CHCMHS011
Assess and promote social, emotional and physical wellbeing

Release 1

Learner guide

Aspire learning resources

Assess and promote social, emotional and physical wellbeing

Learner guide

Aspire Version 1.2

Aspire
learning resources

Version control and modification history

Version	Release date	Modification
Release 1, version 1.1	April 2017	First release
Release 1, version 1.2	February 2019	Minor corrections as part of our continuous improvement program

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Contents

Before you begin

This learner guide is based on the unit of competency *CHCMHS011 Assess and promote social, emotional and physical wellbeing*, Release 1. Your trainer or training organisation must give you information about this unit of competency as part of your training program. You can access the unit of competency and assessment requirements at: www.training.gov.au.

How to work through this learner guide

This learner guide contains a number of features that will assist you in your learning. Your trainer will advise which parts of the learner guide you need to read, and which practice tasks and learning checkpoints you need to complete. The features of this learner guide are detailed in the following table.

Feature of the learner guide	How you can use each feature
Learning content	▶ Read each topic in this learner guide. If you come across content that is confusing, make a note and discuss it with your trainer. Your trainer is in the best position to offer assistance. It is very important that you take on some of the responsibility for the learning you will undertake.
Examples and case studies	▶ Examples of completed documents that may be used in a workplace are included in this learner guide. You can use these examples as models to help you complete practice tasks and learning checkpoints. ▶ Case studies highlight learning points and provide realistic examples of workplace situations.
Practice tasks	▶ Practice tasks give you the opportunity to put your skills and knowledge into action. Your trainer will tell you which practice tasks to complete.
Video clips	▶ Where QR codes appear, learners can use smartphones and other devices to access video clips relating to the content. For information about how to download a QR reader app or accessing video on your device, please visit our website: www.aspirelr.com.au/help
Summary	▶ Key learning points are provided at the end of each topic.
Learning checkpoints	▶ There is a learning checkpoint at the end of each topic. Your trainer will tell you which learning checkpoints to complete. These checkpoints give you an opportunity to check your progress and apply the skills and knowledge you have learnt.

Foundation skills

As you complete learning using this guide, you will be developing the foundation skills relevant for this unit. Foundation skills are the language, literacy and numeracy (LLN) skills and the employability skills required for participation in modern workplaces and contemporary life.

The following table outlines specific foundation skills noted for your learning in this learner guide.

Foundation skill area	Foundation skill description
Learning	▶ Understanding your job role, organisational procedures and legal responsibilities ▶ Managing your work and seeing how well you are going and making goals for yourself at work ▶ Seeking professional development opportunities for continuous improvement
Reading	▶ Understanding how documents are presented and being able to navigate through documents ▶ Understanding industry- and job-specific terminology ▶ Interpreting key information in relevant documents ▶ Understanding routine workplace checklists and documentation
Writing	▶ Planning, drafting and writing reports and documents ▶ Communicating through written letters, email and online ▶ Recording progress; reporting incidents
Oral communication	▶ Clarifying instructions ▶ Providing information ▶ Supporting others through encouragement, negotiation and conflict resolution ▶ Using body language to model desired behaviour and responding to others' body language
Numeracy	▶ Calculating costs, weights, measurements of height and distance ▶ Interpreting measurements
Teamwork	▶ Working well with other people by cooperating, collaborating, encouraging and building rapport
Planning and organising	▶ Planning your workload and commitments ▶ Implementing tasks ▶ Completing work on time ▶ Knowing how to deal with hazards and risks
Making decisions	▶ Understanding and applying decision-making processes ▶ Reviewing the impact of your decisions
Problem-solving	▶ Identifying problems ▶ Working out how to fix a problem using problem-solving processes and reviewing the outcome
Innovation and creation	▶ Recognising opportunities to develop and apply new ideas ▶ Generating ideas by thinking of new ways to do something ▶ Making suggestions to improve work

Foundation skill area	Foundation skill description
Technology and digital literacy	▶ Efficiently using digitally based technologies and systems correctly and safely ▶ Accessing, organising and presenting information ▶ Using equipment correctly and safely

What do you already know?

Use the following table to identify what you may already know. This may assist you to work out what to focus on in your learning.

Topic	Key outcomes	Rate your confidence in each section
Topic 1 Assess the person's wellbeing	1A Inform the person about social and emotional wellbeing, holistic practice and services	☐ Confident ☐ Basic understanding ☐ Not confident
	1B Explore aspects of wellbeing to identify strengths and strategies that keep the person strong	☐ Confident ☐ Basic understanding ☐ Not confident
	1C Recognise own beliefs, power and behaviours to ensure non-judgmental practice	☐ Confident ☐ Basic understanding ☐ Not confident
	1D Respect the person's choices and boundaries when discussing topics	☐ Confident ☐ Basic understanding ☐ Not confident
	1E Identify resources to better understand the person's social and emotional wellbeing	☐ Confident ☐ Basic understanding ☐ Not confident
	1F Determine who the person wants to involve in their plans and support	☐ Confident ☐ Basic understanding ☐ Not confident
	1G Identify, negotiate, obtain and document consent	☐ Confident ☐ Basic understanding ☐ Not confident
Topic 2 Promote physical wellbeing	2A Discuss with the person their health and physical wellbeing	☐ Confident ☐ Basic understanding ☐ Not confident
	2B Discuss health issues or risks and seek professional advice	☐ Confident ☐ Basic understanding ☐ Not confident

Topic	Key outcomes	Rate your confidence in each section
	2C Identify last health check and facilitate referrals or appointments	☐ Confident ☐ Basic understanding ☐ Not confident
	2D Arrange health assessments or medication reviews based on needs	☐ Confident ☐ Basic understanding ☐ Not confident
	2E Develop strategies to improve physical health	☐ Confident ☐ Basic understanding ☐ Not confident
	2F Promote healthy living habits using credible information sources	☐ Confident ☐ Basic understanding ☐ Not confident
Topic 3 Promote social wellbeing	3A Identify and map the person's social support network	☐ Confident ☐ Basic understanding ☐ Not confident
	3B Assess the level of social inclusion, exclusion or isolation	☐ Confident ☐ Basic understanding ☐ Not confident
	3C Promote community participation to extend person's social network	☐ Confident ☐ Basic understanding ☐ Not confident
	3D Determine current social activity and desire to increase participation	☐ Confident ☐ Basic understanding ☐ Not confident
	3E Support and regularly review social inclusion strategies	☐ Confident ☐ Basic understanding ☐ Not confident
Topic 4 Promote emotional wellbeing	4A Identify emotional strengths, challenges and triggers	☐ Confident ☐ Basic understanding ☐ Not confident
	4B Identify activities or people that promote emotional strength and wellbeing	☐ Confident ☐ Basic understanding ☐ Not confident
	4C Develop strategies to address emotional challenges and promote emotional wellbeing	☐ Confident ☐ Basic understanding ☐ Not confident

Topic	Key outcomes	Rate your confidence in each section
Topic 5 Promote cultural or spiritual wellbeing	5A Identify preferred cultural and/or spiritual values, beliefs, traditions and practices	☐ Confident ☐ Basic understanding ☐ Not confident
	5B Identify cultural and spiritual needs and activities or changes	☐ Confident ☐ Basic understanding ☐ Not confident
	5C Identify resources required to introduce these changes	☐ Confident ☐ Basic understanding ☐ Not confident
	5D Implement cultural and spiritual strategies and access resources	☐ Confident ☐ Basic understanding ☐ Not confident
Topic 6 Review the person's wellbeing	6A Celebrate progress and identify new directions and strategies	☐ Confident ☐ Basic understanding ☐ Not confident
	6B Respond flexibly and use contingency plans	☐ Confident ☐ Basic understanding ☐ Not confident
	6C Seek specialist expertise according to the person's needs	☐ Confident ☐ Basic understanding ☐ Not confident
	6D Evaluate service provision and act on feedback from stakeholders	☐ Confident ☐ Basic understanding ☐ Not confident
	6E Reflect on and improve own practice	☐ Confident ☐ Basic understanding ☐ Not confident
	6F Engage in collaborative record keeping	☐ Confident ☐ Basic understanding ☐ Not confident

Topic 1

In this topic you will learn how to:

1A Inform the person about social and emotional wellbeing, holistic practice and services

1B Explore aspects of wellbeing to identify strengths and strategies that keep the person strong

1C Recognise own beliefs, power and behaviours to ensure non-judgmental practice

1D Respect the person's choices and boundaries when discussing topics

1E Identify resources to better understand the person's social and emotional wellbeing

1F Determine who the person wants to involve in their plans and support

1G Identify, negotiate, obtain and document consent

Assess the person's wellbeing

Supporting a person's health and wellbeing is a crucial aspect to working in community services. To do this effectively, you need to understand the person's mental and physical health status. Conduct assessments to accurately understand all aspects of the person's wellbeing.

Assessments can be formal and informal. They should be holistic, in that they consider all aspects of a person's life. Ensure that assessment approaches are always person-centred and respectful.

1A Inform the person about social and emotional wellbeing, holistic practice and services

In the past, medical models of care focused on the person's illness or presenting condition and the need for care and diagnoses. Treatment was often given without consultation with the person and without consideration of their social and emotional needs and preferences.

Community services now aim to maintain a person's integrity, treat the person with respect and provide services that meet the person's individual needs and preferences. Service philosophy now acknowledges that all people have the same rights – service providers must respect the individuals' right to be informed, to have their privacy protected, and actively participate in following their own interests by making their own choices in regards to their health. As a community services support worker, you must inform the person about all aspects of the assessment before proceeding.

Holistic wellbeing

Wellbeing is the term used to describe a person's general feeling of satisfaction with, or pleasure in, their daily life. Wellbeing is the average of a person's daily experiences, not just how they feel at one point in time.

When assisting or supporting a person to select services and programs, it is essential to give attention to all areas of their life so that you are assisting the total or whole person. This is called holistic wellbeing.

Discuss the person's wellbeing so that they can see the links and interactions for themselves. Working together, you can identify ways in which these needs can be taken into consideration.

The holistic view of wellbeing is the combination of a person's:

▶ physical needs

▶ social needs

▶ emotional needs

▶ cultural or spiritual needs.

Support holistic health

In many instances what you do to support a person in maintaining good health is determined by your organisation's policies and procedures as well as the person's care plan. A well-developed plan should encourage the person to identify positive things they can do for their wellbeing and actively involve them in achieving these goals.

Processes and actions that help support good health in a person include:

▶ assessment
▶ care plan development
▶ care plan implementation
▶ care plan review.

Principles and practices: holistic wellbeing

An improvement in one area of wellbeing will almost always lead to improvements in other areas too. For example, if you can help a person improve their health they can benefit across other areas of their life too and improve their general wellbeing.

To support the person to improve their holistic health and wellbeing, you need to understand the principles and practices of holistic health.

Holistic practices
Practices should be collaborative Work with the individual as well as other health professionals to understand the full extent of the person's wellbeing.
Take a strengths-based approach Rather than focusing on the person's illness, and their problem areas, focus on the person's strengths and existing resources.
Maintain confidentiality Always protect the person's confidentiality, in line with the *Privacy Act 1988* (Cth). Obtain consent from the person before sharing personal information with relevant health professionals.
Practise duty of care Always prioritise the person's safety, and do everything in your ability to support their wellbeing.
Respect rights The person has the right to be informed. They have the right to confidentiality, the right to freedom, and to equal and fair treatment. Do not discriminate against the person.

Principles and practices: social wellbeing

Social wellbeing is the strength and quality of a person's relationships. Relationships can be one-on-one, such as friendships, family or significant others. Relationships may also be community-based; for example, does the person feel integrated with their community?

Barriers, such as communication barriers, may inhibit a person's social wellbeing. If a person cannot communicate with others in their community, for example, they may be socially isolated, and may not be able to participate in community activities.

Social wellbeing may also be affected by lack of social skills, such as conflict management skills.

Principles and practices: emotional wellbeing

Chemical interactions, a person's thought processes and a person's circumstances impact emotional wellbeing. For example, a person's life history, financial position, living arrangements and physical health may alter the way they view the world, their role within it and their place in society.

Barriers to emotional wellbeing may include financial stress, relationship problems, mental health issues, homelessness, drug and alcohol addiction and trauma. Determine the person's emotional wellbeing by talking to them, their family or their health professionals.

According to Maslow's hierarchy of needs, people have a range of needs, which may impact emotional wellbeing.

Self fulfillment needs

Self actualisation:
Morality, creativity, spontaneity, problem-solving, lack of prejudice, acceptance of fact

Esteem:
Self-esteem, confidence, achievement, respect of others, respect by others

Psychological needs

Love/belonging:
Friendship, family, sexual intimacy

Safety:
Security of: body, employment, resources, morality, the family, health, property

Basic needs

Physiological:
Breathing, food, water, sex, sleep, homeostasis, excretion

Principles and practices: physical wellbeing

A person's physical health relates to whether or not their various body systems are performing to capacity. Physical issues may be caused by disease and illness or disability. Issues may relate to ageing. Issues may be comorbid with other issues. For instance, an older person may have diabetes, but may also have osteoporosis. Physical wellbeing may also be linked to mental health. Exercise and nutrition may be inhibited by mental health issues, such as depression.

Physical health may be assessed by the person's health practitioner, such as their doctor or their physiotherapist. You should also talk with the person about their day to day physical wellbeing. Work collaboratively with the person and their health professionals to support a person's physical wellbeing.

Here are some barriers to physical wellbeing.

Smoking

People who smoke face a greater risk of a range of cancers and other health problems than non-smokers.

Support people by:

▶ modelling good behaviour by not smoking

▶ encouraging the person to stop smoking

▶ referring the person to Quit specialists or other health professionals such as GPS

▶ following the actions listed in the care plan designed to help the person stop smoking.

Mind–body health

There is a great deal of overlap between a person's physical and mental health. Studies show a positive outlook may improve health. Likewise, people's physical health may influence their state of mind. If people are unwell or are experiencing poor health, they may also become depressed.

Support people by:

▶ encouraging them to focus on the positives

▶ helping them make and maintain links with a support network.

▶ helping them to overcome barriers that prevent them from participating in activities

▶ providing referrals to health care professionals.

Medical self-care

Medical self-care refers to a person's ability to manage and take responsibility for their own health and wellbeing including:

▶ taking medication

▶ seeking help when required

▶ making healthy lifestyle choices.

Environmental health

Environmental health refers to the health of the person's immediate living quarters (their home or their facility) as well as the health of the wider environment.

Environmental health covers:

▶ air quality (poor air quality can compromise cardiovascular and respiratory systems)

▶ water quality (poor water quality can lead to problems in the digestive system)

▶ the safety of buildings (unsafe buildings and surrounds can increase the risk of trips, slips and falls).

Nutrition

Food plays a more important role in fuelling the body's system. The human body needs:

▶ water

▶ carbohydrates and lipids

▶ vitamins, minerals and proteins.

These nutrients have a role in:

▶ processing waste and providing energy

▶ nerve function and skin maintenance

▶ growth and metabolic activity

▶ immune system function

▶ the growth, maintenance and repair of cells.

Weight

Maintaining a healthy weight can improve a person's health and prevent illness and disease. Being underweight or overweight increases the likelihood of poor health. A healthy weight varies with height and build.

Principles and practices: cultural or spiritual wellbeing

Spiritual wellbeing refers to a person's religious activity or how they perceive their place in relationship to the universe. Understanding a person's emotional and psychological state as well as their spiritual and cultural background may assist you in understanding a person's social preferences. This knowledge can be used to help the person expand their social networks.

You do not need detailed knowledge of every culture, religion or spiritual belief; however, it may be helpful to have an understanding of some of the main aspects of people's culture and religion or access this information when you need it. This shows that you respect people's beliefs and practices.

Here is more information.

Spirituality

Not all cultures have an organised religion. This does not mean that group members are without spirituality; for example, Indigenous Australians gain their sense of spirituality through their connection with the land.

Religion and spirituality do not have the same meaning. Spirituality refers to a person's sense of wellbeing and contentment. Some people develop their sense of wellbeing and contentment through organised religion and activities such as praying.

Others develop their sense of wellbeing through less formal acts such as walking in nature, taking time out to listen to calming music or through yoga and meditation.

Religion

Religion may be very important to people you support. You may need to familiarise yourself with belief systems to ensure you are meeting a person's needs. An important feature of many religions is where and how prayer occurs, who leads in prayer and how festivals are observed. Depending on the religion, followers may attend a church, temple, synagogue, mosque or other building. They may go on a certain day of the week or at a special time of year. They may go to celebrate an event. For some people, there might be a religious person who is important to them. This might be a priest, minister, rabbi or imam. This person might conduct religious events, lead prayers, run classes or visit people at home. You need to be aware of and respect people's religious beliefs.

Importance

People gain their sense of identity from the things they do and the people they associate with. People who are unable to maintain their cultural links risk losing their sense of identity. Cultural networks can help a person maintain their sense of connectedness with the wider community.

Whether it is through religion or spirituality, a sense a peace can support a person's health and wellbeing. As discussed earlier, a person's spirituality can be developed through formal or informal religious practices or through other activities. A sense of peace can help a person develop the ability to respond to life's challenges. This quality can help a person deal with the changes that may occur as a result of a disability or impairment or as part of the normal ageing process.

Provide support

It is good practice to consider all of the factors that help a person maintain their sense of self when promoting their wellbeing and supporting them through their care plans. Learning about their culture and religious or spiritual beliefs, talking to them about what they need and showing respect for their customs is part of providing high quality care. To impose your own views is inappropriate.

Do not let your particular views on culture, religion or beliefs change how you work with others. You must treat each person as an individual.

Be aware of how some religious rituals or ceremonies might affect people. If people are fasting, it may affect their health. Drinking wine, an important custom for many European cultures, may affect the medication a person is taking. If you think there is a problem, you should talk to your supervisor.

Principles and practices: cognitive wellbeing

Changing cognitive capacity can affect a person's judgment, making it less likely they will make appropriate decisions about their health and wellbeing.

Changing sensory capacities, such as vision impairment and hearing impairment, can have a number of effects. A person may feel uncomfortable moving out of their home environment, preventing them from enjoying the benefits of recreational activities.

Cognitive conditions may change because of depression, head trauma or acquired brain injury. Indicators include loss of memory, inability to concentrate, plan or organise and confusion or disorientation.

Acquired brain injury is one barrier to cognitive wellbeing. Brain injury has different effects on individuals. People with brain injury may be affected emotionally, physically and lose brain function in a number of areas. This may cause difficulty communicating,

remembering things, processing and organising information and being aware of what is appropriate and inappropriate behaviour. This has considerable impact on the person's quality of life and they may go through a period of grief and loss for their former life.

Here are some other cognitive aspects that affect wellbeing.

Ability to practise coping strategies

▶ Lack of cognitive wellness may impact a person's ability to practise coping strategies. People with acquired brain injury, for instance, may become more aggressive, and have less capacity to manage their aggression. People who experience mental health issues, such as depression, may have less motivation to practise coping strategies. Drugs and alcohol can also inhibit coping.

▶ Learning how to implement coping strategies is important for cognitive health and wellbeing. For example, going into nature, meditation and yoga are effective coping strategies a person may use to manage difficult situations, such as stress.

Mindfulness

▶ Mindfulness is the ability to be present and aware of your situation. Mindfulness is used commonly to help manage pain. For example, when using acceptance and commitment therapy, a person is encouraged to be aware of the pain, and accept and acknowledge the pain, rather than trying to make the pain go away. Mindfulness is also helpful if a person experiences stress and anxiety. Learning to become aware of the breath, or the present moment, can help ground the person and relax them.

Relaxation

▶ Relaxation, such as breathing techniques, meditation and yoga is helpful for managing stress and anxiety. It can also be used to help a person manage pain. One technique is to imagine breathing into the area which is causing pain. Another technique is to become aware of the breath; for example, count ten breaths, and notice where the breath enters and leaves the body. Going into nature is also a form of relaxation. Physical exercise, such as swimming or walking, can help a person relax. Help the person integrate relaxation practices into their everyday life.

Lack of wellbeing and its impact on mental health

Lack of social and emotional wellbeing (SEWB) can significantly impact a person's mental health. They may become depressed or anxious about social engagements and interactions. Both depression and anxiety further compound social barriers to participation, isolating the person further.

You need to monitor whether social activities meet the person's social needs and adapt or change the person's care plan depending on the person's social circumstances. In this way, you help the person build on their existing networks as well as develop new networks. You may also need to help the person access information and resources to improve their communication skills.

Coping strategies

People diagnosed with mental illnesses may develop a range of coping mechanisms to deal with the symptoms and frustration of their illness. Coping mechanisms will differ according to the type and severity of illness and the degree of insight a consumer has into their condition. Some coping mechanisms are positive strategies to reduce the impact of symptoms, such as a person with schizophrenia attempting to manage the voices they are hearing. Other coping mechanisms are a reaction to symptoms that are either a way of venting frustration or blocking out symptoms. These coping mechanisms are usually not part of the individual's illness. They are behaviours that people use to express the stress, anxiety and frustration they feel about their illness.

People are often unaware of the impact these coping mechanisms have on those closest to them. You can demonstrate understanding by talking with the person in a non-judgmental way about the strategies they use and suggesting alternative methods of coping.

People may try to block out symptoms through:	Healthier methods of coping include:
▶ angry outbursts including being abusive to others	▶ going for a walk or engaging in some other form of physical activity
▶ denial of their situation, diagnosis, emotions or needs	▶ finding a supportive person to talk to
▶ withdrawal from activities, friends and social interactions	▶ using a journal or art to express feelings
▶ substance misuse including alcohol misuse, illicit drugs and heavy cigarette smoking	▶ meditation or yoga
▶ excessive sleeping as a way of not having to deal with their problems.	▶ broadening their circle of social contacts.

Provide information and resources to the person

Provide information and resources to the person before conducting assessments. You should be clear and specific when providing information. For example, clearly explain what the person's rights are during the assessment, in a language they will understand. Ask the person if they understand their rights or need further clarification.

Information may be provided verbally and as documentation. For example, you may explain what the person's rights are. You may also provide the person with your organisation's assessment policy and procedure, in the person's own language, so they can read it in their own time or with the support from a family member or an advocate.

Ensure the person has the means to understand the information you provide. You may need to provide translation or interpreting services, or you may need to provide the information in larger print to accommodate visual impairment. Always meet the individual's needs and be sure they have understood information before proceeding with assessment.

Here is a list of information and resources you may provide.

Information and resources you may provide
▶ Information about the person's rights and responsibilities, including right to confidentiality, privacy, safety and respect
▶ Information about the organisation's rights and responsibilities, including the organisation's responsibility to protect the person's safety during assessment
▶ Information about how the assessment will be conducted; who will be present, which data will be collected, when the assessment will be conducted
▶ Information about what the assessment is for; is the assessment designed to understand the person's physical wellbeing, emotional wellbeing or social wellbeing?
▶ Information about how assessment information will be used; to plan an activity program, for example
▶ Resources about holistic health and wellbeing services available, such as alcohol and other drug counselling services, or financial counselling
▶ Resources related to assessment procedures
▶ Online health promotion resources for specific cultural groups such as Australian Indigenous Health Info Net (https://aspirelr.link/indigenous-australian-health-info)

Methods to provide information and resources to the person

The information you provide to a person about programs and activities may be in written form, such as a pamphlet or brochure, or if it is more appropriate to the individual you may tell them the information, use visual images, or provide them with access to the program's website if applicable. There will be a range of ways to provide the information and you should choose the medium most appropriate to the individual's needs.

Consider the following when providing a person with information and resources.

Provide current information
▶ The information should show its publication date. If you print straight from a website you should have the most current copy. If you print multiple copies do not make too many as the information may go out of date while you are still using the copies.

Write in English or preferred language
▶ The information should be concise and clear and you should critically review it to ensure it meets the individual's needs and does not use inappropriate, insensitive or discriminatory language.

Assist understanding

▶ Information is most useful when the vital details such as date, time and place are very clear. Visual images are useful for people with low reading literacy. The use of universal icons for things such as trains, buses or parking areas helps comprehension.

Avoid ambiguity

▶ Ensure the information is clear in its meaning and clarify with the individual any shorthand terms or jargon which they may not know.

Be thorough

▶ Your aim is to ensure that the individual feels empowered to follow up on the information. Although the information should be concise, it must also contain enough details to alleviate any apprehensions on the part of the individual.

Provide information and resources about holistic practice

Inform the person about how each of their needs will be assessed, and why. A person may be experiencing physical issues, so their attention may be focused primarily on physical needs. However, it may also be important to look at the person's emotional and spiritual needs during this time. Help the person identify what their spiritual and emotional needs are, and how they can be thoroughly understood.

Consider the following when providing information and resources about holistic practice.

Provide information and resources about holistic practice
▶ Ensure the person is involved in all decisions and discussions about their holistic needs
▶ Explain the purpose of assessing the need; for example, why is it important to understand a person's emotional needs if they are dealing with physical issues?
▶ Information should be clearly communicated, and all communication needs met
▶ Encourage the person to ask questions about holistic practice

Iatrogenic effects of mental illness diagnosis

In addition to any mental illness or other condition, the person may be impacted by what are known as iatrogenic effects. An iatrogenic effect is a result of the treatment of the mental health condition, not the condition itself. An iatrogenic disorder can be caused by the person's long exposure to a health care facility, or by the diagnostic procedures they have undergone, the treatment they have received, medical personnel and procedures.

Typical iatrogenic effects come from the side effects of medication. Other iatrogenic effects are complications following surgery or a medical procedure. These may be because of error or negligence on the part of a medical practitioner or health worker, or they may be things that do not appear to have any specific cause. An iatrogenic effect is not always something harmful, for example a scar could be considered an iatrogenic effect but is not a disease or illness.

Iatrogenic effects on a person's wellbeing need to be identified and taken into account in the change management process. Some may be unidentified, and by recording your careful observations and knowledge of the person in a change management plan you can determine their presence, and track how they affect the person's wellbeing.

You should be aware of stigma and labelling as iatrogenic effects of mental illness. This is explained below.

Stigma

A significant iatrogenic effect for a person with a mental health issue is the stigma that is often associated with mental health. Through ignorance and the perpetuation of misinformation there is an often held belief that a person with a mental illness is too sick to live what is considered a normal life.

Labelling

Labelling people with a diagnosis perpetuates the belief that people with particular mental health issues always behave in the same way. The myth is that people with their diagnosis are always for example, violent, out of control, 'crazy', or incapable of rational thought. This stigma affects the person's wellbeing and outlook on life to the extent that they are unable to advocate for themselves, and lose self-confidence and self-esteem, which changes their relationships with others and their way of life. The situation can be exacerbated by the side effects of treatment. People can feel powerless and lose sight of their values, as their life becomes focused only on their illness.

Holistic approaches to practice

Community services workers respond to the needs of a wide range of people, many of whom may have several issues or concerns to deal with. In order to take a holistic approach to meeting a person's needs, consider all concerns, including current and past personal circumstances.

Support workers should take a facilitative approach to addressing a person's concerns rather than making assumptions about what they need. Adopt a collaborative approach and encourage people to actively participate in decision-making about the services they need and want. In order for this to happen, ensure the person receives information about a range of services and resources, so they have the opportunity to make informed decisions about the best course of action for them.

The relationship you develop with the person you support is extremely important in determining the outcome of service provision. Build rapport, trust and respect so the person feels comfortable about discussing their concerns. Effective interpersonal and communication skills are also essential in helping people explore issues they may have not considered, and to help them decide how to address their concerns.

Holistic approaches include:

▶ motivational interviewing

▶ solution-focused approaches

▶ strengths-based approaches

▶ cognitive behavioural approaches

▶ narrative approaches

▶ acceptance and commitment therapy (ACT).

Motivational interviewing

Motivational interviewing is used to help a person develop their own intrinsic motivation. If motivation comes from within them, the person is more likely to reach a goal or change behaviour. Motivational interviewing is person-centred, which means it focuses on the individual needs of the person. It also directly involves the person in the process.

Motivational interviewing was first developed by Professor William Miller and Professor Stephen Rollnick to address people who struggled with alcohol addiction.

Motivational interviewing asks open-ended questions, which help the individual identify why they want to change their own behaviour. They are more likely to succeed in changing their behaviour if they identify reasons for changing it.

The following list describes the key principles of motivational interviewing.

Principles of motivational interviewing

▶ The interviewer asks open-ended questions to encourage the individual to think for themselves.

▶ The interviewer provides positive affirmations.

▶ The interviewer uses reflective listening and provides summarising statements for the individual.

▶ The process promotes using empathy, warmth and acceptance.

▶ The main goal is to engage the individual and encourage 'change talk', which helps the individual motivate themselves.

▶ Goals set should be small, genuinely important, specific and realistic for the individual.

Solution-focused approaches

The solution-focused approach puts the emphasis on the solution rather than the problem. It was developed in the USA in the 1980s by Steve de Shazer and Insoo Kim Berg.

The aim of the solution-focused approach is to facilitate a respectful relationship where the person can be guided to explore their behaviour and identify ways in which they are already helping themselves. The facilitator assists the person to articulate these issues and consider how they can be expanded. They also need to foster the person's capacity to look beyond their current situation and to feel affirmed about the future.

There are two main concepts, explained below, that can help identify and create solutions to problems.

Concept 1

▶ The first is the concept that even when a person is experiencing a problem, there are 'exceptions' or times these exceptions are the basis of a potential solution. This is because the person must be doing something different during those times, or the problem would still be at its worst. A therapist's role is to identify what the person is doing during these times, which can become part of a solution. It is in a way recognising that the person already knows what to do, and this can be seen as a starting point for a solution rather than be seen as a symptom of the problem.

Concept 2

▶ The second concept is that a person is more likely to get somewhere if they know where they are going. It is common for a person dealing with a serious problem is to lose a clear view of the future. The person knows what they don't want (the problem), but has lost sight of what they do want. Solution-focused practitioners ask lots of questions about what life might be like if the problem was solved. As the answers to these questions gradually unfold both the practitioner and the individual begin to get a picture of where the person should be heading. The clearer this becomes the greater the possibility of it beginning to happen.

Strengths-based approaches

For many decades, human services agencies focused on the person's problems and perceived shortcomings rather than looking at their strengths and ability to take control of their own lives. In more recent times, the approach has shifted to emphasise the person's capabilities, personal resources and support networks and how these can be drawn on to help individuals manage their issues and lives.

The strengths-based approach encourages people to see themselves as competent and resourceful. It emphasises their abilities, values, interests, beliefs, resources, accomplishments and hopes for the future. It encourages people to develop coping strategies and to become problem-solvers. Community services workers facilitate this process, to help individuals manage their lives, make decisions and develop plans to meet their needs.

The strengths-based approach is closely related to the concept of empowerment. Empowerment can be defined as the process of helping individuals, families, groups and communities to develop their individual and political strength in order to achieve specific goals and bring about personal and community change.

Cognitive behavioural approaches

Cognitive Behaviour Therapy (CBT) is a proven effective short-term and focused approach to treating many types of emotional, behavioural and psychiatric problems. How CBT is applied will vary depending on the issue being addressed. Essentially, CBT is a collaborative and individualised program that helps individuals to identify unhelpful thoughts and behaviours and learn or re-learn healthier skills and habits.

Cognitive behaviour therapy retrains the brain to develop new patterns of thinking, which are more functional. For example, a person who has difficulty getting out of bed because they are depressed may need to practise basic routines like getting out of bed and having a shower and perhaps one other simple activity, such as preparing breakfast. Repeating this routine over time will help the person realise that it is possible to get out of bed and achieve small tasks.

For more information, visit the Australian Association for Cognitive and Behaviour Therapy at:

▶ https://aspirelr.link/aacbt

Here are some key points about CBT and the range of mental health issues it can be used for.

Key points

Cognitive behaviour therapy:

▶ is goal oriented

▶ is focused on immediate difficulties

▶ develops long-term strategies

▶ requires active involvement by the individual

▶ is flexible and individualised

▶ can be adapted to a wide range of individuals in a variety of settings.

Effectiveness

In particular, CBT has demonstrated effectiveness with individuals experiencing the following problems:

▶ Generalised anxiety

▶ Panic

▶ Obsessive compulsive disorder

▶ Phobias

▶ Post-traumatic stress disorder

▶ Depression

▶ Eating disorders

▶ Brain Injury

▶ Somatic disorders

▶ Sexual dysfunction

▶ Social anxiety

▶ Anger and stress management

Narrative approaches

Narrative approaches to psychotherapy and treatment involve helping the individual identify their personal story and analysing how their story contributes to their general cognitive and emotional wellbeing. A person's story may be negative and may drive low self-esteem. For instance, a person may believe that nobody loves them and they are always rejected. The therapist or counsellor can help the person identify an alternative narrative; for example, only two people have ever left you, and you have many positive relationships in your life. Therefore, you have the ability to form positive relationships with people, and you are loved.

Narrative therapy was developed in Australia by social worker Michael White and David Epston. It is often used in conjunction with other therapeutic devices, such as CBT.

For more information, visit the Narrative Therapy Centre's website at:

▶ http://aspirelr.link/narrative-therapy-centre

Acceptance and commitment therapy (ACT)

Acceptance and commitment therapy (ACT) is becoming more commonly used in therapeutic circles. Acceptance and commitment therapy was developed by Steven C. Hayes, Kelly G. Wilson, and Kirk Strosahl in the 1980s. Again, it is a collaborative and individualised approach. While CBT and narrative therapy teaches individuals to change their thought patterns, ACT helps people notice and accept their existing

thought patterns. Through acceptance, the difficult experience often passes, and transforms. Acceptance and commitment therapists believe that pushing away or avoiding difficult experiences is less effective that simply noticing them, and allowing them to transform.

Acceptance commitment therapy is effective for managing pain, depression and anxiety. It uses meditation and relaxation techniques, such as breathing into the source of pain. Using breath, the person begins to notice what the pain feels like, where it is and its form. As the person breathes, they accept the pain's presence, rather than seeking to avoid it.

Example

Inform the person about social and emotional wellbeing, holistic practice and services

Virginia works in an aged care home. One of the people she supports, Ali, experiences chronic pain. He often complains of back pain, leg pain and pain in his joints. He frequently tells Virginia he is unhappy, and doesn't see the point of living.

Virginia takes a holistic approach to helping Ali identify his complaints. She spends time talking to Ali about where the pain is, and what it feels like. She asks Ali open-ended questions about his present emotional experiences, and talks to him about events in the past which may contribute to his current experience. She finds out that Ali doesn't have any family left to support him, and he feels very lonely and isolated.

Through conservations with Ali and his social worker, Virginia helps Ali establish personal goals, such as joining the bridge team, taking a walk in the garden each day and researching meditation techniques. Because Ali identifies the strategies himself, he is excited about starting his new program.

After a week, Virginia talks to Ali about his current experience. Ali says he feels much better. He finds that these activities take his mind off the pain and he believes the pain has even subsided.

Practice task 1

1. Explain how you could provide information and resources to a person when explaining social and emotional wellbeing, holistic practice and the available services and programs.

2. Explain how iatrogenic effects of mental illness diagnosis and treatment impact an individual's wellbeing, and how one of the following approaches could be used to address this issue.
    ▶ Motivational interviewing
    ▶ Solution-focused approaches
    ▶ Strengths-based approaches
    ▶ Cognitive behavioural approaches
    ▶ Narrative approaches
    ▶ Acceptance and commitment therapy (ACT)

3. Explain how you would provide information about cognitive aspects that affect wellbeing, including:
    ▶ the ability to practise coping strategies
    ▶ mindfulness
    ▶ relaxation.

Click to complete Practice task 1

1B Explore aspects of wellbeing to identify strengths and strategies that keep the person strong

View the person holistically and work with the person collaboratively when exploring all aspects of wellbeing. Talk to the person about their physical, emotional, cognitive and spiritual needs. Observe the individual to identify needs. Communicate with other staff and health professionals about the person's full range of needs.

Avoid viewing needs as problems, but instead focus on the person's strengths and resources. For example, if the person has an interest in socialising with other residents, they have a social interest, and socialising is both a strength and a resource.

Identify strengths and strategies that keep the person strong

Work collaboratively with the individual to identify their emotional, physical, social and cognitive needs. You should also identify their existing strengths and resources. Use interviews, such as motivational interviewing, and active listening, to help understand the person's needs and strengths.

Here is more information on how to identify strengths and strategies.

Identify strengths

Strengths may be internal strengths, including:

▶ physical, such as the person's good health

▶ emotional, such as the person's resilience in difficult situations

▶ social, such as the person's ability to form strong relationships

▶ cultural or spiritual, such as the strength of a person's religious belief

▶ cognitive, such as the person's positive outlook.

Strengths may be external, such as:

▶ the person's family and friend network

▶ the person's community network

▶ the person's mental health support

▶ the person's situations; being employed, having financial security, being in a healthy relationship.

Identify strategies

Work collaboratively with the person to determine which strategies work best for them. Help the person set goals.

Strategies include:

- ▶ meditation
- ▶ relaxation
- ▶ CBT
- ▶ strengths-based approach
- ▶ motivational interviewing
- ▶ ACT
- ▶ solution-focused goal setting
- ▶ narrative therapy.

Activities and programs that meet wellbeing needs

Involvement in activities can be an effective way to address wellbeing needs. Activities may be offered by your service, or may be available externally. Help the person identify which activities best suit their needs, and plan how activities can be integrated into the person's daily life. Below are activities which can meet social, physical, cultural, spiritual and emotional needs.

Social

Social activities include:

- ▶ group outings such as BBQs, picnics or any other kind of group outing
- ▶ classes of various kinds such as art, cooking or money management classes
- ▶ volunteer work
- ▶ support groups of various kinds such as peer support and self-help groups
- ▶ recreational and social activities such as community events, fishing trips or lawn bowls.

Physical

Activities will enable a person to improve their physical wellbeing, including:

- ▶ exercise and sports
- ▶ going to the gym or swimming
- ▶ tai chi, yoga or karate
- ▶ cooking healthy meals.

Cultural or spiritual

Cultural and spiritual activities include:

▶ establishing a relationship with a particular cultural or spiritual group

▶ being able to follow their faith

▶ access to culturally specific events, festivals and celebrations

▶ being able to express their cultural identity

▶ cooking culturally specific food.

Emotional

Activities like these will meet the emotional needs of a person:

▶ Activities where the person is able to be useful to others

▶ Creative activities like drawing or playing a musical instrument

▶ Listening to uplifting music

▶ Caring for a pet

▶ Doing things for leisure

▶ Meditation and relaxation

Evidence-based practice

When deciding on strategies to address wellbeing needs and issues, use evidence-based practice. Evidence-based practice means that the effectiveness of strategies have been supported by research and evidence.

Approaches like CBT are formed on years-worth of evidence-based practiced. Since its conception in the 1960s, CBT has been tested and re-tested by many established scientists and therapists. Acceptance commitment therapy, narrative therapy, motivational interviewing and strengths-based approaches are all evidence based.

People you support may choose alternative or complementary therapies, such as homeopathy or herbal treatments to support wellbeing. People are entitled to make decisions for themselves, and you should encourage them to take charge of their personal wellness. However, be mindful that non-evidence-based practice should be supported by evidence-based practices for effective wellness management.

Example

Explore aspects of wellbeing to identify strengths and strategies that keep the person strong

Jim provides support to a range of people in an aged care home. He spends time with each person, building a trusting relationship and finding out about their past experiences, their interests and goals and their support networks. These discussions help Jim gain a 'full picture' of each individual and all aspects of their lives.

Jim uses a strengths-based approach when talking to people. He focuses on the resilience of each individual, their abilities, knowledge, skills, interests and strengths. The people Jim works with are used to focusing on their problems so they find this strengths-based approach uplifting and empowering. This approach also recognises the importance of the person's environment and the situations that impact their lives.

Jim and his colleagues have developed a database of information and local contacts for groups and activities in the local area. They use this database to suggest activities that are likely to meet the social, physical, cultural, spiritual and emotional needs of individuals. The database also contains information about specialists and health professionals that may enhance the individual's wellbeing.

Practice task 2

1. Identify two strengths and strategies a person may identify when addressing social wellbeing.

2. Identify two strengths and strategies a person may identify when addressing physical wellbeing.

3. Explain how evidence-based practice can be used when supporting a person.

Click to complete Practice task 2

1C Recognise own beliefs, power and behaviours to ensure non-judgmental practice

You may be exposed to many different social and cultural groups when working in a care and community environment. The people you support, their family and friends and the staff you work with may be of a different social or cultural group to your own. You must know how to work in a way that reflects a cultural awareness and understanding of others.

The best way to work ethically and non-judgmentally is to be aware of your own beliefs, values and behaviours.

Social and cultural perspective and bias

As a person grows up, they learn about other cultures and social groups in various ways. They might get to know people directly, listen to what other people have to say or seek information in books, newspapers, and other forms of media. All of these experiences help shape their view of the world and lead to assumptions about other social or cultural groups.

A person's view of the world is called their 'perspective'. Any assumption made about other social or cultural groups is called a 'bias'.

Social and cultural bias can be as general as thinking 'those people are not like me'. Or, it can be focused on a particular group, for example, 'the Chinese only eat rice' or 'unemployed people don't like to work'.

Bias can affect the way people communicate and act towards other people and may lead to inappropriate practices at work.

Causes of social and cultural bias

Social and cultural bias exists because people tend to interpret and judge other people and situations by the standards they have formed from their own culture and social upbringing.

Here are some reasons why people are biased towards others.

Lack of knowledge about other cultures

You may need to provide support to a person of a culture you have never encountered before. You may not have had time to read or learn about the culture, and may make assumptions about people from that culture.

Lack of understanding about language

Many people expect migrants who come to Australia to speak fluent English and don't understand when they can't. However, people settling in a new country have many new things to understand and learn, so language is often not their main concern.

Fear

Some people feel frightened or threatened when they don't understand a culture and may be alarmed or feel uncomfortable about another person's appearance.

Stereotyping

A stereotype is a belief or idea about a person or a group of people that may or may not be true. Stereotyping is when you apply those beliefs or ideas to a person without treating them as an individual.

Racism

Racism is a belief that one race of people is better than another. Racism is against the law and is never acceptable behaviour.

Stigma

Stigma is a negative label attached to a group. It is usually based on certain attributes, which may give them a negative image to the public. For example, despite a lot of public education, mental health still carries a stigma in society today.

Strategies to eliminate social and cultural bias

Most workplaces within the care environment would promote cultural awareness in all their staff. They also have some strategies and techniques in place to help eliminate social and cultural bias. Some of these are provided in the following information.

Provide a welcoming environment

Individuals, staff, families and visitors should be made to feel as welcome as possible when visiting or accessing a service. Always smile as you greet a person. Remember to follow cultural customs, such as taking off your shoes when you enter the room or shaking a person's hand, even if they are not from your own culture. Try to provide signs in different languages as this helps people with language or communication barriers. If these signs also contain symbols, it will make them easier to understand.

Encourage diversity

Embrace and encourage diversity in the workplace. Staff and individuals from all cultures should be part of the organisation and involved in the activities. Share other people's cultures by having international food days, sing-alongs, dancing exhibitions and art displays. Include people from a variety of cultures on committees to contribute to the development of a broad, inclusive policy.

Work in a cross-cultural team

Employ staff from a variety of cultures and social groups. This helps staff to learn more about other people, removes fear and insecurity and helps provide appropriate care for individuals of different social and cultural groups.

Have a good attitude

Have a positive attitude at work. This means being punctual, participating in activities and sharing your knowledge with others. Be willing to learn about how and why people act the way they do, including learning about their culture or social group. If you have a positive attitude, you are more likely to enjoy your work and achieve more for yourself and others.

Don't judge other people

Never make judgments about people based on their looks, culture or social group. Your job is to care for and help individuals, not judge people and their actions as being right or wrong. It is also not your job to tell people what you think they should or shouldn't do. You are entitled to your own views and opinions; however, individuals have the right to have their individual thoughts and actions respected at all times.

Include people in decision-making

Consult people from other cultures or social groups when decisions need to be made about new procedures. This will ensure they are culturally or socially suitable. Provide support if an individual needs help to be included in a consultation. For example, if they don't speak English, an interpreter or a family member should be used.

Encourage people to have their say

Community care services often rely on committees or groups of people when making and implementing decisions. Committees work out what individuals, families and staff think and pass this information on to the care service. To state their views and assert their rights, some individuals may need to use an advocate. Help and support people with disabilities, and those from non-English-speaking backgrounds to participate in decision-making that affects them.

Provide staff training and information sessions

Regular training and information sessions help staff members learn about the various cultures and social groups represented by staff and the individuals they provide support services for. Invite guest speakers, show videos and provide written information. It may also be necessary to educate individuals and residents, as well as staff members.

Arrange cultural events

Cultural events are an enjoyable way to learn more about other cultures. When planning various activities, try to include all the cultural or social groups that are represented by individuals receiving support services. For example, you and the team may arrange:

- an Italian music day
- a regular Friday lunch with different cuisines
- outings to culturally specific festivals, such as Chinese New Year in Chinatown
- guest speakers to talk about a particular culture or social group.

Reflect on your own bias

When you work in a care environment, you must treat everyone with courtesy and respect regardless of their race, religion, gender, beliefs or culture. People have a right to be different and everyone must be treated equally. You need to recognise and understand different cultures and how cultural differences can affect your work.

Keeping a reflective journal is a good way to examine your personal experiences of working with culturally diverse groups of people, and to reflect on your own social and cultural bias.

Here is a reflective cycle that is commonly used to help people think about and make sense of their personal experiences.

Description

What happened?

Action

If it happened again, what would you do?

Feelings

What were you thinking and feeling?

Reflective cycle

Conclusion

What can you conclude from this situation and your reaction to it?

Evaluation

What was good and bad about the experience?

Analysis

What sense can you make of the situation? What else could you have done?
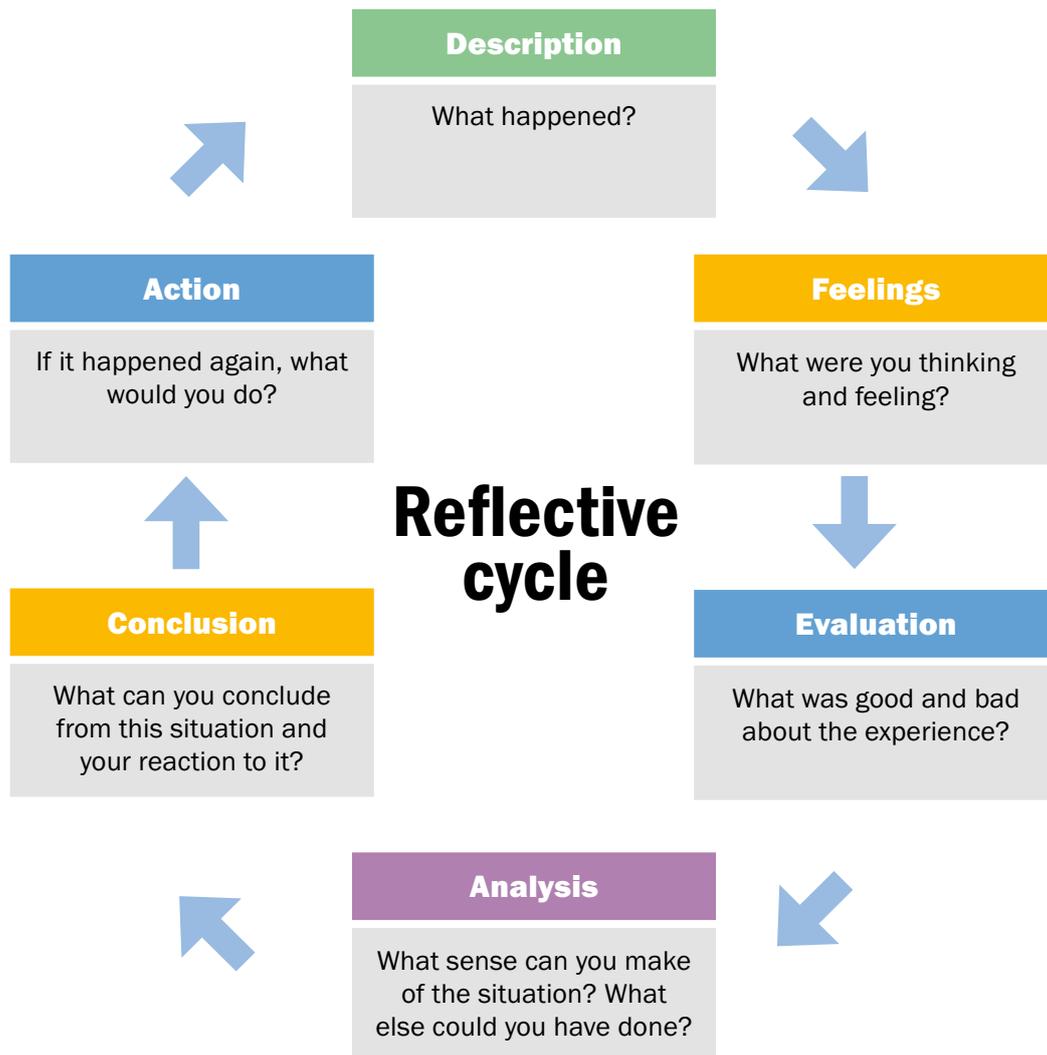
Based on Gibbs' Reflective Cycle (1988)

Use the reflective cycle

To use the reflective cycle to examine your own bias, follow these steps. Write each response in your journal.

Using the reflective cycle

1 **Description**
Think of a recent incident where you were working with a socially and/or culturally diverse person or group of people. What happened?

2 **Feelings**
What did you already know about the background of about this person or group of people? What did you think and feel at the time?

3 **Evaluation**
Were these good or bad thoughts and feelings? Why?

4 **Analysis**
Were these thoughts and feelings realistic? On what do you base this opinion? Do you think you could have reacted in another way?

5 **Conclusion**
What do you conclude about this situation and your reaction to it?

6 **Action**
If it happened again, what might you do differently? Why?

Become culturally aware

Building cultural awareness is the first step towards changing your perspective and breaking down any social and cultural bias.

Cultural awareness involves the ability to stand back from yourself and become aware of your cultural values, beliefs and perceptions. Why do you do things in that way? Why do you react in that particular way?

Cultural awareness is essential if you interact with people from other social and cultural backgrounds. People see, interpret and evaluate things in different ways. Misunderstandings can easily arise if you try to use your own view of the world to try and make sense of somebody else's reality.
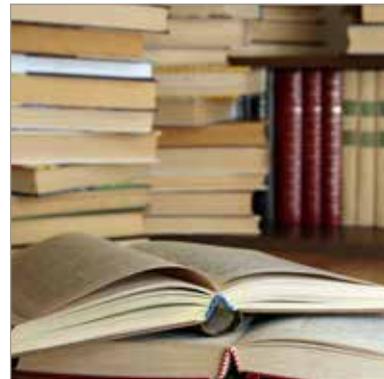
Reflect on power relationships

In community and mental health work, there is always a degree of power at play. A person with mental health issues is seeking help from your organisation. This makes them vulnerable. Support workers and community workers may abuse this responsibility and make decisions on behalf of the person. They may use the person's diagnosis or issues against them.

However, a collaborative, strengths-based and person-centred approach assumes the person you support is equal to you in power. Be aware of a person's vulnerabilities, but focus instead on their strengths and resources, and always treat the other person with respect and equality.

Develop the right attitude

You may not know everything about the people you support, but you can build bridges by having the right attitude. It is well known that the right attitude can form a strong link between people of different backgrounds, no matter what your work role.

Below are some useful suggestions for developing the right attitude. These and more can be found at:

▶ http://aspirelr.link/cultural-awareness

Admit that you don't know

▶ Admit that you don't know everything. This is part of the process of becoming culturally aware. Assume differences, not similarities.

Suspend judgment

▶ Suspend your judgment. Collect as much information as possible so you can describe the situation accurately before evaluating it.

Have empathy

▶ Have empathy. Try standing in another person's shoes. This is the best way to learn more about how other people would like to be treated.

Don't assume

▶ Don't assume. Ask your colleagues for feedback. Constantly check your views to ensure that you clearly understand the situation.

Don't seek to control

▶ Don't seek to control. Assume that other people are as resourceful as you are and that their way may well add to what you know.

Celebrate diversity

▶ Celebrate diversity within your organisation. Find ways to share the different cultures of individuals and co-workers. There is much to learn from other people and their diverse ways of life.

Legal and ethical considerations for supporting wellbeing

When supporting a person's wellbeing, always work within a legal and ethical framework. Legislation may be state/territory or national. Legislation is legally binding, and there are legal consequences if you do not follow legislation. Ethical considerations are not legally binding, but are expected practice in community and mental health work. By following your organisation's policies and procedures, you are following legal and ethical frameworks, as policies and procedures reflect legal and ethical considerations.

Codes of practice

Community services workers and organisations have legal and ethical requirements when working with people. A code of practice is a practical guide to provide guidance about functions and duties set out in legislation. Codes of practice are intended to help the employees achieve a certain standard within an organisation and to provide a model for best practice, a foundation for ongoing reflection about how service is undertaken and provide guidance regarding working with other community services agencies.

Codes of practice, codes of ethics and codes of conduct documents provide guidance about important issues such as being accountable to carry out work in a professional manner, respecting confidentiality, protecting a person's human rights and treating people fairly.

Depending on your industry, your qualifications, and profession, you will have a code of ethical practice you need to follow. Examples include codes of ethics for alcohol and other drug workers, for community workers and for social workers.

You can view an example of a code of ethics at:

▶ http://aspirelr.link/acwa-code-of-ethics

Practice standards

Most community services organisations will have policies and procedures which express and protect the rights and responsibilities of the people receiving services. These policies may be based on legislation and legislated service standards.

There are two standards for mental health services, the National Practice Standards for the Mental Health Workforce 2013 and the National Standards for Mental Health Services 2010. You can view these at the following websites:

▶ http://aspirelr.link/national-practice-standards-mental-health

▶ http://aspirelr.link/national-standards-mental-health

National Practice Standards for the Mental Health Workforce 2013

The National Practice Standards for the Mental Health Workforce 2013 outline the capabilities that all mental health professionals should achieve in their work. They are intended to complement discipline-specific practice standards or competencies of the nursing, occupational therapy, psychiatry, psychology and social work professions.

The key principles of the standards are consistent with national policy and requirements for delivering mental health treatment, care and support in Australia, and are embedded in the practice standards. The standards provide information that can be used as guiding principles for everyday work. A good quality service provider would have quality performance indicators and other compliance measures that would be used to test and measure the degree to which individual workers are providing the required service to the people they support.

Mental health practitioners are required by the standards to:

▶ promote an optimal quality of life for and with people with mental illness

▶ deliver services with the aim of facilitating sustained recovery

▶ involve people using services in all decisions regarding their treatment, care and support and, as far as possible, the opportunity to choose their treatment and setting

▶ recognise the right of the person to have their nominated carer involved in all aspects of their care

▶ learn about and value the lived experience of people using services, and their family or carers

▶ recognise the role played by carers, as well as their capacity, needs and requirements, separate from those of the person receiving services

▶ recognise and support the rights of children and young people affected by a family member with a mental illness.

The National Standards for Mental Health Services 2010

Note that these practice standards differ to the National Practice Standards for the Mental Health Workforce 2013, outlined in the previous section. These standards provide guidance for all mental health services; private hospitals, community (non-government) organisations and private office-based mental health services.

National standards for mental health services

Standard 1: Rights and responsibilities

The rights and responsibilities of people affected by mental health concerns or mental illness are upheld by the mental health service (MHS) and are documented, prominently displayed, applied and promoted throughout all phases of care.

Standard 2: Safety

The activities and environment of the MHS are safe for consumers, carers, families, visitors, staff and its community.

Standard 3: Consumer and care participation

Consumers and carers are actively involved in the development, planning, delivery and evaluation of services.

Standard 4: Diversity responsiveness

The MHS delivers services that take into account the cultural and social diversity of its consumers and meets their needs and those of carers and the community throughout all phases of care.

Standard 5: Promotion and prevention

The MHS works in partnership with its community to promote mental health and address prevention of mental health concerns or mental illness.

Standard 6: Consumers

Consumers have the right to comprehensive and integrated mental health care that meets their individual needs and achieves the best possible outcome in terms of their recovery.

Standard 7: Carers

The MHS recognises, respects, values and supports the importance of carers to the wellbeing, treatment, and recovery of people with a mental illness.

Standard 8: Governance, leadership and management

The MHS is governed, led and managed effectively and efficiently to facilitate the delivery of quality and coordinated services.

Standard 9: Integration

The MHS collaborates with and develops partnerships within in its own organisation and externally with other service providers to facilitate coordinated and integrated services for consumers and carers.

Standard 10: Delivery of care

The MHS incorporates recovery principles into service delivery, culture and practice providing consumers with access and referral to a range of programs that will support sustainable recovery.

Policy frameworks

Policy frameworks include federal and state legislation relevant to the industry sector; service standards; practice standards, codes of ethics and codes of conduct; organisational policies and procedures, and workers' job role descriptions and duty statements. Frameworks also include government policies for providing services to people in areas such as child protection, disability and domestic and family violence. Government policies also provide funding and resourcing guidelines.

Ensure you follow and comply with policy frameworks when supporting wellbeing. For example, always ensure the person has access to information and support their right to make their own decisions. Ensure you also follow and comply with policy frameworks regarding human rights, anti-discrimination and confidentiality.

Rights and responsibilities

In every organisation, whether it is public or private, small or large, everyone has rights and responsibilities. For example, an employer has a right to expect certain levels and standards of performance from employees, and employees have a right to expect certain conditions from employers. The employer is responsible for the successful operation of the organisation and employees must complete their work tasks to ensure the operation runs efficiently. Most importantly, all workers need to remember that their job role is one of supporting the person to be the leader in their own recovery journey.

Your primary responsibility when supporting wellbeing is to ensure the person's safety.

Employee rights	Employee responsibilities
▶ A safe workplace ▶ A workplace free from harassment and discrimination ▶ Access to a grievance (complaint) process ▶ Wages in accordance with the award rates ▶ Clear direction of their duties	▶ Follow policies and procedures to work in a safe manner at all times. ▶ Comply with a duty of care and follow instructions carefully. ▶ Be competent and work within job role. ▶ Be willing to learn and train in new skills. ▶ Be punctual, courteous and respect cultural and social diversity.

Individual rights and responsibilities

Most community services organisations will have policies and procedures which express and protect the rights and responsibilities of the people receiving services. These policies may be based on legislation and standards, as in the disability services sector; or on individual organisational values. Information about the rights and responsibilities of the people receiving services from a particular organisation or within a particular industry sector can be found in service standards, professional practice standards and organisational policies.

Here are some examples of an individual's rights and responsibilities.

Rights

- ▶ Be treated with respect and dignity
- ▶ Be consulted and treated as an equal
- ▶ Be involved in the decision making process
- ▶ Have privacy and confidentiality respected
- ▶ Have the right to a complaints and appeal process
- ▶ Receive accurate and easy-to-understand information
- ▶ Access relevant services
- ▶ Be free from discrimination

Responsibilities

- ▶ Supply the service with information needed to provide appropriate support
- ▶ Respect the rights of the person providing support
- ▶ Respect the privacy and dignity of the person providing support
- ▶ Notify the services of changes in support requirements
- ▶ Ensure their home is safe for support staff

Employer's rights and responsibilities

Here are some rights and responsibilities of an employer.

Rights and responsibilities of an employer are:

- ▶ to provide a safe work place
- ▶ to ensure that you have all the skills, knowledge, training and qualifications required to carry out your role competently
- ▶ to expect certain levels and standards of performance from employees.

Discrimination

To discriminate means to treat someone unfairly or favour others. Discrimination is never acceptable behaviour and is against the law.

It is unlawful to discriminate against people on the basis of age, gender, ethnicity, disability or impairment, marital status, sexual preference, political or religious beliefs. Organisations within Australia must comply with a variety of federal Acts, national standards, and state Acts aimed to prevent discrimination and foster equality of opportunity.

When providing support for wellbeing, treat all individuals as equal. Be mindful of how cultural or gender differences may place a person at risk of trauma, however, avoid making assumptions, and never restrict the care you provide on the basis of culture or gender.

Relevant legislation
▶ *Age Discrimination Act 2004* (Cth)
▶ *Racial Discrimination Act 1975* (Cth)
▶ *Sex Discrimination Act 1984* (Cth)
▶ *Equal Opportunity for Women in the Workplace Act 1999* (Cth)
▶ *Disability Discrimination Act 1992* (Cth)

Human rights

The type and nature of services available to people with mental health support needs now reflects the growing awareness of the human rights of all people.

Human rights recognise the value of every person, regardless of our background, where we live, what we look like, what we think or what we believe. They are based on principles of equality and respect and are shared across cultures, religions and philosophies. They are about being treated fairly, treating others fairly and having the ability to make genuine choices in our daily lives. Respect for human rights underpins the values and principles of the mental health sector and should be applied by all workers when supporting people with mental health needs. It allows all people to contribute to society and feel included.

The Australian Government supports and respects many of the Universal Declaration of Human Rights, which was developed by the United Nations after World War II.

Australia supports human rights treaties, as outlined here.

Human rights treaties supported by Australia
▶ International Covenant on Civil and Political Rights
▶ International Covenant on Economic, Social and Cultural Rights
▶ International Convention on the Elimination of All Forms of Racial Discrimination
▶ Convention on the Elimination of All Forms of Discrimination against Women
▶ Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment
▶ Convention on the Rights of the Child
▶ Convention on the Rights of Persons with Disabilities

Recognise own beliefs, power and behaviours to ensure non-judgmental practice

Rohini has just started working in a diverse care environment. Although she is aware of her own cultural background, she has little understanding of the other cultures represented in the facility and how they might impact on the behaviour of individuals receiving support services. To improve her cultural awareness, she asks her manager if there are any resources with ethno-specific information available for her to read. She is pleased to find out that, not only are there resources, but she is about to complete some cultural competence training as part of her induction.

Practice task 3

1. Apply the reflective cycle to one instance when you demonstrated cultural or social bias in the workplace.

2. How could you apply legal and ethical considerations, including codes of practice, practice standards, policy frameworks and rights and responsibilities when providing wellbeing support?

3. Why should you respect anti-discrimination laws and human rights when providing support for wellbeing?

Click to complete Practice task 3

1D Respect the person's choices and boundaries when discussing topics

Always promote self-advocacy by encouraging the person to think and act for themselves. In care environments, it can be tempting for the person needing support to rely on those providing support. Likewise, carers and workers sometimes fall in the trap of doing everything for people their support, and making decisions on their behalf. Doing so undermines the person's rights and agency, and also the effectiveness of their long-term wellbeing. If a person comes to rely on the service for support, and not their own resources, they are less likely to maintain wellbeing in the future.

Part of encouraging self-advocacy is to respect the person's choices and promote boundaries within the workplace. Boundaries help you maintain a professional relationship, so you can help the person to the best of your ability. They also help you avoid professional burnout, due to stress, or challenges faced in the workplace.

Respect choice and dignity of risk

The rights of people to dignity and choice, upheld in legislation and service standards, also require that duty of care or safety is not used as a reason to limit a person's freedom or personal choice. Your adherence to duty of care and safety must be coupled with the concept of dignity of risk, which means that a person has the right to make their own choices and to take risks.

The right of people to make their own choices, and to fail, make mistakes and learn from them, is part of their right to self-determination. In practice, this right can sometimes come into conflict with your duty of care obligations. The rights of people to dignity and choice, upheld in legislation and service standards, also require that duty of care or safety is not used as a reason to limit a person's freedom or personal choice.

For example, if you are aware that a person's post-traumatic stress is triggered by use of marijuana, but the person insists on using marijuana for recreational use, you have a duty of care to inform them of known risks, but must observe their dignity of risk and freedom to make their own choices.

Dignity of risk supports autonomy and helps empower individuals to make their own decisions.

Respect privacy and confidentiality

Always maintain confidentiality and privacy when discussing wellbeing issues with the person.

Each state and territory has its own legislation in relation to managing the records of people who receive services. Records management legislation promotes fair and responsible handling of information to protect privacy, provide individuals with a right of access to their records, and provide a framework for the resolution of complaints regarding the handling of records. Ensure you are aware of your state or territory's legislation.

There are 13 national privacy principles that apply to the collection, use and storage of people's information. These Principles cover the collection, use, storage and disposal of personal data. Organisations base their privacy policy and confidentiality maintenance procedures and protocols on these Principles.

Collection, use and storage of personal information

1 **Open and transparent management of personal information**
Ensures that organisations manage personal information in an open and transparent way.

2 **Anonymity and pseudonymity**
Requires organisations to give individuals the option of not identifying themselves, or of using a pseudonym. Some exceptions apply.

3 **Collection of solicited personal information**
Outlines when an organisation can collect personal information that is solicited. It applies higher standards to the collection of 'sensitive' information.

4 **Dealing with unsolicited personal information**
Outlines how organisations must deal with unsolicited personal information.

5 **Notification of the collection of personal information**
Outlines when and in what circumstances an organisation that collects personal information must notify an individual of certain matters.

6 **Use or disclosure of personal information**
Outlines the circumstances in which an organisation may use or disclose personal information that it holds.

7 **Direct marketing**
An organisation may only use or disclose personal information for direct marketing purposes if certain conditions are met.

8 **Cross-border disclosure of personal information**
Outlines the steps an organisation must take to protect personal information before it is disclosed overseas.

9 **Adoption, use or disclosure of government-related identifiers**
Outlines the limited circumstances when an organisation may adopt a government-related identifier of an individual as its own identifier, or use or disclose a government-related identifier of an individual.

10 **Quality of personal information**

An organisation must take reasonable steps to ensure the personal information it collects is accurate, up to date and complete.

11 **Security of personal information**

An organisation must take reasonable steps to protect personal information it holds from misuse, interference and loss, and from unauthorised access, modification or disclosure. An entity has obligations to destroy or de-identify personal information in certain circumstances.

12 **Access to personal information**

Outlines an organisation's obligations when an individual requests to be given access to personal information held about them by the organisation.

13 **Correction of personal information**

Outlines an organisation's obligations in relation to correcting the personal information it holds about individuals.

Confidentiality

The way confidential information is managed can have a significant impact on a person's dignity, rights and choices, opportunities and access and self-concept, self-esteem and wellbeing.

Confidentiality is about data or information and refers to managing access to private information. Confidentiality provisions restrict an individual or organisation from using, storing and disclosing information about a person that is outside of the scope for which the information was collected. Confidentiality refers to both written and verbal information. Information relating to people must be securely stored, with access limited to those working directly on the case, according to organisational policy and procedure.

Privacy and confidentiality policies and procedures

Confidentiality is a legal and ethical responsibility of all workers in the mental health sector and the health sector as a whole. All states and territories have legislation that governs the handling of health information in both the public and private sectors. Health privacy legislation includes rules regarding the collection, storage, access, accuracy, disclosure, identifiers and transfer of information.

All mental health services must develop and implement a privacy and confidentiality policy, setting out procedures for the management of personal health information held by the service. The policy must explain how personal health information is collected and used within the service, and the circumstances in which it may be disclosed to third parties. It must also outline specific privacy and confidentiality procedures.

The following outlines procedures for privacy and confidentiality of health information.

Procedures for privacy and confidentiality of health information
▶ Ensure the collection of personal health information is conducted in a setting that provides privacy and protects the information from access by unauthorised people.
▶ Obtain the individual's consent to the use or disclosure of personal health information for the purposes of research and quality assurance and improvement.
▶ Ensure an individual's consent is relevant and up to date.
▶ Provide the person with access to their personal health information upon request.
▶ De-identify personal health information where necessary.
▶ Collect health information directly from the individual if possible.
▶ Ensure that personal health information is disclosed to third parties only where consent has been obtained.
▶ Protect against unauthorised access to information while stored and transmitted in any form, including electronic, paper or verbal.
▶ Ensure security against loss of data.

Share information

When supporting a person it may be necessary to work with a range of other agencies. A person (or their representative) must give consent before any information is shared with or accessed from another agency. Most community organisations gather this consent using a specific form. Consent is given for access to particular information for a particular purpose. You must not pass on information without the person's consent. People receiving services have a right to know what you record about them and to see their own records.

A person's record is highly confidential and you may be required to sign a confidentiality agreement when you are employed, saying you will not without consent divulge any information you have acquired during or after your involvement with people you provide services to unless legally required to do so.

The information that is shared between agencies may include:

▶ information to enable referrals

▶ incident reports

▶ support plans and goals

▶ information about individual needs.

Disclosure of confidential information

There are some instances in which you are permitted to disclose information as part of your duties. For example, if the person is being referred for medical treatment for health symptoms, the hospital, specialist or doctor needs to know the person's history, allergies and personal details. You must always obtain the person's informed consent before you disclose confidential information to a third party. There are some situations where you may be required to disclose confidential information.

You may be required to disclose private or confidential information when:

▶ compelled by law (for example, if the person has a reportable disease or the information is requested by a court of law)

▶ a person's interests require disclosure and there is a serious risk which justifies breaching confidentiality, for example, risk of suicide, self-harm or harm to others

▶ there is a duty to the public (for example, there is public threat or concern)

▶ the person has consented to the disclosure.

Informed consent

Informed consent must be obtained when making decisions on behalf of a person, or sharing a person's information. Your organisation will have policies and procedures which you must follow to obtain consent and agreement from people you work with when providing care. In community services the fundamental rights of people to autonomy, to have choices, and to make decisions about their lives should always be upheld.

When obtaining informed consent, you must ensure people have all the relevant information about a particular decision and about its likely consequences. You must not use bullying tactics, physical force or coercion, trickery or undue influence when you are supporting a person to reach a decision or to make a choice.

Follow your organisation's policies and procedures for obtaining informed consent and do not assume that a person is incapable of giving informed consent until this has been proven.

Here are the types of consent that can be obtained.

Types of consent
Verbal consent The person requests that they want a service or agree to one being implemented.
Written consent The person signs forms requesting or agreeing to the provision of a service.
Implied consent The person implies in some way that they consent such as by nodding their head or assisting with a task.
Supported consent The person may need the support of an advocate or guardian to help determine the appropriate service.

Clarify and respect boundaries

Working within the legal responsibilities and limitations of your work role is essential. If you step outside these boundaries you may cause harm to people who receive services and you may also risk legal action for damages against you and your employer. Understanding legal responsibilities and limitations protects the people you provide support services to, yourself, your employer and your colleagues.

The key source of information setting out the responsibilities and the limitations of your work role, is a duty statement. When a duty statement is developed the employing organisation will check relevant legislation and service standards as well as organisational policies to ensure that the duty statement meets these requirements. Organisational policies and procedures are also sources of information.

Boundaries ensure both you and the person you support are safe. Here are some ways to respect boundaries.

Respect and clarify boundaries
▶ Know your duty statement and job description
▶ Outline your responsibilities and your scope of practice for the person you support
▶ Encourage self-advocacy as much as possible, so the person becomes self-reliant and does not rely too heavily on you
▶ Promote a professional relationship over friendship
▶ Encourage the person to identify their own issues, and make their own decisions
▶ Avoid making contact with people you support outside of the workplace, or outside work hours.

Duty of care

Duty of care is the obligation a person has to act in a way that would not cause harm. Individuals and organisations have a legal obligation to anticipate and act on possible causes of injury and illness that may exist in their work environment, or as a result of their actions. Duty of care is part of common law and it requires you to do what is fair and reasonable to prevent harm or injury to the person you support or their property. While aspects of WHS legislation may vary between states and territories, there are common legislative requirements and obligations under the duty of care principle.

Everyone in the community services environment has the responsibility of duty of care for themselves, the people they care for, visitors and each other. You, your supervisor, your colleagues and your leadership team all hold the responsibility of doing everything they can to remove or minimise possible causes of harm.

Organisations have legislative and regulatory obligations to maintain and act upon policies and procedures to guide and promote the safety and wellbeing of people.

Here is more information about duty of care.

Duty of care
▶ Duty of care is the obligation a worker has to act in a way that would not cause harm.

Negligence
▶ Negligence occurs when duty of care has been breached and harm to either person or property occurs. It is the legal and ethical obligation of any community worker, supervisor or organisation to ensure that people using services are not exposed to unnecessary or unreasonable risk.

Dignity of risk
▶ The rights of people to dignity and choice, upheld in legislation and service standards, also require that duty of care or safety is not used as a reason to limit a person's freedom or personal choice.

Mandatory reporting

In addition to providing duty of care, workers are required to report situations where they hold reasonable suspicions of child sexual or physical abuse. When talking to a person about their wellbeing, for instance, you may observe unexplained bruises. Further conversations reveal that the person is fearful of their son-in-law. You have a mandatory requirement to report suspected abuse.

In some states and territories psychological/emotional abuse, neglect and exposure to domestic violence must also be reported. In most Australian states and territories it is the law that teachers, police officers, nurses and doctors report their suspicions. Various other groups are required across the range of states and territories. Generally they are people working with children in areas related to health care, welfare, education, children's services, residential services, and law enforcement.

In the case of the mental health sector, it is the supervisor's responsibility to report, but mental health support workers who support children need to report their concerns to their supervisor. If a person with mental health needs whom you support communicates their concerns to you regarding any abuse or neglect, you should take it further as required. This is an example of the person understanding and exercising their rights in terms of their legal and ethical responsibilities.

Work health and safety

On 1 January 2012, the *Work Health and Safety Act 2011* (Cth) came into effect, replacing the *Occupational Health and Safety Act 1991* (Cth). This model legislation was developed by the Commonwealth government to harmonise workplace health and safety laws across Australia.

For the Act to be legally binding, it must be passed by the Parliament in each state and territory.

WHS laws are based on duty of care principles applied specifically to places of work. This means that everyone in a workplace has a duty and responsibility to contribute to safety. Employers have a duty to provide a safe work place; workers have a duty to follow WHS policies and procedures and to identify and report safety issues. You need to prioritise the physical and emotional safety of those you support.

The object of the harmonisation of work health and safety laws, according to the *Explanatory Memorandum – Model Work Health and Safety Bill*, Safe Work Australia, 2010 is to:

▶ protect the health and safety of workers

▶ improve safety outcomes in workplaces

▶ reduce compliance costs for business

▶ improve efficiency for regulatory agencies.

Example

Respect the person's choices and boundaries when discussing topics

Ted has a good relationship with his parents but they cannot see the point in letting him buy his own food or learn cooking skills. They feel that he won't eat properly and will just buy sweets, which will contribute to health and dental problems.

Ted has said he doesn't want to involve his parents when making decisions; he wants to make decisions for himself. Judy, the support worker, explains to Ted's parents that their concerns are understood but Ted has the right to make his own decision.

Practice task 4

1. Explain why it is important to clarify and respect boundaries and parameters, and observe dignity of risk when discussing topics with the person you support.

2. Explain why you should respect privacy, confidentiality and disclosure and use informed consent when discussing topics with the person you support.

3. When discussing a person's wellbeing, you learn that the person's carer has deliberately restricted the person's diet to the point that the person is experiencing starvation. Explain how mandatory reporting, duty of care and safety obligations apply to this scenario.

Click to complete Practice task 4

1E Identify resources to better understand the person's social and emotional wellbeing

The person should be the first point of contact when assessing their wellbeing. Talk to the person about their personal experience and actively listen to their response. Observe the person's body language, as words alone may not communicate their experience. For example, if a person is feeling depressed, they may not have the vocabulary to explain their feelings, but by observing their body language, you notice that the slumped posture and reluctance to make eye contact indicates they may be feeling unhappy.

Identify other resources, such as friends and family, or health professionals, who you and the person may work collaboratively with to form a larger picture of the person's wellbeing.

Active listening

Active listening or reflective listening involves communicating to clarify and restate what is being said. It increases the listener's understanding of the information and assures willingness to listen for meaning. Techniques for effective listening include summarising what has been said by the speaker and paraphrasing or rephrasing the content to ensure correct understanding.

Often when people believe they are listening they are probably only just hearing what the other person is saying. Listening is not a passive activity. Active listening requires the listener to be an active participant in the listening process, not just someone who is passively absorbing information. Active listening involves restating what the other person has said using different words to restate the content and the feelings of what the person has expressed. Summarising is another key part of active listening. By repeating what the person has said in a few words you let them know you understand. They will soon tell you if you have got it wrong. Here are some tips for active listening.

Tips for active listening

▶ Briefly recap what the individual has said in your own words.

▶ Soften your summary with phrases like, 'It sounds like you ...'.

▶ Use paraphrasing statements more than questions.

▶ Allow plenty of time and pauses for the speaker to add to what they are saying.

▶ Focus on the last or the most prominent feeling, if more than one feeling is expressed.

▶ Don't add to or subtract from what the speaker has said.

▶   Use neutral words, body language and tone of voice.

▶   Agree with everything the speaker says to avoid conflict.

Nonverbal communication

People can give the wrong impression when they are communicating. Unintentional facial expressions can conflict with the verbal message you are communicating. If you cross your arms, you may be unintentionally communicating that you feel defensive.

Paying attention to all aspects of communication is essential when you are establishing a relationship with someone you support and understanding their wellbeing. If you are handling a difficult situation, your body language could make the situation worse. Your tone of voice, choice of words, facial expressions and gestures are all very important when communicating. Here is a list of nonverbal communication considerations.

Nonverbal communication to consider

▶   Your tone of voice and whether it is pleasant, friendly, annoyed or angry

▶   The volume of your voice and whether it is loud or soft

▶   The pace of your voice; whether it is fast or slow

▶   Your body language and whether you are nodding your head in agreement or pointing your finger

▶   Your facial expressions, such as whether you are smiling or frowning

Identify other information to gather about wellbeing

Work collaboratively with the person to identify other information to gather about their wellbeing. As well as doing an interview with the person, you may mutually decide to conduct an assessment of the person's wellbeing. Assessments may be formal, such as a psychiatric test conducted by a psychiatrist or psychologist. Assessments may also be informal, such as informal observation of a person completing a task.

Provide the person with a range of options for them to consider, and ensure you have provided detailed information about the other sources before obtaining information. For instance, if the person has agreed to undergo a formal assessment, they need to be informed about how the assessment will take place, why the assessment is useful, and how results will be used.

Sources from which you may gather information about wellbeing are listed below. Always obtain the person's informed consent before acquiring information on their behalf.

Sources of information

▶   Medication charts

▶   Medical history

▶   Documentation about past support and care

▶   Assessment results

Identify other people to contact about the person's wellbeing

The person may have other people in their lives who can be a useful source of information about the person's wellbeing. This includes the person's family, friends, carers, other staff, teachers and health professionals.

Always ensure the person provides inform consent before making contact on the person's behalf. Be mindful of the person's confidentiality when obtaining and disclosing information. There may be contributing factors that you may not think of until they are brought up by the person's family member, partner or friend.

Document what you learn, and discuss with the person how this information adds to your general understanding about their wellbeing.

Example

Identify resources to better understand the person's social and emotional wellbeing

Omar has mental health issues and regularly misuses prescription drugs (painkillers). Martin wants to understand more about Omar's social and emotional wellbeing and asks Omar questions, such as how the drugs make him feel, and how he feels on an average day. Omar gets frustrated with the questions, as he says he can't really talk about emotions and feelings. He says Martin should talk to his wife, Ingrid. Martin gets Omar's permission to talk to Ingrid, and gives Ingrid a call. Ingrid is happy to talk about Omar's day-to-day emotions and behaviour. She also mentions that Omar has a strong relationship with the local football club, and football is a very positive aspect of Omar's life. Martin documents the key points of the conversation, then discusses the points with Omar, who agrees with most things Ingrid explained.

Practice task 5

1. Identify two sources of information you could use when obtaining information about a person's wellbeing.

2. Identify two people you could use when obtaining information about a person's wellbeing.

3. What legal and ethical considerations should you make when obtaining information?

Click to complete Practice task 5

1F Determine who the person wants to involve in their plans and support

Once you have determined possible wellbeing issues and needs, you need to work with the person to develop a plan for optimal wellbeing. The plan should be goal-orientated, and self-directed. The person should identify the goals for themselves and decide how they intend to implement goals.

To ensure goals are achievable, it is important to use the person's existing resources as much as possible. These may be internal, such as their personal commitment to achieving a goal. Support may also be social and external, such as family and friends, and relevant health practitioners. Carers and staff are also important for providing support.

Support will be more effective if the person is involved in decisions about people they want to involve in plans and support.

People you may involve include:

▶ parents

▶ siblings

▶ significant others

▶ children

▶ friends

▶ community members, such as pastor, football coach or teacher

▶ health professionals, such as doctor, physiotherapist and dietician.

Example

Determine who the person wants to involve in their plans and support

Tamara is overweight and suffers from bulimia. She has sought help from a counsellor, Jackie, who is keen to help Tamara develop an effective plan for managing her weight and her mental illness.

Jackie asks Tamara who she thinks she can talk to about her eating disorder. Tamara says she is close to her mum, and feels her mum understands her. Jackie asks Tamara whether she and her mum can develop a plan together for managing the eating disorder. Tamara thinks it's possible.

Jackie also asks Tamara about professional support for her weight management. Tamara doesn't know anyone, so Jackie lists a couple of dieticians she has worked with as well as a local personal trainer, and suggests Tamara makes contact.

Jackie documents details about Tamara's support network in Tamara's plan, and gives a copy to Tamara. She tells Tamara that any detail can be changed at any time – they just need to talk about it first.

Practice task 6

1. If a person is very religious, suggest who their natural supports may be.

2. If an older person lives alone in the community, suggest who their natural supports may be.

3. Why do you need to involve the person in all decisions about involving natural supports?

<div style="text-align:center; color:white; background:#F5A800; font-weight:bold;">Click to complete Practice task 6</div>

1G Identify, negotiate, obtain and document consent

You have a legal responsibility to obtain consent from the person, before making contact with their supports, or disclosing any information about the person on their behalf. Consent may be given verbally and/or in writing. For example, your organisation may have a consent template, which can be used.

The person may be reluctant to offer consent, perhaps because they are worried about what the other person thinks of them. Respect the person's concerns. But you may need to negotiate with the person about obtaining consent. For example, the person may be reluctant to obtain their wife's support, as they don't want their wife to know they have depression. Through careful use of negotiation, you can help the person see that their wife's support is essential to their path to wellbeing.

Once consent has been provided, ensure you document it before making contact with the person or agency. This is an important legal requirement.

When practising negotiation:

▶ allow each person to speak clearly about their perspective, while the other people or person listens

▶ use summarisation to summarise what was said

▶ present the solutions to both or all parties and ask for feedback or comments

▶ if conflict arises, practise conflict management techniques, such as being assertive, and encouraging empathy.

Example

Identify, negotiate, obtain and document consent

Michelle provides support services to Jack who is experiencing anxiety and depression. Jack also has an acquired brain injury which affects his memory and his ability to walk unaided. Jack says his health issues are affecting his relationships and he feels socially isolated. He also worries that he is now a burden on his wife Lucy, that she finds life with him boring and that she will leave him. Michelle asks Jack if he has discussed these issues with his wife. Jack says he's worried he will make matters worse, stating 'I just can't talk to Lucy like I used to'.

Michelle suggests she could speak to Lucy on his behalf to begin with. She offers to support both Jack and Lucy to discuss their situation and strategies to help them. Jack thinks this is a great idea. Michelle then explains that she needs Jack's written permission to discuss his information with Lucy. Jack agrees so Michelle and Jack complete the consent form.

Here is an example of the completed consent form.

Consent form	
Consent for:	Contacting Lucy Williams, wife of Jack Williams, about the need for support
Consent obtained:	16 March 2016 from Jack Williams
Signature of consent:	*Jack Williams*
Signature of worker:	*Michelle Webb, support worker*

Practice task 7

1. Why might you need to negotiate consent?

....

....

....

....

2. Why should you document consent?

....

....

3. Provide one example of when you need to obtain informed consent.

....

....

....

....

Click to complete Practice task 7

Summary

1. Holistic wellbeing refers to the person's wellbeing in all aspects of their life – social, emotional, physical, cultural and spiritual and cognitive.

2. Provide information about assessment processes, such as observation and interview, when completing a picture of a person's wellbeing.

3. Use collaborative, strengths-based strategies for enhancing wellbeing, such as motivational interviewing, ACT, CBT and solution-focused approach.

4. Be aware of your own judgment and beliefs when providing non-judgmental care and support.

5. Work within legal and ethical considerations, such as privacy and confidentiality, duty of care, work health and safety and mandatory reporting.

6. The person should always be involved in all decisions about collaborative relationships formed with natural supports.

7. Always obtain informed consent before obtaining or disclosing information about the person.

Learning checkpoint 1
Assess the person's wellbeing

This learning checkpoint allows you to review your skills and knowledge in assessing the person's wellbeing.

Part A

1. Explain how you could provide information and resources to a person about two aspects of holistic wellbeing.

2. Briefly explain one of the following strategies: coping strategies, mindfulness, relaxation.

3. How can you minimise iatrogenic effects of mental illness diagnosis?

4. Choose one of the following approaches to supporting wellbeing and explain why it is an effective approach to addressing wellness issues:

   ▶ Motivational interviewing

   ▶ Strengths-based approaches

   ▶ Cognitive behavioural approaches

   ▶ Narrative approach

   ▶ Acceptance commitment therapy

   ▶ Solution-focused approach

5. Explain how you would explore wellbeing with the person, identifying strengths and strategies that keep the person strong, and identify one evidence-based practice you could use to support individual domains.

Part B

Read the case study, then answer the questions that follow.

> ## Case study
>
> Ryan is a young Aboriginal man who grew up in an abusive home environment and has witnessed domestic violence most of his life. He started using marijuana and later methamphetamine as a coping strategy. Drug use and addiction has lead to mental health issues such as depression and paranoia. Ryan has been unemployed for many years and has several financial issues, including a large debt to a money-lender. He is also behind on his rental payments.

1. Explain how you would reflect on and respond to your own values, beliefs, attitudes, power and behaviours to ensure non-judgmental practice when working with Ryan.

2. Explain your legal and ethical responsibilities when supporting Ryan's wellbeing, including:

   ▶ rights and responsibilities of workers, employers and individuals accessing the service

   ▶ discrimination

   ▶ human rights

   ▶ privacy, confidentiality and disclosure

   ▶ informed consent

   ▶ duty of care

   ▶ dignity of risk

   ▶ policy frameworks and procedures

   ▶ codes of practice

   ▶ work health and safety

   ▶ mandatory reporting.

3. Explain how you would clarify and respect Ryan's choices, parameters and boundaries.

4. How would you work with Ryan to identify useful information or people to contact to add to the understanding of his social emotional wellbeing?

5. Explain how you would determine with Ryan other people, including the natural supports, he wants involved in his plans and support.

6. Why should you identify, negotiate, obtain and document any consents required?

Topic 2

In this topic you will learn how to:

2A Discuss with the person their health and physical wellbeing

2B Discuss health issues or risks and seek professional advice

2C Identify last health check and facilitate referrals or appointments

2D Arrange health assessments or medication reviews based on needs

2E Develop strategies to improve physical health

2F Promote healthy living habits using credible information sources

Promote physical wellbeing

Some people believe health is merely the absence of disease, illness, or impairment. A more appropriate view is to see health, particularly optimal health, as being a person's best possible physical and mental functioning.

As a support worker you have a duty of care to ensure that more than a person's basic needs are met. One of a person's basic needs is their physical wellbeing. Physical wellbeing refers to how effectively the body functions. Physical wellbeing is linked to disease management, good nutrition and diet and physical exercise. Work collaboratively with the person and their health professionals to maintain and support positive physical wellbeing.

2A Discuss with the person their health and physical wellbeing

The first step to understanding a person's physical wellbeing is to discuss physical issues with the person. Some physical issues will be more obvious; the person may have a physical disability for instance. Some physical issues may be less visible; the person may experience headaches, or stomach problems.

Discuss with the person how they are feeling, but also discuss ways to manage and maintain physical wellbeing.

Here is a list of topics you may want to discuss with the person.

Physical issues and requirements to discuss
▶ Nutrition
▶ Exercise
▶ Food security/insecurity
▶ Self-care style opportunities and information
▶ Oral health
▶ Comprehensive health checks
▶ Access to health services, and natural supports and resources
▶ Sexual health strategies including contraception, sexually transmitted infections (STIs) and strategies for sexual expression

Methods to discuss physical wellbeing

When discussing physical wellbeing with the person, always listen attentively. The person may be trying to express a physical need and may use language, but may also use nonverbal language.

If the person is from a culturally diverse background and experiences language barriers, you may use other means of communication when consulting the person about their physical wellbeing. For instance, you may engage a translator, or use images and nonverbal communication.

Be sure to clarify with the person, to fully understand their needs. Clarify by asking concrete questions, asking for more details, and summarising what the person has said. For instance, if a person tells you they are struggling to quit smoking, you summarise by saying, 'I hear you telling me that you struggle to quit smoking. Could we talk about some of the reasons?'

Here are some methods for discussing health and physical wellbeing with the person.

Methods for discussing wellbeing
▶ Formal interview
▶ Health assessment questionnaire
▶ Informal questions about overall health and wellbeing
▶ Ask open-ended questions about wellbeing
▶ Discuss wellbeing options with the person; such as methods for quitting smoking
▶ Provide supplementary material and support; such as brochures about quitting smoking
▶ Maintain confidentiality when discussing health and physical issues

Nutrition

Food plays a more important role in fuelling the body's system. The body needs carbohydrates, water, vitamins, minerals and proteins to function effectively.

Nutrients have a role in processing waste and providing energy, nerve function and skin maintenance, growth and metabolic activity, immune system function, and the growth, maintenance and repair of cells. Poor nutrition can lead to obesity, dehydration, illness and disease, lack of energy and feeling unwell.

Support the person by discussing their nutritional requirements. The person may benefit from working with a nutritionist or dietician, to ensure their nutritional needs are adequately met.

Here are some strategies you can use when supporting a person to meet their nutritional needs.

Plan a menu

▶ One effective way of working with a person to meet their nutritional needs is to help them plan a weekly or daily menu. Ensure that all five food groups are adequately represented and that portions are suitable for the person's health. The person may have specific dietary needs, such as allergies, or dysphagia which causes swallowing problems. Ensure menu items meet specific needs and meet the lifestyle needs of the person.

Provide information about dietary requirements

▶ Support the person by providing information about dietary and nutritional requirements. You may also provide brochures, pamphlets, books and research about nutrition. Talk to a dietician or nutritionist for the latest advice. Nutrition Australia can also provide useful information; visit their website at:
  – http://aspirelr.link/nutrition-australia-home

Engage a dietician

▶ A dietician or nutritionist can help support the person's nutrition needs and help you and the person plan a menu.

Exercise

Exercise is important for healthy wellbeing. Exercise should be appropriate for the person and meet their specific needs. For instance, older people will benefit from regular gentle exercises, whereas a younger, able person may benefit from frequent vigorous exercise, which increases strength and cardiovascular wellness.

Exercise is important for weight management. Almost two in three Australian adults are considered obese. Obesity and being overweight leads to cardiovascular disease, Type 2 diabetes, some cancers, and musculoskeletal conditions. Regular exercise and nutrition can support a person's weight management.

Strength-building exercises are important for bone health, particularly for women as they age. Muscular strength decreases the risk of osteoporosis and falls. It also improves metabolism.

Cardiovascular exercises, such as running, fast walking or swimming, improve general health, increase weight management and support cardiovascular health. Exercise is also recognised as having a positive effect on mental health and emotional wellbeing.

Here is more information to consider.

Find out about the person's health needs

▶   A person's exercise schedule will depend on the person's specific needs. Is the person older? Is the person female or male? Does the person have injuries which affect the type of exercises the person can do? Talk to the person, but also engage the support of professionals, such as a physiotherapist or doctor to ensure exercises are appropriate for the person.

Plan an exercise schedule

▶   Exercise is most beneficial if done regularly. Help the person identify ways to integrate exercise into their regular routine. Maybe the person can take the stairs, instead of the lift. Encourage the person to walk to work, rather than catch the bus. If exercise goals are achievable, the person is more likely to stick with their schedule. Likewise, if the person is responsible for identifying exercises they can integrate into their life, they are more likely to do exercises.

Food security and insecurity

A person with a mental illness may have had periods of food insecurity when they could not obtain safe, nutritious food. This may have been in a period of homelessness or perhaps as a consequence of loss of income, or when other elements of their health prevented them from understanding the need for safe, nutritious food. There may have been opportunities for the person to access nutritious food, but they were not aware of them.

The person may have been eating what they can find in the street, or eating very irregularly. They may only be eating food that is high in carbohydrates and they are missing out on the intestinal health benefits of foods with fibre such as fruits and vegetables.

People may rely heavily on eating mass produced take-away food because it is cheap and ready to eat. This is usually extremely high in fat, sugar and salt, which are linked to many health conditions. Talk to the person about food issues, and their relationship

to food. Be empathetic, and respectful of the person's situation. Work collaboratively with the person to plan how food security or insecurity issues can be addressed.

Here are some factors that may contribute to food security and insecurity.

Deprivation

A person's background and upbringing may not have provided opportunities for them to learn some basic food preparation skills. They may have been living in an environment such as a refugee camp where they have not had access to what we consider to be a normal kitchen. They may not have ever learnt to shop for food or how to select food, or they may be living in a new country where the food is unfamiliar, and the food they know is not available. They may not have ever used basic cooking facilities or possess any basic cooking utensils. It is likely they have very few possessions and, especially if they have been homeless, they will not have anything with which they can prepare food.

Physical issues

Some people may have difficulty swallowing (dysphagia) and this may affect their nutritional state. This may indicate a problem with their throat or may be related to brain damage or problems with the central nervous system. There are many causes of dysphagia, and it can be a reason why people don't eat, or restrict their diet to only certain types of foods; eating is too difficult and it causes pain.

Motivation

The person may not be motivated to prepare food or take an interest in it. This may be the result of an eating disorder, substance abuse or that purchasing food and food preparation can be too complex, especially when the person is experiencing a particular period of ill-health. Managing food takes planning and decision-making skills that the person might not have. There is also the expense and the need to budget for food. Some people may opt to spend their money on things other than food, so nutrition is not a priority.

Self-care opportunities and information

General self-care impacts a person's self-image, and maintains general physical wellness. Self-care is generally learnt. Basic self-care, such as handwashing or personal hygiene, may never have been taught. Circumstances may limit a person's ability to practise self-care. If a person is homeless, they may have limited opportunities for sanitation. Poor self-care may be linked to mental health issues. If a person is depressed, they may lack motivation to shower and dress.

Poor self-care may result in medical issues. Poor nutrition and lack of exercise, for instance, may lead to health conditions. If a person is busy, or disinterested in their self-care, they may eat fast food regularly, instead of fresh and whole food, which negatively impacts physical wellbeing.

Help the person plan self-care. Self-care is the accumulation of daily practices, such as eating well, exercising and maintaining personal hygiene. Self-care goals should be achievable, and ideally identified by the person for optimal effectiveness. Research support services that could help the person maintain basic hygiene practices such as home-care services or volunteer or community groups.

Oral health

People often eliminate certain foods from their diet when they have trouble with their teeth, as it can be too difficult to tear, bite and chew food without a full set of healthy teeth. Poor oral hygiene increases the risk of infections entering the blood stream.

Poor oral health can be both a cause and result of poor nutrition as the type of food eaten can reduce nutrition. Poor nutrition can result in poor oral health. Bacteria can enter the system through dental cavities. There is a strong relationship between poor oral hygiene and some illnesses such as diabetes.

If a person is not using a toothbrush and toothpaste, not drinking enough water, not creating saliva and not eating fibrous foods, they are not cleaning or washing the plaque off their teeth. Eating food high in sugar leads to bacteria growing on the teeth and teeth decay.

Support oral health by discussing current oral health practices with the person. Address nutrition, and teeth brushing habits. Also discuss the need for regular visits to the dentist for check-ups and cleans.

Comprehensive health checks

Comprehensive health checks are when a qualified health practitioner, or team of health practitioners review a person's general health. They may conduct physical assessments, such as skin checks, blood pressure, and lung capacity. They may observe the person's physical condition, review medication charts and medical history and interview the person about their physical wellbeing.

Regular comprehensive health checks help the person maintain physical wellness. The team can help the person plan ways to address specific issues, such as dental health or suggest exercises the person can do. Comprehensive health checks are important for vulnerable people, such as those with medical conditions, who have substance abuse issues, or who are elderly.

Support a person by helping them plan when regular health checks are needed and where they can go for assessment. Include a written schedule in the person's support plan, so other staff can assist the person to keep their scheduled appointments.

Access to health services, natural supports and resources

A person's access to services and natural supports and resources helps a person maintain physical wellbeing. People need to access health support to address specific issues; for example, they may need a hospital, or to see a doctor. Access to services helps a person maintain wellbeing, to prevent the occurrence of problems and challenges. Natural supports help a person maintain wellbeing; for example, if a person aims to quit smoking, family members can remind the person of their goals, and avoid smoking around the person.

Find out about the person's access to health services. If the person lives remotely, such as in a remote Indigenous Australian community, they may have limited access to health services. A person's access may also be limited by finances, transport issues and lack of time. Help the person identify suitable and accessible health services. You may need to support the person by finding out about bulk-billing opportunities, or helping them understand Medicare rebates.

Help the person identify who and what their natural supports and resources are. A significant other may assist with dietary requirements, for instance. The local community sports facility may support the person maintain a regular exercise schedule.

Sexual health strategies

Sexual health is an important aspect of holistic health. Sexual wellbeing can support physical, mental and emotional wellbeing. Talking to the person openly about their sexual health can help prevent sexual health issues. Sexual health strategies should include contraception, sexually transmitted infections (STIs) and strategies for sexual expression. Here is more information.

STIs

There is a range of sexual health issues that can affect a person; some have obvious symptoms, and others are less visible. Chlamydia, for example, can have no obvious symptoms, but is potentially very harmful and easily spread. AIDS can be contracted through unprotected sex, as can sexually transmitted infections (STIs). Unsafe sexual practices can lead to infestations of pubic lice, herpes, and infections to the mouth and lips.

A person may not know how STIs are transmitted. They may benefit from information about protection against STI. Information about sexual health is readily available in many formats and should be included in the range of information you provide. Engage the support of a family planning centre or doctor.

Pregnancy

Women need to be informed about contraceptive options. Options include the contraceptive pill, condoms and a hormone coil. In the case of rape, or unintentional ejaculation, there is a contraceptive pill, which can be taken.

If a woman becomes pregnant, she may need support and advice about her options and about care during pregnancy. The woman should visit her GP or family planning clinic for advice. Support during pregnancy can reduce the risk of complications to the woman and her baby. Pregnancy can often lead to many emotional and hormonal changes, which the woman may need support dealing with.

Sexual expression

Healthy sexual relationships are important for overall wellbeing. There are many different forms of sexual expression and each individual has personal preferences. Sexual expression may be independent, such as masturbation, or with another person. Sexual expression may be heterosexual or homosexual. Talking openly and confidently with a person about their individual preferences helps support positive sexual health options.

> **Example**
>
> ### Discuss with the person their health and physical wellbeing
>
> Meika supports a group of young women who are at risk of domestic violence and abuse. Meika talks to Katie, one of the women, about her physical health. She makes sure the room is secure and quiet so Katie feels safe and the information they discuss is kept private and confidential.
>
> Meika asks Katie open-ended questions about her physical wellbeing, such as her eating habits, exercise, and how she is feeling. Katie has endured years of physical abuse and her many physical injuries still cause her pain. They talk about the possibility of Katie seeing a doctor to address the injuries and pain. Katie mainly eats fast food and smokes marijuana daily. She has poor nutritional habits and although she is still fairly young, is at risk of poor health conditions. Meika helps Katie locate a nutritionist she can talk to about her dietary needs and helps her plan a weekly menu that is affordable and achievable. She also encourages Katie to visit her GP to find out about options to help her quit smoking.

Practice task 8

1. What would you discuss with the person regarding their nutritional, exercise, food security, self-care and oral health needs.

2. Why is it important to discuss sexual health strategies including contraception, sexually transmitted infections (STIs) and strategies for sexual expression?

Click to complete Practice task 8

2B Discuss health issues or risks and seek professional advice

Open and respectful discussion with the person about their current physical wellbeing can help a person plan ways to improve and enhance wellbeing.

You may discuss dietary habits, or smoking habits, and how they impact the person's health. You may discuss the range of health conditions linked to smoking or poor nutrition.

As well as discussing health issues and concerns, make observations. You can clarify your observations with the person to form a comprehensive picture of the person's wellbeing.

Questions to ask when observing physical wellbeing include:

▶ Does the person look undernourished or do they carry too much extra weight?

▶ Does the person appear to be in pain, have an uncomfortable posture, or have difficulty moving or sitting and standing?

▶ Does the person have any obvious symptoms of an illness? Are they sweating, shivering, congested, coughing, have red-rimmed eyes or a rash?

▶ What level of self-care does the person demonstrate?

▶ Do they have any obvious injuries?

▶ Do they have full use of their limbs, hands and feet?

▶ Do they appear to have trouble with their hearing or sight?

Questions to ask a person about physical wellbeing

Physical wellbeing plays a significant role in every person's life and can affect other aspects of their wellbeing. It is important to gain a full understanding of a person's physical wellbeing and discussing physical aspects can usually provide a good starting point when assessing a person's overall wellbeing.

Here are some basic questions you may ask a person about their physical health.

Questions to ask about physical health
▶ How do you feel?
▶ Where is the pain?
▶ How intense is the pain?
▶ How bearable is the pain?
▶ What have you eaten today?
▶ What are your exercise plans?
▶ When did you last visit your health practitioner?

Discuss fitness and nutrition

Talk about a person's current eating and exercise program. It may help the person to identify exactly what they ate on a given day, and identify where they can make improvements. Likewise, review all physical activity the person undertook in the last week and discuss options for improvement.

If the person has specific health needs, such as diabetes, allergies or obesity, engage the support of a health professional. Advice must support the person's wellbeing and must not harm them in any way.

Seek professional help as required

When planning positive steps to wellbeing, it is useful to engage the support of professionals, particularly if the person has specific health needs, such as a medical condition.

Your organisation may have a list or database of health professionals regularly accessed by the service. Ideally, the person sees someone they are comfortable with. They may have a family doctor, for instance. The health professional should be accessible financially and physically.

You may need to assist with referrals. Follow your organisation's referral procedures. As much as possible, encourage the person to self-advocate – that is, contact the referral themselves.

Always seek the person's informed consent before sharing information with a health professional during referral.

You may seek assistance from:

▶ a doctor/GP

▶ a physiotherapist

▶ a dietician

▶ a nutritionist

▶ an osteopath

▶ a massage therapist

▶ a personal fitness trainer

▶ a gerontologist.

Example

Discuss health issues or risks and seek professional advice

Gavin tells his support worker, Steve, in his assessment that he is really unfit and wants to improve his physical fitness. He is 57 years old and overweight. He says he was kicking a football with some housemates recently and was surprised at how quickly he became short of breath. Each time it happened he waited until he got his breath back but he would be short of breath as soon as he started running again. Steve recognises that this could be a risk to Gavin's health but that it is beyond his work role to provide Gavin with advice.

Steve reports to his manager. Using the organisation's referral procedure, a referral is made for Gavin to have a full health check with his GP. The doctor diagnoses a problem with Gavin's heart and refers him to a heart specialist. Within a week Gavin has heart surgery.
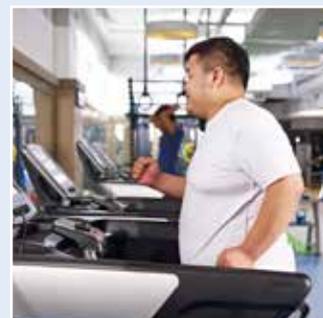
Practice task 9

1. List two methods could you use to discuss health issues and potential risks.

2. List two points you could discuss when talking about the person's fitness and nutrition.

3. What procedure should you follow when seeking professional advice?

Click to complete Practice task 9

2C Identify last health check and facilitate referrals or appointments

Regular health checks help ensure the person's physical wellbeing is maintained. Health checks can measure weight, help identify medical conditions, and observe physical wellness. Health checks may be conducted by a doctor, dentist, physiotherapist, dietician, nutritionist or a team of health professionals. Find out when the person last had a health check.

To find out when the person's last check was:

▶ ask the person directly

▶ view the person's medical history

▶ talk to the person's health professional, with the person's permission

▶ ask the person to complete a health assessment questionnaire.

Facilitate appointments and referrals

Depending on the person's specific circumstances, you may need to facilitate appointments and referrals. Specialists and professionals can provide additional support, knowledge, diagnoses, treatment and wellbeing management advice. They can also conduct assessments to determine wellbeing problems and issues, or progress made.

Help the person identify a health practitioner they feel comfortable seeing. For example, a female dealing with sexual health issues may feel more comfortable seeing a female doctor. The professional, or team of professionals, should be physically and financially accessible.

The four main types of referral processes are detailed here.

Urgent or emergency referral

If a person requires urgent medical or psychiatric assistance, an emergency or urgent referral should be conducted.

Example
You are required to contact the Crisis Assessment Team (CAT) because an individual tells you they are planning to commit suicide and have collected enough prescription medication to do so.

Passive referral

The person is given the contact details of the external service and other relevant information. The individual is encouraged to contact the service and make an appointment.

Example
A person has described the experience of having panic attacks in the assessment interview. You suggest that they should contact their GP and seek a mental health care plan to obtain a referral to a psychologist. The person leaves the meeting telling you that they plan to call their GP that afternoon to arrange an appointment.

Facilitated referral

The person is assisted to contact the referral. For example, the community services worker contacts an external service with the individual's permission to make an appointment. The person is given necessary assistance to access service, for example, transport support.

Example

A person has presented with dementia and is at risk of homelessness. The caseworker consults the person about available public care facilities with a specialised dementia care unit that can provide housing and support. The worker asks if the person requires assistance contacting the specialised dementia care unit. She does, so in the person's presence, the worker phones the unit to make an appointment on the person's behalf.

Active referral

In the presence of the person and with their consent, the support worker makes an appointment by contacting the other service and shares relevant assessment information and ensures the person can access the service. The worker reviews the referral to ensure the service continues to meet the person's needs.

Example

A person presents to an AOD agency with complex issues; bipolar disorder, suicide ideation and risk of homelessness. The person is currently severely depressed and unmotivated to access required services. The worker discusses options with the individual and asks for consent to phone the CAT team, an appropriate mental health service and housing services to make referrals. They ensure the person makes all scheduled appointments and phones the service after each appointment to update the person's care plan.

Encourage people to advocate on their own behalf

If the person has the ability, encourage them to advocate on their own behalf to access services. Successfully advocating for themselves is empowering.

This process of self–referral can be effective if the person:

▶ is aware of how to approach services providers and make their needs known

▶ has the communication skills to express what they need

▶ has the confidence to ask questions and approach new people

▶ are literate so that they can read information from the service provider and fill out relevant forms.

Provide information

Ensure you provide information to the individual that will address any barriers they may encounter when following up on health referrals and appointments.

Consider issues such as:

▶ the person's mobility, transport options, and ability to access the medical service

▶ their level of independence and whether they can, or wish to, attend an appointment by themselves or with support

▶ the timing of the appointment; for example, the person may feel they function better in the morning

Identify last health check and facilitate referrals or appointments

Jake was once so drunk that he passed out on a couch and slept for about 24 hours with his arm in an awkward position underneath him. This restricted his circulation and as a consequence he now has limited use of his arm.

He has shared this information with his support worker, Terri, as it is a factor that limits his participation in the programs and activities that he does. He says that lately his arm has become worse but says he can manage and he won't let it stop him doing things; he'll just use his good arm.

Terri recognises the potential risks of the injury to Jake's wellbeing and follows her organisation's procedures to refer Jake to a doctor. Jake is reluctant for this to happen but Terri explains the importance of the situation and says she has a duty of care to support him and minimise his risk of harming himself. Jake responds to the concern she shows by agreeing to the referral.

Practice task 10

1. Why do you need to find out when the person's last health check was?

_____

_____

_____

2. List two barriers that may prevent a person accessing referrals or appointments.

_____

_____

_____

_____

3. How can you find out when a person last had a health check?

_____

_____

_____

_____

Click to complete Practice task 10

2D Arrange health assessments or medication reviews based on needs

Although you are not a medical professional, nor expected to act like one, it is useful to research basic health assessments to support individuals. For reliable and user-friendly information on a variety of health topics visit the Better Health Channel at:

▶ http://aspirelr.link/better-health

Some people are at higher risk of a particular disease and should be checked more frequently or at an earlier age than others. There are also self-check lists that might provide useful information that will help you discuss health checks with individuals.

In keeping with respecting the person's rights as an individual, ensure that the person is referred to health assessments based on their needs and not because it provides an opportunity to look for conditions for which there is no evidence.

Evidence-based practice requires effective diagnosis. Although some conditions may be difficult to diagnose, and may take a number of assessments before being correctly identified, it is essential that the symptoms causing concern to the individual are addressed.

Arrange health assessments

Health assessments may be regular, or may be used to address a specific issue. Health assessments may be conducted by one or more health practitioners.

Support the person by arranging specific health assessments, in accordance with your organisation's referral procedures. Always maintain the person's confidentiality and obtain their permission before sharing their details with a health professional.

Health assessments may be conducted by various professionals, including:

▶ doctors

▶ physiotherapists

▶ dieticians

▶ nutritionists

▶ gerontologists

▶ dentists

▶ podiatrists

▶ gynaecologists

▶ oncologists.

Medication reviews

Medication is prescribed by a doctor. Some medication can be over-the-counter, meaning it can be purchased without a prescription from a doctor. Some medication is prescription only.

The person may use a blister pack; a secured packet, which contains the correct dose of medication for the correct day. Blister packs can only be prepared by a doctor and a pharmacist.

The person will have a medication support plan, which will outline what medication they take, the dose, and the administration route. Support workers are only allowed to facilitate medication administration, but cannot conduct administration themselves. They should follow instructions provided by a doctor, nurse or pharmacist and their organisational policies and procedures.

A person's medication should be reviewed on a regular basis for effectiveness. Regular medication reviews are important as they assess the currency of medication taken, ensure there are no contraindications and that medications are being administered correctly. Find out when the person's last review was and arrange a medication review if required. If you are concerned medication is not effective, or there are side effects, arrange for a medication review as soon as possible.

Example

Arrange health assessments or medication reviews based on needs

Sylvia has just started to take responsibility for her own medication and feels very confident about following the medication schedule. However, she also sees it as an opportunity to change the dose. She has purchased some herbal remedies that she plans to use in conjunction with her medication.

When Ruby checks with Sylvia about how she is managing her physical health, Sylvia tells her she has 'improved' her medication. On further investigation, Ruby sees the need for a formal medication review, to ensure the herbal remedies do not contraindicate with the prescribed medication, and to make sure Sylvia's dose is appropriate. Ruby talks to Sylvia about the importance of discussing these changes with her doctor. Ruby obtains Sylvia's consent to speak to her doctor directly and then organises for herself, Sylvia and the doctor to meet and implement a medication review.

Practice task 11

1. According to Diabetes Australia, approximately 280 Australians develop diabetes every day. Risk factors for Type 2 diabetes include:

    ▶ family history of diabetes

    ▶ pre-diabetes (slightly elevated blood glucose levels)

    ▶ age over 45 years

    ▶ being overweight or obese

    ▶ high blood pressure

    ▶ high blood cholesterol

    ▶ smoking

    ▶ sedentary lifestyle

    ▶ history of angina (chest pain), heart attack or stroke

    ▶ particular ethnic backgrounds.

    Briefly describe how you would use this information to talk to the person about having a health assessment.

2. How would you arrange an assessment for this person?

3. What is the purpose of a medication review?

Click to complete Practice task 11

2E Develop strategies to improve physical health

Even small changes can improve a person's physical health, so an individual should identify simple strategies that will help them do this. These can be things that are fairly low impact to their lifestyle, such as reducing the number of cigarettes they smoke every day, or limiting the amount of sweet food they eat.

The person may make changes to their diet, or take up regular exercise. Using a fitness and nutrition plan, or itinerary may help the person effectively integrate changes into their daily life.

Support and encourage the person to identify areas where physical health could be improved

Talk to the person about their current physical condition, then talk about the person's physical wellness goals. Identify what their health goals are; for example, losing 10kg in one year. Goals should be specific, measurable, achievable, realistic and have a specific timeline.

If the person identifies their own goals and areas for improvement, they are more likely to achieve their goals. Here are two examples of wellness goals.

Quit smoking

▶ Rex wants to cut back on cigarettes as he has developed a bad cough and is worried about lung cancer. Rex smokes a pack a day and smokes more with beer or coffee than at any other time. Rex's support worker helps Rex identify his goal to reduce the amount of cigarettes he smokes per day. They decide that in the first week, Rex will smoke half a pack a day, and in the second week, he will smoke a quarter of a pack a day. By the third week, Rex aims to smoke one to three cigarettes a day. They identify Rex's natural supports; his wife, Helen and his kids, Sam and Lucy.

Lose weight

▶ Tam is 20 kg overweight. He talks to his support worker about his goal to lose 20 kg in two months. The support worker thinks this goal is unrealistic, and may possibly be unsafe. They engage the support of a dietician and an exercise therapist who help Tam develop a realistic plan for losing 20 kg in six months.

Strategies to improve physical health

Importantly, the person should be involved in all decisions to improve physical health. If they make a decision to make changes to health and wellbeing, they are more likely to sustain changes, and changes are more likely to be effective.

For changes to be made, people need to experience the benefits or be rewarded for making changes. Help the person identify what these rewards may be. For example, the person may feel pride when they see they have lost 2kg in a week. Rewards are more effective if they are intrinsic, rather than extrinsic; that is, that they come from within the person, rather than being external to the person.

Help the person set realistic wellness goals, with specific and achievable objectives that help them reach goals.

Here are some examples of strategies you can use to improve physical health.

Strategies for improving health
▶ Fitness program or dietary or nutritional daily menu
▶ Using natural and existing resources and supports
▶ Accessing resources and information about the benefits of good health
▶ Motivational interviewing
▶ Strengths based approach
▶ Goal setting and solution focused approach
▶ Cognitive behavioural therapy (CBT)
▶ Acceptance and commitment therapy (ACT)
▶ Narrative therapy
▶ Identifying rewards.

Example

Develop strategies to improve physical health

Simon knows Leigh's goal is to increase his fitness, so he decides to be pro-active and assist him. The next time they meet, he arranges for him and Leigh to 'walk and talk' instead of just talking. They walk around the block together while they discuss Leigh's activity plan. The walk is good for both of them and when they return, they write up all Leigh's goals, strategies and resources required to meet his needs.

Practice task 12

1. Reflect on a time when you made some changes in your life to achieve a positive outcome, or an occasion where you helped someone make changes. What factors supported progress towards the change?

2. What things encouraged you/the person to achieve your/their goals?

3. How did you/the person feel when you/they achieved a goal along the way?

Click to complete Practice task 12

2F Promote healthy living habits using credible information sources

Support people to make positive wellbeing changes by providing information. Be aware, however, of your information source and the reliability of information.

In the information age, there are vast amounts of information available. Using internet search engines to find information on a health condition or health issue will present thousands of entries and a lot of this information is unreliable. The information you provide to people, to support positive physical wellbeing, must be credible and accessible. Government resources, such as Better Health Channel, are useful places to start. Often there will be a resource page on these websites which will link you to other reliable sources of information. Generally speaking, information should be research based and evidence based.

Reliable sources of information include the following websites:

▶ Better Health Channel
  – http://aspirelr.link/better-health
▶ Australian government Department of Health
  – http://aspirelr.link/dep-health
▶ Diabetes Australia
  – http://aspirelr.link/diabetes-australia
▶ Nutrition Australia
  – http://aspirelr.link/nutrition-australia
▶ Heart Foundation
  – http://aspirelr.link/heart-foundation
▶ DrinkWise
  – http://aspirelr.link/drink-wise
▶ Quit
  – http://aspirelr.link/quit

Example

Promote healthy living habits using credible information sources

Max knows that several individuals he provides support services for are taking complementary medicines that are being sourced from other countries. He is concerned about the safety of the products.

Max visits the Better Health Channel and learns that the Therapeutic Goods Administration (TGA), a federal government department that regulates all medicines in Australia, has a branch that provides information about this specific issue. The Office of Complementary Medicines oversees the recall of faulty or dangerous complementary medicines. Max also learns that Australian law requires every complementary product to be assessed for the safety and quality of its ingredients. For this reason the site advises buying products made in Australia.

Max adds this information to his resource database and prints the information off to discuss with his manager, his colleagues and with the individuals he provides support services for.

Practice task 13

Read the case study, then answer the questions that follow.

Case study

Sara has expressed interest in a diet that claims to cleanse her body of toxins. She says that she has been looking at a website that describes this diet as being extremely positive to all aspects of health. It claims to bring clarity of mind and to purify the body.

Sara says a good thing about the diet is they provide a 'personal cleansing guru' who communicates by text message at only $10 per contact through direct debit, and you can purchase their special brand of 'purity foods'.

The support worker, Dana, suggests to Sara that there might be other sites that have information about a healthy diet that don't cost money. Dana helps Sara research some websites that have reliable information about healthy food choices, mainly government health and hospital sites. Dana and Sara discuss the sites and consider the full range of options.

1. What aspects of the cleansing diet appeals to Sara?

2. What concerns might Dana have about the scheme?

3. Describe two ways in which Sara's needs can be met without joining this scheme.

Click to complete Practice task 13

Summary

1. People have varying capacities to manage their personal care, depending on their mental health status and their living conditions.

2. Support the person to gain access to appropriate services which can support self-care and general physical wellbeing.

3. Aspects of physical health can impact significantly on holistic wellbeing.

4. A person with a mental illness may not have been able to access the resources they need for good nutrition, physical health and self-care.

5. A conversation about physical health and self-care needs to be non-judgmental and draw out relevant information from the past and the present.

6. A worker can learn about a person's physical health and self-care through observation.

7. Health services must provide resources and links to qualified health professionals that empower the individual to take responsibility for their physical health.

Learning checkpoint 2
Promote physical wellbeing

This learning checkpoint allows you to review your skills and knowledge in promoting physical wellbeing.

Part A

1. List two requirements and/or benefits of exercise to maintain healthy physical wellbeing.

2. List two requirements and/or benefits of nutrition to maintain healthy physical wellbeing.

3. How can you help a person address food insecurity issues?

4. Provide one piece of information you could give a person who needs support with self-care.

5. A person has poor oral health as a result of drug use. They also are at risk of Type 2 diabetes because of poor diet. Explain how you could help the person plan an oral health and comprehensive health check.

6. Explain general requirements for sexual health strategies including contraception, sexually transmitted infections (STIs) and strategies for sexual expression.

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Part B

Read the case study, then answer the questions that follow.

> ## Case study
>
> Carla is 89 years old, lives alone in the community and had polio in her childhood. She experiences chronic back pain which makes sitting or lying for long periods difficult. Carla smokes 40 cigarettes daily and drinks alcohol in the evenings. She doesn't enjoy eating alone and rarely makes nutritious home-cooked meals. Her meals are usually frozen food packs from the supermarket and quite often she throws most of it out.

1. List two potential health risks to discuss with Carla and explain how you would encourage Carla to seek professional advice as required.

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2. How could you identify when Carla's last health check was undertaken and how could you facilitate referrals or appointments?

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3. Why is it important to arrange for health assessments or medication reviews based on Carla's needs?

4. How could you proactively support Carla to identify physical health improvements and what strategies could you develop?

5. Suggest two possible natural supports that Carla could use to achieve her wellness goals.

6. List two established and credible information sources that you use to promote healthy living habits to Carla.

Topic 3

Promote social wellbeing

In this topic you will learn how to:

3A Identify and map the person's social support network

3B Assess the level of social inclusion, exclusion or isolation

3C Promote community participation to extend the person's social network

3D Determine current social activity and desire to increase participation

3E Support and regularly review social inclusion strategies

Human beings are social creatures. We have evolved to live in communities and to interact with others in a range of relationships, day to day, and for the duration of our lives. Being part of a family, a group of friends or a community are some of the most important aspects of wellbeing, as we need to feel that we are accepted and that we 'fit in' with others.

A strong social network can be an invaluable source of emotional resilience and motivation. There are many examples throughout history of people being able to cope with great hardship because of the close relationships they had with others, either as family or friends or colleagues, or even with the wider community.

Understanding a person's emotional and psychological state as well as their spiritual and cultural background may assist you in understanding a person's social preferences. This knowledge can be used to help the person expand their social networks. Work collaboratively with the person to promote and empower their social wellbeing.

3A Identify and map the person's social support network

Social networks can help a person integrate into the community. Integration plays a broader social role for people with disabilities or mental health issues. If people with disabilities or mental health issues are visible and participating in the community, their presence in society is normalised and this helps break down prejudice.

Social networks are groups of people or contacts that provide others with advice, information and support. Some examples are listed here.

Examples of social networks
▶   Family groups
▶   Work groups
▶   Sport and other recreational groups
▶   Age-related groups
▶   Community centres, community welfare groups and support groups
▶   Voluntary organisations
▶   Ethnic or religious associations

Types of social networks

There are many different types of social networks that can benefit a person's wellbeing. As a support worker it is your role to identify all supports that are available to a person.

Consider the following social networks.

Family

▶   Family groups can include a person's biological family; that is, people to whom the person is related. Family may mean immediate family (mother, father and siblings) or extended family (including uncles, aunts, grandparents and cousins).

▶   Single-parent families are made up of a mother or father and children. Families can also include adoptive families, foster families and respite families.

▶   In some instances a person will have a significant other or friends who form their family. Family can be a natural support and resource.

Work group

▶   A person in the workforce may need support from their employer and work colleagues. These people play an important role in helping the person integrate into the community.

▶   Support workers can encourage work groups to play an important part in the person's social development.

Support groups

▶   Support groups are a good source of information and can help people interact with their peers.

Sport and recreation

▶ Sport and recreational groups can offer someone the opportunity to socialise and maintain their physical and social or emotional health. For example, there are sporting groups especially for people with disabilities. Clubs are made up of people who share common interests such as fishing, swimming, netball, bowling, bushwalking, and golf.

Age groups

▶ Age-related groups can offer a person the chance to participate in the wider society.

▶ Community groups, welfare, religious and cultural organisations run programs designed specifically for people of a certain age.

▶ Youth groups can give young people opportunities to participate in age appropriate programs such as Scouts.

▶ Senior citizens groups and Probus clubs cater to the needs of older people.

Purpose of social network

Understand the purpose of social networking. People may want to join a social network for a number of reasons, listed below.

Purpose of social networks
▶ Develop new friendships
▶ Learn new skills
▶ Find out about a disease or disorder
▶ Develop fitness
▶ Strengthen family
▶ Improve communication and social skills
▶ Self-expression

Identify social preferences

Social networks offer opportunities for social interaction. The social network chosen must be selected carefully to ensure the individual gains the maximum benefit from their participation. One of the first things you should do is identify the person's interests. This allows you to look for social networks or groups that will be of interest to the person.

Ways to identify a person's interests include:

▶ reading the person's case notes to identify their likes, dislikes and preferences

▶ reading the initial assessment form to identify the person's medical condition and their physical, social and psychological needs

▶ talking with the person and their family members.

Identify and map social networks

A person's existing social support and network can help support the person's wellbeing. Help the person identify who their support network includes. It can be helpful to draw a diagram illustrating the person's links and network. This can help you and the person identify strengths and gaps. The diagram can also be used as a starting point to encourage the person to reveal aspects of these networks that they like and dislike.

There are many strategies that can be used to identify a person's social network, including talking to the person, their family and others in their community.

Here is a diagram of a person's network.
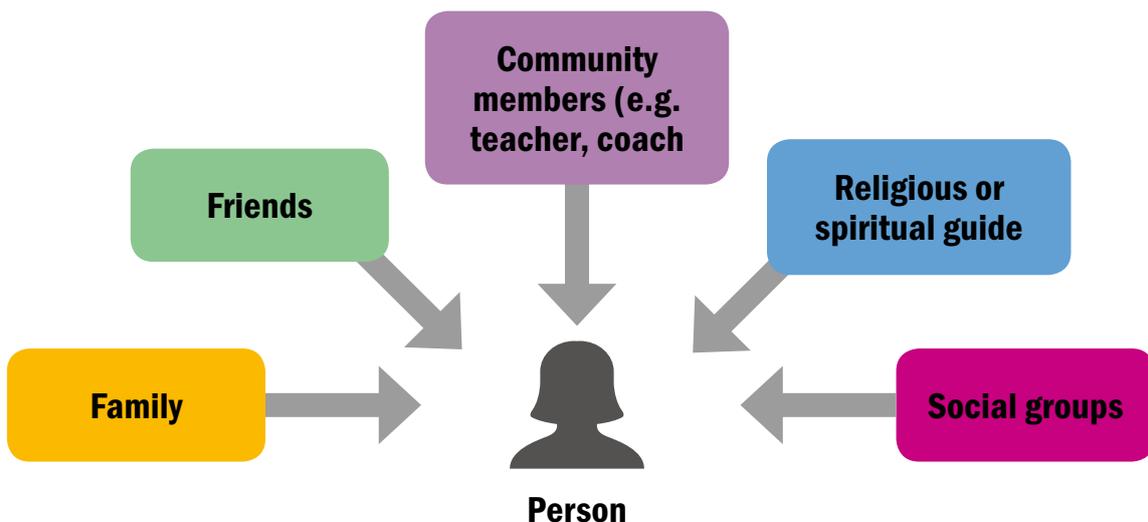
Support existing networks and build new networks

As with all interactions, you must make sure you are acting in accordance with the person's preferences. The person's thoughts and feelings may differ greatly from your own.

People you support may feel disempowered or powerless because they need to rely on others to meet many of their needs. It is your role, as a support worker, to help empower the people you work with. Empowerment refers to a person's sense of control over their lives or their feelings of autonomy.

Here is more information to consider.

Support person's capacity

People require appropriate interpersonal skills and confidence to participate in social networks. Interpersonal skills include:

▶ recognising non-verbal and verbal cues

▶ knowing boundaries

▶ speaking clearly

▶ understanding spoken messages.

People also need confidence to speak to new people and to assert themselves appropriately. Support workers can help by conducting role-plays with the person and/or referring people to living skills programs.

Link person to resources

There are various resources workers can use to support a person's social activities and engagement. These resources include transport, equipment, money and time.

Example

Identify and map the person's social support network

Liam is working with Jethro. They discuss Jethro's social activities.

Liam asks, 'What do you do in you spare time?'

Jethro replies, 'I run and swim.'

Liam clarifies, 'On your own or as part of a club?'

Jethro says, 'As part of a club, but I may as well be on my own. I don't get a chance to mix with anyone.'

Liam queries, 'Would you like more interaction with others?'

Jethro responds, 'Yes. I guess I do. Sometimes I feel very isolated.'

Liam continues, 'What about school friends?'

Jethro answers, 'I don't really feel that I fit in with them anymore. They've all moved on to better things'.

Liam follows with, 'I'm sorry to hear that. It sounds like that must be distressing for you. What about your family?'

Jethro states, 'I hate my parents but I get along well with my sister, Moira. She understands me'. Liam says, 'Do your parents understand you?'

Jethro says, 'No. I wish they did.'

Liam asks, 'Do you interact with anyone else?'

Jethro says, 'No. Nobody'.

Liam then prepares the following diagram and uses this information to help identify Jethro's social network.
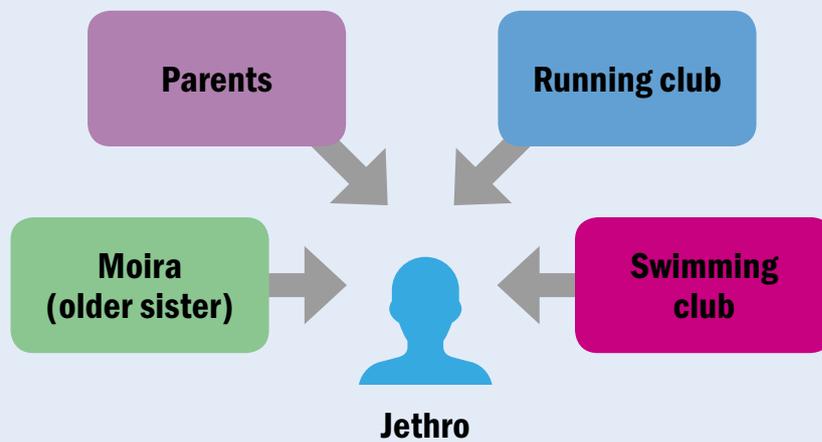
Practice task 14

1. Draw a diagram of your own social networks.

2. What methods could you use to identify the person's social network?

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3. How can existing supports help a person's wellbeing?

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Click to complete Practice task 14

3B Assess the level of social inclusion, exclusion or isolation

People have varying preferences for social interaction. Some people are very social while others prefer to have just a few close relationships. A person might need to be encouraged to gradually develop relationships with others as they gain interest in things external to their immediate concerns, and as they develop confidence.

Some people, however, experience social exclusion or isolation. For example, some people experience social anxiety, or have difficulties connecting with others. Assess a person's social inclusion or exclusion so you can better provide support and link the person to appropriate resources.

Possible reasons for social exclusion or isolation include:

▶ social anxiety (fear of social situations)

▶ physical or intellectual disability

▶ communication barriers, such as language barriers

▶ poverty, or lifestyle circumstances, which impact a person's access to social activities

▶ depression or other mental health issues

▶ lack of motivation

▶ poor self-confidence

▶ lack of social skills

▶ shame associated with disability or mental illness.

Methods to assess social inclusion, exclusion or isolation

There are a number of systemic issues that can cause or impact whether the person feels they are included or excluded in society. Interview the person about their perception of how they fit with society. You may also need to observe the person participating in social interactions. A questionnaire may give the person time to reflect on their answers, allowing for an accurate and detailed representation of their experience. Personality tests, conducted by a trained professional, can also reveal information about a person's social tendency and interaction style.

A person's responses will give you some insight into their perception of exclusion, inclusion or isolation.

Disadvantage, systemic oppression and power dynamics

Personality or interaction skills may impact a person's ability to connect with others. However, there are external reasons for exclusion or isolation. These include disadvantage, systemic oppression and power dynamics, explained here.

Disadvantage

People who are from ethnically diverse backgrounds, experience poverty, have financial issues, face cultural and language barriers or who have a disability may experience social disadvantage. This affects social interaction. Homelessness, for instance, is heavily stigmatised by society. A person living in poverty has limited access to social resources, may have limited personal hygiene and limited social skills. Not being able to communicate effectively with others is very disadvantageous when forming social relationships.

Support people who experience disadvantage by linking them to appropriate resources. For example, an Indigenous Australian person may experience social fulfilment engaging with other Indigenous Australians, who understand their culture and heritage.

Systemic oppression

Systemic oppression is when an individual is oppressed by a system, rather than an individual person. For example, people from Indigenous Australian backgrounds may experience racism and exclusion from Australian institutions run by non-Indigenous Australians. Systemic oppression is often linked to poor health and wellbeing, racism, and social exclusion.

Power dynamics

Power dynamics refer to the power relationship between individuals or between the individual and society. Ideally, power should be in balance and both parties should have equal power. But in most cases, one person or institution has inherently more power than the other person. Power may relate to finances; the person who controls the finances has power. Power may relate to culture; oppressing cultures, such as English culture, have more power than oppressed cultures, such as Indigenous Australians. Victims of domestic violence experience oppression from the person with more power. Help people identify power dynamics in their own social relationships and discuss the effect of the power imbalance on their wellbeing.

Example

Assess the level of social inclusion, exclusion or isolation

Eugene doesn't have a lot of social contact but he is happy with what he has. His main support is his family in Hungary and he contacts them over the internet regularly. He also watches Hungarian news and reads Hungarian magazines online so he has a sense of connection with his country and topical issues to talk about with his family. Although he is physically isolated, he still feels connected and engaged socially.

Practice task 15

Read the case study, then answer the questions that follow.

> **Case study**
>
> Nelson is unemployed and experiences depression. He is on his own nearly all day, every day. He tells the support worker that he sleeps in and then goes out to buy take away food and cigarettes. He doesn't talk to anyone in the shops. He doesn't read newspapers or watch television and he often loses track of time. He said he doesn't talk to the other guy in the unit he lives in. He says the other person cooks food and uses the kitchen but Nelson doesn't need to cook; he just eats take away. He used to like going to a bookshop at the shopping centre but a security guard accused him of stealing and told him to go away.
>
> Nelson talks to his sister on the phone and she offers to come and visit but Nelson discourages her. He is not talking to his mother because she stopped giving him extra money for cigarettes. Most of the time, Nelson smokes cigarettes because he has nothing else to do to occupy his time.

1. List two factors that indicate that Nelson is socially isolated.

2. How has Nelson been socially excluded?

3. Discuss how power dynamics, systemic oppression and disadvantage play a role in this scenario.

Click to complete Practice task 15

3C Promote community participation to extend the person's social network

Community participation can be very positive for the person's social wellbeing. It can help address barriers imposed by culture or society. Encourage the person to think expansively about options for community participation. Identify goals. Once the optimal goal is identified, you can work together to break it into small goals.

There are many resources in the community. Being flexible and creative in your approach will provide a wider range of opportunities to people accessing support services and participating in community activity.

Talk to the person about their likes and interests. You will need to be open to the person's suggestions. Listen to what the person is saying. Listen to their words and tone of voice, and watch their body language. If the person shows interest or excitement about an idea, it should be investigated.

Areas of social activity and participation include:

▶ education
▶ employment
▶ community
▶ volunteering
▶ hobbies
▶ personal interests.

Promote participation in education

Participating in education can benefit the person on a practical and personal level. Practically, education can open up career opportunities. It can also satisfy personal interests. Education is another way of being linked to the community and making a contribution to society. It also benefits self-identity, personal fulfilment and sense of belonging.

There are many educational courses that a person can undertake in a community setting. Some of them will be short courses on specific topics where the participants can learn basic skills and information in a practical way. Some community organisations also offer accredited courses, or courses which provide a qualification.

Education undertaken in a community setting can be much more familiar and supportive than an educational institution. It offers potential for a person to develop a training and career path.

Promote participation in education by investigating the person's areas of interest, and providing possible options and opportunities. Assess the person's ability to access education.

Considerations for accessing education
▶ What is the purpose of education? Qualification? Career? Interest? Hobby?
▶ What is the cost and is it affordable for the person?
▶ Are their options for financial support, such as a scholarship or government support?
▶ Can the person physically access education? Transport? Location?
▶ Are the person's language and cultural needs met? Can an interpreter be accessed?
▶ What are the enrolment procedures?

Promote participation in employment

Employment leads to financial security. It also provides another opportunity for social contact, a sense of identity and a sense of belonging. People who are unemployed are often socially isolated and financial insecurity can compound social exclusion. Unemployment carries a negative stigma or stereotype of the person which can affect their motivation and sense of identity and purpose.

There are many community-based organisations that run employment programs as well as vocational training and pre-employment programs. They cater for the individual's readiness for employment. The person may have previous employment skills they can use, or may look at re-training. Some unpaid employment, such as Men's Shed, can give the person a social environment in which they can use their existing skills and learn new ones in a supported way, with people with the same interests.

Promote participation in the community

Participating in the community is important to the person's sense of belonging, as well as their personal identity. It helps them establish who they are in relation to others. Community also provides company and learning opportunities. Contributing to community, such as volunteering, can improve a person's self-worth and increase the person's confidence and motivation.

There are many different levels of community involvement. Essentially, community is a group of people coming together. Community activities can be structured or unstructured. Community groups may be small and informal, such as a group of women who meet to sew together every Thursday. Community groups may be religious, such as a church community. They may be structured, such as a community regeneration project, designed to improve sustainability in the city centre.

Sport and other recreational activities often encourage community participation. Football clubs, for example, invite members to enrol at the start of a season. Weekly football practice and games is a positive form of social engagement. Help the person identify their community interests and explore options available to them.

Promote volunteering

Volunteering can also be a way of increasing a person's emotional wellbeing by enhancing self-worth and perception of contribution. A person can gain a sense of belonging by being part of a volunteering community. Volunteering provides social contact as well as learning opportunities.

If a person is unemployed, older, younger, or has time on their hands, they may have the opportunity to volunteer. Volunteering can be a very positive way of contributing to society, but also forming social engagement. Some volunteering roles can be used as a stepping stone for employment.

Volunteering roles can be selected for the level of support they provide. In some instances a person will need to have a mentor or someone to help them but in others, they can use their self-management and decision making skills to work autonomously.

Promote participation in personal interests and hobbies

Participating in interests and hobbies is important to a person's sense of identity and self-worth. If a person is interested in an activity, they are more motivated and likely to pursue it. Personal interests and hobbies may be active or passive. They may be group or individual activities. Many individual activities, such as painting or drawing, have opportunities for community involvement.

Hobbies and personal interests can widen a person's social interaction. Interests and hobbies may act as a distraction from other issues for a given time period and therefore be a form of meditation, mindfulness, creativity and production.

There are numerous hobby and interest groups and many of these can be accessed through community contacts. Local papers usually advertise social and interest groups that are run in the community. The internet is also a useful source of information. The person can start to communicate with others wherever they can access the web.

Example

Promote community participation to extend the person's social network

Laura is recently divorced and has been diagnosed with depression and anxiety. In discussions with her support worker Jill, she confides that she also feels socially isolated and has low self-esteem.

During their discussion, Laura says she recently attended a community festival and was very interested in the juggling street performers. She picked up a flyer advertising free juggling lessons at the local community house. She says she would like to attend the lessons but she's worried she might get anxious being around people she doesn't know and feels that she will ruin the lessons for everyone else because she thinks she is clumsy.

Jill spends time talking through the situation with Laura and suggests useful strategies and meditation techniques Laura could use to manage her anxiety. Jill actively encourages Laura to attend the lessons and soon Laura feels more confident in her ability to overcome any barriers.

When she attends her first lesson, Laura meets Mika who offers to help Laura learn and practise. Her new interest in juggling and her friendship with Mika gives Laura something to focus on as she copes with her recent divorce.

Practice task 16

1. Use the internet to locate information about one interest or hobby you would like to pursue. Provide details of what community involvement you can have in your local area.

2. What strategies can you use to promote community participation and connection?

3. Focus on one of the following areas and discuss how you would promote social participation in this area:

    ▶ Education
    ▶ Employment
    ▶ Community
    ▶ Volunteering
    ▶ Hobbies
    ▶ Personal interests

Click to complete Practice task 16

3D Determine current social activity and desire to increase participation

Work with the person to determine their current level of social activity. Interview the person formally and informally by asking open-ended questions, such as:

▶ Which activities do you participate in?

▶ What activities do you enjoy?

▶ How do you feel when participating in this activity?

People who experience social anxiety or other forms of social exclusion may have difficulty identifying existing activities. They may not see their workplace, or educational facility as social. However, through discussion, you can help the person identify all types of social interaction, even if it as simple as saying hello to the neighbour once a day.

Questionnaires, and talking the person's friends and family (with permission) can also help you build a picture of the person's social engagement.

Determine the person's desire to increase participation

Talk to the person about their desire to increase social participation. During your conversation, you may detect more enthusiasm for a particular topic than others. For example, when you mention nature walks, the person you are working with looks up and pays attention.

Clarify interests and brainstorm ways to participate in various social activities. Help the person set realistic goals to enhance social participation. For example, if the person has social anxiety, but wants to gain a qualification in carpentry, they may start by doing an online course to improve confidence. Then, they may attend a short course, and when their confidence is increased, enrol in a Diploma of Carpentry at the local college.

The person should be involved in decisions. Telling a person what they should do is ineffective for sustainable change and disempowers the person. If a person decides for themselves what they would like to participate in, they are more likely to succeed.

Gather information about the person in relation to the following categories.

Employment

▶ Determine the person's current level of involvement in socially based activity and their desire to increase participation in employment by helping the person explore their interests and employment goals. Why do they require employment? Is it financial? What sort of employment do they need? Do they need part time, full time or casual employment? What are their barriers to employment?

▶ Ideally, the person is employed in an area that interests them. Alternatively, they may be employed in an area they have skills for. A skills assessment can help a person determine their suitability for a particular type of work. Put a person in touch with an employment agency. Another option is helping the person research possible job opportunities on the internet. Help the person identify realistic employment goals. For example, if the person wants to be a chef, but has never worked in a kitchen, they may need to start with basic kitchen-hand work.

Education

▶ Determine the person's current level of involvement in socially based activity and their desire to increase participation in education by helping the person explore their interests and education goals. A person's employment or desire for employment may drive a person's education goals. Education may be based on interest. Research accessibility options with the person. Help the person set realistic education goals and link them to resources which help them reach their goals.

Volunteering

▶ Interview the person about their interests or skills. These may help the person identify volunteer opportunities in the community. For example, if the person is part of a religious group, they may enjoy volunteer work organised by their church community. Volunteering is most effective if the individual is enthusiastic about participation.

Community

▶ Determine the person's current level of involvement in community and their desire to increase participation in community by talking to the person about their current involvements. For example, does the person volunteer? Is the person part of any social or sporting groups? Talk to the person about their needs and interests and help them research possible ways of engaging more with their community. It may be as simple as having a conversation with a neighbour or visiting the shopping centre instead of ordering food online.

Hobbies and interests

▶ Determine the person's current level of involvement in hobbies and interests and their desire to increase participation in hobbies and interests by asking open-ended questions, such as 'What interests you?' or 'How do you spend your time on the weekend?' A person may be frustrated about having little time to pursue hobbies or interests, or may feel they are financially inaccessible. Help the person brainstorm options, such as finding cheaper alternatives, or identifying hours in the week which could be dedicated to interests. Discuss the advantages of pursuing interests for recreation.

Example

Determine current social activity and desire to increase participation

Xi talks to Victor about his current situation. Victor has been depressed and has felt socially isolated for the last six months, since his wife passed away. When Xi asks Victor what his interests are, Victor just shrugs.

Xi asks Victor what type of activities he and his wife enjoyed together. Victor says they used to walk a lot on weekends, in parks and forests. Xi asks Victor if he would be interested in walking again. At first Victor is non-committal but as Xi researches possible walks Victor could do around the city, he becomes more enthusiastic. Victor decides to try a short walk that weekend with a friend. Xi suggests Victor makes a commitment to doing a small walk every weekend with one or more people and increasing the distance if he finds it enjoyable and beneficial.

Xi also provides Victor with information about walking groups organised by community groups and councils in his local area. Xi shows Victor how to access the websites and Victor is surprised and very interested in the range of group activities that are available in his area.

Practice task 17

1. What area of social interaction has Xi helped Victor identify in the previous example?

2. Suggest two open-ended questions Xi could ask Victor to help him determine his current involvement in hobbies and interests.

3. Suggest two open-ended questions Xi could ask Victor to help him determine his desire to increase participation in hobbies and interests.

Click to complete Practice task 17

3E Support and regularly review social inclusion strategies

When an individual has identified their needs and preferences to develop their social wellbeing, you can work together to develop and document a plan. The plan will be a tool you can both use to regularly review the strategies being undertaken.

The plan or strategy will vary from person to person. Possible elements of the strategy are listed below.

Elements of social inclusion strategy
▶ The steps that will be taken
▶ The responsibilities the individual and the worker will have
▶ Details of other people who will be involved
▶ Any resources required
▶ A review strategy
▶ Measurable outcomes

Develop achievable goals

You can return to this plan as needed when you review the person's participation in activities and revise it accordingly.

The plan should include goals or outcomes that are measurable and realistic. Goals should be meaningful to the individual. Help the person identify goals which contribute to their holistic wellbeing. For example, a social outing with friends may also have physical benefits. The plan will help you and the individual stay focused, so the person can achieve what they want to achieve.

The plan may involve smaller, achievable steps towards the final goal. For example, if the goal is to improve social inclusion by spending more time with friends, the first step could be to phone a good friend and make contact. If steps are concrete, measurable and realistic, there is more chance the final goal is reached. Achieving small steps also creates incremental rewards, such as pride, so the person is motivated to stick to the strategy.

Consider the following when helping a person to develop their goals.

Goal-setting
▶ The person should identify their own goals
▶ Support the person to identify their own goals
▶ The person should identify achievable steps towards reaching the final goal
▶ Support the person to identify realistic and achievable steps towards final goal

▶ Empower the person to make their own decisions

▶ Help the person decide on realistic timelines for each step and each goal

▶ Document the plan, highlighting when goals are expected to be reached

Provide support

Help the person address lack of motivation or self-doubt by providing continual support.

A person may experience dips in motivation due to their mental illness or because they feel they are not succeeding. Review steps and goals for suitability, and if necessary, amend goals. For example, extend the timeline for goals so they are more achievable.

Assure the person that the strategy or plan is flexible and dynamic. It may be demotivating if the person feels aspects of the plan cannot be changed. Involve the person when making modifications to the plan.

Review strategies for effectiveness

Help the person decide on a review strategy. For example, after one month, you and the person discuss how the person is going and review the plan for effectiveness. Did the person complete steps they agreed to? What are the indications that the goal has been reached? For example, does the person feel more socially integrated? What needs to be changed or adapted? What is working and not working?

Having a clear review strategy can help the person stay on track and focused.

Example

Support and regularly review social inclusion strategies

Jerry has been working at the Men's Shed for the last three months. When Ted, his support worker, asks Jerry how it's all going, Jerry is very defensive and angry. Ted takes a moment to let Jerry express his emotions and then helps Jerry identify where the emotion might be coming from. He learns that Jerry hasn't made any specific friendships at the shed and feels like everyone dislikes him.

Ted helps Jerry identify positive interactions he has had at the shed, such as a positive conversation with another man about family. By focusing on the positives, rather than the negatives, Jerry starts to feel more positive in general about the experience. He decides that the Men's Shed has contributed positively to his social development and he is feeling more connected and less alone since starting work there.

Practice task 18

1. Describe two important steps to follow when making a plan for social inclusion.

2. Describe one review strategy you could use.

3. A person wants to start attending salsa classes once a week but they have social anxiety. Identify a possible goal and three steps to achieving this goal, which could support the person.

Click to complete Practice task 18

Summary

1. Belonging is a basic human need. A level of social interaction is vital to emotional wellbeing.

2. People can become isolated due to mental illness, disability, circumstances, disempowerment, disadvantage and oppression. This can have increasingly detrimental effects on their wellbeing.

3. Some individuals require support to access social networks and become part of the wider community.

4. Individuals should be actively involved in identifying their preferences.

5. Confidence, skills and resources can act as barriers to participation.

6. Social activities should be reviewed to ensure a good fit between the services offered and the individual's needs.

7. Help the person develop a strategy for increasing social inclusion that includes a review strategy.

Learning checkpoint 3
Promote social wellbeing

This learning checkpoint allows you to review your skills and knowledge in promoting social wellbeing.

Part A

1. Choose one of the following terms and briefly explain what it means and how it can affect a person:
   ▶ Social exclusion/inclusion
   ▶ Disadvantage
   ▶ Systemic oppression
   ▶ Power dynamics

2. Explain how education and employment can contribute to social wellbeing.

3. Explain how being part of a community can contribute to social wellbeing.

4. Explain how volunteering and having hobbies and personal interests contributes to a person's social wellbeing.

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Part B

Read the case study, then answer the questions that follow.

Case study

Dmitri has schizophrenia and lives in a supported living environment in his own flat. Dmitri has an interest in motor vehicles, particularly vintage cars.

Dmitri receives support services three times a week. His regular support worker, Jade, visits for three hours and checks on Dmitri's health and wellbeing, helps him with tasks and takes him to appointments with health professionals. Dmitri sees his mother twice a month, when he visits her for lunch. He also talks to his neighbour Paul who has an intellectual disability. Sometimes, Dmitri goes to the movies with Paul.

Because it is winter, Dmitri has been spending less time outside. He is also worried about finances, so has been avoiding outings.

1. Identify and map Dmitri's social network, including people who provide support and community participation.

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2. Explain how you could assess Dmitri's level of social inclusion, exclusion or isolation.

3. Develop a strategy to promote community participation and connection to extend the depth or breadth of Dmitri's current social network.

4. How could you support and regularly review social inclusion strategies?

Topic 4

In this topic you will learn how to:

4A   **Identify emotional strengths, challenges and triggers**

4B   **Identify activities or people that promote emotional strength and wellbeing**

4C   **Develop strategies to address emotional challenges and promote emotional wellbeing**

Promote emotional wellbeing

There is a strong connection between physical and emotional health. Poor physical health may impact a person's emotional and psychological health; likewise, poor emotional and psychological health may affect a person's physical health.

A person's circumstances may affect their emotional and psychological health. For example, a person's life history, financial position, living arrangements and physical health may alter the way they view the world, their role within it and their place in society.

Support changes in a person's emotional wellbeing by linking them to appropriate resources and helping them develop strategies which address challenges.

4A Identify emotional strengths, challenges and triggers

A person's emotional situation may be complex and linked to many factors, such as mental health, living circumstances and physical ability. When supporting a person's emotional wellbeing, work within your capability to identify emotional strengths, challenges and triggers. Identifying emotional strengths helps you use a strengths-based approach to supporting wellbeing. Identifying challenges and triggers helps you and the person to recognise barriers which may affect their emotional wellbeing and plan strategies to respond to barriers.

Here is more information about strengths, challenges and triggers.

Strengths

Emotional strengths may be at first be difficult to detect. If the person has a low self-esteem, or is very emotionally vulnerable, they may have difficulty identifying their own strengths. Help support the person by asking open-ended questions about their past and current situation. Focusing on a time in the person's life when they did feel more resilient may be useful. You could also talk to the person's natural supports, or encourage the person to talk to their supports, as other people sometimes have a clearer perspective than we do about ourselves.

Examples of emotional strengths include:

▶ resilience against challenging situations

▶ adaptability and flexibility

▶ compassion and empathy for others

▶ self-awareness

▶ positivity.

Emotional challenges

A person may experience mental health issues or face external circumstances which raise significant emotional challenges. Help the person identify these challenges, so they can begin to plan how to address them.

Emotional challenges may include:

▶ mental health issues, such as depression or anxiety

▶ physical pain

▶ disability

▶ oppression or exclusion from society

▶ lack of cultural or spiritual support

▶ lack of social support

▶ absence of a support network

▶ significant challenging events, such as the death of a loved one, poverty or unemployment

▶ lack of strategy for containing and managing emotion

▶ trauma, such as abuse or neglect.

Emotional triggers

Emotional triggers are the internal or external stimuli which provoke emotional responses. People who have experienced trauma, for instance, are often vulnerable to re-traumatisation when certain triggers occur. Knowing what a person's triggers are can help a person minimise exposure to triggers and manage emotional responses.

Emotional triggers may include:

▶ physical stimuli, such as loud noises, or unpleasant images

▶ exposure to trauma or difficult events

▶ anxiety provoking events

▶ difficult interactions

▶ self-doubt

▶ lack of confidence.

Assess the person's ability to practise self-care

Self-care is integral to emotional health. Good self-care includes avoiding triggers and challenging situations, seeking mental health support, minimising stress and developing positive mental strategies. People with poor emotional health sometimes struggle to maintain self-care; the relationship between self-care and emotional health is cyclical. For example, if a person has depression, they may lack motivation to exercise. Lack of exercise may contribute to a person's depressive state.

Talk to the person about their self-care practices. Questions you could ask include, 'How often do you meditate?' and 'Are there any ways you can imagine relieving this stress?'

Self-care is often integrated with a person's physical appearance and self-esteem. A person's physical appearance may affect self-esteem and confidence.

Reasons a person may have a negative self-perception include:

▶ the need for mobility equipment; for example, a walking frame or wheelchair

▶ problems getting dressed; for example, they cannot do their buttons up

▶ no longer being able to put on make-up or do their hair

▶ no longer being able to shave properly

▶ needing continence aids.

Assess the quality of a person's support systems

A person's support systems are very important to their emotional wellbeing. They help a person address challenges, such as grief and depression. They also help a person commit to and sustain emotional wellness goals, such as exercising regularly, or pursuing interests. Support systems link a person to community, and community is integral to social and emotional wellbeing. Ask the person to identify natural and professional supports in their life, including family and friends, and community members. Drawing a map or diagram of a person's support system can be useful. Help the person identify the effectiveness of each support. Sometimes, perceived support is actually a hindrance for emotional wellbeing. For example, a significant other may be

affecting stress rather than providing support. Use challenging and probing questions, such as 'What I hear you saying is that your husband is your main support but you are also telling me that he doesn't treat you with respect. Are you able to clarify this?'

Here is more information about support systems.

Support systems

Natural supports

Natural supports can promote emotional strength and wellbeing. They differ from other supports in that they are not 'paid' supports. Natural supports promote social inclusion and may be family, friends, acquaintances, co-workers or neighbours and members of organisations or groups.

Importantly, an individual can feel more autonomy in selecting natural supports because they are a choice, not a fixed component a program.

Personal strengths

Return to the things that help the person keep strong. These will be the sorts of things that the person feels comfortable with and which will give them security and surety, particularly support activities that give the person a sense of achievement and pride. The person may have rarely, if ever, received praise and been seen as being associated with something positive.

Celebrate success

The activities that build self-confidence and self-esteem for an individual will depend on their individual preference. Again, remember that all forward progress is positive no matter how small the increments.
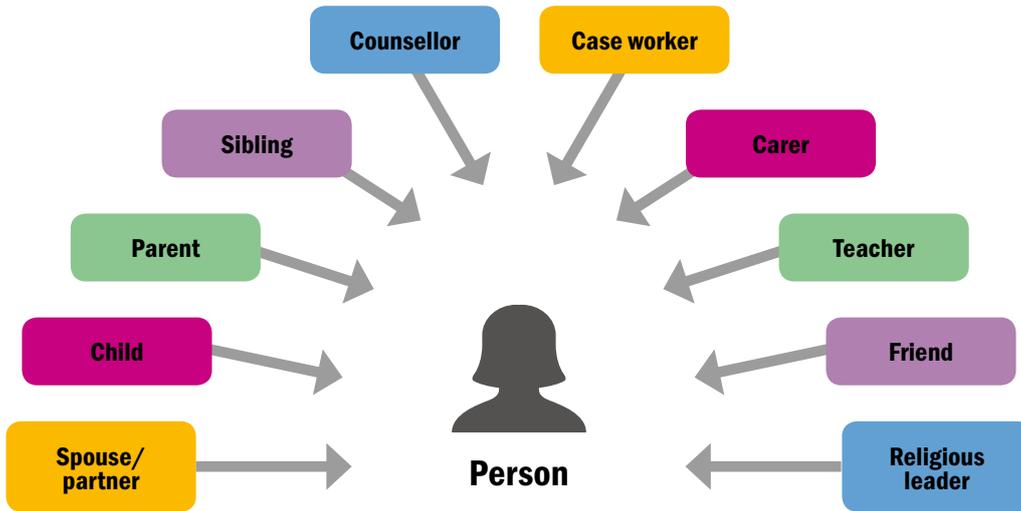
Professional support

Professional support networks include counsellors, psychologists, doctors and psychiatrists. Find out who the person's support network includes, and how effective support is.

Professional support may also be institutional, such as the person's school, or university.

Identify the person's relationships

Relationships have a significant contribution to a person's emotional wellbeing. The quality of these relationships is therefore important to a person's health. Poor relationships can cause stress and add to emotional or mental challenges. Positive relationships can help a person make positive improvements to wellbeing and sustain changes. How is the person treated by those around them? How do relationships contribute to a person's self-esteem? What are the power dynamics in a relationship?

Relationships can be very complex organisms, so professional help may be required. Start with identifying what the relationships are in a person's life. Help the person draw a map. Then discuss the quality of these relationships. Here are some examples of relationships.

Example

Identify emotional strengths, challenges and triggers

Marta has recently been diagnosed with depression. She lives alone and feels like she has no-one to support her. Her support worker, Janice, helps Marta identify some of her personal strengths, such as her interest in art, music and her love of books. They discuss Marta's external strengths and social networks, such as her friendship with her neighbour and her weekly art class.

Marta talks about her emotional challenges and triggers. These include spending nights alone, insomnia and concerns about money. Janice and Marta discuss how to address these challenges. Marta decides to talk to a financial counsellor about managing her finances and possibly moving to a smaller apartment. She also considers the possibility of sharing with others, which would mean she has company in the evenings. Marta tells Janice she is keen to spend more time working on her art.

Practice task 19

1. Identify one emotional strength, one trigger and one challenge you experience in emotional situations.

2. How is self-care linked to a person's emotional wellbeing?

3. How can support systems and relationships affect a person's emotional wellbeing?

Click to complete Practice task 19

4B Identify activities or people that promote emotional strength and wellbeing

Help the person identify which activities or people promote emotional strength, rather than challenge it. Being surrounded by positive relationships and resources helps the person make positive changes to wellbeing and sustain improvements. Relationships which cause continual conflict, for instance, make it difficult for a person to address their own health and wellness needs and may add to stress and mental exhaustion.

Engaging in positive activities helps a person's identity and sense of belonging.

A person's judgement can sometimes be clouded. For example, if a person is the victim of domestic abuse, they may not see why the relationship is detrimental because they blame themselves for the abuse.

Help the person clarify difficult situations by asking open and closed questions. Open questions include, 'How does this relationship make you feel?' Closed questions include, 'I hear you saying your husband makes you feel powerless. Is that correct?'

Help the person brainstorm possible activities that promote emotional wellbeing. Start by helping the person identify their recreational interests and their cultural or spiritual interests.

Activities and people that promote emotional strength include:

▶ spiritual or cultural activities, such as attending church or mosque

▶ meditation, relaxation and prayer

▶ exercise and nutrition

▶ counsellors, psychologists and psychiatrists

▶ natural supports; for example, friends, family and community.

Identify barriers

Help the person identify barriers which may limit access to emotional strengths and resources, and discuss how to address barriers.

Potential barriers include:

▶ lack of time and money to do emotionally strengthening activities, such as meditation

▶ mental illness, such as depression, anxiety or schizophrenia

▶ fear or mistrust of other people; for example, victims of domestic abuse may be wary of forming new relationships

▶ lack of confidence.

Link people to resources

Support people by facilitating connection with resources or people who promote positive emotional wellbeing. As much as possible, the person should self-advocate and connect with resources themselves, but you can provide support.

Consider the following.

Facilitate referrals

▶ You may need to facilitate referrals for professional support. Follow your organisation's referral procedure. Encourage the person to access referral themselves, but assist with identifying transport, access and providing contact details.

Research

▶ You may help the person research possible resources. For example, if the person is interested in pursuing a hobby, you may help the person use the internet to research classes they can take.

Provide skills and training

▶ People may need support developing relationships. If they have social anxiety, or have experienced abuse, they may have difficulty forming positive relationships. A person may benefit from learning interpersonal skills, such as conflict management.

Example

Identify activities or people that promote emotional strength and wellbeing

Domenica enjoys going to church. The familiar surroundings, hymns and chants make her feel secure and connected to a wider community. She enjoys the repetition and the congregation's responses. The traditional costumes and practices provide a sense of theatre and pageantry. She always feels calm and settled when the service ends. Domenica often stays after the service has ended to have coffee or a meal with a small group of other women. They talk about life and family and local community news.

Practice task 20

1. Give one example of an activity you engage in which promotes your emotional wellbeing and strength.

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2. Think of an example of a person you engage with who promotes emotional wellbeing and strength.

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3. How could you facilitate a person's connection to resources and activities that promote emotional wellbeing?

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Click to complete Practice task 20

4C Develop strategies to address emotional challenges and promote emotional wellbeing

Emotional wellbeing is integrated with self-belief and self-confidence. It is helpful to support the individual to participate in activities that they enjoy and are familiar with, and which give them a sense of fulfilment and achievement. Foster the person's belief in their abilities and help them identify the positives.

Another important element of promoting emotional wellbeing is providing a safe, predictable and secure environment. People who are very emotionally vulnerable will benefit from a secure environment.

Strategies that promote emotional wellbeing

As well as providing a safe, secure environment and promoting inclusion in activities which enhance self-confidence, you can use a combination of the following approaches. For example, you may use motivational interviewing to help the person identify their personal wellness goals, and strategies they are interested in applying to meet these goals.

Strategies for promoting emotional wellbeing
▶ Motivational interviewing
▶ Solution-focused approaches
▶ Strengths-based approaches
▶ Cognitive behavioural approaches
▶ Narrative approaches
▶ Acceptance and commitment therapy (ACT)

Emotional wellness strategies to promote emotional wellbeing

Work collaboratively with the person to develop their own emotional wellness strategy. The person should identify their own wellness needs, their own strengths, challenges and triggers.

The person should also set their own emotional wellness goals. For example, a person may decide to practise meditation every day for five minutes. The goals should be specific, measurable, achievable and realistic, and should have a set time frame.

Document the goals, and help the person identify steps to achieving goals. Ideally, steps are short-term and focused, so the person develops a sense of satisfaction when steps are achieved. Motivation for achieving overall wellness goals is therefore maintained.

Emotional wellness strategies to address challenges

A person's challenges may make it difficult for the person to see and think clearly. For example, if a person is in a domestic violence situation, they may have trouble identifying their strengths and supports because they feel so disempowered.

Help the person identify what their challenges and triggers are and work with the person to brainstorm ways to address challenges. For example, a person may not want to see a psychiatrist because they are worried about the cost. However, you can help the person research an option that is covered by Medicare.

Develop contingency plans to address emotional challenges

When developing strategies it is important to remember and to remind the person that strategies are dynamic and flexible. Emotional changes are not necessarily predictable. While a person seems like they are improving emotionally, an external challenge may set them back. This can be demoralising for a person and they may begin to lack confidence that change is possible.

Support the person by helping them make contingency plans. Contingency plans are usually associated with emotional triggers and challenges. If a person knows that they are triggered by a particular event or emotional experience, having a plan in place to respond to the challenge will help their confidence and emotional resilience.

Here are some examples of contingency plans.

Prevent anxiety

▶ Suzy knows her anxiety is triggered by big crowds. When she is in smaller crowds, she practises her breathing exercises to develop resilience.

Break relationship patterns

▶ Paul has been in a negative relationship with Virginia for years. Although they frequently break up, they get back together as soon as she calls. He knows that they always end up fighting. Paul rehearses what he will say to Virginia when she calls, so he is prepared, and minimises the chance they will end up fighting.

Find a better financial solution

▶ Ari wants to see a psychologist when he experiences panic attacks but he can't afford the appointments. The care worker helps Ari find a help line he can make a free call to when he has a panic attack and also connects Ari to a psychologist who bulk bills, through the community health centre, so Ari can develop strategies to prevent anxiety.

Example

Develop strategies to address emotional challenges and promote emotional wellbeing

Sean has anxiety and low self-confidence. When Trudi sits down with Sean to develop a strategy for promoting emotional wellbeing, they talk about his emotional strengths and resources.

At first, Sean is reluctant to identify any strengths, but eventually identifies music as a strength and interest. When they talk about why music is a strength, Sean identifies that it relaxes him makes him feel confident. Another strength he identifies is that he cares a lot about others.

They talk about emotional barriers. Sean finds it easy to identify these. His emotional barriers include his anxiety and low confidence. When they explore this further, he identifies that his low confidence stems from the feeling that people don't like him. Trudi points out that this is the other side of his perceived strength; that he cares about people. Because he cares about people, he cares what they think of him. Sean agrees with Trudi's point and they talk about how they can focus on this as a strength rather than a barrier.

Sean sets a goal to participate in one musical activity a day, whether it's playing music or listening to music. When he feels stressed or anxious, he will listen to music. Sean's other goal is to try and focus on his close friendships, and the relationships he feels comfortable with, to slowly grow his social confidence.

Trudi encourages Sean to record his goals and set timelines. She also helps Sean decide on indicators for success and ensures he knows that the program is flexible and dynamic.

Practice task 21

1. Tex has a gambling habit. Every payday, he ends up spending the money on the pokies. He is in serious financial debt which causes him stress. Describe a possible strategy and contingency plan to help Tex manage this situation.

2. Sonja is looking for a relationship. She feels lonely and insecure. Describe possible goals and steps towards goals Sonja could set.

3. Think of one strategy that can help Sonja or Tex develop emotional resilience.

Click to complete Practice task 21

Summary

1. Emotional health is related to resilience and the capacity to cope with life's changes day to day.

2. There is a close relationship between physical and emotional health.

3. Emotional health is closely linked to self-esteem and self-confidence.

4. People will have innate management strategies that can be developed and identified.

5. Being able to participate in familiar things and known areas of success will help a person to improve their emotional wellbeing.

6. Natural supports can assist a person to increase their confidence and self-esteem.

7. In some instances of emotional distress a contingency plan will be required to cater for possible events and actions on the part of the individual.

8. Employing strategies that help a person to constructively express their emotions will assist them to manage their emotional wellbeing.

9. Supporting the person to maintain their individuality and autonomy promotes self-esteem.

Learning checkpoint 4
Promote emotional wellbeing

This learning checkpoint allows you to review your skills and knowledge in promoting emotional wellbeing.

Part A

1. Explain how a person's ability to provide care for themselves reflects their emotional wellbeing.

2. Explain how the quality of a person's support systems relates to their emotional wellbeing.

3. How can you support a person to have healthy relationships?

4. Identify two activities that can promote healthy emotional strength and wellbeing.

Part B

Read the case study, then answer the questions that follow.

Lucy is 18 and is being supported by a women's shelter following significant domestic abuse from her stepfather. Lucy has many physical injuries and has social anxiety. She experiences post-traumatic stress symptoms as well as depression. Lucy's PTSS is triggered by social anxiety through contact with people she doesn't know well, especially men.

Lucy lived with the violence for five years. Despite her anxiety and depression, she was able to maintain her studies and finished school with good grades. Lucy was motivated to do well at school because of her dream to become a doctor in a developing country. Studying also helped her take her mind off what was happening at home. School became a refuge from the violence.

1. Identify Lucy's emotional strengths, challenges and triggers.

2. Identify one activity that could promote Lucy's emotional strength and wellbeing.

3. Identify a person or community that could promote Lucy's emotional strength and wellbeing.

4. Develop strategies and contingency plans to address emotional challenges and promote resilience and emotional wellbeing for Lucy.

Topic 5

In this topic you will learn how to:

5A Identify preferred cultural and spiritual values, beliefs, traditions and practices

5B Identify cultural and spiritual needs and activities or changes

5C Identify resources required to introduce these changes

5D Implement cultural and spiritual strategies and access resources

Promote cultural or spiritual wellbeing

In recent years there has been an increase in awareness among health professionals, organisations and governments of the particular issues related to mental illness experienced by specific groups in the community. Indigenous Australians, youth, older people and those from culturally and linguistically diverse backgrounds may require different forms of assistance and support to manage their illness and lifestyle.

Cultural and spiritual diversity should be catered for regardless of where we live and what we do. Where a person follows a particular religion, value system or cultural heritage, it is their right to have this acknowledged and respected.

Cultural practices and habits that have been part of our upbringing are important to us in an emotional and social way, and can promote a sense of purpose, fulfilment and belonging. Culture is demonstrated through shared practices such as language, food and celebrations.

Spirituality may be celebrated individually or through a church or religious group.

As an integral part of each one of us, spiritual and cultural wellbeing is a fundamental component of holistic wellbeing.

5A Identify preferred cultural and spiritual values, beliefs, traditions and practices

Spiritual beliefs and cultural practices are highly individual. Work with the person to identify individual beliefs and needs. Do not assume that everyone has the same level of interest in their culture or beliefs or follows practices in the same way. Some people will be immersed in their culture or religion, and it will determine how they live their daily lives. Others will identify with beliefs less strongly.

Remember that the term 'culture' is not just defined by the person's ethnicity, heritage or religion but also by the people in society that the person identifies with and shares attitudes, values and beliefs with. For example, LGBTI culture is the common culture shared by lesbian, gay, bisexual, transgender and intersex people. It is sometimes referred to as gay culture or queer culture.

Avoid making assumptions about a person's ethnicity and cultural practices. Ask the person questions and learn from your own observations and research. Cultural practices may be evident in a person's dress or presentation, in the language they use or the practices they follow.

You are not expected to know everything about a person's culture or religion but taking time to understand what culture and spirituality mean to the person will help you support their cultural and spiritual wellbeing.

Create a culturally safe environment

A culturally safe environment is one in which a person's identity – cultural and otherwise – is not challenged. Culturally safe practices include actions that meet people's needs and respect their culture, identity and rights. Culturally unsafe practices diminish or disempower a person's cultural identity and wellbeing.

Strategies to promote cultural safety include:

▶ being open-minded and flexible in attitudes towards people from cultures other than your own

▶ being aware of how your own cultural background influences your attitudes, beliefs and actions about others

▶ recognising and avoiding stereotypes

▶ engaging with others using clear, open communication where knowledge and respect is shared

▶ engaging with others in two-way communication to share knowledge, understanding and information

▶ understanding the impact of culture shock

▶ developing trust.

Avoid stereotypes and prejudice

Valuing diversity means we avoid stereotypes and prejudices and we don't discriminate against people. To be prejudiced means to think or feel less favourably about someone or a group without any reason. Stereotypes and prejudice often lead to discrimination, which is treating someone less fairly than another person because of their difference.

You can find out information about a person's culture by asking the person or their family and friends, reading their care plan, asking colleagues or finding information from the library and internet. Even when you do know about a person's culture, you should never use stereotypes to form opinions about them. Treat each person as an individual and understand that there is further diversity within cultural groups.

Communication

Cultural differences often mean there are different languages or ways of behaving that affect communication. You need to know how to change your communication to suit the culture of the people you are working with. For example, the following aspects of body language and nonverbal communication are most commonly used differently across cultures. The way you give and receive information will be more effective if you take these into account.

Use of eye contact

It shows disrespect in some cultures to make direct eye contact with a person who is your superior, such as a boss, an elder, or a person of higher social rank. In mainstream Australian culture, giving direct eye contact is interpreted as showing honesty, trustworthiness and respect, so this is an obvious course of cross-cultural miscommunication. In some Indigenous Australian cultures, the degree of eye contact is related to complex kinship relationships. It has been observed that many Indigenous Australians give less direct eye contact than non-Indigenous people, particularly when interacting with white people, so this can be a significant barrier to effective communication.

Proximity

In some cultures, the distance or personal space people are comfortable with may be closer than the norm in Australian mainstream cultures. Perceived invasion of personal space can make people feel uncomfortable and threatened; however, using too much distance can be interpreted as being stand-offish and unfriendly. Some research also suggests that people who grew up in the country have wider personal space boundaries than people who grew up in cities.

Touch and gesture

The use and meaning of touch is another element that varies widely across cultures; in some it is common for people to hug and kiss on greeting each other, or to walk about holding hands (although there are usually clear rules about whom you do this with); in others touching people outside your intimate circle is frowned upon.

Gestures are another source of differences in interpretation and misunderstandings across cultures.

Tone of voice

Loudness and tone of voice also vary; in one cultural group, speaking loudly and boisterously is a normal conversation and does not necessarily indicate aggression.

Work collaboratively with the person to understand spiritual values, beliefs, traditions, activities and practices

Collaboration is always the key to working effectively to support health and wellbeing. It is your job to empower the individual to identify their own needs and make decisions about their own wellbeing and fulfilment. You can help support the person by linking them to networks and resources.

By understanding spiritual and cultural values, beliefs, traditions, activities and practices, you can help link the person to appropriate resources. Understanding is also essential to your role as a respectful and effective support worker.

Here is more information on understanding spiritual values, beliefs, traditions, activities and practices.

Understand spiritual values and beliefs

▶ A person's spiritual values are things that are important to them. For example, a Christian person may value kindness and forgiveness. They may also value the church community. Christian people believe that there is one God, who sent his son to absolve sins. A Buddhist may value enlightenment, and non-attachment to worldly possessions and experiences. You may benefit from conducting research into religion or spirituality to better understand it. You should also talk to the person about their personal values as these will be individual.

Understand traditions

▶ Traditions will depend on the person's family and cultural background. Some traditions are general for a particular religion. For example, in Islam, people are expected not to eat pork. Use the internet to research traditions but talk to the person about traditions they choose to follow.

Understand activities and practices

▶ Cultural and spiritual activities will be unique to the person, although they may be practices shared by others in that spiritual or cultural group. Islamic women sometimes choose to wear head coverings. Once again, avoid making assumptions and seek to understand a person's unique activities and practices.

Work collaboratively with the person to understand aspects of spirituality and culture

Help the person identify what culture means to them and ways to integrate cultural practices more fully into their lifestyle. Consider the following.

Involvement

Being culturally engaged and integrated adds to a person's sense of belonging and identity. Being disconnected from culture can lead to alienation and in some cases, depression. Culture relates to shared experiences, so if a person is culturally disconnected, they can become socially isolated. Ask the person open-ended questions about their involvement in activities and networks. This may include attending church or spiritual meetings, practicing daily prayer, spending time with people from that culture or religion, eating culturally specific food, speaking in a native language. You may also talk with the person's family and their spiritual cultural network, with permission, to gain a greater understanding. It may help the person to write down what cultural activities they are involved in.

Practise culture

Self-identity and belonging are strongly linked to a person's ability to practise culture. Practising culture may inform self-esteem and self-worth. For example, a person may feel proud of their Chinese heritage, and this contributes to their overall self-esteem. Talk to the person about their ability to practise culture, and identify possible barriers. Barriers may be related to time, financial resources, physical space or racism and discrimination. If barriers are the latter, you may need to support the person to understand their rights to practise culture and spirituality freely. The exclusion may be a legal matter and you can support the person by obtaining legal advice, or linking them with an advocate.

Links with culture

Being integrated with culture is important to a person's identity and sense of belonging. Associating with others who share cultural practices and interests helps the person develop and sustain cultural identity.

People will have varying degrees of association with their culture. They may live with others from their cultural or religious group. They may be physically separated but may integrate certain practices into their daily life, such as removing shoes before entering their home. Invite the person to talk openly about people and resources which link them to their culture and spiritual practice and help the person plan how these links can be fostered.

Support the person's ability to practise their own culture

Support workers can help a person to identify and improve their ability to practise their own culture to improve their cultural and spiritual wellbeing. They can also provide information to ensure the person initiates or maintains good links within their own culture.

Here are some ways you can support a person's ability to practise their own culture and benefit their cultural and spiritual wellbeing.

| How you can support the person	Benefits gained by the person
▶ Educate yourself and others to promote cultural diversity and social cohesion	▶ Free and safe to openly voice their opinions and issues
▶ Develop and promote skills for communication and interaction across cultures	▶ Valued within their own culture and in mainstream society
▶ Create connections and relationships through interacting with others	▶ Safe from abuse, harassment and criticism
▶ Increase skills to respect our own and each other's identity	▶ Confident, valued and healthy self-esteem and self-worth
▶ Help the person develop and sustain cultural identity	▶ Pride in representing their cultural/ spiritual group or community
▶ Provide advice, support and information about issues that may be specific to that culture	▶ Strong connection to family, community and culture
▶ Reflect on your own biases and work in a non-judgmental manner	▶ Sense of belonging and individual and group strength and solidarity

Example

Identify preferred cultural and spiritual values, beliefs, traditions and practices

Aito was a successful businessman with a large corporation but was laid off and has now been unemployed for 18 months. Aito is a 45 year old man recently diagnosed with anxiety and depression.

Although Aito does not follow a religion in a formal sense, he still likes to surround himself with images and observe practices he has grown up with. He always wears slippers indoors and has a traditional Japanese tatami mat in his room with a small water feature and a pot of bamboo on a low table in front of it. He doesn't wear shoes at all when he sits on the mat.

Aito tells Kyle, the support worker, that although he is not religious, these images and practices make him feel calm and remind him of his very happy childhood and of his beloved parents. Kyle encourages Aito to talk more about his childhood, his parents and his cultural and spiritual views. Aito admits that as he ages, he finds comfort in things that remind him of his past. They discuss other objects and activities that he could use to meet his cultural and spiritual needs and benefit his wellbeing.
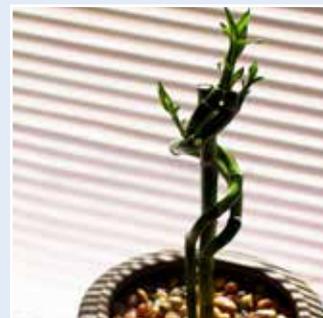
Practice task 22

1. Discuss two ways you can work collaboratively with a person to understand their cultural or spiritual beliefs, values, traditions, activities and practices.

2. Explain how you could support a person to identify their involvement in cultural activities and networks.

3. Explain how you could support a person to identify their ability to practise their own culture and their good links with their own culture.

Click to complete Practice task 22

5B Identify cultural and spiritual needs and activities or changes

By talking with the person and their network, you should form an understanding of the person's needs. Record these specific needs, such as 'Person feels they do not have enough time to attend church,' or 'Person feels culturally discriminated against, and so feels ashamed of cultural practices.'

These needs will inform spiritual and cultural goals.

A person may express their culture or religion in a number of different ways, including:

▶ choice of food
▶ language
▶ greeting and addressing others
▶ services and ceremonies
▶ festivals, anniversaries and occasions
▶ personal care
▶ dress and presentation
▶ habits and beliefs
▶ gender roles
▶ traditional roles within the family or group.

Identify cultural and spiritual changes

Help the person identify the changes they want to make to their cultural and spiritual practices. Record changes and talk to the person about how the desire to make improvement to spiritual and cultural wellbeing informs specific spiritual and cultural goals.

Possible spiritual and cultural changes include:

▶ developing stronger links with spiritual/cultural community
▶ spending more time practising spiritual/cultural traditions and activities
▶ knowing more about spiritual/cultural identity and traditions
▶ establishing daily spiritual/cultural practices
▶ feeling more empowered to practise spiritual/cultural traditions and activities.

Example

Identify cultural and spiritual needs and activities or changes

Here are some activities that may meet a person's cultural and spiritual needs.

Excursions

A person's spirituality may be refreshed by being able to spend time outdoors enjoying the natural environment, or by visiting places of spiritual importance to them. These may or may not be religious sites.

Dance

Physical activity associated with a culture may provide exercise. Dance is an important element of many cultures and is a physical, social and emotional activity as well as a spiritual and cultural one.

Festivals

Traditional festivals can be very social and build emotional strength. They usually include all the elements of the culture: language, food, music, dance, art and expression. They may also include traditional crafts, games, films or sports.

Practice task 23

1. Give two examples of how a person could meet their increasing cultural needs.

2. List two ways that a person may express their culture.

Click to complete Practice task 23

5C Identify resources required to introduce these changes

In Australia's culturally diverse society there are many groups that cater for people with a specific cultural background. Establishing good links with these organisations will help you to have information at hand in community language, which may help the person gain a better understanding of the service being offered, and provide you with a source of information as to how you can support a person to continue to practise their culture.

Participating in culturally specific activities or speaking in their community language can provide social support and emotional wellbeing. Again, the person can benefit from being in an environment where they know what is expected of them. They may gain confidence because they are able to use their native language, especially if they are more proficient in that language than they are in English. There may be opportunities to reminisce, to enjoy activities as they have done in the past, share in traditional food and generally feel safe in an environment where they feel they belong.

Connect to people and resources

As part of your research and information gathering you can look for culturally specific groups which offer activities and programs in which the person will feel comfortable.

There may be natural supports that can play a role in identifying and assisting with the resources needed to make changes. They can be a valuable source of information and background knowledge when researching an individual's preferences.

Talk to the person and document how these resources and people can help the person make cultural and spiritual changes. You may need to assist the person by facilitating contact with resources. For example, you may provide a phone number or email address of the pastor or you may help arrange an appointment with an Imam.

To obtain resources and establish connections:

▶ use the internet or phone book to research possible community or religious groups
▶ talk to the person, their significant others, family and friends about cultural and spiritual resources
▶ phone or email a pastor or other spiritual leader for advice
▶ talk to other staff members from the same culture or religious background
▶ support the person by linking them to advocacy or interpreting services.

Access resources and information

Exploring cultural factors can be empowering as it values difference and sheds light on aspects of a person's life experiences, including difficulties.

Comprehensive resources have been developed to assist people who are working in community services, health, education and public services to learn more about the cultural backgrounds of people they communicate with and provide services to. There are resources that can provide information on specific groups and specific community services sectors.

Here are some useful resources.

▶ Mental Health in Multicultural Australia (MHIMA) provides mental health information and resources written in different languages at:
  – http://aspirelr.link/mhima-strategy-resources-translated.

▶ Centre for Cultural Diversity in Ageing provides cultural awareness guides on over thirty different cultural groups at:
  – https://aspirelr.link/ccda-multilingual-resources.

▶ Queensland Health provides information about different cultural groups at:
  – http://aspirelr.link/cultural-profiles-health.

▶ Australian Human Rights Commission provides information about cultural safety at:
  – http://aspirelr.link/ahrc-cultural-safety.

▶ One Door Mental Health provides information about issues and approaches to working with Indigenous Australians in the field of mental health at:
  – http://aspirelr.link/one-door-rap.

Example

Identify resources required to introduce these changes

Sulley is overweight and was recently diagnosed with type 2 diabetes. It is nearly Ramadan, the period when Muslims fast during the daylight hours. Sulley is planning to observe Ramadan but is worried about his diabetes and how fasting will affect his health. With Sulley's consent, his support worker, Jane, contacts the mosque that Sulley attends and talks to the Imam there. The Imam explains that the Koran exempts the sick from the duty of fasting, especially if fasting could lead to harmful consequences for that person. He assures Jane that diabetes falls under this category and offers to speak to Sulley about his concerns and will give special permission for Sulley to eat during the day.

Practice task 24

1. List the activities or resources that might be required to meet the needs of the following individuals:

    ▶   Mohammed is a Muslim and prays five times a day

    ▶   Marella is a devout Catholic

    ▶   Manmohan would like to return to his Sikh tradition of wearing a dastaar (turban)

2. How can you help a person connect with resources and people so they can make spiritual and cultural changes?

Click to complete Practice task 24

5D Implement cultural and spiritual strategies and access resources

Help the person plan a strategy or program for implementing spiritual and cultural changes.

The person should be responsible for identifying their own needs, changes, and spiritual and cultural goals. Encourage the person to document these goals, or document them for the person. Spiritual and cultural goals should be achievable and realistic. Support the person to establish achievable goals by linking them to appropriate resources.

Here is some more information.

Support language

▶ Most peak-bodies offer translated materials, governments provide translated materials as do hospitals, health organisations and organisations that work in the fields of human rights and discrimination. Interpreters are available and many organisations employ multi-lingual or bi-lingual staff.

Community resources

▶ Other resources are available in the community. Because of Australia's multi-cultural society, traditional and cultural foods and other items are available through specialist retail outlets such as Asian grocery shops. Markets carry fruits and vegetables that reflect the cultures living in the community. There are other food shops that sell food prepared in a traditional or cultural way such as kosher or halal.

▶ The Victorian Government has a Community Group Directory (http://aspirelr. link/multicultural-vic) and groups usually have their own websites. These groups can provide information and contacts and culturally specific programs. Local governments are also a good source of information about local groups that may be able to meet an individual's needs.

Natural supports

▶ Natural supports can be useful as these can give access to social networks. Natural supports might be family members or friends from the same cultural or spiritual group. It might be a culture based social group or an organisation set up by a community to help its community members.

Identify and address any cultural improvements to practice

Help the person to identify their cultural and spiritual needs and then help them to identify areas they would like to improve. Once again, encourage the person to be self-directed and make decisions for themselves.

Areas a person may wish to make improvements in include:

▶ following cultural practices and traditions

▶ engaging in spirituality

▶ spending more time engaged in spirituality

▶ connecting with others from the same cultural background or spiritual group.

Establish a plan and anticipate contingencies

Help the person develop their own plan to make cultural and spiritual changes. Ensure part of the plan involves review. For instance, after the first week, the person may decide to talk to their support worker about how effective the plan is.

Anticipate possible barriers or issues with the plan and plan contingencies. Contingencies are alternative plans. For example, if a person is attempting to integrate more with their Jewish community, but are having trouble finding other people who practise Judaism, a contingency plan may be to use the internet to locate people in nearby regions.

A person's access to resources may be inhibited by their location, finances, language or social fear. Support the person as much as possible to facilitate connections, if barriers occur.

Example

Implement cultural and spiritual strategies and access resources

Here are two examples to compare different practices.

Spiritual practices

Yami tells people that she has become a Christian and has changed her name. She says she would like people to call her by her new Christian name – Jasmine. Most people, however, don't take her seriously and go on calling her Yami. Jasmine's support worker supports Jasmine by referring to her by her preferred name and advises staff members to do the same.

Cultural practices

The facilitator of a support group finds a shop that sells Ethiopian coffee made in the traditional way for an individual who is missing what was once his favourite drink.

Practice task 25

1. A person you work with has told you that they want to attend church once a week. Describe how you would implement a strategy and identify resources the person could access.

2. List two barriers that a person might face when implementing their cultural and spiritual strategy.

3. How could you support the person to identify and address any cultural improvements to practice?

Click to complete Practice task 25

Summary

1. Cultural and spiritual wellbeing can enhance holistic wellbeing.

2. Cultural and spiritual links and practices are important to many people.

3. People should be encouraged and supported to maintain cultural and spiritual practices.

4. There are many culture specific groups that can be a resource to workers and individuals. Support the person by linking them to these groups.

5. Cultural diversity should be reflected throughout a service.

6. Support the person to identify cultural and spiritual needs and areas for improvement, and develop a plan.

7. Help the person to identify natural resources and supports.

Learning checkpoint 5
Promote cultural or spiritual wellbeing

This learning checkpoint allows you to review your skills and knowledge in promoting cultural or spiritual wellbeing.

Part A

1. Explain how a person's involvement in cultural activities and networks contributes to holistic wellbeing.

2. Explain how you can support a person's ability to practise their own culture.

3. Explain how good links to own culture contribute to holistic wellbeing.

4. Provide two examples of cultural and spiritual values, beliefs, traditions or practices.

Part B

Read the case study, then answer the questions that follow.

> **Case study**
>
> Omar has an intellectual disability. He lives with his sister and her family and receives additional care from a disability support service. Omar is a devout Muslim. He carries the Quran with him at all times. He only eats halal certified foods and he prays five times a day. He refuses to leave the house in case he should miss a prayer session. Omar wants to observe Ramadan which involves a period of fasting. Omar's sister is worried how fasting will affect Omar's health, as his doctor has warned that he may be pre-diabetic (impaired glucose metabolism).

1. Explain how you could work collaboratively to identify Omar's preferred cultural and spiritual values, beliefs, traditions, activities and practices.

2. Identify cultural and spiritual needs and activities that Omar wants to undertake or changes he would like to make.

3. Identify other people or resources required to introduce these changes.

4. Explain how you could support Omar to implement cultural and spiritual strategies and access resources.

5. Explain any cultural improvements to practice that you could identify with Omar.

Topic 6

In this topic you will learn how to:

Review the person's wellbeing

A person's wellbeing is dynamic. Changes and improvements may happen incrementally, or in big shifts. Sometimes, changes may be negative or changes may not be made at all. A person's wellbeing will constantly shift due to internal and external stimuli. Providing constant support for the person will help them manage and adapt to wellbeing changes, as they occur. Help the person sustain positive changes by acknowledging and celebrating change. Help the person respond to negative changes in wellbeing by integrating contingency plans. Sometimes, the person will need additional support from professionals and specialists in certain areas.

6A Celebrate progress and identify new directions and strategies

To help a person sustain motivation to make positive changes and improvements to wellbeing, celebrate success and progress as it occurs. If negative changes occur, or progress is not made, address the person's strategies and plans, and help the person make alterations, if necessary. This way, you support the individual to move towards reaching personal wellness goals and maintaining holistic health.

Consider the following.

Ask questions

▶ Meet with the person on a regular basis. Ask the person questions about wellbeing, to help them identify progress and issues. If the person has difficulty identifying progress or issues, you may need to ask more probing or challenging questions.

Review other evidence

▶ Review other evidence of progress, such as conversations with other people who interact with or support the person, assessment results and observation. Collate and present this evidence to the person.

Decide on a specific review strategy

▶ When formulating strategies with a person, decide on how and how often reviews will take place. Weekly? Monthly? In person? Over the phone? Agreeing to a specific review strategy with the person will help the person stay on track to achieving wellness goals.

Celebrate progress

Celebrating progress and positive change is important when supporting a person to achieve wellness goals. For people facing very difficult circumstances, such as severe mental illness, poverty and disadvantage, progress can be hard to detect.

Signs of progress will be specific to the person. Indications of progress for one person may be very different from indications of progress of another. For example, one person with social anxiety visits a shopping centre and talks to the person selling fruit and vegetables. For that person, significant progress has been made. Another person with social anxiety enrols to start a course in writing and editing. For this person, significant progress has been made. Progress may be very subtle. Changes may be significant. In both cases, be sure to celebrate and acknowledge progress. Here are some tips for celebrating a person's progress.

Name the change

▶ Name the change or progress that has occurred. For example, 'You went to the shops by yourself. How does this make you feel?' As much as possible, encourage the person to name the change themselves. For example, 'What progress do you think you made today?'

Discuss how change relates to overall wellness goals

▶ Help the person stay focused by bringing the change back to the person's goals. Has the person achieved a step towards reaching their wellness goal? Has the person achieved the goal itself? Talk to the person about how this change demonstrates overall improvement.

Encourage the person to tell others

▶ Encourage self-pride and confidence by suggesting the person talk about their positive progress with others. For example, a person has gone one week without having a fall. You suggest the person tells their carer, so they can celebrate success together.

Identify rewards

▶ Progress made may mean the person can now do something they couldn't previously do. For example, a person with social anxiety may want to go to the movies. Having taken the first step of shopping in the centre alone may give them the confidence they need to go to the movies. The person should identify their own rewards, which are meaningful to them.

Talk about why changes are positive

▶ Progress and positive changes are meaningless unless the person understands why they are positive. Help the person to identify internal positive effects of changes, such as pride, increased confidence and satisfaction. After not smoking for a week, the person may be feeling healthier and more positive. Focus on these positive effects. Help the person identify external effects of change. After a week of not smoking, the person has more money to spend on other social activities, which means they have spent more time with friends.

Support the person to identify new directions and strategies

A person may become disillusioned if they feel no progress is made, or changes have been negative. Address issues as early as possible and help the person by encouraging them to see the bigger picture. Lack of progress or negative changes may be slight, whereas positive changes are more significant. Help the person maintain a balanced perspective. Normalise negative changes or lack of progress by reminding the person that change is not always linear; set-backs are often part of the course.

Lack of progress may be incidental, and related to external circumstances. Alternatively, the plan may not be realistic, or effective. Help the person identify why progress hasn't been made, and what the consequences are. You may need to support the person to amend the program, or implement a contingency plan.

Help the person maintain self-confidence and pride in changes that have been made. For example, 'You had a fall this week, it is true. But the previous six weeks, you didn't have a single fall. How does that make you feel?'

Follow these steps when supporting a person to identify new directions.

Identify new directions
Identify problems and issues that occurred
Analyse why the issue occurred, and the consequence
Brainstorm alternative strategies and directions
Analyse how strategies lead to improvements and discuss required resources and timelines
Review new strategies and directions

Example

Celebrate progress and identify new directions and strategies

Carlos has been a cigarette smoker for 55 years but he is trying to cut back. He and the support worker Nancy have developed a strategy where Carlos will reduce the number of cigarettes by half in the first week. In the second week, Carlos has agreed to use nicotine patches and attempt to reduce cigarettes by another half. Carlos seems motivated and optimistic and Nancy congratulates him on making such an important first step.

When Carlos meets with Nancy at the end of the second week, he seems ashamed and disappointed. He tells Nancy that even with the nicotine patches, he is back to smoking a pack a day. Nancy reminds Carlos that it is only the second week, and making significant changes like this can take time. She praises him for being open and honest about his relapse and that he should feel proud that he still wants to quit and is seeking help to do so. They talk about likely triggers to smoking and why Carlos went back to a pack a day in the second week. He says his work and relationship have been stressful so he needed to smoke more. He has also been going out to dinner or the pub with friends who also smoke.

Nancy and Carlos talk about other ways of managing stress that Carlos could use, such as exercise or meditation. Nancy helps Carlos identify activities that he likes doing that don't involve smoking. Carlos enjoys cooking so he decides to spend more time cooking meals, to go for a walk every morning and to swim on the weekend to try and alleviate stress, instead of smoking. Nancy also suggests to Carlos that he reconnect with some of his friends who don't smoke.

After the third week, Carlos proudly tells Nancy that he has implemented the strategies, has cut back to half a pack again, and is already feeling the positive effects.

Practice task 26

1. A person has attended church for the first time in five years. They are attempting to reconnect with their spiritual self and community. Although the person feels anxious talking to others in the congregation after the service, they still made it to the service. How could you help this person to celebrate progress?

2. A person has not had a delusional episode for three weeks. After their meeting with you, however, they are triggered by a loud noise and have a delusion. The next time you meet, they are disappointed in themselves and feel like the strategies aren't working. What could you say to this person to support them?

3. A person in a wheelchair plans to attend weekly basketball matches at the local sports and rec centre. However, the centre hasn't catered for wheelchair access. The person feels disappointed and angry towards society for restricting her choices. How could you help the person develop a new strategy or direction?

Click to complete Practice task 26

6B Respond flexibly and use contingency plans

To encourage motivation and support positive change, strategies should be flexible and realistic. Unpredictable internal and external events may occur, which cause set-backs or inhibit change. If a plan is flexible, you and the person can respond to changes as they occur.

Develop contingency plans to address issues. For example, if a person cannot access a building because of lack of wheelchair access, find an alternative route, or an alternative building. If a person has not been able to attend literacy lessons because of lack of transport, find a literacy class which is more accessible, or help the person arrange transport.

The plan should reflect the fact that progress and wellness change is not linear. It may be useful to apply the Stages of Change model.

Read more about the Stages of Change model at: http://aspirelr.link/aod-stages-of-change-model.

Stages of Change model

The Stages of Change model was developed by Prochaska and DiClemente in 1994. The model assumes that change is gradual and happens over time. As progress is made, motivation and needs change, and progress may reflect this.

According to the model, the stages of change are as follows.

Stages of Change model

Stage 1: Pre-contemplation

People may be aware of the problem, and the effects of the problem, but may not yet have identified the benefits of making a change. They may lack motivation to make a change. For example, a person who is over-weight may know that weight puts them at risk of type 2 diabetes, but they feel like losing weight is too difficult.

Stage 2: Contemplation

A person starts to think about how their issue is associated with their behaviour and starts to identify personal responsibility. They start exploring the possibility of change. They desire change, but haven't got the confidence yet to implement change. For example, a person with social anxiety may be keen to attend a music festival and know that their anxiety is limiting their potential. However, they are not sure they have the ability to change.

Stage 3: Preparation

As the person starts to accept responsibility for their issue, they start to build confidence to make change and formulate a commitment towards making change. They assess steps needed to make the change. For example, when a person wants to quit smoking, they look up a Quit helpline and purchase nicotine patches from the chemist.

Step 4: Action

The person starts to implement change. They access resources and support and make efforts to change behaviour. For example, a person wanting to develop their connection with a Muslim community visits a mosque and commits to praying five times a day.

Step 5: Maintenance

A person is focused on maintaining changes. They are aware of situations that put them at risk of relapse and have implemented contingency plans. They have increased motivation and confidence over time. Change is being integrated into lifestyle. For example, a person who experienced high stress as a result of their career has cut back hours, and for the last six months, has focused energy on their hobbies and interests. They feel significantly less stressed and are proud of themselves for taking action.

Step 6: Termination

A person's lifestyle and self-image is consistent with changes. They are immune to relapse and temptation. The person feels in control and proud of changes that have been made. For example, a person has developed positive thinking habits, which have protected the person against depression. The person has resumed work and has stronger family relationships.

Example

Respond flexibly and use contingency plans

Igor came to Australia from Hungary in his late teens. He says he spent most of his life 'just working hard and looking after the family'. Igor's wife died five years ago. Now as an older man, Igor feels his lack of Hungarian culture may contribute to his feelings of alienation and depression. He doesn't know many Hungarian people and has largely forgotten the language because he doesn't practise it. He also doesn't practise Hungarian traditions.

Igor asks his support worker, Max, if he can change the existing support plan to include his newly identified need for cultural expression. Max says the support plan is designed to be flexible and can definitely be changed to meet these new needs.

Max helps Igor identify wellness goals and develop a strategy for change. The goal is to develop a stronger connection with Hungarian identity. The steps towards making change include:

▶ making contact with the Hungarian cultural centre

▶ purchasing Hungarian literature and audio books

▶ purchasing a Hungarian recipe book and attempting to cook Hungarian food for himself and his family

▶ enrolling in a Hungarian speaking course online.

When Igor first researches Hungarian cultural centres in his city, he cannot find one. He feels discouraged and even more alienated from his culture. Max helps Igor find an online community. Igor is worried about using the internet for communication as he feels nervous using technology. Max helps Igor develop basic computer skills, and over time, Igor begins to feel more confident communicating with a Hungarian community online. After six months, Igor has developed strong connections with two Hungarian women, about his age. He has learnt to cook Hungarian meals, and feels more satisfied with his life.

Practice task 27

1. Apply the Stages of Change model to the case study in the previous example.

2. What or who inhibits positive change in the previous example and how do these make Igor feel?

3. Describe Max's flexible response and relevant contingency plans.

Click to complete Practice task 27

6C Seek specialist expertise according to the person's needs

Sometimes a person will need additional skills and expertise to make changes. Additional support may be engaged when the plan is first implemented. However, the need for additional support may be identified when lack of progress, or issues occur. For example, if a person is not losing weight as expected, they may need to contact a dietician for additional advice and support.

Here is a list of possible specialists you may engage for different types of advice.

Specialist expertise
▶ Physical advice from a doctor, physiotherapist, chiropractor, podiatrist, optometrist or osteopath
▶ Emotional advice and support from a counsellor, drugs and alcohol rehabilitation service, support group, QUIT service, LifeLine or relationship skills facilitator
▶ Cognitive advice from psychologist, psychiatrist or counsellor
▶ Social advice from a relationship counsellor, employment agency, psychologist or counsellor
▶ Spiritual and cultural advice from a religious or spiritual leader or representative from the community

Identify need for specialist advice

Empower the person to identify the need for specialist advice, and how advice should be obtained. A person may need additional support for the following reasons.

Need for specialist support
▶ Person is not achieving wellness goals
▶ Person struggles to make changes without support
▶ Person is demotivated
▶ Person lacks community and support to sustain changes
▶ Person doesn't know how to make and maintain changes

Refer to specialist for support

As much as possible, encourage the person to self-advocate when obtaining additional support. This involves identifying who can provide support, contacting the specialist, and attending appointments. For example, provide the person with the number for LifeLine and encourage them to call LifeLine whenever they start to experience fear and self-doubt.

If you are facilitating a referral, you should always seek the person's permission before sharing personal information, in line with privacy legislation.

When making a referral:

▶ encourage self-advocacy

▶ ensure the person has the means to access referral; transport, cost and motivation

▶ provide a phone number and other relevant details, such as address and opening hours

▶ provide referral information, such as assessment results

▶ observe privacy and confidentiality

▶ document referral process according to policies and procedures.

Example

Seek specialist expertise according to the person's needs

Hendrika has committed to addressing her depression, so she can feel better, return to work and develop her social connections. Her plan is to exercise once a day, take the anti-depressants prescribed by her doctor, attend group therapy every week and see her psychologist fortnightly.

After three weeks, Hendrika is not noticing any benefits or positive change. She feels demotivated and frustrated. Her support worker, Yin, helps Hendrika review why she may not be experiencing progress. Hendrika feels the anti-depressants are not effective.

Yin helps Hendrika find another doctor to ask for a second opinion. Yin provides the number of a doctor who specialises in mental illness and Hendrika phones to make an appointment. New anti-depressants are prescribed, and in three weeks, Hendrika starts to experience positive change.

Practice task 28

1. A person's falls have increased as a result of increased seizures. Who could the person consult for specialist advice?

2. A person requires specialist advice from a spiritual guidance counsellor. What indications might the person present with?

Click to complete Practice task 28

6D Evaluate service provision and act on feedback from stakeholders

In order to establish whether services provided to people have helped them meet identified outcomes, workers need to monitor and evaluate their progress. This should be done according to organisational procedures and in consultation with a range of stakeholders. It is good practice to evaluate the wellness plan on a regular basis as part of a continuous improvement cycle.

Review outcomes to identify:

▶ Whether services are meeting wellness needs so that people are achieving their goals and are happy with the service provided

▶ Whether people are achieving their goals within agreed time lines

▶ Whether there are any problems with service provision or people are failing to meet their goals

▶ Whether changes need to be made in how services are provided in order to better meet the needs; this may include modifying goals or changing the steps needed to achieve goals

▶ Whether needs or circumstances have changed

Follow organisational procedures

Most organisations will have a range of indicators or benchmarks in place to review outcomes and service delivery.

As part of the organisation's procedures, workers will also undergo regular performance reviews with their supervisor. This gives workers an opportunity to reflect on their work practices and performance, and on their goals as a practitioner.

Consider the following.

Benchmarks to review	Performance should cover the following
▶ Outcomes	▶ The quality of their relationship with people they support
▶ Reports from stakeholders including the person, the person's significant others and other service providers	▶ How well they communicate with people and others
▶ Staff adherence to organisation procedures and policies	▶ How well they respond to the changing needs of the individual
▶ Timeliness of service delivery	▶ How well they adhere to the code of conduct and other standards of the organisation
▶ Industry standards	▶ Their ability to work effectively as part of a team

Evaluate effectiveness of service

In order to evaluate the effectiveness of a service, workers must gather information from a range of stakeholders. Information may be provided in the form of reports from specialist service providers such as psychologists, or involve discussions with co-workers, family members and the person being supported. Feedback forms are also a way of obtaining feedback that the person may not want to discuss. Workers can also evaluate their own role in service outcomes by reflecting on their practice with a supervisor, their peers or on their own.

Stakeholders include:

▶ people you support

▶ the person's family, community and significant others

▶ other care workers

▶ specialists the person is referred to.

Consult with stakeholders

It is not possible to evaluate the effectiveness of a service without gathering information from the person and the people most directly involved in their wellness program. Stakeholders include the person themselves, carers, significant others and other people involved in providing services to the person such as counsellors, health professionals or AOD workers.

All of these people are in a position to observe change in the person and provide information about the person's progress, their motivation, how their needs are changing, what needs still need to be addressed and whether the person is doing better in some areas than others.

Here is more information on stakeholders you should consult with.

Consult with stakeholders

Significant others

Significant others such as family members, carers and partners can also provide useful input about a person's progress. They are able to observe behaviour that workers don't see such as that the person is engaging in fewer behaviours of concern or they seem generally happier and more motivated.

Other providers

Other people involved in service delivery can also provide information about progress. They are in a position to notice both positive and negative changes in a person's behaviour. They may also provide information about what concerns the person still needs to address or how their needs are changing. They may suggest possible future directions in service delivery.

If the person has a case manager external to the agency, workers should be involved in regular discussion with them. Case managers are responsible for managing the various services that people receive. They are in a position to talk to people about the different services being provided and whether or not the person feels they are helpful. Case managers also follow up with the service providers to check how they feel the person is progressing.

Person you support

People you support are the most important stakeholders and have an important role to play in evaluating service provision. They can provide information about how well (or otherwise) the service has met their needs, whether they need more support in some areas, what is not working and whether or not they feel they have met or can meet their goals. People are more likely to want to achieve their goals if they think the service is supportive and provides the right resources for them to reach their desired outcomes. When supporting the person you should:

- ▶ discuss outcomes
- ▶ use feedback to determine how well needs are being met
- ▶ use feedback forms in addition to verbal feedback.

Types of feedback

How you receive feedback, and the types of feedback you receive will vary depending on the circumstances.

Here are some examples.

Types of structured feedback	Types of unstructured feedback
▶ Performance appraisals ▶ Performance reviews ▶ Feedback forms ▶ Questionnaires ▶ Supervision meetings ▶ Consultation meetings with stakeholders	▶ Attendance rates; a person is not attending appointments ▶ Observation; a person is not enjoying or engaging in activities ▶ Informal reports from others; staff tell you the person is unhappy ▶ Informal reports from person; person complains about not having enough social contact

Act on feedback

Once feedback from stakeholders has been obtained, you need to take action to integrate constructive feedback.

Evaluate feedback. Is the feedback helpful? What is the source of feedback? What are the person's motivations for providing feedback? How can feedback improve service?

Work with the person and your colleagues to plan how to integrate feedback. You may require additional resources for integrating feedback. For example, you may need weekly supervision to address issues with boundaries, which were identified through feedback.

Here are some examples of integrating feedback.

Address need for additional services

- ▶ The person you support is not meeting their goals. They feel frustrated and demotivated. They want to quit the program. Before they do, you encourage them to contact a specialist for advice.

You and the person have poor rapport

▶ Rapport issues are not necessarily easily fixed. There may be a personality clash, or distrust between you and the person. Try to address rapport issues, such as using better communication, or obtaining supervision. A new worker may need to be assigned if issues cannot be resolved.

Goals are not realistic

▶ A person is not reaching their wellness goals. When you help the person identify why, you determine that the goals are not realistic. You and the person work together to establish more realistic goals.

Example

Evaluate service provision and act on feedback from stakeholders

Here is an example of a feedback form used by Claire Valley community services.

Feedback form

1. Are you satisfied with how Claire Valley supported your needs?	☐ Very satisfied ☐ Satisfied ☐ Dissatisfied ☐ Very dissatisfied
2. Please explain what you are happy with and why.	☐ Contact with agency .... ☐ Contact with staff .... ☐ Services arranged to meet needs .... ☐ Quality of services .... ☐ Feeling of achievement .... ☐ Other ....
3. Has the agency identified your needs appropriately?	☐ Yes ☐ Sometimes ☐ No ☐ Comments ....
4. Have you met your goals?	☐ Yes ☐ In part ☐ No ☐ Comments ....
5. What can the service do differently?	....

Practice task 29

1. List two ways to evaluate work and service provision.

2. List two ways to gather feedback and explain who feedback would come from.

3. A person has stopped attending your meetings. They appear demotivated and unhappy when you see them. You know from their significant others that their strategies are not working and no progress is being made. What should you do?

Click to complete Practice task 29

6E Reflect on and improve own practice

Reflective practice is becoming increasingly important in all community services work. It is a way for individual workers and teams to take the time to consider what they have done well and what they may have done more effectively.

Reflective practice can help workers to improve the quality of their work by encouraging them to reflect on their practice and learn by experience. Reflective practice may be carried out alone; for example, by using a journal, or it may involve discussion with a supervisor or peer workers.

As part of reflective practice, ask:

▶ Is there anything I did not do that I should have done?

▶ Is there anything I am doing that I should not be doing?

Identify strategies to improve practice

Use your reflective practice and feedback gathered from others to identify strategies for making improvements. Having a clear strategy will help you maintain focus and make appropriate changes and improvements to the way you deliver service. Set clear goals within a realistic timeframe and ensure you have the support and resources to help you achieve goals.

Here is more information.

Using reflection and feedback to improve practice

Analyse feedback and reflection

How often do you hear the same feedback? What are consistent issues you should address? What is the reason for the issues that have been identified? Where could additional support be obtained?

Brainstorm strategies

Brainstorm changes you can make. You may do this alone or with a team, such as your supervisor and your colleagues, and the person you support. For example, if you are consistently having conflicts with people you support, and you identify the issue to be your communication style, you may need support to improve your communication skills. You write down a list of communication courses you can take, and talk to your supervisor about ways to improve your communication style.

Decide on options

Talk to your supervisor and colleagues about your course of action. Generally, you will be supported to make improvements. Your organisation may provide financial support, such as paying for courses and training, and allowing you time off work to complete the training. Make decisions in consultation.

Implement change and review

Implement changes and strategies. Review how effective strategies are, and whether your practice has improved. Brainstorm additional changes needed and maintenance of the changes.

Example

Reflect on and improve own practice

May has found that none of the people she provides support services to are making positive changes. She begins to wonder if she is the problem and talks to her supervisor about how to conduct reflective practice. The supervisor, Meryl, encourages May to keep a diary of her interaction style and suggests she sit in on May's interactions with the people she supports.

After a week of reflective practice, Meryl and May discuss possible issues. One issue is that May is very passive in her communication style. She allows the person to dominate conversation and doesn't provide clear focus and structure for meetings. She seems unsure about her professional boundaries and Meryl suggests people might take advantage of her uncertainty. May doesn't seem to guide the conversations effectively – they end up as informal chats that don't provide clear information. The people she supports are not developing clear or effective strategies as a result.

Meryl asks May what she could do to make improvements. May would like some training, so she and Meryl identify an appropriate course May can do. After three weeks of the course, and some role playing with Meryl, May observes increased levels of confidence when interacting with the people she supports. May continues to keep a reflection journal and over time, the people she supports achieve more goals and develop clearer strategies.

Practice task 30

1. List two ways of conducting reflective practice.

2. Why is reflective practice important?

3. Provide an example of a strategy you could implement if the people you support are not effectively meeting goals.

Click to complete Practice task 30

6F Engage in collaborative record keeping

Record keeping should be collaborative. Consult the person about their needs, goals and outcomes, and document with their guidance. Encourage team members to keep clear and accurate records. Read written communication from staff.

Examples of collaborative record keeping include:

▶ keeping up-to-date files for the person, including medical information, goal-setting and record of outcomes

▶ reporting outcomes for the person and their holistic wellness team

▶ reports and assessment results from other services and specialists

▶ verbal interviews with the person and significant others about needs, goals or outcomes

▶ evidence of performance appraisal and self-reflection.

Record-keeping management

Workers have a responsibility to ensure all reports and records are accurate and adhere to organisational procedures and guidelines.

Procedures for documenting information may vary between organisations but there are some common principles. Workers should ensure that they report any incidents or anything unusual that occurred in their shift. The purpose of such documents is to keep a record of the person's progress and to make sure that all team members are up-to-date with any important information regarding the person that may affect service delivery.

Notes and records

Every person receiving support at a mental health service will have an information file kept about them. These records may be referred to as case notes or file notes. They may be hand written and stored or electronically recorded and filed.

Here are some guidelines that should be followed when writing case notes.

Be objective

Only report the facts and don't include opinions or assumptions.

Be precise

All workers struggle with a busy workload and so don't have a lot of time for note writing. You will save time if you can be concise and only report relevant information that is essential to service delivery.

Be clear

Other people will be reading your notes perhaps months or years after you have written them; keep in mind the information needs of these readers and use plain English that is easily understood.

Be timely

Write your notes as soon as possible; with a busy workload it is easy to forget the details of service delivery with one person as you move on to another. If you leave note-writing to the next day or later, you may forget to include relevant information.

Ensure notes are complete

Notes should be concise but should include all the relevant information. By omitting relevant information you may be diminishing the quality of care provided to people because decisions could not be made effectively.

Handwriting

Try to write as neatly as possible keeping in mind other people will need to understand what you have written.

No personal abbreviations

You will be informed by your supervisor of approved abbreviations or acronyms to use in note-writing; don't use your own versions as other people won't be able to understand them.

Spelling

Your note-writing is a reflection of your work practice and so should be professional; use a dictionary if necessary.

Date

Each entry in a person's file should be dated and it should be specified whether the information is taken from an interview or telephone conversation.

Correspondence

Each time you speak to the person or other party such as an external service provider, or send or receive correspondence, a brief note should be made on the file.

Don't incriminate

Never record incriminating information about the person. These records may be used as in evidence in court, so seek guidance from your supervisor.

Don't judge

Never record disrespectful or judgmental comments about the person. Other people will have access to and read these files, including the person, their family and carers.

Legal and organisational requirements

Completing documents in line with organisational procedures means understanding what your role is and what reports you need to make. For example, if you observe changes in a person's behaviour, you must document this in the case notes so other team members know to monitor and report any changes they notice. You must also ensure that you adhere to work health and safety requirements such as filling out incident reports or hazard identification forms.

It is also important that workers are aware that most of the documents they write may be used as evidence in court; for example, to settle a negligence claim. In addition, under freedom of information legislation, a person may also request access to their files. For these reasons, and to ensure the best possible delivery of services, it is essential that all records concerning the people you support are kept up-to-date and accurate.

According to the *Privacy Act 1988* (Cth) a person has legal rights to privacy and protection of personal information. They can access any information about themselves at any time. The organisation must abide by privacy laws and maintain and store information safely.

Write reports

Most organisations have their own procedures for writing documents or reports. Here are some general principles.

Accuracy and clarity

▶ Notes must be accurate and written in a way that can be clearly understood by others. Workers should always check what they have written to make sure it is accurate and that it includes their name and signature and the date and time they wrote the report.

Objectivity

▶ Write only facts about what you see, hear and do. Avoid personal opinions, assumptions and feelings and illustrate your points with factual descriptions of behaviour. If you do not have all the facts about a situation make sure that you make this clear and do not infer that you know more than you do. You should never assume you know what happened or make a guess. If you are reporting what someone else has said, use direct quotes as much as possible.

Appropriate language

▶ Use bias-free language and a neutral tone as far as possible. Avoid using clichéd or emotive language and terms such as 'tragic' or 'fantastic'.

Completeness

▶ Reports should contain complete and relevant information. This may include positive and negative information and include notes about behavioural changes or observed indicators of risk.

Timeliness

▶ Notes should be made as soon as possible after contact with the person to ensure accuracy and to make sure the person's records are kept as up to date as possible.

Manage information to ensure all records are maintained, stored and accessible

Workers must ensure they not only keep all the documents they are responsible for up to date but also that these documents are securely stored in accordance with organisational guidelines, confidentiality principles and privacy legislation.

All documents should be accessible only to appropriate and authorised staff. It is not appropriate for one worker to keep a person's file on their desk for days or to take it home and forget to bring it back. Workers can manage records according to confidentiality and privacy principles and ensure that they are accessible by doing the following.

Follow confidentiality and privacy by:

▶ keeping files and other personal information in a locked filing cabinet when not in use

▶ limiting access to filing cabinets to workers who must access information as part of their work

▶ making sure that files are not left out or unattended; for example, in a car or in the lunchroom

▶ ensuring that documents on a laptop computer are kept safe and that precautions are taken so the laptop is not stolen

▶ avoiding sending or receiving personal information via email whenever possible as emails may not be secure

▶ avoiding sending or receiving personal information by fax.

Example

Engage in collaborative record keeping

Vivek is a support worker for Dave. After meeting with Dave, Vivek leaves Dave's file on his desk and goes to lunch. When he comes back, he sees the file has been opened. Vivek immediately feels concerned about who has opened Dave's file and what information has been seen. He looks through the file and checks that all documents are there. They are.

When he talks to his co-workers, Vivek discovers that another support worker, Rod, had opened the file and read through Dave's information. He tells Vivek that he knows Dave's family and just wanted to see how Dave was progressing.

Rod and Vivek reflect on the situation and both accept that they acted unprofessionally and breached the organisation's policies and procedures. They also acknowledge that they have not met their legal and ethical obligations to keep Dave's information private and confidential. Vivek should have immediately stored Dave's file in the locked filing cabinet and Rod was not authorised to access Dave's file or read the confidential information. They agree to speak to their supervisor about this situation.

Practice task 31

1. List two examples of collaborative record keeping.

2. Explain how legal and ethical considerations relate to records management.

3. Why should record keeping be collaborative?

Click to complete Practice task 31

Summary

1. In order to establish whether services provided to a person have helped them meet their goals and achieve other positive outcomes, workers need to monitor and evaluate progress and the effectiveness of services.

2. By evaluating and monitoring progress, workers can determine whether current services are meeting the person's needs, whether there is a problem and people are failing to meet their goals, and whether changes need to be made.

3. It is not possible to evaluate the effectiveness of a service without gathering information from the person and the people most directly involved with them.

4. Feedback forms are useful for gathering information from people that they may not be willing to discuss with workers.

5. Reflective practice is a way for individual workers and teams to take time to consider what they have done well and what they may have done more effectively.

6. Workers have a responsibility to ensure all reports and records are accurate and adhere to organisational procedures and guidelines.

7. There are various types of documents that workers may need to complete. It is important that the appropriate report is made.

Learning checkpoint 6
Review the person's wellbeing

This learning checkpoint allows you to review your skills and knowledge in reviewing the person's wellbeing.

Part A

1. Describe the Stages of Change model in relation to supporting holistic health.

2. List two legal and/or ethical considerations regarding records management.

3. List two ways you can engage in collaborative record keeping.

4. Explain why it is important to reflect on own practice and describe strategies you could use to improve your work practice.

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Part B

Read the case study, then answer the questions that follow.

Case study

Jett supports Manny, who is an older Maori man living alone in the community. Manny has type 1 diabetes, so needs to be careful about what he eats and drinks. He needs to carry insulin with him. Manny is Christian and attends church every Sunday. He also has a strong connection with his Maori identity. He spends time with Maori friends such as going to sporting events together and celebrating cultural festivals together.

Manny's key holistic wellness goals are to lose 5 to 10kg to help his knee and back health, as well as an improvement to overall health. He also wants to spend more time with family, especially his children. Manny experiences mild depression particularly during the winter months, so one of the goals is to do more exercise. In the last six months, Manny has been walking most mornings and has been doing gentle weight bearing exercises at home. He has also joined a swimming group who meet once a week. Manny has lost 8kg in six months and feels fitter and stronger.

One minor set-back during the course of six months is that Manny's daughter, Helen, moved back to New Zealand. Manny misses both Helen and her children and has found her move very distressing.

1. Explain how Jett could recognise and celebrate Manny's progress and identify new directions and strategies as chosen by Manny.

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2. Explain why Jett may need to respond flexibly and utilise contingency plans to meet Manny's needs.

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3. How would Jett recognise the need for specialist expertise and seek advice according to Manny's needs?

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4. How could Jett evaluate effectiveness of work and service provision, and gather and act on feedback from Manny and other relevant parties?

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