Family Peer Support: An Emerging Profession Session 2: Self-Care

Mogens Bill Baerentzen, PhD, CRC, LMHP

University of Nebraska Medical Center

Behavioral Health Education Center of Nebraska

Mid-America Mental Health Technology Transfer Center

SAMHSA
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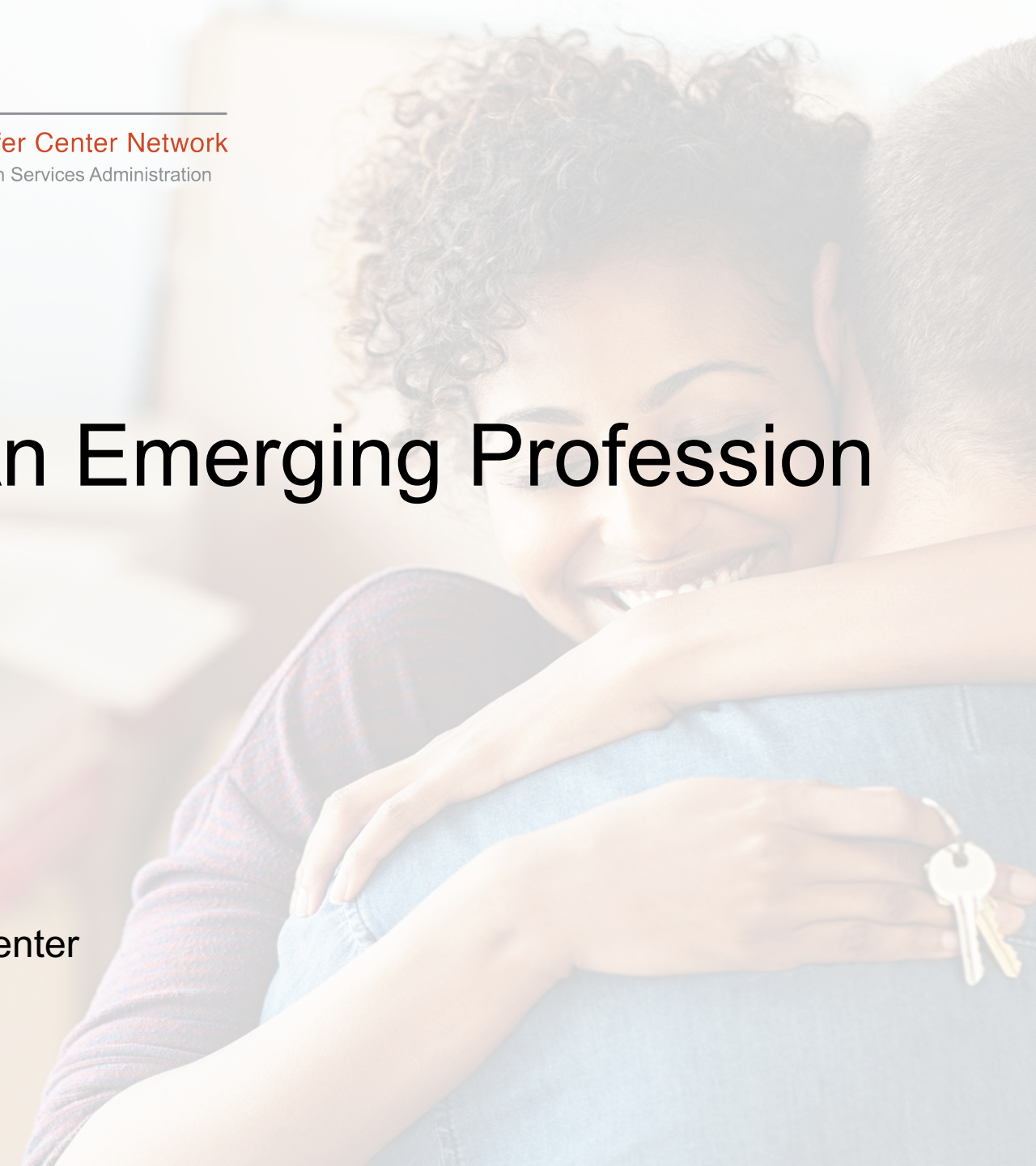MHTTC Mental Health Technology Transfer Center Network
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The MHTTC Network uses affirming, respectful and recovery-oriented language in all activities. That language is:

INVITING TO INDIVIDUALS PARTICIPATING IN THEIR OWN JOURNEYS

STRENGTHS-BASED AND HOPEFUL

PERSON-FIRST AND FREE OF LABELS

INCLUSIVE AND ACCEPTING OF DIVERSE CULTURES, GENDERS, PERSPECTIVES, AND EXPERIENCES

NON-JUDGMENTAL AND AVOIDING ASSUMPTIONS

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HEALING-CENTERED/ TRAUMA-RESPONSIVE

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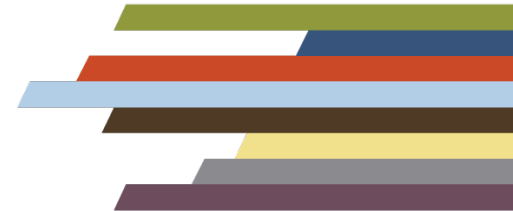
Mid-America Mental Health Technology Transfer Center

Established to increase utilization of evidence-based mental health practices.

- Missouri, Iowa, Nebraska, and Kansas.
- Free training and technical assistance.
- SAMHSA grant awarded to the Behavioral Health Education Center of Nebraska at University of Nebraska Medical Center.
  (5 years, $3.7 million, grant number: H79SM081769)
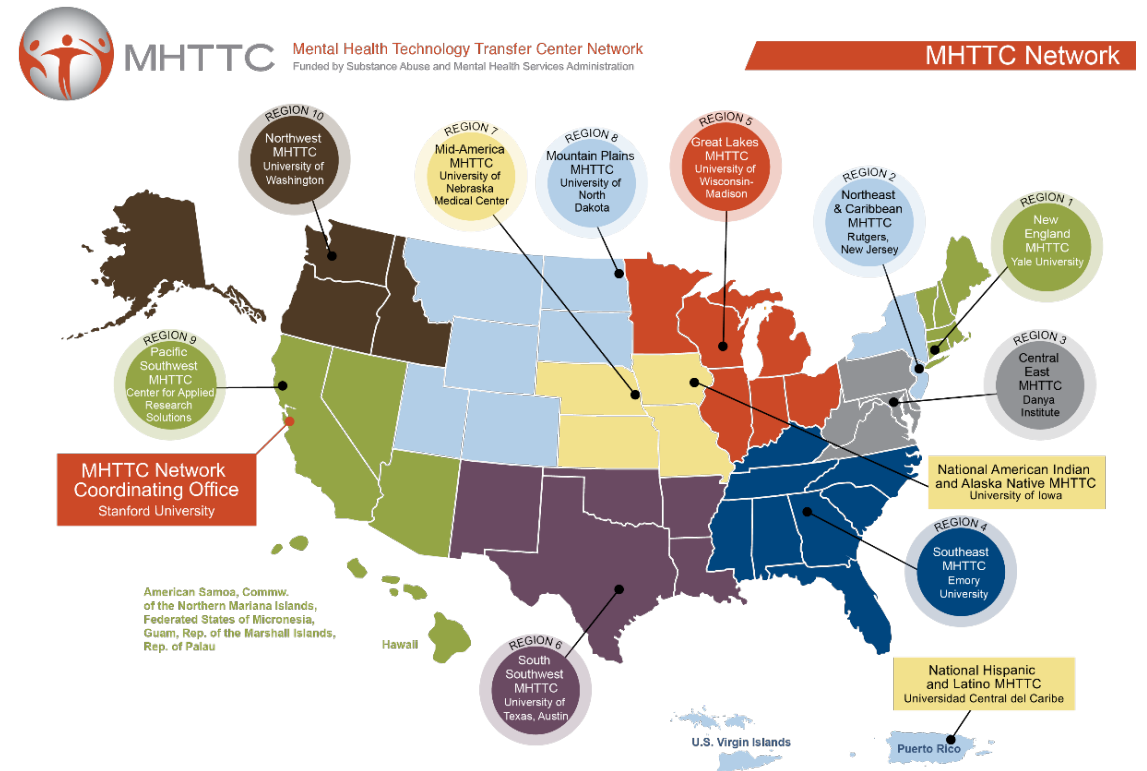
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Family Peer Support: An Emerging Profession

A webinar series to introduce Family Peer Support to the mental health workforce. A Partnership of Community Alliance and Mid-America MHTTC.

Register for upcoming events:

https://mhttcnetwork.org/centers/mid-america-mhttc/family-peer-support-emerging-workforce

Family Peer Support: Being part of the mental health team (12/17/2020)

Family Peer Support: Preventing crisis and relapse (01/21/2020)
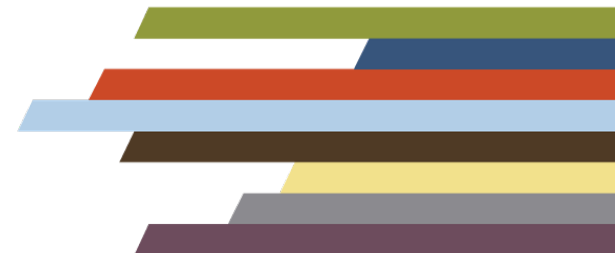
Session 2
Family Peer Support: Self-care

In this presentation, we will describe how family peer support workers help families adjust their thoughts, feelings and behavior to promote health and well-being. Self-care allows family members to relate better to their loved ones, and providers and practitioners to promote recovery. Participants will understand how a family peer support worker can help families:

- Understand, identify, and accept their own emotional response to the illness of a loved one;

- Adopt productive self-care strategies through teaching and modeling; and

- Develop a personal self-care plan.

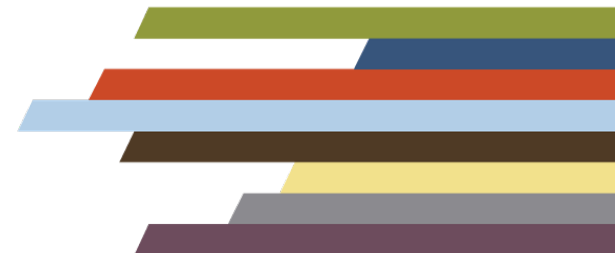# Family Stress, 1/2

Onset of a SMI
- Often create major changes in family roles, that few persons are prepared for (Hatfield, 1987, Spaniol, 1987).
- Families often feel helpless, angry, despairing, and anxious; and mental health practitioners are often not prepared to help (Spaniol & zipple, 1998).

**3 types of distressing family caregiver stigma**, (Corrigan, 2016)
- *Public Stigma.* Discrimination, social distancing, derogatory language, blame, criticism, etc. Leads to decreased social support, isolation, and guilt.
- *Self-stigma.* Internalized public stigma. Associated with shame and psychological distress.
- *Label avoidance.* Fear of being labeled. Might encourage family member to avoid label and treatment.
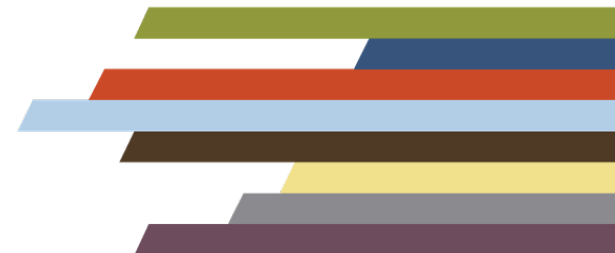
Family Stress, 2/2

Health Literacy
Family caregivers seek information about their loved ones diagnosis, treatment, and prognosis (Corrigan, 2016). They wish to learn how to cope and adjust; and how to motivate and be helpful (Hatfield, 1983).

Treatment exclusion
Family caregivers believe they have a lot to offer the mental health team (information and support), yet feel excluded by professionals (Marshall & Solomon, 2000).

Family Resilience

Despite seemingly similar circumstances there are great variations in how persons react to a crisis. Some have healthy and others maladaptive adjustments (Kumpfer, 2002).

- 30-65% of persons with a serious mental illness live with their family. Families function as caregivers, a role for which they are often not prepared (Corrigan, 2016).
- Persons adjustment to being a caregiver vary as a result of personal and environmental characteristics over time. Persons might experience stress related to caregiver overload, loss of self, and social supports affect, and develop depression, anxiety and poor health (Pearlin, Mullan, Semple, & Skaff, 1990).
- Caregivers can built resilience through social supports (i.e. family peer support), counseling/therapy (cognitive reframing), health practices (i.e. sleep, diet and physical activity), and education.
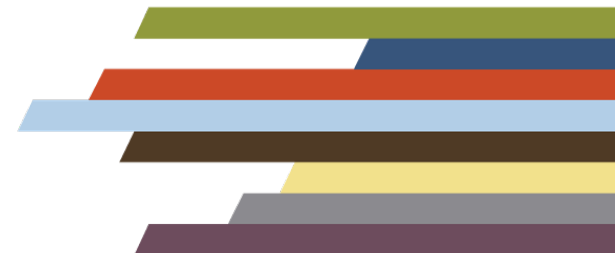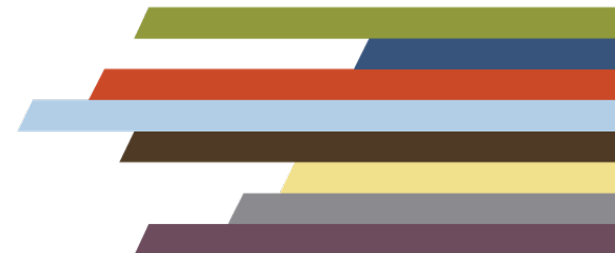
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Family Peer Support: Self-care

Jai Sookram, PhD
Community Alliance
Manager, Family and Peer Support Services

Cecilia Losee

Richard Kalal

Developing a Well Being plan when a FM has a BHC

- What is our immediate response- does super parenting work?
- What do Families need?
- Coming to terms with a new reality.
- Collaboration and cooperation
- Explore BPSS dimensions of well being
- Making and implementing
- The essential roles od peers and allies in our wellness plans.

Understanding, identifying and accepting their own emotional response to the illness: Changing Family Dynamics

Impact of a FM illness driven behavior on parents, siblings, friends and extended family members

How did roles change ?

Creating partnerships

Developing a Family Well being Plan for FPS : multi dimensional

- Caring for persons with chronic illness is multi dimensional:
- Overall well being of all family members.
- Personal Physical and mental Health.
- Personal Social support network.
- Personal Spiritual engagement for the meaning of suffering and the future.
- Socioeconomic concerns.

Advocacy

- Personal education to relevant issues in the BHC.
- Relationship with Providers and Practitioners.
- Accessing State and Federal benefits.

First Hand accounts of how this works in Practice.

Welcome to Cecelia Losee and Richard Kalal

Thank you very much

Please do not hesitate to contact me regarding family peer support services
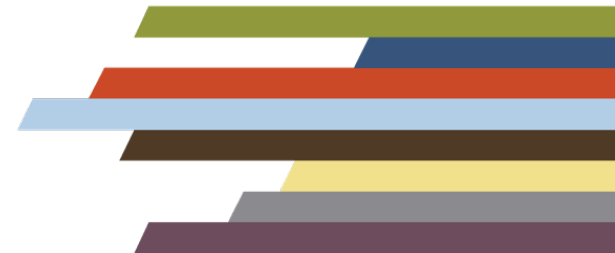
Mogens Bill Baerentzen, PhD., CRC, LMHP

Mogens.Baerentzen@unmc.edu

Questions?
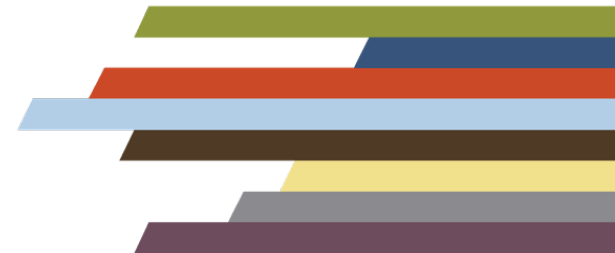
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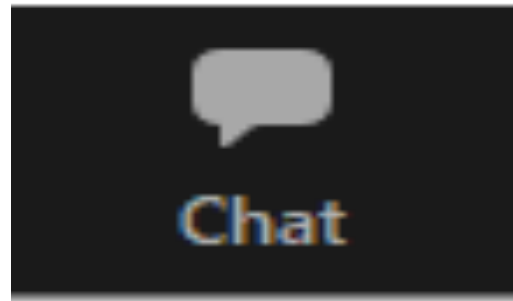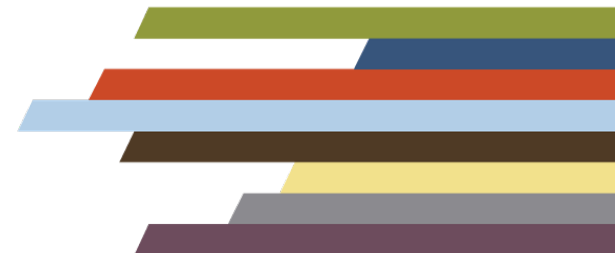
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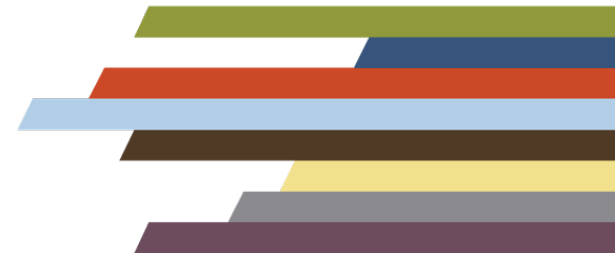@MidAmericaMHTTC

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Jan. 21 2020, Family Peer Support: Preventing crisis and relapse