

Well Ways and Well Ways Duo

Mental Illness Fellowship Victoria's programs for family and friends of a person living with mental illness

ROBYN PARKER

With approximately one in five Australians directly affected by mental illness at some point in their lives, the need for access to appropriate and effective services is clear. In its 30 year history, the Mental Illness Fellowship (MIF) has grown from a small, Victorian, grassroots group of volunteers who formed the original Schizophrenia Fellowship of Victoria, into one of the country's largest providers of psychiatric disability support services, funded primarily through government grants. The Mental Illness Fellowship of Australia provides a national point of contact, information exchange, advocacy and support for MIFs located in most of the states and territories. The Fellowships provide a range of community-based housing, rehabilitation, education and support services to those experiencing mental illness and their carers.

One of the distinctive features of the MIF approach is that it also recognises the impact on the wellbeing of family members and friends of caring for a person with a mental illness or with co-existing conditions (i.e., a mental illness and a substance use problem). Typically, services are focused on the person with the mental illness and family members and friends have been unable to access programs that exclusively address their own needs. In response, MIF conducts two programs that are designed specifically for family members and friends: Well Ways and the more

recently developed Well Ways Duo. The copyright for both programs is owned by MIF Victoria, which is contracted by Fellowships in other states and territories to provide the program and train facilitators. Therefore, MIF Victoria drives the ongoing revision and updating of the programs, maintenance of the information and training systems, and program evaluation. Well Ways and Well Ways Duo both aim to help families and friends of a person with a mental illness care for themselves, other family members and the person with the mental illness—Well Ways for family and friends of people with a mental illness and Well Ways Duo for those caring for someone with a dual diagnosis.

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The programs

In the early years of the organisation, there was little evidence underpinning the approach to service provision for people with a mental illness and their families. Services were largely based on providing advocacy and support. At that time, the original Well Ways program was available in the United States, and well regarded as a formal, structured program. The Well Ways model was rewritten and supplemented with resource materials, assisted by previous experience with a regional program and discussions with workers, carers, consumers and family members. Parts of the program are adaptable to incorporate local information, for example, state-specific aspects of the legal and mental health systems. The entire program is evidence-based, and is revised and updated every two years. Feedback from facilitators and participants informs each update of the program.

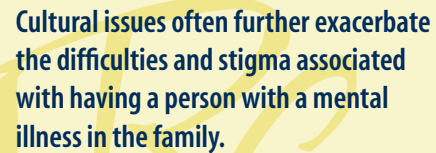
The intake process for the programs is intensive, ensuring that 80% of those who enquire about the program see it through to completion. Although some participants do seem to expect the program to provide "magic bullets", by the end of the program their mindset has shifted. Having the space to talk about themselves and their experiences and being given permission to think about themselves allows participants, who may start out expecting the program to provide "the answer", to learn how to deal with the issues they face and care for themselves and other family members and friends.

Well Ways

Participants in the Well Ways program learn about specific illnesses such as anxiety, depression, bi-polar disorder, schizophrenia, obsessive-compulsive disorders, schizoaffective disorder and dual diagnosis disorders, and the treatment and support options available through mental health and carer services. Facilitators present practical insights into the behaviours a person with a mental illness might exhibit and discuss the complexities and challenges associated with caring for a person with a mental illness. Over the course of eight 3-hour weekly group sessions and four follow-up sessions, the capacity of carers to cope with the impact of caring for a person with a mental

illness upon themselves and other family members is improved. They learn new ways of communicating and solving problems, share experiences, and develop ongoing support and information networks.

Cultural issues often further exacerbate the difficulties and stigma associated with having a person with a mental illness in the family. MIF is beginning to offer Well Ways for participants from culturally and linguistically diverse (CALD) communities, with the first such program for families in the Vietnamese community being judged as very successful. Access to information on mental illness (or dual diagnosis) in any form is often very limited for CALD families, particularly if they have only recently re-located to Australia. In the first program, with the assistance of a bilingual worker, participants were able to talk through many of their experiences and very quickly developed a support network that involved regular meetings outside of the program. Even where more than one CALD community is represented in a program, cultural differences in perceptions of the situation are identified and the different approaches to resolving problems discussed.



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Well Ways Duo

The Well Ways Duo program also provides information about mental illnesses, but focuses more specifically on how the various mental illnesses interact with drugs and alcohol and the particularly challenging behaviours that may arise. Participants receive information about specific drugs and their effects, and learn to identify the signs and symptoms that may precede a difficult episode or crisis and effective ways of dealing with or managing them. Well Ways Duo is conducted via six 3-hour weekly group sessions followed by four follow-up sessions over a period of 12 months.

Three of the group sessions involve presentations by a psychiatrist and members of the police force and Crisis Assessment and Treatment teams. Each discusses their particular role in the mental health system and the factors that impact on how they perform that role. Greater understanding of the experiences of both parties emerges from these sessions, however the empathy and compassion of the speaker and their ability to engage with participants is crucial. Importantly, Well Ways Duo not only provides participants with a forum for learning to deal with the challenges of having a family member with a dual diagnosis, it also offers space and permission to acknowledge the associated grief and loss.

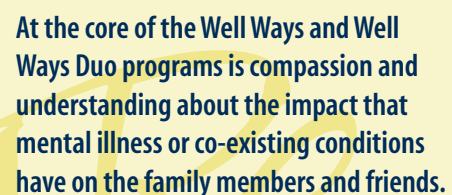
Although the growing demand around the country for the programs, especially Well Ways Duo, is welcome, the coordinators are extremely careful to advertise the program only when there are sufficient trained facilitators to deliver it. This caution reflects the compassion implicit in MIF activities and processes, in that the agency works to avoid negative experiences for carers, such as enrolling in a program that subsequently becomes unavailable due to lack of staff. Similarly, MIF Victoria engages in ongoing development of intake processes to ensure that as far as possible, clients are able to access the services they require with only one phone call.

The facilitators

The experience of living with or caring for a family member or friend with a mental illness or a dual diagnosis is a prerequisite for training as a facilitator of a Well Ways or Well Ways Duo program. The training program is based on adult education principles and entails an in-depth three-day program covering the theory and concepts underlying the Well Ways programs. The drive to instil high levels of participant trust and confidence in the program and to ensure the programs are delivered as intended by highly skilled facilitators has led to the development of a thorough system of training, mentoring, debriefing and supervision. People being trained as Well Ways facilitators are required to meet competency standards and take refresher courses every 12 months, and they sign agreements to preserve the integrity of the program content and delivery. Registration as a facilitator can be revoked if these conditions and standards are not met. A mentoring and supervision scheme is also in place for those who provide the facilitator training. Whilst the program is offered generally via area mental health services, with the introduction of Well Ways Duo more drug and alcohol services are becoming aware of MIF services.

The evidence

At the core of the Well Ways and Well Ways Duo programs is compassion and understanding about the impact that mental illness or co-existing conditions have on the family members and friends. An evaluation of the psychological distress and wellbeing of over 600 clients of the Well Ways program was conducted over the period 2003–07. It showed that the high levels of psychological distress and poor health participants reported prior to the program declined over the evaluation period to a degree that was not only statistically significant, but also of practical benefit. A second period of evaluation is



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about to commence. As well as specific evaluation activities, MIF systematically collects data from and about clients to feed back into other services and day-to-day operations.

Final comments

Having a family member or friend with a mental illness or dual diagnosis can be an overwhelming experience with significant implications for the health and wellbeing of all concerned. Where services typically focus on the person with a mental illness, the Well Ways and Well Ways Duo programs give voice to the experiences and concerns of his or her family members and friends, gives them space and permission

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to focus on the impact of the illness on themselves and their lives, and offers opportunities for them to learn new ways of coping with and understanding their situation in a supportive and compassionate setting. The programs are transportable and adaptable, and supported by a team of experts who regularly review their content and delivery. In places where few services are available and resources to develop services are scarce, the MIF programs offer a welcome response to the needs of families and friends of person with a mental illness and those with dual diagnosis.

For more information, contact Lorraine Johnstone, Well Ways Programs Coordinator, Fairfield Place, P.O. Box 359, Clifton Hill, Victoria 3068. Phone 03 8486 4200, email ljohnstone@mifellowship.org www.mifellowship.org

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Contributing to *Family Relationships Quarterly*

Guidelines for contributors

The *Family Relationships Quarterly* newsletter aims to provide a lively forum for ideas, argument and comment on family relationships. The newsletter includes literature highlights, research updates, upcoming conference and event listings and information about training opportunities. Articles include reviews of policy developments, program spotlights, summaries of research, and practitioner updates. These range from short reviews of books, conferences, workshops and projects to more substantial articles on significant issues relevant to family relationships.

Service providers, researchers and those interested in family relationships in Australia are encouraged to contribute to the newsletter. We welcome readers' letters, comments and feedback on issues discussed in AFRC publications.

The average length of contributions is 1,000–1,500 words, but may be as short as 300–500 words. If you would like to submit a longer article, or if you are unsure about the appropriateness of a piece, contact the Manager of the Australian Family Relationships Clearinghouse prior to submission.

Acceptance of all material is subject to a review process. Consideration will be given to whether articles are relevant, clearly written, and accessible. Consideration will also be given to the following criteria: timeliness of article; significance of the topic; factual accuracy; clear presentation and logical organisation of material; conclusions substantiated by convincing analytical argument; argument supported by references; quality and balance of the argument or information presented; and balance and relevance of any policy implications drawn.

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