



Delivering the Life**Moves** programme

## **A guide for professionals**

*LifeMoves provides structured peer support that empowers people with acquired neurological conditions*

## Overview

LifeMoves was developed for neurological clients by The Royal Melbourne Hospital and delivered at the Royal Park campus of the hospital from 2002-2009. It has now moved into the community and is delivered by the not-for-profit organisation Peers Inspiring Peers.

LifeMoves provides structured peer support that empowers people with acquired neurological conditions. This support is provided through the LifeMoves programme, a multi-session programme over 8 weeks involving experienced facilitators who themselves have an acquired neurological condition.

LifeMoves structured peer support is based on Vision Australia's Quality Living Group Facilitation training programme and its model of client-directed group work and empowerment principles.

A client brochure is available on request.

## Benefits of patient Peer support

### The research says...

Dennis, C.L., Peer support within a health care context: a concept analysis. *Int J Nurs Stud*, 2003. **40**(3): p. 321-32.

- The rationale for incorporating peers in support-enhancing interventions rests on the notion that peers understand the target population's situation (p 326)
- Potential Health Outcomes of peer support include augmenting social network, preventing health concerns, reinforcing help-seeking behaviours, decreasing barriers to care, encouraging effective coping, promoting social comparisons, increasing self-efficacy, aiding self-esteem (p 325)
- Founded on this mutual identification, shared experience, and a sense of belonging, there is evidence to suggest that peer support positively affects psychological and physical self outcomes (p 326)
- Peer support can influence health outcomes by:
  - Decreasing isolation and loneliness,
  - Swaying health practices and deterring maladaptive behaviours or responses,
  - Promoting positive psychological states and individual motivation,

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- Providing information regarding access to medical services or the benefits of behaviours that positively influence health and well-being, and
- Preventing the risk for, progression of, and recovery from physical illness (p: 327).

Doull, O'Connor, Robinson, Tugwell, Wells, Peer Support strategies for improving the health and well-being of individuals with chronic diseases (Protocol). The Cochrane Collaboration, 2006, Issue 2: p. 1-8.

- Peer support is becoming an increasingly important strategy in healthcare environments that are facing shrinking financial and human resources (p2)
- Peer support strategies are also uniquely able to offer individuals support and advice that is grounded in experiential knowledge and is specific to a particular condition (p2)

## Evaluation

In 2006, a qualitative evaluation of the LifeMoves programme was completed as part of the DHS Improving Care for Older People Collaborative (2006). The evaluation found that participants of the LifeMoves programme experienced:

- An increased sense of support;
- Reduced feelings of isolation; and
- Increased confidence and sense of autonomy and control (empowerment).

Further studies are being conducted to evaluate the functional and emotional health, health care utilisation and cost-utility outcomes of people participating in the LifeMoves peer-support programme. Such quantitative research is essential to evaluate the programme, with a view to possibly extending its application to other conditions and patient populations. Structured research studies will also contribute to the establishment of best practice guidelines in peer support programmes, and help to educate professionals and the public about the benefits and outcomes.

## LifeMoves summary

Many patients experience significant social and emotional consequences as a result of their brain injury: including anxiety, major changes in identity and relationships, loss of self esteem and diminished sense of autonomy. Given this, they need guidance, courage, strategies to cope and an increased sense of control and meaning to their lives.

The rationale for the LifeMoves programme is that people who share similar experiences and challenges best facilitate healthy psychosocial adjustment.

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The by-lines for LifeMoves are...

Structured patient peer support on your rehabilitation journey.

Talking and sharing activities with someone who has been through a similar experience can make all the difference.

You are unique but not alone.

## Values:

The LifeMoves services operate under the following values:

- Empowering
- Supporting
- Partnering

## You will see us...

### Empowering

- Working with our peers as equals
- Modelling hope for the future
- Encouraging our peers to set and reach their own goals
- Celebrating successes and achievements

*Therefore you will not see us 'dishing out' solutions, solving all problems or being 'The Expert'*

### Supporting

- Actively listening to everyone's ideas, thoughts and opinions
- Sharing our experience where it may assist others
- Encouraging others to explore new possibilities
- Acknowledging that life is a journey
- Looking after ourselves and seeking help when we need it

*Therefore you will not see us taking 'air time'*

### Partnering

- Respecting each other and embracing diversity
- Being open and honest in all our dealings
- Working collaboratively to achieve common goals
- Recommending professional expertise where appropriate

*Therefore you will not see us being competitive or giving advice outside of our expertise*

## 8 week structured group programme (community based)

### Programme content

*LifeMoves* includes an eight-week structured group programme that aims to facilitate psychosocial adjustment in people who have an acquired neurological condition.

The programme consists of eight weekly two-and-a-half hour sessions of client-generated discussions that are facilitated by trained peer support workers.

*LifeMoves* is designed to augment a traditional rehabilitation approach by targeting the social and emotional consequences of neurological trauma. The objectives of the programme are to:

- enhance personal development and quality of life for clients;
- increase client's feelings of self-confidence, self-esteem and self-worth;
- reduce depression/anxiety;
- reinforce gains in functioning;
- reduce length of community rehabilitation episodes; and
- reduce frequency of readmission rates to community rehabilitation services for psychosocial support.

The content of each *LifeMoves* programme is unique - developed based on participant generated needs, expectations and abilities. An example programme might include:

#### Week One:

- Group Guidelines
- Current group challenges and needs

#### Week Two:

- Topics for programme
- Changes since illness and what has helped
- Values

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### **Weeks three to eight:**

Various topics as selected by participants, which may include:

- Coming to terms with the change
- Hope for the future
- Loss and grief
- Managing fatigue
- Community resources
- Dealing with emotions
- Managing others and relaxation
- Returning to work
- Coping with Incontinence
- Communicating with family and friends.

Speakers are invited into the programme as required by participants.

### **Group programme participation criteria**

Participants in LifeMoves programmes shall:

- Have a diagnosis of an acquired neurological condition
- Live in any catchment area (as long as they provide their own transport)
- Be over 18 years of age
- Communicate in or understand English (interpreters are not able to attend)
- Have adequate cognition and capacity to participate (at some level) in a group conversation (clients with acute aphasia welcome)

People at risk of challenging behaviours such as verbal and physical abuse or sexually inappropriate behaviours need to be discussed with the Coordinator.

Carers are excluded from LifeMoves (to ensure clients may speak freely).

At present clients needing interpreters are unable to participate but we intend to accommodate these clients in the future.

## Target clients

LifeMoves is targeted at clients who have adjustment issues with their neurological illness. Adjustment issues may be indicated by:

- Low mood or depression
- Anxiety
- Setting unrealistic goals
- Illness a major life changing event
- Having sustained significant loss of function
- A withdrawn or argumentative personality
- Low eye contact
- Angry outbursts
- Relationship issues
- Family feedback
- Low motivation.

Think twice before assuming your clients won't like groups:

- LifeMoves is **not** group therapy
- Most participants say that they don't like groups and then are pleasantly surprised

Be mindful that when we judge whether a client may like peer support, we could be wrong! Help clients make an informed decision (clinicians have previously asked clients to attend two weeks and decide if they want to stay). Alternatively you may want to hear what former participants would say...

## How to recommend to target clients

We have asked former participants how they would recommend the group programme and they say:

- Meet people with similar problems
- Fills in the time of day

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- No bloomin' experts
- Helps me think of solutions for myself
- Share different ideas with others who have been there
- Opportunity to practice speaking in a soft forum
- Develop confidence to be comfortable with others
- There is no expectation that you have to talk (you can just listen for the 8 weeks)

### Group programme facilitation

Nina Smith, Peers Inspiring Peers Executive Director who has 10 years advanced facilitation experience, facilitates or supervises all programmes. Nina is also a former LifeMoves participant and has a neurological illness.

The programme is co-facilitated by a trained volunteer and previous participants will attend the programme as guest speakers. All volunteers have a neurological condition.

### Venue

LifeMoves group programmes are held at community venues with disability access in a convenient location, for example, community library meeting rooms.

### Dates

Please contact our LifeMoves Relationship Coordinator (details below) for information on the next programme dates.

### Cost

There is currently no cost for participation in this programme.

### Morning tea

Morning tea or afternoon tea and breaks will be provided.

### Disabled facilities

Yes

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## Transport

Clients are required to make their own way to the venue.

Please speak directly to the Coordinator if you have any concerns regarding the financial hardship of specific individuals.

## Lifemoves volunteers

The volunteers co-facilitate LifeMoves group programmes. They all have a neurological condition and have attended a LifeMoves programme. In addition they have participated in 4 weeks of patient peer support training. The specific peer support skills training includes:

- Roles, boundaries and confidentiality
- Peer relationships and peer support skills
- Values, beliefs, and attitudes
- Valuing diversity
- Communications skills – active listening, questioning and summarising
- Self-care

The volunteers also attend quarterly ongoing training in peer support skills. All volunteers receive supervision after each client service.

## Referral process

Please email our LifeMoves Relationship Coordinator (details below) for a referral form.

## Friends for LifeMoves

Friends for LifeMoves is a new network available for participants of LifeMoves after their programme. Its aim is to continue to inspire each other on the rehabilitation journey.

## Contacts

If you have additional questions please contact:

LifeMoves Relationship Coordinator -Florence Kingsley-Matthews

[florence@peersinspiringpeers.org.au](mailto:florence@peersinspiringpeers.org.au)

Ph: 03 9376 6669 / 0412 178 507

or

Peers Inspiring Peers Executive Director -Nina Smith

[nina@peersinspiringpeers.org.au](mailto:nina@peersinspiringpeers.org.au)

Ph: 0412 647 690