In establishing a lived experience consultation group, Central Coast ARAFMI sought to address two separate, but equally important needs:

1. The need (specifically on a local level) to raise awareness of the unique expertise that people with a lived experience of mental illness have to offer
2. The need for a place where people with a lived experience of mental illness can come to on their own terms to explore what recovery means (whether it be friendship, contribution to community, skill development or personal growth).

It is important that the inherent structure of the group be adaptable to the changing dynamic and interests of the members. This means that as an organisation ARAFMI supervises and supports, but gives the Alliance the freedom to manage the agenda and the operations independently. It is up to the members to collectively decide:

- What they would like to get out of attending this group
- How they would like to contribute to the group, the organisation, and the local community

Initially the project was supported with finite flexible funding. However, the organisation valued the contribution of the Recovery Alliance, and has since funded the peer worker role through fundraising alone.

The environment is designed to be welcoming and non-judgemental- the degree to which members actively contribute depends on confidence and availability. The ARAFMI peer worker works closely with individuals to identify areas where skills can be developed, and support offered.

The group meets each Tuesday, 10am-12pm for 48 weeks of the calendar year. For the past three years, attendance rates have sat at an average of five people; through numbers have varied from three to ten. Since its inception, the Recovery Alliance has had more than twenty members, whose length of stay (affected by their stage of recovery, and personal and professional commitments) averages approximately ten to twelve months.

Throughout the past three years, the Recovery Alliance has delivered a number of significant projects, including:

- Delivering mental health awareness workshops from a lived experience perspective
- Learning Hub (for people with a lived experience and their families)
- Recovery Wise (a lived experience e-newsletter released bi-monthly)
- Central Coast Peer Network (a meet-up group for peer workers on the Central Coast)
- Central Coast Peer Champions Forum (promoting peer work on the Central Coast)
- Student placement program
Contribution to mental health peer work (local level)

In 2017 the Recovery Alliance sought to raise the profile of mental health peer work on the Central Coast. We referred to Priority Area 4 of the 4th National Mental Health Plan- increase consumer and carer employment in clinical and community support settings. Through group participation, our members had personal experience of how peer work can improve engagement and outcome for those who live with a mental illness. Yet we also recognised that on a local level, ‘lived expertise’ was under-recognised. At the time, there were five identified peer workers in the region, (four paid, one unpaid). They all were employed on a part time basis and typically operated in isolation from other peer workers.

Action One: The establishment of the Central Coast Peer Network
In April 2017 we founded the Central Coast Peer Network. The CCPN meets once every two months, and peer workers (paid and unpaid) are welcome to attend. Since its inception, there have been 5 meetings, and more than thirteen people have been involved.

Outcomes:
- There is now a time and place where local peer workers can regularly come together and:
  - Share information and resources
  - Give and receive support
  - Engage in reflective practice
- Reduction in isolation, greater sense of connectedness
- Identification of local worker interests and concerns, such as a desire for more training, socialisation with other peer workers, opportunity to share experience and expertise

Action Two: Developing and Hosting Central Coast Peer Champions Forum
In June 2017, we developed and delivered the Central Coast Peer Champions Forum- an event that brought together local organisations, workers and community members to explore the future potential of the peer workforce within our region. More than forty two people attended (representing all levels, from management to frontline workers).

Outcomes
- Showcase of peer leadership and innovation
- Increased awareness about issues that are affecting peer workers
- Identification of local interests and concerns relating to peer work: (affordable training opportunities, want and need for more paid carer peer worker roles, moving from policy to meaningful implementation, desire for greater collaboration between peer and non-peer workers).
- Identification of strategies that organisations can implement to support peer workers

1. Evidence of a significant contribution to the field of mental health on a local, state or national level
**Contribution to the promotion of ‘lived expertise’ (local level)**

In 2015, the Recovery Alliance developed, delivered and evaluated eight mental health awareness workshops. These events were designed for mental health workers, consumers, carers and members of the community. The point of difference was that the content and facilitation would be guided by those with a lived experience, under the supervision of an experienced trainer and mental health worker. In total, more than one hundred and twenty locals participated in these workshops. There were dual outcomes for this project. We raised awareness of lived expertise and the perspectives of those who have firsthand experience of mental illness. In addition, those with a lived experience were given the opportunity to develop transferrable skills including: group facilitation, marketing, design, technology and WHS awareness. With short term funding we were able to offer casual paid employment with flexible and supportive conditions. Six individuals co-designed and facilitated this project, with one going on to be employed as a peer worker with the organisation on an ongoing basis.

In late 2017, Recovery Alliance members sought to share their experiences and perspectives, and created ‘Recovery Wise’ - a newsletter which is written by people who have lived experience, for people who have lived experience. It is available in digital and hard copy, and is released once every two months. It’s designed to be ‘an insider’s guide to recovery’ – making information personable, manageable and engaging. Through the sharing stories, we aim to reduce stigma. Through the sharing of information and resources that we have personally found to be useful, we seek to provide readers with ‘do-able’ tools for their recovery toolkit. [Refer to Appendix for distribution statistics]

In line with the 5th National Mental Health Plan, Priority Area 6, we aim to demonstrate the value of lived expertise, thereby working towards reducing stigma relating to those who live with a mental illness.

**Contribution to education and training of the lived experience community (local level)**

In 2016, the Recovery Alliance had access to short-term flexible funding which was used to provide local consumers and carers with opportunities to enhance their mental health literacy (free of charge). On offer was: Mental Health First Aid, Cert IV in Training and Assessment, and an eight week ‘recovery through art’ class. More than forty-five locals accessed these programs.

**Contribution to learning and development of future workforce (local level)**

As an organisation, Central Coast ARAFMI places premium value on lived expertise. Students who complete a work placement with us are required to attend the Recovery Alliance for a minimum of four weeks. It is our belief that through supporting their participation, we will be encouraging the future workforce to recognise and value lived experience strengths.
In essence, the Recovery Alliance is a lived experience consultation group. However, it is in both its genesis and governance that a point of difference is presented.

Origins
Historically, Central Coast ARAFMI has been an organisation that supports and represents mental health families. Yet carer feedback has consistently indicated a strong desire for:

- A mental health system that empowers consumers, and promotes meaningful recovery
- Services that are responsive to and respectful of consumer wants and needs

It is reasoned that a certain degree of carer stress and responsibility can be relieved by giving their loved ones the tools and confidence to pursue recovery on an ongoing basis. Following this rationale, Central Coast ARAFMI has expanded to include lived experience advocacy branch. Whilst relatively new, the Recovery Alliance endorses the traditional values of the organisation by recognising that individuals and their families are the experts in their own lives; who have much to offer society.

Governance
Governance of the Alliance is based on a number of assumptions:

1. That in order to achieve meaningful change for the consumer movement
   a. people with a lived experience need to take on leadership roles
   b. participants need to have the opportunity to experiment, take risks and challenge traditional ways of doing things

2. That as a volunteer group, participants need
   a. To feel engaged and purposeful
   b. To feel that they are making a meaningful contribution
   c. To feel that they are meeting a personal want/need or interest

The group is made up of people who have a lived experience of mental illness, and it is facilitated by a consumer peer worker. This worker has inherent privilege, but aims to act as an instrument of the group, rather than as its leader. Group participants take control of:

- The Recovery Alliance’s terms of reference (TOR)
- Membership guidelines
- Recruitment processes
- What goals are set, and what projects are chosen
- The development, delivery and evaluation of all projects

There parameters are clear. The Recovery Alliance and its participants must reflect the values and attitudes of Central Coast ARAFMI- and their actions must work towards
benefiting the lived experience community. However, we are given the freedom of negotiation. What makes this project special is its integrity— it does what it says it will do. If participants have goals and ideas, the organisation supports them to develop the skills and confidence necessary to make things happen.

The results are:

- Projects reflect the genuine interests of people with a lived experience (rather than being based on the agendas— even well intentioned ones— of those who do not have a personal experience of mental illness and the mental health system)
- Participants are given the opportunity to change, to grow and to lead. To expand a transferrable skillset and increase their confidence.
- Participants have the opportunity to see how their personal experiences can be used to bring about change, to support some and inform others
- The organisation has the opportunity to be genuinely guided by the lived experience voice— to change some practices, to consolidate others and to become more responsive to those that they support
- Workers within the organisation have the chance to access unique perspectives and expertise
- The community has access to information, resources and events that have been developed by consumers for consumers

**Promoting Reciprocity**

From the very beginning, it was decided that participants needed to be seen as beneficiaries of the program as well as the community to whom we would be delivering information, resources and events. This still remains true today. Through our various projects, we hope to connect, inform, upskill and empower consumers. We believe that carers and mental health workers can also increase their understandings through our work. But just as important— the Recovery Alliance is a place where participants can come to:

- Get out of the house and get out of their headspace
- Connect with others who share similar experiences
- Find meaning and purpose to their experiences
- Develop new skills and understandings
- Give back to the community

Therefore when it comes time to evaluate the Recovery Alliance, we look at what we as group members have gained. This is considered incredibly important— particularly as we are a volunteer group. Personal experience has taught us that when we as participants feel engaged, then we have a greater capacity to share our experience and enthusiasm with others.
Bringing new ideas to the Central Coast- Regional Innovation

The Recovery Alliance identified a clear gap on that existed on the Central Coast- a gap that involved local peer workers who were all operating in isolation. Our projects, The Central Coast Peer Network and the Central Coast Peer Champions Forum, were a first of its kind for our region- up until then, there had been no initiatives looking to bring peer workers together, to talk about issues that were affecting them in the workplace. On the Coast, we are also the first group where people with a lived experience are responsible for all aspects relating to developing and delivering mental health awareness workshops: from content development, IT, WHS, catering, marketing, facilitation and evaluation.

Since its inception, the Recovery Alliance has involved mental health consumers at all levels, from planning to implementation to evaluation.

Year One: Our Trial Run

In 2015 the service manager sought to form a consumer advocacy branch of the organisation, where people could come and share both their experience and expertise. Initially one lived experienced worker, and two trainee peer workers were employed. They designed and delivered a recruitment program designed to bring action oriented consumers together. This involved attending weekly two hour meetings.

Based on that first recruitment, eight people became members and discussed how they as a group could promote lived expertise. Using existing flexible funding, the group decided to run eight educational workshops aimed at raising community awareness of mental health issues- from the perspective of those who experience them. Members: identified workshop topics and developed verbal and digital presentations. They marketed and facilitated the events. They developed an evaluation procedure and reported on their findings about what worked and didn’t work in their presentation. Using flexible funding, committee members who acted as workshop facilitators were paid for their time.

Year Two: Finding Our Feet

By early 2016, the eight workshops had been completed, and the flexible funding ran out. The group decided to continue on in volunteer capacity. Group leadership slimed down to one paid peer worker who was employed on a part time basis. As a group it took time to find our feet. As consumers, for many this was the first time we had been given choice and power. What we did with it required discussion over time at our weekly meetings. The organisation gave us space to explore our goals, which included:

3. Evidence of participation of mental health consumers in the planning, implementation and evaluation as relevant
• Continuing to provide consumers with opportunities to empower consumers
• Providing a place where consumers could come and share their stories of recovery and hope

We challenged ourselves to explore what committee work meant-

• Respecting individuality whilst also trying to find a cohesive voice
• Dividing up responsibilities and holding members accountable
• Balancing members opinions with the number of people willing to carry out the work

This was an incredibly challenging time, but it taught us how to use our voice and how to work together as a group to solve problems.

**Year Three: Consolidation**

Over the past two years, group membership fluctuated. Old members left, and new members joined. With our developing confidence, we were able to start consolidating our ideas about what our group was, and would be. This included developing a terms of reference, and designing and distributing our own marketing materials. With the support of the service manager, we learnt how to develop project plans and make budgets. We set a goal for 2017: to raise the profile of peer work on the Central Coast. We formed the Central Coast Peer Network- with group members completing carrying all of the responsibilities including marketing, communication, planning and catering. We also planned, hosted and evaluated the Central Coast Peer Champions Forum. This included extensive project planning, the recruitment of guest speakers, the organisation of an agenda (and clarifying what we wanted to achieve from the day). Extensive marketing was carried out, as was budgeting, catering, WHS management and hosting. We also conducted our first annual review, where we evaluated our past projects and explored where we wanted to take the group in the future.

**Year Four: Clarity**

This year we have reviewed the role of the Recovery Alliance. As a group, we worked to identify what we wanted to get out of the program, and how we would like to contribute to the local mental health community. This involved refining our terms of reference, and re-developing our recruitment and marketing strategies. To date it has involved the development of a bi-monthly newsletter- we have developed content, designed a layout, created a digital version and distributed it. We have committed to pursuing our own learning- exploring ways that we can maintain our own recovery. This has involved members sharing information and resources such as TED talks, Pinterest samples, and journal and newspaper articles. As the group becomes closer and members become more confident, we have started to see increased levels of initiative, commitment and creativity. Members
rotate chairing and minute taking, and run the group efficiently in the absence of the ARAFMI peer worker. Our goals for the next twelve months include:

- Continuing to design and deliver Recovery Wise (our bi-monthly newsletter)
- To continue providing opportunities for local peer workers to get together
- To develop a social media campaign to raise awareness about the many faces of recovery and resilience
- To increase our own personal skills in group facilitation, marketing and technology such as webcasting
- Raising local community awareness of our group as a place where people can come to learn about recovery, and give back to others

Central Coast Peer Network

As previously discussed, this venture has brought together local peer workers from a range of organisations to share information, resources, ideas and experiences. To date, participants have represented nine organisations have been involved including: Central Coast ARAFMI, Aftercare, Neami, Hearing Voices Network, MH-Worx, Anxiety Disorders Support Group, CCLHD, New Horizons, and SMHSOPs. Out of these nine organisations, seven have made an ongoing commitment to be involved.

Central Coast Peer Champions Forum

This event brought together local and regional organisations to explore the potentiality of peer work on the Central Coast. More than forty people attended this event, including:

- Guest speakers from: NSW Mental Health Commission, NSW Ministry of Health, Flourish, Uniting Care, St Vincent’s Hospital, MH Worx and National Mental Health Consumer and Carer Forum
- Guests from more than 15 government and non-government organisations
- Industry representatives from all levels of experience from volunteers, students, peer and project workers, team leaders, managers, coordinators and CEOs.

Central Coast ARAFMI and Central Coast Primary Care Partnership (CCPC)

Over the past three years, the Recovery Alliance has consistently demonstrated how people with a lived experience can positively contribute to their local community. Based on their performance, a pilot project has been developed between ARAFMI and CCPC, whereby four lived experience workers and volunteers have been seconded to the Partners in Recovery Program, to act as support facilitators for an initial period of four months. This
venture further explores how lived expertise can be further incorporated into the local mental health landscape.

**Additional Linkages**

- In 2018, a representative of the Recovery Alliance joined the Brisbane Waters Private Hospital Consumer and Community Advisory Committee
- In 2017, the Recovery Alliance (via Central Coast Peer Network) hosted a community conversation, for the National Mental Health Commission’s ‘Engage and Participate’ project
- In 2017, the Recovery Alliance hosted lived experience consultation session for Being
- In 2016, a representative of the Recovery Alliance participated and presented at Being’s Lived Experience Ideas Exchange

![5. Verification and evaluation of the program’s effectiveness](image)

### 2017 Recovery Alliance Annual Review

- Number of meetings: 46
- Range in group size: (3-10 people)
- Average group size: 5

**Why did I join the Recovery Alliance?**

- *Purpose and meaning:* ‘to give back to the community’ ‘to feel like I am doing something with my life’ ‘to find meaning from everything that I’ve faced’
- *Social Connectedness:* ‘to get out of the house and talk to people’ ‘to have a sense of belonging’ ‘to find others who know what it’s like to live with a mental illness’
- *Growth:* ‘to learn new things’ ‘to feel more capable and proud of myself’

**Why do I keep attending the Recovery Alliance?**

- ‘I have direction and purpose now...I’m not just existing’
- ‘I’m proud to tell people what I’m doing’
- ‘I’ve meet likeminded people. They share amazing stories and it’s a supportive environment’
- ‘I now feel like I have something to offer’
- ‘We respect the past, we learn from it, but we move forward on their own terms in a direction of our choice’
- ‘There is a collective wisdom that we share between us. We share ideas and resources. We are each other’s’ biggest cheerleaders’.

**Where would you like to take the Alliance in the future?**
- Develop personal skills, learn more about: counselling and peer support, domestic violence, overcoming stigma, how to run a teleconference, how to run a workshop
- Take time to discuss current affair issues, and issues affecting our local community
- To start going out more into the community- to local events, and to hold our meetings in other settings
- To recruit others to join our group

Feedback from the ARAFMI Service Manager

‘The Recovery Alliance has had a real impact on me as a manager. It has influenced, educated and challenged me. I have had to learn the language of lived experience and have internalised it into the day to day running of all programs.’

Mental Health Awareness Workshops

- Number of workshops- 8
- Number of participants- 120 people + 6 lived experience facilitators
(For performance data, refer to appendix)

Learning Hub

Duration: February 2016 – March 2017
Programs offered: Mental Health First Aid (2 days)
Recovery in Art Workshop (8 days)
Cert IV in Training and Assessment (26 days)
Total participant rate: 45 consumers and carers

Participants reported feeling more at ease, knowing that the programs were run by people who had their own lived experience
- ‘I felt better knowing that they got it- that I didn’t always have to explain why things are hard, and why I can’t always turn up’
- ‘I could talk about things if I wanted to, and no one would judge. But I also didn’t have to talk about things if I didn’t want to’

Student Supervision

- University students-4
- TAFE Students-5
- Mental Health Coordinating Council- 2

‘The Recovery Alliance has opened my eyes to the benefits of sharing experiences, building meaningful relationships and coming together to accomplish goals. After spending just a few
meetings with the group, there were obvious feelings of support for each other and pride to be a part of the group and of their achievements.’ – Student feedback

Central Coast Peer Champions Forum

<table>
<thead>
<tr>
<th>Number of participants:</th>
<th>42+</th>
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</thead>
<tbody>
<tr>
<td>Number of organisations represented:</td>
<td>15+</td>
</tr>
</tbody>
</table>

Participant Feedback- Key issues raised:

- Need for peer workers to have access to continuous training, networking and professional supervision- to maintain wellbeing and prevent burnout
- The need to support peers and other worker to partake in collaborative practices
- Need for more paid roles for carer peer workers
- Not every peer has the confidence and resources to be a change maker- they need support

Participant Feedback-How I benefited from attending the forum:

- Better understanding of peer work
- Learning more about how organisations can support peer workers
- Learnt more about peer workforce goals for NSW
- Learnt more about the diversity of peer work roles
- Understanding more about the experiences of front line lived experience workers
- Connecting with like-minded people
- I am inspired to do my part to change the mental health system
- I feel more confident about ‘coming out’ as a lived experience worker to my colleagues

Central Coast Peer Network

- Number of meetings- 5
- Number of participants- 15 (average attendance of 5 people per meeting)
- Number of organisations represented-8 (average meeting representation of 4)

Whilst the group was originally founded as an action group/committee, feedback from participants has indicated an interest in:

- Less regular meetings (quarterly or twice a year instead of bi-monthly)
- Focus on social connectivity, reflective practice, resource sharing and skill development rather than advocacy

Recovery Wise (Lived Experience Newsletter)

Refer to Appendix for data
Conclusion
My recovery journey parallels with the inception and growth of the Recovery Alliance. At the start, we weren’t exactly sure who we were, or where we were going. We have grown with time; shaped by experience and our relationships with each other. At its heart, our group is about finding the humanity within ourselves, and others. Making that connection—human being to human being. It is simple and as complicated as that. Meeting a person where they are at, and recognising them for their strengths, and respecting the challenges that they have faced to get there. Ultimately, our goal is to help people feel less alone, and more connected. There is nothing more special than that ‘me too!’ moment where you realise that you are not the only one that thinks or feels a certain way.

Philosophy is all very well, but it is what we do with these values and attitudes that really count. Key to our evolution has been the freedom to explore what we have to offer, and how we wish to devote our time and energy. Some systems and methods of responding to people in distress are based on reason, but absent on empathy. Some are highly emotive but poorly planned out. We are the balance between the two. What is important is that it has been our journey of discovery— not one that has been set out and pre-determined by others. In doing so, we have truly been able to harness our lived expertise, for the benefit of others, as well as ourselves. This means embracing uncertainty— the shades of grey that cause discomfort, but are never the less part of life, and in particular, recovery.

Referees
Removed for privacy

Appendix Attached
Recovery Alliance

Who are we?

We are a collective of individuals who have a lived experience of mental illness. Our aim is to:

- Raise awareness of how mental illness affects individuals and their families
- Provide peer support to people who are looking to reclaim their lives in a way that is purposeful, productive and self-determined
- Harness the unique experience and knowledge that is shared by people who live with a mental illness

What do we do?

- Design and deliver mental health awareness workshops
- Host lived experience and peer worker forums
- Develop and share information and resources
- Provide a place where people can share their stories and receive peer support
- Provide feedback and advice to local mental health services and their workers

Membership is open to:

People who live with a mental illness AND are looking to

- Share their experiences
- Learn more about recovery
- Be part of a team that advocates for the interests of the lived experience community

When do we meet?

Weekly
Tuesdays 10am-12pm
Central Coast Location

For more information:

Erin Higgins
Central Coast ARAFMI
(02) 43237731
erinhiggins@ocarafmi.org.au
**Graph One**
In 2015, we designed and delivered a workshop that raised awareness about borderline personality disorder, from a lived experience perspective. 90 people participated and provided the following feedback.

<table>
<thead>
<tr>
<th>Question</th>
<th>Pre Workshop</th>
<th>Post Workshop</th>
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<tr>
<td>A. My confidence and knowledge about borderline personality disorder is..</td>
<td>4.7</td>
<td>7.4</td>
</tr>
<tr>
<td>B. I feel comfortable starting conversations and offering hope to those who live with borderline personality disorder</td>
<td>5.7</td>
<td>7.9</td>
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<tr>
<td>C. I can talk and listen to carers whose loved one lives with borderline personality disorder</td>
<td>6.7</td>
<td>8.1</td>
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</table>

**Graph Two**
In 2016 we designed and delivered a workshop aimed at raising awareness of the role that mental health can play in hoarding and squalor, - this event combined lived experience with clinical expertise. More than thirty people participated and shared their feedback.

<table>
<thead>
<tr>
<th>Question</th>
<th>Pre Workshop</th>
<th>Post Workshop</th>
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<tr>
<td>A. My confidence and knowledge about hoarding and squalor</td>
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<td>8.1</td>
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<tr>
<td>B. I feel comfortable starting conversations and offering hope to those who are experiencing issues relating to hoarding and squalor</td>
<td>6.3</td>
<td>8.4</td>
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<tr>
<td>C. I can talk and listen to carers who have a loved one experiencing issues relating to hoarding and squalor</td>
<td>5.7</td>
<td>8.5</td>
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# Central Coast Peer Champions Forum

## Agenda

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<tr>
<th>Time</th>
<th>Session</th>
<th>Presenter/Notes</th>
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<tbody>
<tr>
<td>9:30</td>
<td>Registration Open</td>
<td>Central Coast ARAFMI Recovery Alliance</td>
</tr>
<tr>
<td>9:45am</td>
<td>Acknowledgement of Country</td>
<td>Erin Higgins, Peer Worker, Central Coast ARAFMI</td>
</tr>
<tr>
<td>10:00am</td>
<td>Investing in the future of the peer workforce: national and state goals</td>
<td>Karen Burns, Deputy Commissioner, Mental Health Commission of NSW</td>
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<tr>
<td>10:20am</td>
<td>The place and value of the peer workforce in mental health services</td>
<td>Jae Radican, State Wide Peer Workforce Coordinator, Mental Health Branch, NSW Ministry of Health</td>
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<tr>
<td>10:50am</td>
<td>Question Time</td>
<td>Karen Burns and Jae Radican</td>
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<tr>
<td>11:05am</td>
<td>Morning Tea Break (20 minutes)</td>
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<tr>
<td>11:25am</td>
<td>Employing a peer workforce: Implications for managers and their organisations (question time included)</td>
<td>Peter Farrugia, Manager Peer Workforce for Flourish Australia</td>
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<td>12:05</td>
<td>Narratives from the frontline: Peer worker discussion panel</td>
<td>Ian Hoffman, Consumer Representative for Uniting Recovery and Uniting Hope Sandra McDonald, Carer Consultant, Partners in Recovery South Western Sydney Jenna Roberts, Consumer Participation Officer for St Vincent's Health Network Sydney</td>
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<td>12:50</td>
<td>Lunch (40 minutes)</td>
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<td>1:30pm</td>
<td>Voices for change: showcasing peer leadership (followed by 10 minutes question time)</td>
<td>Doug Holmes, General Manager for MH-worX</td>
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<td>Eileen McDonald, NSW Carer Representative, National Mental Health Consumer and Carer Forum</td>
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<td>2:10pm</td>
<td>Where to from here: supporting a Central Coast peer workforce</td>
<td>Rhonda Wilson, Service Manager Central Coast ARAFMI</td>
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<td>2:50pm</td>
<td>Afternoon Tea (15 mins)</td>
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<td>3:05pm</td>
<td>Peer Worker and Lived Experience Consultation Session (1 ½ hours)</td>
<td>Elizabeth Priestly, Chief Executive, Way Ahead</td>
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<td></td>
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<td>Jaime Comber, Policy Officer, Being</td>
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Central Coast Peer Champions Forum

Central Coast Peer Network

Recovery Wise: Current Data

Release date: February 2018
Issues released: 2

Mail Chimp Statistics:

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<th>Click Rate</th>
<th>Industry Average-Click Rate</th>
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<td>19.7%</td>
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My Recovery Journey: Erin’s Story

I’ve lived with mental illness for more than sixteen years. It has brought me anger, sadness and pain, but it is not something that I am ashamed of. In fact, I am proud. Proud to say that despite all the challenges thrown at me, I am still standing here today.

I was given a diagnosis at the age of 14; still a child, and still trying to figure out who I was and where I fit in this world. The label doesn’t matter. What matters is that suddenly the world became a very frightening place, and I had no idea why I was feeling the way I was feeling. I had withdrawn from my friends, and found it hard to stay in school. I hurt my body in a number of ways that I now regret. I was so full of anger, and it took me a while to realise that I was going through a grieving process- mourning the loss of a ‘regular’ teen age life and the future that I thought was now lost to me.

Strangely enough, I would never take back those years. I say that because it made me the person that I am today. That girl is strong. She is resilient, compassionate and humorous. Those painful memories are also a reminder that I have the capability to overcome, to persist and to achieve in the face of great difficulty. I have learnt to take charge of my own life, and my own happiness. I’m still a work in progress, but I try to just focus on what is within my control, and to accept the things that I cannot change at this point in time.

For me, the turning point was my last hospitalisation. Two things were different that time. Firstly, I knew that I didn’t want to live my life that way anymore, and truly opened myself up to doing whatever it took to feel at peace. Sometimes this involved going out of my comfort zone. The second thing was meeting some of the men and women who were also hospitalised. They were experts by experience. They showed me that people ‘like me’ could have a life, could have a career, and could have a relationship.

This led me to what I like to think of as my new calling: peer work. I now use my own experiences to guide and support others who are just beginning their recovery journey. It means so much to me to know that because of all those difficulties, I have developed a special expertise that is now becoming more recognised and valued in the mental health industry.

My favourite saying is one by Winston Churchill: ‘Success is not final, failure is not fatal, it is the courage to continue that counts.’

ARAFMI Recovery Alliance (2018)
Welcome to our first edition!

Here at the Recovery Alliance, we are excited to launch this special project: A newsletter written by people who have lived experience of mental illness for people who have lived experience of mental illness!

We are Central Coast ARAFMI’s lived experience consultation committee, and as a group, we have first had experience of:

• managing mental distress
• navigating mental health system
• engaging in recovery: the pursuit of a meaningful and satisfying life

This newsletter is a resource for people experiencing mental distress, as well as their family and friends. Each edition will contain:

• stories of hope and recovery
• information and resources that promote wellbeing and empowerment

To receive the newsletter in digital form, subscribe at: http://eepurl.com/dgS3g1

We look forward to sharing our recovery journey with you, and welcome your questions and suggestions

Central Coast ARAFMI Recovery Alliance (contact: erin@ccarafmi.org.au)

Recovery is....

‘a deeply personal, unique process of changing one’s attitudes, values, feelings, goals, skills and roles. It is a way of living a satisfying, hopeful and contributing life, even with the limitations caused by illness.

Recovery involves the development of new meaning and purpose in one’s life as one grows beyond the catastrophic effects of mental illness.’

Why is it sometimes so hard to practice self-care?

At some time or another, we've all been told how important it is to take care of yourself. But what does that really mean? And why is it so hard for some of us to do?

Sometimes we struggle because we are juggling many commitments, and taking care of ourselves is placed at the bottom of the to-do list. In this case, it can be helpful to schedule in some 'me time'. That's right, get your phones out, open up the calendar and pick a day and time where you're going to get that haircut, go for that walk or catch up with that friend. This is also a good option if you're like me, and procrastinate a lot!

Sometimes I feel so tired that each step is like walking through quicksand. Honestly, it sometimes it just feels too hard. In times like these, it pays to start small. Five minutes once a day, or even once a week. The good news is that the more you do something, the easier the habit becomes.

I must admit that at times, certain self-care activities have just felt like another chore on my list. This is because I didn't really enjoy them, and felt like they were forced on me by well-meaning but very annoying family, friends and workers. Pick activities that you actually enjoy, not those that you do out of guilt.

I struggle with meditation, and find that I actually relax better when I'm at the gym with the music up loud. That being said, sometimes it's useful to keep an open mind and every now and then try something new. If you're looking for some support or company, pick an activity that you can do with a friend. Sometimes knowing that you've got that companionship acts as encouragement.

2 Week Self-care Challenge

<table>
<thead>
<tr>
<th>Day 1</th>
<th>Put together a playlist of your favourite songs</th>
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<tbody>
<tr>
<td>Day 2</td>
<td>Treat yourself to dinner out</td>
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<tr>
<td>Day 3</td>
<td>Practice meditation</td>
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<tr>
<td>Day 4</td>
<td>Unplug from technology</td>
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<td>Day 5</td>
<td>Grab a coffee and go for a walk with a friend</td>
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<td>Day 6</td>
<td>Have a hot bubble bath</td>
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<td>Day 7</td>
<td>Unsubscribe from unnecessary emails</td>
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<td>Day 8</td>
<td>Write down five things that you are grateful for</td>
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<td>Day 9</td>
<td>Read a new book</td>
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<tr>
<td>Day 10</td>
<td>Try a new sport or activity</td>
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<td>Day 11</td>
<td>Ring a friend you haven't spoken to in ages</td>
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<td>Day 12</td>
<td>Try mindful colouring</td>
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<tr>
<td>Day 13</td>
<td>Get up early and watch the sun rise</td>
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<tr>
<td>Day 14</td>
<td>Write a journal entry</td>
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</tbody>
</table>

“My therapist told me the way to achieve true inner peace is to finish what I start. So far today, I have finished two bags of M&M’s and a chocolate cake. I feel better already.”

~ Dave Barry

www.talesoftherapy.wordpress.com
What role can recovery play in my life?

Recovery is about finding a way of living a meaningful and satisfying life, in the face of challenges presented by mental illness.

There is no one-size-fits all approach to recovery. It can mean different things, to different people. It’s doesn’t have to be about being cured, or symptom free. It is a non-linear process. This means that you might still have some ups and downs along the way. But that’s okay. Do you know anyone whose life is perfect at all times?

Key Recovery Concepts

**Hope:** Finding and maintaining hope for a better future

**Identity:** A person is more than just their symptoms, more than just their illness

**Meaning:** Finding meaning and purpose in your life

**Growth:** Learning more about yourself, and discovering new values, skills and interests

**Responsibility:** Taking ownership of your health and the decisions that you make. Working out what you want, and what you are willing to do to work towards it.

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I always try to cheer myself up by singing when I get sad. Most of the time, it turns out that my voice is worse than my problems.

DespicableMeMinions.org

ARAFMI Recovery Alliance (2018)