
Checking in time .....	30
Closure and containment .....	30
Considerations for week1 and 2 .....	31
The Group Contract .....	32
Games and Energiser Ideas .....	33
Get to know you games .....	33
The Toilet Paper Game .....	33
People Bingo .....	34
Interviewing .....	35
True/False Game .....	36
Twenty Questions without yes or no .....	36

The Dice Game .....	37
Checking in Games .....	38
Feelings Cards .....	38
Picture Cards.....	38
The Absolutely Fantastic to Absolutely Crap Continuum.....	39
The Journey of My Shoes Today .....	39
Mind puzzles .....	39
The Picnic.....	39
The Cowboy .....	40
The Truck .....	40
Scissors Pass.....	40
Games and activities to explore specific ideas or themes.....	41
Spider's Web .....	41
Label game.....	42
Anyone Who.....	43
What's Your Favourite Song? .....	44
Activities to Explore Mental Illness Education.....	44
Guest Speakers.....	44
Photo Cards Activity .....	45
Someone Else's Shoes.....	46
Mental Illness Symptom Game .....	46
Hearing Voices Activity .....	46
Mental Health Continuum Exercise.....	48
Jigsaw Puzzle Activity .....	49
Touring the Inpatient Unit .....	50
Optical Illusions Activity .....	50
Mental Illness Videos Which Promote Discussion .....	51
Stigma.....	52
Word Association Activity – Mental Illness and Physical Illness .....	52
Myth Worksheets.....	54
Definitions Of Stigma.....	54
Famous People Activity .....	55
Exploring Home.....	55
The Place Where I Live .....	55
Drawing your home or the place where you live: .....	55
Drawing your ideal bedroom.....	56
My housing story .....	56
What i want in my home activity.....	57
Friends .....	57
Problem Solving .....	58
The Balloon Game.....	58
Closure Activities.....	60
Relaxation Exercise.....	60
Positive Affirmations .....	61
Warm Ups / Ice Breakers .....	62
Whiz, Bang, Bounce .....	62
Gotcha.....	62
Celebrity Heads.....	63
Song Game .....	64
Group Charades.....	65
The What Are You Doing Game? .....	65
Background into STIGMA.....	66
Resources.....	67

© Centre for Adolescent Health 2005

This work is copyright. Apart from any use as permitted under the Copyright Act 1968, no part may be reproduced without prior permission from the Centre for Adolescent Health.

# **PATS PROGRAM GUIDE**

## **Introduction**

Welcome to the Paying Attention To Self (PATS) facilitators manual. This manual has been designed in consultation with a number of facilitators who have been running the PATS program. It has been put together to help you to be able to tailor the program to suit the needs and preferences of the young people and agencies in which you are working.

## **What is PATS?**

PATS is a Peer Support Program for Young People whose parent is affected by a mental illness.

The Centre for Adolescent Health, Royal Children's Hospital established the Paying Attention to Self (PATS) Program in 1997. The program was developed in response to the identified lack of support and resources for adolescents whose parents have mental health issues. In PATS it is recognised that mental illness not only affects the parent who is ill, but raises many issues for their children, particularly during adolescence. PATS is a mental Health Promotion and illness prevention program

## **Aims and Objectives**

PATS is a peer support program which aims to provide young people who have parents with mental health issues with the opportunity to share their experiences and be supported by other young people in a situation similar to their own.

The overall goal of PATS is to reduce the likelihood of the development of mental health difficulties in young people who have been identified as being at increased risk. The focus of the program is therefore on mental health promotion and illness prevention.

The objectives of PATS are:

- to increase young people's knowledge of mental health and illness,
- to improve their help seeking behaviour and coping strategies, and
- to improve their sense of connection to their peers, family and community.

## **Target group:**

PATS is targeted to young people aged 13 – 18 years who have a parent affected by a mental illness such as schizophrenia, bi polar disorder, depression, anxiety disorders and borderline personality disorder.

PATS recognises that there is a lot of diversity in families where a parent is affected by a mental illness. Falkov identified a spectrum of need for this target group. Some young people:

- Appear well
- Are resilient but need support
- Are vulnerable & need services
- Are vulnerable & in need of protection owing to risk of injury.

Young people may move in any direction along this spectrum of need across their lifetime. (Falkov, A., cited in AICAFMHA, 2004, 5).

PATS is able to work with young people who have different levels of need.

## **The importance of the PATS program**

First onset of mental illness often occurs in adolescence. By the age of 18 as many as 25% of adolescents will have had at least one depressive episode (Clarke, Hornbrook, Lynch, Polen, Gale, Beardskeem I;Cibbir & Seeley, 2001). Most adults with recurrent depression have their initial depressive episodes as teenagers, suggesting that Young people who have a parent affected by a mental illness are at significantly increased risk of developing mental health problems. Approximately 27,000 Australian children have a mother affected by a mental illness (Cowling, McGorry & Hay, 1995). This represents a significant number of young people at increased risk for experiencing mental illness at some time in their life.

Not only are the young people at an increased risk for experiencing mental illness but also face daily the stresses of caring for a parent affected by mental illness, fearing they will be affected by mental illness at some time, coping with the stigma of mental illness, and trying to manage the ordinary stresses of growing up including managing school and work. It is estimated that there are 388,800 cares under the age of 26 years in Australia, representing 17% of all cares in Australia and 18,800 of these are primary carers. It is estimated that a further 6 –10% of young people under 26 are informal carers. One quarter of young carers provide care for someone with a mental illness (Australian Bureau of Statistics, 1998). These figures probably underestimate the total number of young carers in Australia, as many young people are not identified as being carers.

Young primary carers are required to perform the same caring tasks as older primary carers: providing emotional support and assisting with tasks such as mobility, provision of medications, housework and intimate care tasks (Carers Australia, 2001, 10) The Carers Australia study reported that young carers spend most of their time providing care or thinking about the person they support (11) While children and adolescents worry about their parents and want to take care of them they can find it difficult to talk about their parents illness and often feel embarrassed by it. While they struggle to understand and recognise the signs of their parents' mental illness, they find coping is much more difficult when they are uninformed about the parents illness and/ or when they are given conflicting information from different members of the family (Handley, Farrell, Josephs, Hanke, & Hazelton, 2001)

There can be negative impacts of caring on young people who are unsupported in this role. Carers Australia found that as a direct consequence of the role of young carers, the majority are at risk of all or some of the following: socio economic disadvantage, isolation, low levels of health and emotional wellbeing, impaired psychosocial development, limited friendships, difficulties when engaging in intimate relationships, low participation and attainment in school and employment, difficulties in making transitions to independence and a significant lack of opportunity and choices. (2001, 16)

The literature surrounding young carers indicates "if the basic rights and needs of young carers were met, the negative effects associated with their caring role could be significantly reduced." (Carer's Australia, 2001, 3) Recommended supports for young carers include:

- Recognition, understanding and respect
- Age appropriate information on illness and disability and about their rights as young people and carers
- Informal and formal support, most critically a person to talk to who they can trust
- Access to appropriate, flexible and affordable services, such as respite that meets their specific needs

The opportunity to enjoy their childhood and youth and reach emotional and social maturity through having choices and access to full social and economic participation.

Given these increased risks and daily stresses involved in caring for or living with a parent with a mental illness, preventive or early intervention programs for young people in these situations are warranted. The PATS program was developed in response to this need. The PATS program recognises the needs of the young people and the caring role, which many participants take on within their families. PATS provides a supportive group experience where young people could learn more about mental illness, develop coping strategies, explore their caring roles and, importantly, have fun with other young people in similar situations. PATS also encourage help seeking behaviours within the young people and assists young people and their families with accessing community supports.

# The fundamentals of PATS

## Peer Support

The Centre for Adolescent Health has developed PATS based on a model of peer support which has been evolving over a number of years. Our concept of peer support is the bringing together of young people who share common health and wellbeing concerns. Utilising adolescent development and youth participation principles, young people and health professionals work in partnership to generate a sense of community, belonging and acceptance. Peer support occurs in groups and with individuals through discussion, reflection, exploration, skill development and socialising.

## Aims of Peer Support

- To increase young people's connectedness to peers, family, schools and community.
- To enhance adolescent development and wellbeing.
- To normalise young people's experiences.
- To empower young people to identify, create and make use of opportunities.
- To encourage young people to make positive changes where possible.

The Centre's model of peer support has been adapted to work with a number of different target groups including young people who have a chronic illness, young people who are socially isolated and in the case of PATS young people whose parents are affected by a mental illness.

We believe peers are young people who share a common experience – in the case of PATS – having a parent who is affected by a mental illness. We try to group young people together who are at similar levels developmentally eg in terms of age, cognitive abilities and social skills. Peer support programs are based on the premise that bringing young people together in a group format can reduce feelings of isolation, provide an opportunity to meet new people and establish friendships. They assist young people to be aware that there are people their own age with similar experiences and issues. It is hoped that this awareness increases the sense of belonging and social connectedness (Bettencourt et al, 1998; Milburn, 1996; Olsson et al, 2005).

We are often asked what kind of skills or training background is needed to run a PATS group. The model of PATS is very flexible and can be utilized by workers with a variety of health and welfare backgrounds. Obviously each worker who runs the program will bring with them certain skills which can be incorporated within the program. However, there are some key principles and theoretical knowledge, which drive the program, and which we believe are important for any PATS coordinator to understand and have a commitment to.

Projects commonly report that through their sharing, participants are able to see how others deal with problems. They are able to see alternative perspectives and solutions to problems and learn to develop and apply coping skills. Potential outcomes for peer based interventions include learning social skills, learning to share, comfort, help and empathise with others (Bettencourt et al, 1998; Milburn, 1996; Turner, 1999; Olsson et al, 2005)

Many young people during adolescence start to individuate from their parents and care givers and their peer group becomes an important focus for them. Many studies have identified that young people tend to go to their friends for information and support, prior to accessing support from adults or services. Utilising peer support and peer education is a way to take advantage of what is occurring naturally and to ensure that the information, which is given, is correct and that young people have the skills to support their friends.

We also recognise that for young people who have a parent with a mental illness, it is often difficult for them to talk about their parent's illness to their peers at school and in their social networks. PATS therefore provides an avenue for meeting and talking to other young people who have experienced similar situations.

## **Youth Participation**

A core practice framework of the PATS program is youth participation. A common definition used to describe youth participation is that of the Australian Youth Foundation (1996):

'Youth participation is about developing partnerships between young people and adults in all areas of life so young people can take a valued position in our society, and the community as a whole can benefit from their contribution, ideas and energies.'

The Youth Affairs Council of Victoria and the Office for Youth state that 'youth participation involves young people being active in decision making processes on issues that affect them'. In any democratic society it is important that all members have opportunities to participate in the decision making processes that affect them and their communities (Office for Youth, 2004).

There are numerous benefits to both young people and organisations from involving young people in youth services. For young people this includes:

- Recognising the rights of all people to be involved in decision making that affects them
- Respecting young people's citizenship now
- Recognising the capacity of young people and building their capacity
- Building connectedness with their community
- Empowering young people
- A sense of belonging
- Provision of supportive adult relationships
- Contributing to their community and developing a sense of mattering

Building confidence in one's abilities to master one's environment (Australian Youth Foundation 2000; Wierenga et al. 2003; Eccles and Gootman 2002).

PATS is committed to engaging with and developing opportunities for participation with young people who are marginalised and disadvantaged. Many participants in PATS, because of the chaotic nature of their home situation or lack of attendance at school, may miss out on traditional opportunities for participation and leadership. PATS aims to provide opportunities for skill development and participation within the program, which may be attractive to well functioning and resourced young people.

Hart (1992) developed a widely used conceptual model for considering the different levels of participation. It recognises that what can appear to be participation may be more tokenistic, and may not involve much participation for young people.

The model is as follows:

8. Youth directed and initiated
7. Youth initiated, shared with adults
6. Adult initiated, shared decisions with youth
5. Consulted and informed
4. Assigned but informed
3. Tokenism
2. Decoration
1. Manipulation

In PATS the program generally moves through the stages of consulted and informed, through to level 8, youth initiated and shared with adults. The issues outlined need to be considered to enable participation for all young people.

## **Advocacy / Changing Perceptions / Awareness Raising**

PATS as well as working with young people to help them come to terms with their family situation, has a strong commitment to advocacy on a broader political and community level. Recognising that there are many contextual factors in our community such as access to housing, employment, financial assistance and health care which impact on the experience of mental illness, along with community perceptions and stigma. PATS empowers young people and their families to work towards change in how mental health and illness is perceived in our community, and to advocate for change in the way services support families in this situation.

## **Mental Health Promotion And Prevention Principles**

Any worker involved in PATS needs to have some background knowledge of Mental Health and illness. Useful information regarding Mental Health Promotion, prevention and early intervention can be found at [www.mentalhealth.gov.au](http://www.mentalhealth.gov.au)

# **The PATS Model**

## **Peer Support Groups**

The core focus of PATS is the peer support group. Groups are made of six to eight young people who meet weekly for eight weeks. The groups are facilitated by a peer leader (a young person whose parent has a mental illness) and a health professional.

Topics covered in the group include:

- Understanding their parents illness
- Improving their relationship with their parent
- Communication and problem solving skills
- Dealing with the stigma associated with mental illness
- Strategies to cope with their parent's condition and to stay mentally healthy themselves.

The focus is on healthy thinking and healthy coping strategies. Group activities include discussion, games, role-plays, art and craft, guest speakers and social outings.

## **Social Events**

Each school term social and recreational activities are held for PATS participants. These provide the opportunity to continue friendships and support after the eight-week group has been completed. Four social activities are held each year along with the peer leadership camp.

## **Leadership Training And Advocacy**

A two-day leadership training for young people and health professionals is conducted each year. The training covers such areas as:

- Peer support
- Mental illness
- Communication skills
- Group dynamics
- Leadership skills
- Public speaking
- and activity planning.

Leadership training gives the opportunity for the young people to further develop their skills and confidence and to offer support to newer participants in the program.

Peer leaders are provided opportunities to educate the community and advocate on behalf of other young people through speaking at conferences and co facilitating workshops with the health professionals. Each PATS site is encouraged to form a reference group, which is able to take on an advocacy, consultation and feedback role in the wider community.

## **Co- Leadership**

The role of the peer leader is a crucial component of the PATS program. The peer leader is responsible for the social aspects of the groups, organising activities and getting the participants mixing and talking. They act as a positive role model for the participants and are able to share their own experiences and coping strategies with the participants.

## **PATS – The Program Guide**

### **Planning the Program**

Who can run a peer support program such as PATS?

We are often asked what kind of skills or training background is needed to run a PATS group. The model of PATS is very flexible and can be utilized by workers with a variety of health and welfare backgrounds. Obviously each worker who runs the program will bring with them certain skills, which can be incorporated within the program. To maintain the necessary support structure and resources, facilitators should belong to an agency or auspicing body.

### **Recruiting a Peer Leaders**

Peer Leaders play a very important role in the group, and this aspect of the program needs to be thought through well by organizations and coordinators of PATS. For PATS programs, which are starting out, you may not have a peer leader available for running your initial group. It is strongly suggested that you do not run the group alone, therefore it is recommended that two workers coordinate the first group if a peer leader is not feasible.

From the initial group of young people, there is an opportunity to identify participants who are keen to take on leadership roles in the programs. For PATS programs which are more established, each group intake of young people, provides an opportunity to identify young people who may be keen and interested in taking on leadership roles in PATS. It is important that all young people are given the opportunity to become involved in the leadership side of PATS.

Not all young people will be suited to, or may want to co facilitate a PATS groups. There are different opportunities for leadership roles within PATS including forming a reference group, planning social activities, assisting with publications and writings, public speaking and consulting on projects. Alternately, not all young people will present as being ready to take on a leadership role when they first join PATS but if they express an interest it is important to find a role which is suitable for them.

Some young people in PATS may not have had the opportunity to take on leadership roles in other settings. This could be due to missing out on

traditional opportunities for participation and leadership because of the chaotic nature of their home situation or lack of attendance at school.

We approach peer leadership within PATS as an incremental task. Providing opportunities which are meaningful and interesting for the young person and which are suited to their skill level. Incremental challenges are given which do not set up the young person for failure. For example, we would not give a young person who has never given a speech before the task of running a workshop at a conference, but work them to start with a smaller talk at an agency presentation with other PATS staff in order to build skills and develop their abilities in a comfortable environment.

Not all young people are suitable to be the peer leader in the 8-week group. Most young people are encouraged to attend the 2-day leadership training as well as encouraged to take on other roles within the PATS program before taking on a peer leader role in the groups. This allows more knowledge and experience working within a team as well as to develop their ability to work and relate with others.

For those who are becoming a co-facilitator of a group for the first time, it is important that they are given incremental tasks in being the peer leader. Eg. The first few nights of a group, you might ask the peer leader to focus on welcoming the other participants and being the person who jumps in to share their story with the group, enabling others to feel comfortable to share their stories and experiences. As the group progresses and the peer leader's confidence grows, you might then encourage them to take on a more active role in leading discussions and preparing and running activities for the group.

The peer leader is an important bridge between the worker and the participants. They can assist in decoding the language of the worker so that the participants can understand and vice versa, helping the worker understand what the participants are saying or wanting. The peer leader is an important role model for the other participants. Being enthusiastic and welcoming is very important and observing the dynamics of the group and feeding this back to the worker can be very helpful. Often peer leaders will pick up on things, which are happening in the group that the worker may not be aware of or have noticed.

The relationship between the peer leader and worker is very important for the successful running of a group. As workers, it is very important that time is set aside each week to focus on your relationship with your peer leader.

Over the years we have asked young people and workers involved in PATS what they think the role of a peer leader and health professional is in running a PATS group.

Participants consider the following qualities to be important for facilitators to possess:

Caring, open minded, works well with others, listener, observer, resourceful, relates well, accepting, trustworthy, assertive, a guide, realistic, friendly, values equality, warm, model, understanding, flexible, good communication skills, sense of humour, can set limits, is patient!

Here are some things to consider with your Peer Leader:

- Let them be as involved as they like but suggest they simply observe the first few times
- Give them freedom and autonomy to develop their own activities, prepare their own resources etc
- Give them lots of positive feedback as well as constructive criticism
- Give them plenty of opportunity to change, improve and expand the group
- Don't cling to the ideas you started with; allow it to grow
- Don't let individual group members "dump on them" too much or call them at home
- Debrief after every group
- Ring them during the week if necessary to discuss the coming meeting
- Provide them with the opportunity to attend leadership training through the Centre For Adolescent Health.

## Roles of the PATS worker in the 8 week group

The workers role within the 8 week group has lots of different elements to it. The background work of the group is usually the role of the PATS worker – taking enquiries, accepting referrals, organizing the pre program interview, coordinating transport arrangements, liaison with parents, and workers, organizing the venue.

During the 8 week group, workers need to plan with their peer leader who is taking on the main facilitation of activities and discussion each week. This is often shared between the two of you, but it is good to clarify who is taking on the facilitation of which activities.

Workers play an important role in being the backstop for the group. If there are issues, which come up in the group discussion which need containing and perhaps addressing outside of the group, the worker needs to be prepared to manage this situation. Workers play an important role in liaison between the young person and their family and other workers involved with their care.

Reminding the group of the contract for expectations of behaviour within the group is often the role of the worker and ensuring that these agreements are adhered to and followed.

Supporting and working with the peer leader is an important aspect of the role. Providing the opportunity for planning and debriefing is vital at the commencement and end of each session.

Being aware of the duty of care regarding child protection issues and safety for participants is important in facilitating the groups. Upholding your agencies protocols and procedures for managing any critical incidents or child protection concerns is important.

## Choosing a Venue for the PATS program

The Venue in which PATS is held is an important consideration in planning. A large room is required which has comfortable chairs which can be arranged in a circle.

This is not a list of 'must haves', rather a list of things, which could be advantageous, and worth discussing with your peer helper or co-facilitator

- Heating and cooling
- Access to public transport
- Wheelchair access
- Music
- Access to a kitchen
- Private – not going to be interruptions from other groups or people
- Youth friendly – it is not recommended that the group is run in a clinical or mental health setting, rather a generic youth space which does not have the potential to identify the young people as being involved in a mental health program
- Access to an outside space which allows for activities to be run outside depending on the weather
- Venues which have access to recreational activities such as table tennis, billiards etc add a drop in feel to the venue
- Access to technology such as a DVD player, television and CD player

Things to consider:

- Safety of the venue, especially when closing up at night
- Is there easy accessibility and visibility from the road?
- Can parents access the program for dropping off and picking up their child?
- It is recommended that another adult be on the premises while the group is running. This person may not sit in on the group, but be available in the background if any safety issues arise.

Venue ideas:

- Hall which has a cosy meeting room
- Private galleries or art studios
- Community health centres
- Conference rooms at a local library
- YMCA or YWCA
- Meeting rooms at a local council
- Local youth services offices

## Food

Food is an important consideration for PATS. If your group is run after school, it is important to supply something substantial for the participants to eat and drink. Food can bring the participants together in an informal way. Consistently our evaluation forms feature comments from the participants stating they really like the food that is provided.

Consideration can be made of having a balance between things like chips and soft drink and providing healthy food and nutrition options such as fruit, nuts and savoury items.

Some groups encourage their participants to contribute to the afternoon tea by having a weekly roster of different participants bringing something to share. However some families can struggle with this. Ensuring that there is a budget for food is important.

## Transport Arrangements

The biggest challenge for young people to access the PATS program is transport. Workers across the state have consistently rated transport as a key resource issue for the program. Many participants families do not have access to a car or extended family/ friends who can take on the task of getting their son/daughter to the groups. In planning the PATS group, the issue of transport needs a lot of planning and consideration.

In rural areas in particular this can be big challenge where public transport options are often very limited (or non existent).

The ways PATS coordinators have managed the transport needs of their participants include:

- Organising volunteers from community agencies to assist with driving
- Utilising a community bus/ or agency vehicle (if available) for the coordinator to do the picking up and dropping home of participants. Some groups have incorporated the driving as part of the program and have reported that a lot of bonding occurs between the participants during the drive to and from the group. This has it's advantages and disadvantages. It is a big task for one person to take on – doing the driving and facilitation of the group on the same day. It can be very difficult if participants are spread over large distances. Some coordinators found they spent more time driving on PATS days than they did running the group.
- Many coordinators access support from the Commonwealth Carer Resource Centres to fund taxi vouchers and transport tickets for participants. Establishing a partnership with the carer's centres has enabled many participants to access the program who otherwise would have missed out. The new Young Carer's Project is another way to access support for the young people through Carers services.

- It is recommended that the transport needs of participants be discussed early on in the referral with the referring worker. Sharing the responsibility for transportation between agencies can ensure that there is a joint approach to getting the young person to the group. Where families have a case manager, it is important to utilise them in assisting with the transport planning, so this does not become solely the responsibility of the PATS coordinator.

Ensuring that the venue in which PATS is run is close to public transport can assist many young people and families in accessing the program and is an important consideration.

## Promoting your PATS program

PATS is a program which cuts across many health and welfare fields. The potential referral base is broad. Families and young people can self refer or referrals may come via a worker/ organisation.

In considering where to promote PATS it is important to be broad in your thinking of which agencies and workers to target. PATS coordinators focus a lot of their time on establishing a connection with workers and agencies in the area they are targeting the program.

Schools, Adult Mental Health Services and Child and Adolescent Mental Health services are key organizations to target. However many referrals come through youth services at the local council level and other family support and drug and alcohol agencies so these are important services to target as well.

In the PATS evaluation the PATS coordinators recommended that established networks of workers in your region should be targeted, rather than trying to establish a separate PATS reference group for workers.

The coordinators found that it was important to regularly contact other agencies to ensure they kept PATS in mind when working with families. PATS coordinators found that whenever they dropped their promotion, the referrals would drop off too.

Recommended Promotional methods include:

- Attending worker networks and giving presentations on PATS
- Establishing an email list of workers in the area to whom you can regularly send updates on the program and when groups are running.
- Sending out the PATS poster and post cards for distribution along with the parent and worker information letters
- Media promotion – local newspapers, radio
- Presentations at conferences and local schools
- Establishing connections with the Commonwealth Carer Respite Centres and the young carer workers across the state.
- Having information about your PATS groups on key website lists eg [www.copmi.net.au](http://www.copmi.net.au), Carer's Victoria.

Where possible it is recommended that you utilize PATS members to do promotional talks and speeches when promoting the program. The young people are the best advocates of the value of the program.

## **PATS referral process**

The entry point for young people in to PATS is the 8-week group. Referral into the program generally occurs via a written referral or verbal intake over the phone. There are often three steps to the referral.

### **Step 1 – The Initial enquiry**

Generally it will be the young person, a family member or a worker who will ring up to enquire about the program. General information regarding the PATS aims and objectives can be given to the enquirer - [refer to sample letters](#)

It is a good idea to document these initial calls and keep a record due to:

- They could turn into a formal referral
- Enquirers may give background information on the young person and their family
- May help with screening the appropriateness of the referral eg: is the young person in the age bracket, does their parents have a diagnosed mental illness
- May help ascertain whether the young person needs to be referred elsewhere
- Useful for follow up when putting a group together
- Helps record the number of enquires which may or may not translate into referrals.
- May help provide a pattern of young people or situations which need further targeting

[See Initial Enquires form](#)

### **Step 2 – The Referral Form**

This form may again be completed in writing by the referring worker, or completed over the phone by the PATS worker. It is helpful to get background information on the young person and the family situation, to assist with assessing whether they are appropriate for the group and to ascertain their needs. It also aids in the engagement process of the young person and their parent.

[See appendix 2. Referral Form](#)

## **Step 3 – The pre-program interview**

The pre-program interview is very important for engaging with the young person and their family and for assessing if the group is appropriate for their needs.

### Location for pre-program interview

#### **Home Visits**

Some PATS coordinators visit potential young people and their families in their own home. This often occurs where there are transport difficulties for the family. Visiting families in their homes can often aid in the engagement process, as the families can appreciate workers coming to them.

Where home visits are being conducted it is important to consider worker safety, particularly if it is a new family for the worker. Part of the information collected during the referral process needs to include a risk screen for conducting a home visit.

Things to consider include:

- Checking who lives in the home and is likely to be present during the visit.
- Whether there has been a history of domestic violence or aggression with the family.
- Whether there are current drug and alcohol issues for the young person or their parent.
- Whether there are any dogs or other animals in the house and if they will be contained during the visit.
- The location of the home eg, is it visible from the road, or in a block of flats.
- Workers must have a mobile phone that is charged and on them at all times during the visit.
- Visits need to be conducted in daylight
- During the visit, workers need to be aware of the exit points in the home, and keep themselves nearest the exit point.
- Workers need to inform a work colleague of the location and time of the visit, and provide a time of return from the visit. Should they not return at the agreed time, the colleague needs to attempt to make contact with the worker, to check they are ok. If contact is not made, senior management and the police should be called.

If there are risks identified, it is advisable that two workers conduct the house visit for the initial interview.

Whilst home visits can aid in the engagement process, it can also be difficult to have a private conversation with the young person and their parent. In the home environment, there can be a lot of distractions to compete with –

neighbours and friends dropping in, phones ringing, television, other siblings. It is important when setting up the home visit that you let the young person and parent know that you will require a quiet space in the house where the young person and yourself can talk uninterrupted.

Whilst saying this, a home visit can also increase the workers understanding of the environment in which the young person is living and what their needs may be.

### **Agency Based Interviews**

Benefits of conducting a program at your agency include:

- Orientating the young person to the building and where the group will be conducted. This can help break down the boundaries of fear of entering a new environment and may help in assisting the young person to join the group
- Highlights any difficulties there may be in transport for the 8 week groups
- The pre-program interview enables the worker and young person to problem solve access issues to the program.

### **Discussions with parents/ and legal guardians**

Young people may come to the PATS interview with their parent or a supportive family member or friend. It is good to start the interview together with the young person and their parent/ friend. An overview of the program can be provided and a discussion about the outcomes that other young people and parents report of their participation in PATS.

It may be helpful to ask the parent or support person what they are hoping the young person will get out of the group, and to explore if they have any questions or concerns about the program that they would like to ask. You may then explain that you are going to have some time talking with the young person by themselves and then will come back to talk to them at the end.

### **Things to think about when meeting the young person for the first time**

The pre program interview is very important for engaging with the young person and their family.

Important points when meeting a young person for the first time include:

- Greet their parents or companions and show them a place where they can wait. It's important that you have an opportunity to speak to the young person alone.
- You may have been provided with information from referring workers and family members on the young person's situation, it is important to start the interview with a clean slate for that young person.

- Approach each young person as an individual as all people and situations are different
- Determine how they feel about meeting you. Have they come out of their own interest or has there been some coopting from parents and workers.
- Reassure the young person that the program is voluntary and they can decide it is right for them or not
- Try and encourage them to come to the first night, so their decision is based on actual experience and not just a perceived idea of what it would be like. 9 out of 10 if you can get them to a first night they are likely to complete the group
- Give the young person opportunity to ask questions
- Allow discussion around the young person's interests and likes and broader topics than just their situation in relation to their parent's illness
- Use it as an opportunity to reduce fears – allow the young person to see the venue and explore transport issues
- Explain the group aims
- Give them your work phone number so they have the opportunity to call if they have further questions
- Discuss with the young person what they are comfortable with you discussing with their parent/guardian or support person

Normal counselling protocols apply in the pre-program discussion:

- It is important to explain who you are and what your role is in the program
- Give an overview of PATRS and what young people tend to get out of it
- Discuss confidentiality and obtain permission for recording the details of the interview. Explain where the information is stored and who is likely to have access to the information
- Explain duty of care and boundaries of confidentiality
- Explain the purpose for asking the information – that it help to work out if PATS is the most suitable group, and to make sure the group will be meeting the desired needs.
- Provide the young person with the option of not answering questions if they do not want to or if they feel uncomfortable

The pre-program interview has been structured to explore:

- The protective and risk factors in the young person's life
- Assist the young person to identify their strengths in managing their parent's illness
- Determine other issues occurring in their life
- Provide the worker some insight into how comfortable the young person is talking about their parent's illness. For those young people who struggle to talk in the interview, they may find participating in the group quite challenging and confronting
- Determine whether the young person requires some individual counselling before taking part in the group program.
- Explore with the young person if they are more comfortable in a group or individual setting

- Explore counseling and other support options for the young person if issues are raised beyond the scope of PATS. PATS may form part of a broader plan of support for the young person

#### Completing the pre-program interview

- You need to complete a confidentiality release form with the young person and their parent/guardian. This form needs to outline that it is the young person gives you permission to liaise with regarding their participation in PATS eg. School counselor, referring worker
- Coming back to the parent or support person to discuss what has been agreed with their child eg. Whether they want to join the group
- If the young person has decided to join the group, you need discuss transport arrangements
- Discuss confidentiality with parents, explaining that you will not be able to share what their child has talked about in the group without the young persons permission, however you can let them know of the themes covered each week
- Explain duty of care with the parents – if they was anything you were concerned about for the young person that you would ensure that they are informed of their needs

## Dealing with parental concerns around the PATS program

Some parents get quite nervous about heir child taking part in the program, and feel defensive about heir parenting and their illness.

Some strategies to help overcome this include:

- Explain on your first meeting with parents that PATS aims to improve connections with family and friends for the young person and aims to increase understanding of mental illness and decrease stigma
- Encourage them to visit the venue
- Send appropriate program information to the young person to show their parents
- Contact the appropriate parent or guardian to clarify the level of involvement or any concerns.

## Eligibility Criteria

Upon completion of the pre-program interview therea rea some questions which need to be considered, for deciding whether the group is appropriate for the young person. These include:

- Does the young person have support outside of the program? Young people need some stability in their life to take part in PATS – some supportive structures in place include school, family or a youth service
- Does the young person have an interest to take part in the group?

- Does the parents have a diagnosed illness? In the case where a parent has an undiagnosed illness the young person may be considered eligible if the parent has had significant symptomatology which has existed for at least 4 –6 months and can be attested by a worker or General Practitioner, and is affecting the young person.
- Will participation in the PATS program benefit the young person, or is there potential for their participation to be conflictual in the family?
- Is it recommended that the young person take part in individual counselling and the family be linked into support services as a first step towards accessing the program?

## **Exclusion Criteria**

The young person has his or her own acute mental health issues. For the PATS program to be effective the young person needs to have some capacity to be able to reflect on their own and others.

PATS does not have a clinical treatment focus, therefore if a young person is requiring treatment for their own mental health needs, this needs to be addressed prior to attending the group.

## **Setting up the group**

Consideration of the make up of each group of participants is important. PATS facilitators consider the following things when setting up groups and activities?

- Is the young person at a developmental level relative to others in the group?
- Number of young people in the group
- Physical and intellectual abilities of the group: Ensure the activities you choose cater for the individuals' capabilities and be familiar with the range of illnesses present within the group. Take these into consideration when designing the games session.
- Age: Ensure the games chosen are suitable for the age group with whom you are working.
- Gender: Some games can require a considerable amount of physical contact. Consider this with young people who are coming to terms with the physical changes in their bodies as some may be very sensitive about this.

## **Stages and processes of groups**

Groups are very dynamic. No two groups are the same, with each group which is run having different combinations of people – personality, gender, culture, motivation, needs. There are lots of different relationships in a group between people. Each person's style can affect the dynamics of the group. Some people might be very task focused – there's a job that needs doing and that's all that matters, for example someone might have come along to the group and wants to learn about mental illness and are not interested in getting

to know other people or talking about other things. Other people might need to get to know other people and are not as worried about education.

As a group leader part of the challenge is getting the balance in the group and supporting the group to work together so that each person's needs and interests can be accommodated.

While every group is going to run differently, there are considered to be 5 key stages which groups go through, which can be helpful for facilitators to be aware of. These stages were first conceptualized by Tuckman and Jensen in 1977. Each group is likely to vary in the pace it moves through each stage and requires the facilitators to work in different ways at each stage.

Adapted from Johnson D and Johnson F, 2000, *Joining together: Group Theory and Group Skills*, 8th Edition, Boston, Allyn and Bacon p31-33

<b>Stages of the groups</b>	<b>What is happening for the participants</b>	<b>What the facilitator needs to focus on:</b>
Forming Week 1 and 2	Participants may have a broad range of feelings on the first night: nervous, unsure if they want to be there, polite, wanting to avoid conflict. People are likely to be cautious and on guard. Checking out the other members of the group and wondering am I going to fit in? Is this group for me? They may be reluctant to answer questions, or some people may be overly enthusiastic and not give space to others to talk.	The first night is crucial for the group. Leaders need to be welcoming and enthusiastic and spend a lot of time on warm up and get to know you activities. Generally on the first night the leaders take the lead in the discussion. Establishing a group contract with the members is important for the expectations and rules of the group. People need boundaries of what is acceptable behaviour and ways of being in this group. Ensuring people feel safe and understand the purpose of the group is important. Encouraging opportunities for people to connect up with each other and find things in common is important.
Storming	Early on in the life of a group, members may not be as cautious as they were on the first night. They might start to question the authority of the leaders and test them out. This is often an exploratory phase in which people are trying to work out how the group is going to work. People might be beginning to feel like it's ok to be themselves and friendships may start to form. The participants might initiate conversation between each other, rather than waiting for the leaders to direct the conversation.	In this stage the participants need to know that they will be listened to. This is often a time to continue the get to know you activities, and utilize activities which get the group mixing. It is important that there is consistency between the group contract and what is happening in the group eg. That the leader ensures that people are listening to each other and only one person speaks at a time, or that there are no put downs. It is in the storming stage that the group may be ready to start discussing specific topics related to the purpose of the group. Eg. Mental health education.

Norming	This is often a time when the group gets into a rhythm. The participants know and understand the rules and get into a routine of how the group operates. Trust and cooperation is likely to be building between members which provides the opportunity to get into more in depth discussion and more reflective activities. Communication of views and feelings may begin to develop with people sharing more.	As facilitators it is important to watch out for people who do not say what they are really thinking or feeling because they don't want to challenge or disagree with people. It's important that a culture is created in the group of accepting different opinions. There is likely to be more spontaneous interaction between members which is not reliant on the facilitator with people talking on breaks to each other and greeting each other at the start of the group. It's important to observe any cliques which might form and keep an eye out for anyone who is isolated in the group.
Performing	The middle to later part of the group is often a time when cohesion in the group occurs.  Members might be feeling comfortable enough to talk to each other and ask questions of each other, rather than waiting for the facilitator to direct the conversation. Members may be interested in exploring topics in more detail and there is often more sharing at this stage as people are feeling more comfortable with each other.	The facilitator in this stage can start to encourage the group members to take responsibility for the topics of discussion. More space can be allowed for the group to generate discussion amongst each other. More in- depth activities can be planned and explored.
Mourning/ Adjourning Week 7 and 8	Towards the end of the group, members may start to think about the fact that the group is finishing soon. Some people may feel very sad about this, others relieved. Some people may feel that they have just started to get warmed up to the group and have lots more things they want to talk about before it finishes.	It is important that a week or two before the final night, the facilitator acknowledges that the group is going to finish soon. Space needs to be allowed for people to be able to share what this means for them. It is important to prepare people for the group finishing, so that it does not come as an abrupt ending for them. Allow space on the final night for members to discuss topics that they may not have had the chance to discuss as yet. It is a good idea to discuss if they want to keep in contact and explore ways that this can happen eg. Going on the PATS mailing list, exchanging contact details with each other. It's often useful to have activities which give the participants the opportunity to reflect on what they have got out of the group and to have some kind of celebration at the end.

Storming, Norming and Performing are stages which can occur interchangeably throughout the group. Groups are unlikely to proceed through these stages in a direct sequence but may move in and out of these stages at different times throughout weeks 2-7.

This outline of the stages of groups is a useful way to think about where the group is at, and to plan activities which suit the different stages. However it needs to be seen as guide only.. Different members within a group may be at different stages individually and groups may not move neatly through each of the stages. As group facilitators and leaders what is most important is the ability to sit back and observe what is happening in your group – to see how each individual is managing within the group and how the group is progressing as a whole. Keeping a balance between the needs of each individual and the group as whole is a complicated, and dynamic task, which ensures leaders, are kept on their toes.

## **Activities and Themes**

It is recommended that you and your co facilitator use activities and ideas which you feel comfortable with which may involve some trial and error. The best way to do this is to allow your group to identify topics or themes that they would like to talk about and then pick some activities from this manual which best suit the topic.

We try not to be prescriptive in saying which order to do activities in. The main suggestion is to start with your planning with your participants:

- where are they at?
- what topics have they identified?
- what are the comment they have made which could be expanded into a PATS night?

Use your group as your starting base, not the manual!!!

## **The importance of games**

Games are an effective means of enjoyment, team building, to build self esteem, and to meet others. You can use games for a number of things....

- To provide challenges
- Introduce people to one another and a means to get to know one another
- Further explore relationships between people or groups of people
- Introduce a group to an idea, issue or area of study
- Provide a focus for a theme day
- To have FUN

When conducting games for a group of young people, there are a number of factors that need to be considered:

Venue/Are	<ul style="list-style-type: none"> <li>• size</li> <li>• indoor/outdoor</li> <li>• accessibility</li> <li>• safety</li> </ul>
Group	<ul style="list-style-type: none"> <li>• the characteristics of the group should always be considered</li> <li>• number of people in group</li> <li>• physical and intellectual ability</li> <li>• age</li> <li>• gender</li> </ul>
Time	<ul style="list-style-type: none"> <li>• length of group and defined length of games session</li> <li>• allow enough time for explaining and for playing games</li> <li>• always have an extra game planned and equipment available</li> <li>• allow time for debriefing and exploring meaning of game</li> </ul>
Equipment	<ul style="list-style-type: none"> <li>• have all equipment on hand</li> <li>• equipment should be safe and instructions for its use should be clear</li> </ul>
Leadership skills	<ul style="list-style-type: none"> <li>• when conducting games the facilitator can sometimes be organizer, umpire, manager, motivator, safety officer, problem solver etc</li> <li>• the facilitator should try and be aware of participants movement potential and confidence levels participation, enjoyment, challenge, and excitement are the key responses to participation in games and these should be available to all</li> </ul>

## Checklist for a successful games session

- Visualise your presentation.
- Have all equipment ready before the games session commences.
- Define playing area clearly.
- Know the area or environment before starting an activity.
- Think ahead. Be alert to areas / scenarios which could spell danger.
- Don't have groups looking at the sun when speaking to them.
- Wait until the group is together before speaking to them.
- If a group is restless, have them sit down before you speak to them.
- Draw the group closer to you if it is noisy and difficult for them to hear.
- Gain their attention before speaking to them.
- Use group members to help.
- Project your voice to the person furthest away.
- Don't continue speaking if others are talking.
- Aim for participation rather than elimination.
- Reinforce constantly. Clap, cheer, laugh and congratulate. Encourage those who are working hard.
- Delegate whenever it is possible.
- Direct questions to individuals and not to the whole group.
- Use names whenever you can.
- Be decisive and confident.
- Communicate directly, clearly and unambiguously.
- Be brief. Start them playing as soon as possible.
- Don't just say it, show it!
- Use arms, hands and your whole body to harness a group's attention.
- Control the equipment at all times.
- Be creative about dividing the group into teams.
- Keep the whole group in sight when leading a game.
- Consider the differences in cultural background, age, levels of ability in the group.
- Use quick learners in the group to help those having difficulties.
- Defuse or deal with problems before they escalate.
- Keep up the momentum. Change direction if something isn't working.
- Remember the benefits of laughter. Use humour to motivate, relax and energise.

Adapted from The Great New Book of 'Life. Be in it' Games by Bedford and Robinson (1996) p. 12

In Pats, the main sorts of games or activities that are used fall under the following categories...

- Ice breakers/ warm up activities
- “Get to know you” games
- Checking in activities
- Activities to explore specific ideas or themes
- Closure activities

## The PATS Activity Guide

### Sessions

PATS sessions can be structured in varying ways. Below is a rough outline of how your sessions might be structured

- Session 1
  - Welcome and introductions
  - Lots of get to know you activities
  - Group Contract of expectations
  - Discussion of why we are here and what participants want to get out of the group
  - Closure game or activity
- Session 2 -7
  - Ice Breaker
  - Check in time – how has your week been
  - Warm up activity which focuses on the theme of the night
  - Discussion around the theme
  - Closure activity and an opportunity to reflect on the session for participants.
- Session 8.
  - Warm up activity/ Ice Breaker
  - Check in time – how has your week been
  - Activity which provides the opportunity for participants to reflect on their time in the group and what the 8 weeks has meant for them
  - Discussion about how the participants can keep in contact, and an explanation of what other opportunities there are for involvement in PATS eg. Social activities, leadership training, reference group.
  - Party/ video night

## Ideas for themes

Don't structure themes too much, allow the young people to express their needs and themes they would like covered. Here are some ideas:

- Exploring feelings
- Mental Health
  - what is mental health
  - myths behind mental illness
  - guest speakers
- Friendships
  - what constitutes a good friendship
  - does the parents illness affect their friendships?
- Exploring home
  - what is your home like
  - dream home
- Exploring physically well/unwell
  - how does it feel to be sick
  - we can think of mental illness the same as physical illness
- Stigma

## Unstructured time

Unstructured time allows you participants to interact with each other in an unguided and informal way. This can be done by:

- Building in breaks during the session
- Leave the participants for an agreed amount of time to take alone without facilitator present

Leaving the room and having the participants talk without the leader present can open the participants up. You don't want to go too far away of course, and this can depend on the age of your participants as to whether they are able to focus without a leader present! It's worth trying though.

Unstructured time allows participants to get to know each other, to develop their social skills and develop relationships with each other. The more comfortable the participants are with each other, the more likely they are to engage in conversation around the themes. For groups where your participants just want to socialise and are reluctant to engage in discussion around the topic/ theme, it can be useful to negotiate with them a set period of time each week which is unstructured and is agreed on by everyone. Involving your participants in developing the session plans and making decisions about the balance between structured and unstructured time encourages the participants to take responsibility for the group as well as the facilitators.

## Checking in time

Checking in time, is something that is recommended s incorporated as part of the routine for your group each week. You may start your sessions wit the check in, or have it after a warm up or ice breaker.

Checking in is important as:

- It gives the group permission to talk about what is happening in their life which may or may not be related to their parents illness
- It is an opportunity for participants to let the group know how they are feeling that day and to share with the group how their week has been.
- It can be used as a time for participants to present problems or concerns that are troubling them
- You can build in a problem solving component to the group, where participants can present a situation which they would like ideas from the other participants on how they'd manage their situation.
- Checking in time gives the facilitator some insight into where your participants are at each session and what their capacity might be for focusing on the group.

It is important that your participants don't get into giving advice mode with each other or judgement mode.

Ensure that all participants who want to, are able to share how their week has been, and that the discussion is not dominated by one person. As a facilitator, you may make to the decision to go with the theme raised and use the participants' story as a starting point for discussion. Some evenings therefore, you may set aside the theme you had planned if the participants appear interested in the topic which has been generated by the check in session.

In deciding whether to contain the conversation to a set time frame and move on to the planned theme, or to let the participants go with the discussion, which has been elicited, it's good to explore:

- If the topic is relevant for other members in the group
- If it opens up potential themes, which are relevant to PATS
- With the group whether they want to continue with the topic or whether they would like to move on with the planned theme

## Closure and containment

The ending of each of your PATS sessions are very important. Ensuring that participants leave the group feeling ok is crucial. At times there can be in depth themes and discussions held in a PATS group which can bring up memories for participants which might be distressing. Having the opportunity to talk about significant events in participants' lives is an important part of PATS, but it's equally important that there is containment at the end of the session and that themes/ feelings are not left exposed without some kind of

closure for participants. There is a list of closure activities further along in the manual.

Building in a closure activity at the end of each session is very important. Closure activities provide the opportunity for your participants to check in and reflect on what they have discussed and shared with each other during the session. It is important to provide the opportunity for your participants to talk to you individually at the end of the session if something raised in the group has upset them.

Particularly after your first few nights of PATS, it's a good idea to contact each participant individually to see how they are finding the group. For young people who have never spoken about their parent's illness before, coming to a group can be a very powerful experience, and being able to talk to you about how they are finding the group can be helpful.

At times a young person may raise an issue in the group, which may not be appropriate for exploration with the other members. It is important to acknowledge when someone has shared something very significant in the group. However you may need to suggest that it is something you think would be better followed up individually outside of the group.

Particularly where a disclosure of current physical or sexual assault occurs in a group, it is important that this is explored and followed up outside of the group setting.

## **Considerations for week1 and 2**

The first night is very important for engaging the young people and to make them feel comfortable and interested in coming back. Some tips in doing this include:

- Have a structured plan for week 1 and 2, but a plan that is able to be flexible and responsive to group needs
- Think through arrival time
- some participants may arrive early
- parents/workers dropping participants off and checking the arrangement for pick up time
- have young people who arrive late or telephone with transport difficulties
- Have some tasks for the young people to do if they happen to arrive early eg. Setting up, games such as billiards, making mini pizzas, helping with afternoon tea. Make sure they are invited to join in.
- Have the peer leader arrive ½ hour before the group begins so they can be there for early participants and will allow you to chase up young people with transport issues and answers parents questions.

Often week 1 and 2 focus on getting to know each other, working out the group expectations and working out what participants are there for and wanting to get out of the group.

## The Group Contract

On the first night of the group it is helpful to establish an agreement between your participants of how they would like the group to run and what their expectations are of each other. Defining what is acceptable behaviour and what is not provides clear boundaries for the participants of what is going to happen in the group. Providing a clear structure is important for ensuring the participants feel safe in the group, and if the young people are involved in the designing of the group contract, it can increase their commitment and sense of responsibility for what is happening. The contract is an important start to creating the atmosphere and ethos of the group.

In PATS we usually frame the contract in terms of our expectations of each other, rather than using the term rules.

Methods which have been used by facilitators to establish a group contract include:

### **Brainstorming expectations on butchers paper as a whole group.**

#### **Completing an individual handout which has the following questions:**

- Right now I am feeling .....
- Things I want to see happen in this group are...
- A question I want to ask the group is...
- What I don't want to happen in this group is ...

The participants write on the handout their answers to these questions individually and anonymously. Their sheets are handed in and the responses are then written up on the board. A discussion can then ensue which explores how their wishes for the group can be met. For example if someone wrote I don't want to be teased in the group. The facilitator can ask the group what is a way we can make sure teasing doesn't happen? And these ideas then form the basis of the group contract.

### **The what do we want to happen/ not happen circle**

A large circle can be drawn on a piece of butchers paper. Ask the group to make suggestions for things they'd like to see happen in the group to go inside the circle. And things they don't want to happen to go outside the circle. Group members can be asked to sign the paper if they agree to these being the expectations for the group.

The following topics are potential areas of discussion concerning the group expectations:

- Confidentiality and the exceptions to this
- How do we manage difference of opinion in the group
- What can you do if during the group something is discussed which upsets you

- What do we want people to do if they can't make it to a night or are running late?
- How do we make decisions in the group eg consensus, majority rules etc?
- What can you do if you are asked a question, or asked to do something that you don't feel comfortable with?

In discussing the group expectations it is important to emphasise that whilst there is a lot of similarity between everyone's experiences, there is also likely to be difference too. Talking about valuing and respecting each others experience is important and not comparing each other for whose situation is better or worse can be helpful.

## Games and Energiser Ideas

### Get to know you games



#### The Toilet Paper Game

Number of participants: Minimum 2, maximum 15 (break into another group if larger numbers)

Timing: Depends on number of participants. Minimum of ten minutes.

Suitable: Indoors or outdoors

Equipment: A roll of toilet paper

No physical requirements

#### How to play...

Arrange group in a circle, preferably sitting. Introduce this game with some kind of story which requires the participants to take a supply of toilet paper (e.g., tell them that they are going camping for a few days and need to take their own toilet paper as there are no toilets there). Pass the toilet roll around the group until each person has a supply. They can take as much as they wish.

Once all are sufficiently supplied, state that each person must then tell the rest of the group one piece of information about themselves for each piece of paper they have taken. If people get stuck for what to say have the group ask questions so that they use up their toilet paper. (Source unknown)



## People Bingo

Number of participants : Suits larger groups - minimum of 6

Timing : Depends on numbers - 10 minutes minimum

Suitable : Indoors or outdoors

Physical Requirements: Ability to move around

Equipment: Bingo sheet and pen for each person

### How to play...

Each person is given a copy of a bingo sheet which has various clues and questions on it. They must, on the word “go”, move around the group asking questions of other people to find people who have done the things mentioned. If they find someone to fit a question, they must get them to sign that box. They need to be able to prove that this person has done what they sign for. A different person must be found for each question.

The winner is the person who has all sections signed and yells out “Bingo”. You might like to put a time-limit on the game and pronounce the winner as the person with the most signatures at the end of the time allotted.

As a leader you can design the bingo sheets to suit the group. The aim is to get the participants mixing, laughing and finding out things about each other. Here’s an example of the types of things to include on the card. (Adjust card to suit group size):

Someone who has been on a plane	Someone who watches Australian Idol	Someone who can impersonate a chicken	Someone who is the oldest in their family
Someone who has had a hangover	Someone who has stayed overnight in hospital	Someone who likes chocolate	Someone who can sing the national anthem
Someone who was born overseas	Someone who has their licence	Someone who is scared of spiders	Someone who is good at burping

(Source unknown)

## Interviewing

Number of participants: Minimum 2 - no limit

Timing: Depends on numbers involved, minimum 5 minutes

Suitable: Indoors/ outdoors

Equipment: Paper and pens, list of questions to ask each other

This is a good “get to know you” activity as it allows the participants to find out things about each other and is generally an effective discussion starter. It is non-threatening and is particularly useful for shy participants who may find it hard to tell the entire group something about themselves.

### **How to play...**

Break your group up into pairs, with participants going with people that they do not know. Give each pair the list of questions that they need to ask each other. (As a leader you need to have these questions prepared). Tell them that they need to find out as much about their partner as they can. Examples of the kinds of questions you could include on the list are:

- How many people are in your family?
- What year level are you in at school?
- What is your favourite food?
- What kind of music do you like?
- What's your favourite movie?
- Do you have a favourite place?
- What would you like to be doing in five years' time?
- What do you like doing on the weekends?
- What do you want to get out of the group?

Tell the pairs that one person needs to act as the interviewer and the other the interviewee, and then they can swap roles. Give the group enough time to ask each other these questions. Once the interviews are complete bring the group back together and ask each person to introduce the person they have interviewed to the rest of the group, explaining their answers to the questions. (Source unknown)

## True/False Game

Number of participants : Minimum 2 - no limit

Timing: 5 minutes

Suitable : Indoors/ outdoors

Equipment : Paper and pens

This is a quick game that can be lots of fun and helps the participants get to know more about each other. It is a good idea to play this game in the first few sessions before they know each other too well.

### **How to play...**

Give each person a piece of paper and a pen. Ask them to write on their piece of paper three things about themselves that are true and one thing which is false. They can say anything about themselves such as things they have done, places they have been, things they like doing etc.

You can then either:

As a whole group go through each person's statements and try and work out which is the false piece of information, or

Break the group into pairs and have each pair try and work out their partner's false statement. Once they have worked it out, they then can move on to the next person until they have spoken to everyone in the group. This is a good way to get the group mixing. (Source unknown)

## Twenty Questions without yes or no

This is a game which can be played simply for fun or to actually find things out about people in your group.

Number of participants: Minimum 2, no limit

Suitable: Indoors/ outdoors

Timing: Depends on number of participants, minimum 5 minutes.

Equipment: None

Physical Requirements: None

### **How to play...**

One person is designated as the person in the "hot seat". This person has to answer questions which the rest of the group pose to them. In giving their answers they are not allowed to say either "yes" or "no".

You can add up the number of times the person says yes or no, or change the person in the hot seat whenever the wrong thing is said. See who can be asked twenty questions without answering yes or no.

Variation: Have the person in the hot seat decide on a topic which they need to speak about for one minute to the group. See how long they can last without saying “um” or “ah”. Give each person a shot at this and see who can go the longest without saying the dreaded words!!! (Source unknown)

## The Dice Game

3 – 10 participants

One dice needed

White board/ or butchers paper

### **How to Play**

This is a get to know you game which enables your participants to share things about themselves and ask questions of others in a fun way.

This game can be done in rounds. You need to come up with six questions for each round which your participants need to answer.

Each question is numbered and put up on the whiteboard/ butchers paper. Each person in the group, takes it in turn to roll the dice. Whatever number the dice lands on, that is the question which they need to answer.

Round 1.

- Eg.
1. What is your favourite sport
  2. What star sign are you
  3. What movie have you watched the most times
  4. If you could go anywhere you wanted on holiday, where would you go?
  5. If you were prime minister for a day, what would you do?
  6. What song do you never want to hear again.

You might go twice around your group for each round, so that each participant rolls the dice twice and answers two questions from the round.

You can have the rule that if they get the same number twice, they can ask someone else in the group that question.

For a variation, you can leave number 6 blank. Whoever rolls a 6 can ask the group their own question and each person has to answer it.

Changing the round with a new set of questions keeps the game lively and interesting. You can have the group members nominate a question for the second round.

## Checking in Games

Checking in activities are good to use at the start of your sessions as a way for your participants to share with each other where they are at in this moment, how they are feeling and what has been happening for them over the week.

Checking in can be done as a discussion around the group. Potential questions to ask include:

- Tell us what kind of week you have had.
- Share with us something that was a highlight and something that was a low for you this week.
- Finish this sentence “My day or my week has involved ....”

You can do the check in time as a group activity, or ask participants to turn to the person next to them and share with each other what your day/ week has been like. After a few minutes, you can ask the pairs to share what they have been talking about with the wider group.

You can introduce resources into your check in session.

### Feelings Cards

These can be spread around the room and you can ask your participants to choose a word which reflects how they are feeling today, and how they have felt this week.

Resources include:

- ST Lukes Feeling Words Cards
- Feelings Market Place Cards
- Or you can make some up yourself!

### Picture Cards

Sometimes pictures and images can be more powerful than words. Spread picture cards around the room and ask the participants to choose one that represents their day or week. The young people can simply show the card they have chosen to the group, or explain to the group why they have chosen that card.

Resources:

- St Lukes Bear Cards, or shadow cards.
- Photo Language Cards
- Or you can make some yourself

## The Absolutely Fantastic to Absolutely Crap Continuum

Tell the group that there is a continuum from one end of the room to the other. At one end of the continuum (point to one side of the room) is Absolutely Fantastic and at the other end (yep you guessed it) is absolutely crap. Ask the participants to place themselves along the continuum at where they rate their week/ day.

Once everyone has placed themselves, you can ask the participants to share anything they'd like about why they have placed themselves where they have.

## The Journey of My Shoes Today

Ask the participants to take their shoes off and put them in front of them. Ask them to look at their shoes and for a minute or two, think about the places these shoes have been with you today. What has their day been like? Have you walked around feeling light and happy? Or have they had a lot of weight to carry because you've been a bit down? Has it been a busy day where they haven't stopped or a slow and easy day.

## Mind puzzles

Mind puzzles can be a great time-filler, can help quieten a group and get the participants focused. They are also challenging, at times frustrating, and lots of fun.

## The Picnic

Begin the game by stating that you have organised a picnic and you would like the group members to attend, but they need to bring some kind of contribution along. Each player has to state what item they will bring and it is up to you to decide whether or not they can come. This will depend on the pattern which you have decided upon as being the requirements of the picnic. It is up to the group members to try and work out what the pattern is through their suggested contributions.

The pattern can be many things:

- The first letter of the object matches the person's name (e.g., Michael might bring along a marble).
- Objects must be named in alphabetical order (e.g., apple, bread, carrot).
- Objects must begin with the last letter of the previous item (e.g., if someone said carrot, the next person must say something beginning with the letter "t" as their contribution).
- Objects must all have a double letter (e.g., wheel, roof etc).

## The Cowboy

A cowboy rides into town on Friday, stays for two days and rides out again on Friday. How is that possible?

Answer: The horse's name is Friday.

## The Truck

A truck driver is driving down a country road. The headlights on the truck are broken. There are no street-lights along the road. It is overcast and you cannot see the moon or any stars. A man jumps into the middle of the road and is not carrying a torch. The truck driver screeches to a stop. How did the truck driver see him?

Answer : It is daytime

(Source : Catholic Youth Ministry "Why are games useful?" Activity Sheet, Unpublished)

## Scissors Pass

This puzzle requires a pair of scissors and your group to be sitting in a circle.

Start off with a pair of scissors in your hands and after opening and closing them a few times pass them on to the person sitting next to you and tell them whether they are crossed or uncrossed. Get them to do the same to the person sitting next to them. It is your task to tell them whether they are correct in saying that the scissors are crossed or uncrossed.

The answer to this puzzle is that it does not matter what position the scissors are actually in. Whether the scissors are crossed or uncrossed depends on the position of the person's legs who is doing the guessing. If their legs are crossed, then the scissors are crossed, if their legs are uncrossed then the scissors are uncrossed. (This isn't as easy to work out as it sounds!)

Variation: If you think this is a little easy for your group, have the crossing or uncrossing of the scissors be dependent on the position of the person's legs to whom the scissors are being passed. (Source unknown)

## Games and activities to explore specific ideas or themes

### Spider's Web

This activity can be done as a “get to know you” game or can be used to aid in the discussion of a topic. It's great for emphasizing the commonalties in a group or for trying to encourage group cohesiveness. It can also be used as a closure activity at the end of the 8 weeks.

Number of participants : Minimum of 5, maximum of 15

Timing: Depends on numbers at least 10 minutes

Suitable: Indoors or outdoors

Equipment: A ball of string

Physical Requirements: Ability to throw and catch a ball of string

#### **How to Play...**

Arrange your group in a circle. One person starts off with the ball of string. As a leader you tell the group that when they receive the ball of string they need to provide some information.

This is where you can use the game for different purposes:

- As a “get to know you” activity you can ask them to say their name and tell the group three things about themselves.
- To get them focusing on the program you might ask them to say what they are hoping to get out of the PATS program.

It's up to you as a leader to decide what questions you want discussed.

The first person then starts with the string and gives their information. Holding the end of the string, they then need to throw the remainder of the string (the ball) to someone else in the circle, preferably someone across from them. That person then answers the questions and passes the string onto someone else, again holding part of the string in their hand. The process continues until everyone in the circle has had a chance to speak and the ball of string is returned to the person who started off speaking.

Have the group hold their string above their heads. Hopefully you will have some kind of a pattern made with the string which resembles a spider's web. Have the group comment on the string - what do they think it means.

Perhaps emphasise to the group that the string represents that they are all connected in this program through their experiences and through having come along to the group. The program is about working together, so each of them has a contribution to make to the pattern and to what is going to happen in the group. (Source unknown)



## Label game

This is an interesting game to play with a group when they first meet, however it does require good facilitation to get the point of the game across.

It is a useful activity for starting discussions about how we perceive ourselves as opposed to how others may see us and how easily judgments and labels can be given to people. It can be a good activity to use within a session on stigma and stereotypes.

Timing: Minimum 10 minutes

Suitable: Indoors

Number of participants: Minimum 5

Equipment: Each person needs a supply of sticky labels and a pen

Physical Requirements: The ability to write

### **How to Play...**

As a leader have a list of words prepared which are descriptive words. The following is an example of the types of words you could have listed: shy, interesting, intelligent, funny, approachable, confident, happy, reserved, mysterious, cool, friendly, warm, energetic, sincere, unusual.

Tell the participants that for each person in the room, they need to pick one of the words from the list which they think could describe them and write it on a label. Once everyone has written a label for each group member, tell them to place the labels on the people that they were written for. Each person in the room should end up with the same number of labels as there are people in the room.

Have your group members comment on the different words which have been used to describe them. Ask questions such as:

- What do you think of the way you've been described?
- Is there anything that you are surprised about?
- Would you have used the same words to describe yourself?
- Do these labels represent the person that you are?

You could then lead your discussion onto talking about how easily judgments made on first impressions can be made about people. Finish by saying that over the next eight weeks we'll be finding out a lot more about each other and getting many more words that we'll be able to use to describe each other.

If you are using the activity to introduce the concept of stigma and stereotyping, you can ask the group do they think people make judgements of people with mental illnesses? What are the ways that people make those

judgements? What are words they have heard used to describe someone with a mental illness?

You could do this activity again in the final session of the group, with the group members making up their own words to describe each other (emphasise the need for positive descriptions). It's interesting to see how the labels differ from their first impressions. (Source unknown)

## Anyone Who

This game has a number of variations and can be used for different purposes. It can be used simply for fun and to liven up a session, as a “get to know you” activity or as a way for your group members to share their experiences with the group in a non-threatening way.

Number of participants: At least 7

Suitable: Indoors, in a room with space to move around

Equipment: A chair for each person

Timing: Approximately 10 minutes

Physical requirements: This activity involves each person moving chairs. It can be played with someone in a wheelchair as they can be required to move spaces not chairs.

### **How to Play...**

All participants except one sit down on chairs in a circle. The chair belonging to the person who is standing is removed from the circle so that there is one less chair for the number of people playing the game. This person then stands in the middle of the circle.

As a “get to know you” game the person in the middle says their name and then says “anyone who ...” and gives some kind of a command (e.g., “I’m Jody. Anyone who is wearing jeans.”). At this point those in the circle who are wearing jeans must get up and swap places. Each person has to move at least one chair away from the chair they have been sitting on. The person in the middle must also try to take someone else’s chair. Whoever is left without a chair then becomes the person in the middle and gives a new command.

You can also adapt this game to suit the topic for the session. For example, if you are focusing on the feelings associated with having a parent with mental illness you might have the person in the middle say a feeling they have experienced and when that occurred such as “Anyone who has ever felt angry because their parent isn’t well”.

It's important to bring some closure to this game if it is used for a topic session by validating the feelings and experiences which are expressed. It may be necessary to state that whilst not everyone may have swapped chairs for some of the examples, everyone has had some experiences with the topic. (It's pretty unusual to have a group where someone hasn't moved places at all.)

## What's Your Favourite Song?

Equipment: A CD / tape player.

This is often incorporated into PATS towards the end of the program. Depending on the group size it can take a whole session.

Each person is encouraged to bring in a song which has a lot of meaning for them and to share it with the group. They are then asked to explain why it has meaning. There are often great discussions resulting from this activity.

## **Activities to Explore Mental Illness Education**

There are many ways in which you can discuss the topic of mental illness and tackle educating the group members about their parents' illness. This topic may be covered over a number of weeks.

## Guest Speakers

You may wish to get a guest speaker in to support you in the education session.

Bringing in a mental health worker from the adult mental health service or Child and Adolescent Mental Health Service can have two advantages, both in educating the young people and in facilitating their connection with workers in other agencies.

## **Questions for Mental Health Educators**

When organizing a mental health educator, it is important to provide the participants the opportunity to ask the questions they are interested in learning about. The week prior to the guest speaker coming to the group, it is a good idea to provide the opportunity for the group to discuss or write down what questions they would like answered. Giving each individual a piece of paper and asking them to write a question anonymously, can assist members in asking questions that they may be a bit nervous or embarrassed to ask. The questions can then be given to your guest educator, so that they can prepare for the night.

## **Common Questions that PATS group members want answered:**

- What is mental illness?
- What causes mental illness?
- How does someone get a diagnosis of mental illness?
- Is it to do with the environment or genetics?
- What are the differences between bi polar disorder, schizophrenia, depression and Borderline Personality Disorder?
- Will I get it too?
- What can you do to protect yourself from getting sick?
- Suicide and self harm – why does it happen, how can you help someone that's feeling like that?
- Can my parent recover from their illness? Why do some people recover and others don't?
- Why do people drink and smoke?
- Where can you get help/ assistance – eg CAT team
- What do the different workers do?
- How is mental illness treated? Does medication help?

There are a number of activities which can be done which assist the participants in understanding their parents' illness and empathising with them:



### **Photo Cards Activity**

Using photo cards eg. Photo Language cards or St Luke's Bear cards.

Place the cards around the room and ask the participants to pick a card which represents something to them about mental health and mental illness. Discuss their photos in the group.

This is often a good warm up activity to discussing parental mental illness. It allows the opportunity for group members to share their parents' diagnosis if they want, or to talk in general terms about their understanding and perceptions of mental illness.

Discussion/ Debrief: It is good to sum up this activity by stating that there are many different ways in which mental illness can affect someone and what it might mean to an individual and their family. Every person's situation is different, but there can also be commonalities.

## Someone Else's Shoes

This is a warm up activity for talking about their parent's illness and how it might affect them.

Ask the participants to take off their shoes and place them in the middle of the room. They are to put the someone else's shoes on – getting either a matching pair or two different shoes. They can then go and find the owner of the shoes and swap them with them. Ask them to have a discussion with that person about their shoes – where they got them, when they got them, why they chose them.

Tell the group that the aim of the activity is to get you to stand in someone else's shoes for a while and see things from someone else's perspective. Tonight that perspective is someone who has a mental illness.

## Mental Illness Symptom Game

Using the PATS Cards developed by Paul Leeves, place the diagnoses cards on the table. Anxiety, Depression, Psychosis and Manic. You might like to develop other cards eg Personality Disorder. (see appendix)

Give each young person a behaviour card and ask them to place the card on the illness they think this behaviour might be associated with.

**Discussion/ Debrief:** There is often lots of discussion about the fact that different behaviours may be associated with more than one illness, and that the behaviour on its own, may not equate with a diagnosis. Eg. Tiredness or lethargy is something lots of people experience, but it doesn't mean they have an illness. Discuss the DSM4TR and how for a diagnosis, the symptoms need to be present for specified periods of time.

## Hearing Voices Activity

Ask for two volunteers. They are to have a conversation with each other.

Possible topics:

- Talk about what you did on the weekend.
- Talk about the last movie you saw or one you want to go and see.
- Your favourite thing to do when you have spare time and money!

Or have them pick a topic of their own choosing. Explain to the two talkers that you want them to try and continue talking despite the distractions that may occur.

Then ask two other members in the group to try to distract each of the talkers by whispering in their ears. They are not to touch the talkers or to stand in

front of them, but to try speaking in their ear about different topics to try and distract them.

They may need some help to start off, suggest singing row, row, row your boat in the persons ear, or commenting on what you like about their clothes.

Let the four of them have a few minutes trying this out. Then swap around so that the talkers can become the distractors.

**Discussion/ Debrief:**

- Ask the talkers what that was like for them?
- Was it hard to have the conversation with their partner? Why was it hard?
- Were they able to concentrate on what the other person was saying or were they getting distracted?
- Did they find themselves responding to the whisperer or the person talking to them?

Discuss with the group that this activity is a simulation of what it can be like for some people who experience psychosis, and who experience hearing voices. State that whilst for the people around them, they may not be aware that the person is going through this, it is very real for the person experiencing it.

Ask the group – if this was happening to someone, how might it affect them?  
Eg. Distracted, not able to concentrate, getting frustrated, hard to think and have a conversation. Might talk to themselves.

Therefore if you were trying to have a conversation with your parent whilst they were experiencing psychosis, they may struggle to talk to you. It's not that they don't want to, they just might have lots going on inside their head which prevents them from being able to talk to you.

Imagine too if the voice in their head was saying mean things about themselves – eg you're dumb, nobody likes you, everyone is looking at you. This can be very hard to ignore for the person experiencing psychosis and can be distressing.

Discuss: what can you do if someone seems like they are hearing voices?

Suggestions might include:

Keep calm, don't yell at them

Maybe pick another time to have the conversation

Find out what is helpful for them eg. Some people might need the t.v. or radio turned down so there aren't as many noises in the room. Other people might want noise to take their focus away from the sound in their head.

If you are worried about them, call a family member, their Case manager or the CATT team.



## Mental Health Continuum Exercise

**Purpose:** To help the participants identify that mental health is something which affects everyone and that there is a continuum of mental health for everyone.

To help participants discuss the way in which mental health can vary for people and to begin thinking about their own concepts of mental health and mental illness.

**Instructions:** This activity is good to do in two groups.

- Give each group a copy of the scenarios and the Mentally Healthy and Mentally Unwell Cards.
- Place the Mentally Healthy and Mentally Unwell cards at opposite ends of a table/ room etc.
- Give the participants a copy of the scenarios and ask the participants to place the scenarios somewhere along the line, where they think that person might be in relation to being mentally healthy or unwell.
- Have the participants discuss in their groups where they think the scenarios could be placed.
- 

Once the two groups have finished have them look at each others placement of the cards.

**Discuss as a group:**

- In this activity it's important to emphasise that there is no right and wrong.
- Are there differences in the two groups as to where the cards have been placed?
- Were there scenarios which they were unsure about or had differences of opinion over?
- What did they base their decisions on?
- Can someone be mentally healthy and still feel sad, or angry?

### **Example of Scenarios**

You might like to adapt the scenarios to suit the kids in your group.

- Feeling Great – have a job they love
- Feeling positive – life's not perfect but it's pretty good
- Anxious about upcoming exams
- Has schizophrenia, had 2 psychotic episodes which weren't too bad, medication helped a lot
- Their grandmother passed away this week and they haven't felt like doing anything and have been crying a lot.

- Feeling very down after dad's death a few months ago, doesn't feel like doing anything
- Has an anxiety problem, doesn't leave the house, knows they need help
- Has a personality disorder, won't accept help, doesn't think they are ill
- Has chronic depression, goes into hospital 6 or 7 times a year
- Feeling angry and violent over problems with friends
- Has an anxiety problem, doesn't leave the house, knows they need help

## Jigsaw Puzzle Activity

This activity aims to raise awareness of how mental illness can affect people's thoughts, and helps the group to think about things from their parent's perspective.

**Resource Preparation:** You will need multiple copies of a colourful poster or large picture, so that each person in the group has a copy of the same poster. Prior to the group, cut up the posters into a jigsaw puzzle.

Prepare the majority of the posters the same way, with equal sized pieces (approx 10 – 20 pieces).

Choose two posters to be prepared differently. Chop the pieces up much smaller, so that there is double the number of pieces. You might also like to mix the pieces between the two posters, so that it will not be possible for the people putting these together to complete the puzzles.

On the night of this activity, hand out the puzzles to each participant in the group, choosing two people to have the altered puzzles.

Do not show the group the way the puzzle is to be put together (ie don't give them a full copy of the poster).

Ask them to make the puzzle up, setting a time limit of a few minutes, so that there is a feeling of competition in the group.

At the completion of the time, ask the group to stop and see how they have gone.

### **Discussion/ Debrief:**

Ask the group:

- How did that go for you?
- Was it hard to put the puzzle together without knowing what you were making?
- How did you tackle the task? Eg. Did you work with the shapes, or the colours to try to work out where the pieces went? Did you create the outside of the puzzle first, or start on the inside? Get a sense of each person's process.

Ask the two people who had the altered puzzle what it was like for them? Did they work out that there were more pieces for them than the others? Did they discover that there were some pieces missing? Was this frustrating? Did they feel left out?

Explain that you had deliberately altered some of the puzzles (and apologise to the people that got the “dodgy” puzzles). But explain that you did this for a reason.

Explain that this activity is a simulation of how it can be for someone who has a mental illness, when they are trying to do a task. Sometimes, their thought process might be affected, and they might struggle to put their thoughts and ideas together in a way that is logical for other people. They might see the world quite differently to us so rather than seeing the colours and shapes and tackling the puzzle that way, they might do it very differently.

For some people their thought process can be slowed right down – both from the illness or the medication they are on. So tasks which might be easy to other people can be hard and confusing and take more time for them. They might be able to see that it’s easy for other people too and get frustrated with themselves.

Ask the group:

- What might be helpful things to say if someone has a mental illness and is trying to do a task?
- What might be unhelpful things to say? Eg. You’re stupid, you’re lazy.
- Ask them to comment on whether their parents ever find it hard to do things that are easy for other people? How do they respond? What is it like to see that happening yourself?

## Touring the Inpatient Unit

Some PATS groups have visited the Inpatient Unit of the Adult Mental Health Service close to their area as part of their sessions. This has worked well in creating a stronger connection between the Adult Service and PATS. It allows the staff of the inpatient unit to get to know the PATS members and be able to explain their job and what the procedures are for when their parent is hospitalized. It gives the young people the chance to ask lots of questions and to orientate themselves to the hospital.

## Optical Illusions Activity

Some PATS group facilitators have bought in optical illusions for the group to look at and decipher. These can be obtained from book shops and photo stores. As the group tries to find the hidden pictures, a discussion can be held about who is able to see the hidden picture and who can’t? Discuss what is it like if everyone can see the picture but you can’t? Or if no-one can see anything, but you can?

You can introduce the idea that for people who experience psychosis, they may see things differently to other people and find different meaning in things. Discuss with the group: What is important is that for that person, what they are seeing or experiencing is real for them, even if others don't experience it.

## **Mental Illness Videos Which Promote Discussion**

Videos which work well for creating conversations with the group about mental illness are:

### **Hard Words: Children's Experiences of Parental Mental Illness.**

This is a 7 minute video for children aged 9 –13 years and is produced by the Victorian Department of Human Services and is available through ARAFEMI Ph: 61 03 9889 3733.

Whilst Hard Words is targeted to children, it has been used successfully with older adolescents, particularly with groups where the participants have been living with their parent's illness for many years. It is often a good discussion starter for the members to talk about what it was like when they were younger compared to now.

**Koping** – A video supporting children and young people whose parents are living with a mental health problem. This is a 17 minute video aimed at teenagers. It is available through the Child and Youth Mental Health Service, Royal Children's Hospital Queensland, PO Box 1507, Fortitude Valley, Queensland.

Koping features young actors talking about parental mental illness. The stories have been taken from young people and re-enacted by the teenage actors. It is important if you are showing this video that you explain to the group that the participants are actors prior to showing the video.

We have often used this video to start discussions in the group. Questions to ask include: Which person's story did you relate to in the video?

If we were to make a video about what it's like to live with a parent who is affected by a mental illness, what would you want to put in it? What would be important to get across to people?

**Young Carer's DVD and video** – Produced in 2005 by Carer's Victoria, the young carer's video and DVD is a good resource for exploring caring issues. These resources are targeted to all young people who have a caring role and not solely to young people whose parent is affected by a mental illness. A number of PATS participants were involved in the development of the resources, so mental health issues are explored well in the resources.

Other recommended videos which PATS facilitators have used to create discussion:

- The Fisher King – psychosis/ grandeur
- A Beautiful Mind - schizophrenia
- About a Boy - depression
- Mr Jones
- Shine – anxiety disorder – people with mental illness have contributed a lot to the world.
- Benny and June – what is the difference between someone having mental illness and someone who is seen as a bit eccentric?
- I am Sam – parenting, separation, stigma

### **Songs for Discussion:**

- Harvey Danger – Flag pole sitter – Subject – psychosis and paranoia
- Match Box 20 – UNWELL – Subject - Mental illness
- Little Birdy – Relapse – recovery from mental illness

These are good songs to start off a discussion about mental illness. It's good to print off the words and have copies available for the group while they listen to the songs.

Discuss: Mental Illness can affect anyone. Lot of famous and creative people have mental illness. What do you think the song is trying to convey?

Songs are good to use as an introduction to a music activity night, or to get the group to try writing a song together.

## **Stigma**

Stigma is an important topic to cover in PATS and works well as a precursor or follow on from the Mental Illness Education Nights.



### **Word Association Activity – Mental Illness and Physical Illness**

Write the words Mental Illness and Physical Illness – on two sides of a large piece of butchers paper or on a white board.

Ask the group to brainstorm any words they can think of that are related to mental illness and physical illness. Things they have heard people say about people with mental or physical illness.

Eg. Crazy, mad, pshycho, looney.

Once you have filled the board or paper, ask the group to look at the two lists. What do they notice about the two lists of words. Is there a difference?

Highlight to the group whether there are more factual words on the physical illness side and whether there are more negative words on the mental illness side.

Ask the group why they think there is a difference?

Brainstorm or Discuss: What do you think it would be like if instead of having a mental illness, your parent was diagnosed with a physical illness eg cancer?

Questions for Discussion:

- How would you feel? About them, about the illness?
- How do you think other people would respond? Do you think you'd have the same kind of support? Same kind of reaction? Would you feel more inclined to tell people at school?
- Would it change the way you relate to your mum or dad?

Mention how when it's a physical illness, one that people understand, there can be more support – because mental illness isn't visible, it's harder to understand. The person appears ok, but may not be.

Also how we treat the person can be different. Would you expect someone with cancer to hurry up and get better? Would you tell them to pull their act together and get better?

Discussion about Recovery: Often we can have lots of expectations of people when they have a mental illness. Often you can feel like they are just doing it on purpose, that they are being lazy on purpose. Yet for some people, they have little control over their symptoms and the progression of the illness.

What can this mean for our expectations of them?

Whilst it's frustrating, getting angry at them is probably not going to be very helpful, as they may not be able to get better even if they want to. Recovering from mental illness is not as simple as just pulling their act together.

Like someone with cancer, there might be days when they are doing well, when they respond well to the medication and can get out and do things, but other days when they feel really rotten and may need more support and assistance.

Discuss what things help people get well? Eg correct diagnosis, the right treatment, medicine, doctor, time, rest, care and support

We can think the same about mental health.

There are similarities between mental health and physical health.

People are helped by the same sort of things eg. Rest, care, hospitals, medicine, doctors, friends, time

People with both physical and mental illness are helped by care eg. Being understanding and supportive, visits and contact, encouragement and knowing someone cares.

Illness is treatable and there are various treatments for both physical and mental illness. Most times people can be treated at home but sometimes they need to go to hospital.

A big difference is that you can't tell by looking at someone that they have a mental illness.

(Adapted from the Supporting Kinds in Primary School Program)  
Get permission from Rose for this.

Put the Myth work sheets in the Manual (from the original PATS manual)

## Myth Worksheets

It can be good to work through the worksheets on myths associated with mental illness. Check if the young people understand the factual information concerning each statement.

Ask the group: Has anyone been in a situation where you've heard people telling jokes or using the words that we brainstormed about mental illness? Have you seen examples in the media or on t.v. where mental illness is portrayed in a negative or stigmatizing way?

How did you react? Get angry, laugh with them.

Ask the group to share ideas about how they can tackle stigma?

## Definitions Of Stigma

Give out the stigma handout (adapted from SANE Australia). Ask SANE for permission to reproduce.

Encourage the group to keep their eyes open during the coming weeks for where mental illness is mentioned in the media. Encourage them to have a critical eye and look at the language which is used and how the message about mental illness is portrayed. Over the weeks, if people bring things in, discuss as a group.

## Famous People Activity

It's good to begin or end the session on Stigma by brainstorming the names of famous people they know who have mental illness.

For listings of Famous People Affected by Mental Illness check out

[www.stampoutstigma.org](http://www.stampoutstigma.org)

<http://www.schizophrenia.com/family/Famous>

[www.nami.org/helpline/peoplew.htm](http://www.nami.org/helpline/peoplew.htm)

## **Exploring Home The Place Where I Live**

Discussing the concept of home or the place where I live can be a good theme to explore in PATS. Many participants may have moved residences and homes many times. This may or may not be a consequence of their parents' illness.

You can do this as a discussion, asking the group the following questions. Or you can do it as an art activity in a number of ways.

### Drawing your home or the place where you live:

Ask the group what do you think of when you think of the word home? – Ask them to draw, or write this on a piece of paper.

Or you can ask the participants to draw the place where they live currently. Following their drawing you can ask the participants to share with the group what they have drawn. The following questions can be used to prompt discussion.

- What's your home like?
- Is it a place where you can relax,
- Somewhere you feel safe?
- Somewhere you can bring friends to?
- Somewhere that has a good feeling?
- What are the things that you wish your home was like? Had more of/ less of?
- Is there a place in your house that is yours?
- Do you have privacy?
- Does it change at different times?
- Who are the people who live in your house?

## Drawing your ideal bedroom

This activity is used to get the participants in touch with themselves, their dreams and to remove the focus from their parents' illness for a while. It can provide a lot of insight into the participants feelings and can also be a lot of fun.

Number of participants: Unlimited

Timing: This activity can take the entire PATS session (e.g., an hour and a half)

Suitable: Indoors / outdoors

Equipment: Paper, textas, paints, pencils, and any other decorative things (e.g., magazines, material, glitter, coloured paper etc).

### **What to do...**

Give each person a piece of paper. Ask them to draw what their ideal bedroom would be like. Tell them that there are no restrictions and it doesn't matter if what they draw is impossible. Ask them to use their imagination and to draw what they would wish.

Make sure you allow enough time for the participants to really explore their ideas about their ideal room and to get it down on paper. It's a good idea to have music playing in the background to foster their creativity and make it a really positive atmosphere.

Once the drawings are complete, have each person present their room to the rest of the group, explaining what they have drawn, and why they have drawn it. Encourage group members to comment on the drawings as well, such as what they think the drawing says about the person who has drawn it.

## My housing story

This can be an art activity or discussion based. Give each participant a piece of paper and paints or textas. Ask them to spend a few minutes drawing the different places they have lived in, in their life. Some young people might have lived in the one house, others might have lived in lots of different places. When they have finished ask them to share their house story with the group.

Questions which can be asked at the end:

- What is it like if you have to move house a lot of the time? How does it impact on your friendships, schooling?
- What are the different reasons that people might have to move a lot?
- What is the favourite place that you have lived? What is the place you have least liked?

- What are the different ways you have coped with having to move lots of times?
- What are the positive aspects of moving house?
- What are the negative aspects?
- How do you create or find your own space each time you move?

For some young people they might want to talk about their experiences with housing services, real estate agents etc.

## What I want in my home activity

Resources: Large piece of butchers paper

Textas and pens

Draw a large circle on the piece of paper.

Ask the group to brainstorm all the things that they think are important to have in a home and to write or draw them inside the circle.

Ask them to brainstorm and write outside the circle all the things that they think should not be in a home.

Discussion: Once the brainstorm has happened discuss with the group:

What were the things that you were able to agree on? Were there things that you disagreed on or were different for each of you?

Discuss safety in the home. What can you do if you don't feel safe in your home?

Look at the list and discuss what are the things that are within your control? What things are outside of your control?

## Friends

Reflection Activity:

Give each participant a piece of paper and textas.

Ask the participants to draw a number of circles inside each other on their page. Ask them to write the different friendships that they have. In the middle put the people that they are closest to and the ones that are less close to further out.

Potential Questions for Discussion

- How did you decide on who went in the middle? Who was most important and why?
- What constitutes a good friend?
- What do they do for you? What do you do for them? Is it a two way relationship or one way?
- Has your mum's illness affected your friendships? In what way? Eg. Moving school lots or missing school.
- Does your parents' illness affect the way you interact with people?

- Eg. Not relating to them.
- Do you tell them about your mum? At what point in your friendship?
- Has anyone had bad experiences with friends or other people's reactions to their parent's illness?
- Do you have ways that you suss out whether or not you are able to tell someone about your parent's illness?
- Are you the type of person who tells people everything and trusts everyone you meet and then perhaps regret doing that later? Or do you not tell anyone anything and keep it to yourself?

You could do a trust exercise and then discuss:

- What's necessary for you to be able to trust people?
- Are there certain secrets about your family that you don't tell? Have there been stories that you've made up so they don't know?
- Are there challenging things people have said? Myths about mental illness that need challenging?

## Problem Solving

Using Hypothetical stories which are relevant to your participants can be a good way of exploring different ways young people can manage different situations which may occur if their parent is unwell. Using third person scenarios can be less threatening than asking the participants to share personal situations that they have experienced.

### The Balloon Game

To make the discussion of hypothetical situations interesting, it can be fun to cut up the scenarios and place them in balloons (one per balloon). You can blow up the balloons with the scenarios inside. Then throw a few balloons in the air and ask the participants to try to keep the balloons from hitting the ground. The group needs to work together to keep the balloons in the air. If a balloon hits the ground. The game stops and the last person to touch that balloon must pop it and then read out the scenario which is inside to the group. The group can then discuss:

- How would that person be feeling?
- What could they do?
- Where could they get support and assistance from?

Pick scenarios from the ones listed below or make up some of your own. It's good to think about your participants and choose scenarios which might be relevant to their situation to encourage discussion.

Your mum or dad is talking really fast, and their ideas are hard to follow

Your mum or dad is talking about the same thing over and over and over and not letting you change the subject.

Your mum or dad is telling you something that is really strange – eg. Saying there are spiders all over them and they seem really anxious and scared.

Your mum or dad has been lying on the couch for two days. They haven't got dressed and are really sad. They've stopped looking after themselves – won't shower or eat.

Your mum or dad has been drinking a lot and is getting really agro – shouting and yelling.

Your mum or dad wants to go shopping with you. They are really excited and say they are going on a spending spree. You know that rent is due this week and they don't usually have much money in rent week.

Your mum or dad is really changeable in their mood at the moment. Yesterday they told you off for being at home. They wanted you to get out of the house. Today they have asked you to stay home and seem like you are their best friend. They seem to have forgotten about yesterday.

Your mum or dad is really forgetful at the moment. Whenever you talk to them they seem really vague and you aren't sure that what you're saying is registering.

Your mum or dad has been totally ignoring you. They don't speak to you, or talk to you. You used to do things together but now they don't want to spend any time with you at all.

## Closure Activities

It is important that at the end of each night, there is an activity which brings the group together and provides an opportunity to reflect on how the participants have felt that evening or what they have got out of the discussion. This is important for containment and ensuring participants go home feeling ok. It also assists in reinforcing the message/s of the evening and can also be a way of obtaining feedback from the participants of how they are finding the group.

Resources:

- St Luke's Bear Cards
- Photo language Cards
- Feelings Market Place Cards

Similar to the check in activities, you can spread the word or photo cards around the room and ask participants to pick a word or photo which represents what they have got out of the evening or how they are feeling at the end of the session compared to the start of the session.

Discussion based closure can work well. Ask your participants to think about the discussion and activities they have done that session. You can then ask the following questions:

What is something you are taking away with you from tonight's session?  
What is it like for you being in this group and hearing each other's ideas?

You can ask the group to reflect on the week ahead of them. Ask them "what's one thing I can try to do differently this week that I haven't done before". Or ask "what is something nice I can do for myself this week".

You can use anonymous reflections as a way of closure for the participants. Give each person a piece of paper and a pen and ask them to write a response to the following questions:

- In tonight's PATS group I felt...
- What I have learnt tonight is...
- What I am taking away from tonight is ...
- 

The pieces of paper can be collected up and read out to the group. The purpose is not to try and work out who said what, but to get a sense of how the participants are going and for the members to see how each of them is feeling about being in the group.

## Relaxation Exercise

Some groups have found it useful to incorporate a relaxation exercise into the end of their PATS sessions as a regular occurrence. This has two purposes, to help relax and bring awareness to the participants of their bodies and how they are feeling. And also to teach relaxation skills.

## Positive Affirmations

At the completion of the 8 weeks it is important to provide the opportunity for the group to reflect on their journey in PATS and to provide feedback to each other.

Giving positive affirmations can be a nice way to end the group. This can be done by:

1. Each person receives a piece of paper with their name on the top of it. This paper is passed around the group for each member to write a positive message on. Once one person writes something, they fold the paper down in concertina fashion and pass it on to the next person to write something without seeing what the previous person has written. This continues until each person has received a written positive affirmation from all group members. Your participants then have a lasting message from everyone in the group.
2. A great resource to use for doing positive affirmations are the St Luke's Strength cards, which are coloured cards with different strengths highlighted. You can have your participants pick a card for another group member, explaining what they believe is a strength they have noticed in them throughout the program.

### 3. Letter to Myself

Give each participant a piece of paper and a pen. Ask them to write a letter to themselves about how they are feeling at the completion of PATS. What have they got out of the group and what is something they want to remember and try and do for themselves or their family after taking part in the group. Give each of the participants an envelope and ask them to place their letter in it when it is finished and to address it to themselves. Collect up the letters and tell them that you will mail these out to them in 8 weeks time as a reminder of the group.

## Warm Ups / Ice Breakers

### Whiz, Bang, Bounce

Number of participants: Minimum 5, no limit

Timing: 5 - 10 minutes

This is a word game which requires no equipment or physical movement. Can be played indoors or outdoors.

#### **How to play...**

This game is played with everyone in a circle. There are three words which are passed along the circle. These being whiz, bang and bounce. To begin choose which direction the words are going to be passed.

When someone says “whiz” they pass the word on to the person next to them. If “bang” is said the direction is reversed and the words are passed back the way they came. If “bounce” is stated the next person is skipped. Any of the three words can be stated by those playing. (e.g., you may have three people say “whiz” before someone says “bang” and it is passed back the way it came).

The idea of the game is to try and confuse participants so that they speak at the wrong moment. Try and get the passing happening as fast as you can to add to the confusion and hilarity.

When someone speaks at the wrong moment they can drop out of the game until everyone is out and then join in a new round. Alternatively you can add up the number of times people make mistakes and have a tally score for each person. This number can then be used in your session as possibly the number of times that each person has to contribute to the discussion, or the number of things that the participants have to say about themselves to the group. (Source unknown)

### Gotcha

This game is great for filling in a few minutes or for producing laughter and getting the group interacting together.

It can be played indoors or outdoors. No equipment is required.

Number of participants: Minimum 4, no limit

Does require physical mobility in arms.

#### **How to play...**

Form your group into a circle, facing inwards and standing (or sitting) side by side. Ask everyone to hold out their right hand to their side (about shoulder height) with the palm facing upwards. Next get them to extend their index finger on their left hand and place the tip of it on to the palm of the person’s hand on their left. (A good way to introduce this position is to tell them to

imagine that they are snobby waiters who are inspecting the food which the waiter next to them has prepared! )

The group is now ready to start. When you say “GO” everyone tries to catch the finger of the person on their right side. At the same time, they are also trying to avoid being caught by the person on their left. Sounds easy?? Give it a go!

Once the group has mastered their right hand, reverse hands so that the left palm is facing up and the right finger is pointing down. (Collard, 1996, p. 11)



## Celebrity Heads

Suitable: Indoors or outdoors

Equipment: Sticky labels with names of famous people or characters written on them (e.g., Madonna, John Howard, Shane Warne, Bart Simpson).

Numbers: 3 – 15 people

Timing: Minimum 15 minutes, can go as long as you want.

This is a popular game and is based on the game of this title which was originally played on “Hey Hey It’s Saturday”.

### **How to play...**

Three people are chosen to sit at the front of the group facing everyone. They are each given a sticky label to place on their forehead which they are not allowed to read. Upon this label is written the name of someone famous.

Each player takes it in turn to ask questions of the rest of the group to work out whose name is on their label. They are only able to receive a yes or no answer from the group members. If the answer to a question asked is “yes”, they get to ask another question. They can keep asking questions until they receive a “no” answer. Then the next person is able to ask a question. Questions are asked until the participants are successful in working out who their person is. Then a new group of people can have a go.

Hints: Assess your group as to the complexity of names on the label. Stick to well-known names for those who may find it difficult. To make the game a little harder, you may like to put a limit on the number of guesses people are allowed to have. Also introduce hints for those who seem to be struggling.

Variation: You can play this game with everyone receiving a sticky label on their back. They then walk around the room asking questions of each other to work out who is on their label. As before they can keep asking questions of the person they are speaking with as long as they receive a “yes” answer. Once they receive a “no” they must move on and ask someone else a question. Once someone has worked out who their person is you can get them to sit down. This is a great variation for larger groups and to get people mixing.

## Song Game

This is a great team work game.

Number of participants : Minimum 4, no limit - the more the merrier.

Suitable: Indoors

Timing : Minimum 10 minutes

Equipment: Paper and pens for each group

Physical requirements: One group member needs to be able to write.

### **How to play...**

Split your group up into teams. For groups with less than ten people, two teams is ample. For larger groups, you can have up to ten people in each team.

As a leader you need to say a word, for example, “dream”. Each team needs to separate to different locations and in four minutes must think of as many songs as possible that have the word “dream” in their lyrics (e.g., Dream Lover).

After the four minutes the teams come back together and take it in turn to share the songs which their team have come up with. To share their song, the team must sing the line from the song which mentions the word “dream” (e.g., for Dream Lover they would need to sing “dream lover come rescue me”). All group members of the team must take part in the singing.

If another team has that song on their list, they must cross it off. If no other team has the song listed they get a point. Keep going around the groups until there are no songs left on the lists. Add up the scores to see which team came up with the most songs. Then you can decide on another word and go off again.

NB: The definition of a song can include nursery rhymes, commercial jingles and television theme songs. (Made-up songs are not allowed!) In order for a team to gain a point someone on another team must recognise the song. (Source unknown)

## Group Charades

This activity is great for team work and is lots of fun. It's a variation on traditional charades and adds a bit of healthy competition in your group.

Resources: White board and pen,  
or words written on paper.

### **How to Play**

Split your group into two teams. Ask for one volunteer from each team to come out the front of the group. These two people stand facing their team members.

Behind these two volunteers, you write on the whiteboard a word or statement. The two teams must on the word go start to act out that word, using the symbols of charades. All team members must be involved in the acting.

The two volunteers who are out the front try to guess what the word is that they are acting out. Whichever person says the word first, gets a point for their team.

Once a point is given, the person out the front is changed for each team and a new word is written on the board. It's useful to play the game for the first team to five or ten points.

Potential words to act out:

Mosquito, parachute, wedding, hung over, busting for a pee, pilot, champagne, winner, baby, fisherman, cool, lazy. Teapot, tree, Congratulate, rain, balloon, musician, dog, farting, bridge, in love.

## The What Are You Doing Game?

This is a drama game which gets your group active and is good for developing the spontaneity and creativity of your participants.

### **How to Play**

Have your group stand in a circle. The leader steps into the middle of the circle and starts acting out some kind of action. Eg. Brushing their hair, surfing, jogging on the spot. The person to their left is encouraged to ask "What are you doing?" Instead of answering with what you are doing, you answer with another action eg. "I'm dancing". You then step out of the circle and the person who asked the question jumps in and starts acting like they are dancing. The person next to them then asks the question what are you doing? And the person in the middle gives a different action and steps out of the circle for them to take their place and act out what they have said.

This game usually results in lots of laughs and as the action moves around the circle, the group tend to get more creative with their responses. It is often good to do two rounds of this activity.

## Background into STIGMA

Stigma is an attempt to label a group of people as less worthy of respect than others. Stigma against people with a mental illness often involves inaccurate and [offensive representations in the media](#), portraying them as violent, comical or incompetent.

Some people affected by mental illness say that the [effects of stigma](#) can be as distressing as their symptoms.

Stigma makes recovery harder. Stigma can erode self-confidence and make people affected by mental illness shy away from mixing with people – fearing the misunderstanding and ridicule they see in the media.

### 🚫 Stigma promotes discrimination

Stigma makes it difficult to find accommodation and work. The fear and ignorance about mental illness encouraged by media misrepresentation contributes to discrimination.

### 🚫 The effect on family and friends

It is hurtful and upsetting to see somebody you care for being mocked.

What you can do about stigma :

1. Get your facts right  
Be accurate. If the report can't be verified, it can't be followed up.  
Record how it was offensive to people with a mental illness, the source and the date.
2. Report to SANE StigmaWatch make a report to SANE [StigmaWatch](#).  
<http://www.sane.org/content/view/31/69/>
3. Make a complaint

You can contact the newspaper, radio or TV station. Write a letter, email or fax including:

- The facts: Summarise the stigma and exactly when and where it appeared.
- Write clearly: Make your writing clear and legible.
- Be concise: Don't ramble on. Media people are busy. They're more likely to deal promptly with a letter that's to the point.
- Be polite: It's tempting to write an angry letter. However a polite letter – 'I was saddened to see . . .' is more likely to get a sympathetic response.
- Remember most cases of stigma in the media arise because of thoughtlessness rather than malice. [www.sane.org](http://www.sane.org)

## Resources

Rohnke, K. Silver Bullets: A guide to initiative problems, adventure games and trust activities. Project Adventure Inc, USA, (1984)

Collard, M. No Props: Great games with no equipment. Project Adventure Australia, (1996)

Feelings Marketplace Cards. Effectiveness Resources International.  
P.O. Box 154, Medway, MA 02053

(The resources listed above are all available through Project Adventure which is located in View Bank in Victoria.)

Bedford, W. and Robinson, J. The Great New Book of 'Life Be in it' Games. Rebound Associates Pty Ltd, Victoria, (1996)

St Luke's Strength Cards. P.O. Box 315, Bendigo, Victoria 3552

The Games Booklet: Focus Special 45. Newsletter of the Diocesan Youth Apostolate Team. Unpublished (1987).