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**Support Group Facilitator Guide**

**At-A-Glance**

**Support Group Facilitator Guide At-A-Glance**

*A supplemental guide to help you facilitate your DBSA peer-based self-help support groups.*

Please refer to the full DBSA Support Group Facilitation Guide in either hard-copy or on the DBSA website at [www.DBSAlliance.org](http://www.DBSAlliance.org)

**IMPORTANT CHAPTER PHONE NUMBERS**

Chapter Name:

Alternate Facilitator Names and Telephone Numbers:

Professional Advisor Name and Telephone Number:

Chapter Board Member Contacts:

In case of emergency, call/Local warm-line number:

**National Suicide Prevention Talk Line:**

**(800) 273 – TALK (8255)**

**10 Principles of Verbal De-escalation of An Individual (Quick Reference)**

1. **Space -** Respect the personal space of the individual; do not get uncomfortably close or block exits.

2. **Control -** Do not be provocative or respond in anger. Be in control and measured.

3. **Be Calm -** Establish verbal content calmlywith the individual.

4. **Be Focused -** Be concise and speak in short, easy-to-understand sentences or phrases.

*YOU MIGHT SAY…*

* “I will help you regain control.”
* “This is a safe place.”

5. **Listen** closely to what the person is saying.

6. **Their Wants/Needs -** Identify the individual’s **wants and feelings** and try to accommodate reasonable requests.

*DO THEY WANT?...*

* A quiet place to go
* A chance to talk about things

7. **Be agreeable -** Agree or agree to disagree with the person’s concerns, while avoiding negative statements.

8. **Clear Limits -** Set clear limits with expected outcomes, but do not make demands or order specific behavior.

9. **Choices -** Offer choices and optimism.

10. **Review** - Afterwards, review the event and look for areas of improvement.

**Helpful Tips for Facilitators**

Good facilitation takes a spirit of helpfulness and the willingness to serve as a guide for other peers as you make your way together toward improving the lives of people living with mood disorders. So, here are a few final tips…

* Keep eye contact with all participants.
* Address people by their names.
* Pay attention to who talks and who doesn’t.
* Glance around the room to check on group energy, individual relations, and body language
* Let one person talk at a time
* Keep discussions on a personal and feeling level.
* Encourage “I” statements.
* Listen so that you can give positive feedback, extend support, and call attention to similar or conflicting points of view.
* Let participants speak first and throw questions directed at you back to the group.

**SOURCE**: Michigan Protection and Advocacy Service, mpas.org

**Table of Contents**

Page

DBSA Support Group Meeting Format 1

DBSA Support Group Welcome Statement 2

DBSA Support Group Preamble 3

DBSA Support Group Guidelines 4

Check-In 5

Open Discussion

Options for opening the conversation 6

Back-pocket potential topics 6

Active listening skills 7

Challenging situations 8

Close the Meeting 9

DBSA Core Beliefs 10

Ethics of Facilitating Support Groups 11

10 Tips for Preventing Conflict 12

Handling Group Challenges 14

10 Principles of Verbal De-escalation of an Individual 16

Helpful Tips for Facilitators 18

**10 Principles of Verbal De-escalation of An Individual (continued)**

6. **Their Wants/Needs -** Identify the individual’s **wants and feelings** and try to accommodate reasonable requests.

*DO THEY WANT?...*

* Something to eat or drink
* A quiet place to go
* A chance to talk about things

7. **Be agreeable -** Agree or agree to disagree with the person’s concerns, while avoiding negative statements.

8. **Clear Limits -** Set clear limits with expected outcomes, but do not make demands or order specific behavior.

9. **Choices -** Offer choices and optimism.

10. **Review** - Afterwards, review the event and look for areas of improvement.

**10 Principles of Verbal De-escalation of An Individual**

There are times when a support group member’s behavior can escalate. Here are some principles to assist in those circumstances:

1. **Space -** Respect the personal space of the individual; do not get uncomfortably close or block exits.

2. **Control -** Do not be provocative or respond in anger. Be in control and measured.

*BODY LANGUAGE*

* Relaxed facial expression
* Arms un-crossed, hands open
* Knees bent
* 2 x arm’s length distance

3. **Be Calm -** Establish verbal content calmlywith the individual.

4. **Be Focused -** Be concise and speak in short, easy-to-understand sentences or phrases. Repeat yourself often.

*YOU MIGHT SAY…*

* “No harm will come to you.”
* “I will help you regain control.”
* “I am here to help, not to hurt.”
* “This is a safe place.”

5. **Listen** closely to what the person is saying.

**DBSA Support Group Meeting Format**

While each DBSA chapter develops its own personality, all sponsored support groups follow the support group format prescribed by DBSA to ensure quality and consistency. All DBSA support groups have a consistent welcome statement, preamble, and group guidelines which are found in this guide. **Read all of these aloud before beginning discussion at each meeting, even if no one new is present.** The facilitator should read the welcome and ask volunteers to read the preamble and guidelines.

**Support Group Meeting Outline**

* Gathering time
* Welcome
* Read DBSA Support Group preamble and guidelines
* Check-in
* Discussion
* Close the meeting

**Gathering or Social time**

*Facilitator welcomes people and breaks the ice*

Have one or more volunteers greet people as they arrive and thank them for coming. If there is a sign-in sheet, encourage them to sign in on the list provided. If someone is uncomfortable providing sign-in information, do not require that they do so. Volunteers should offer nametags, invite guests to have refreshments if these are available, and help introduce them to others in the room. Make sure there are places for people to talk with others, and places for people to be alone or read informational materials. Be sensitive to individual needs and choices.

**DBSA Support Group Welcome Statement**

*Facilitator brings people together and gets their attention, providing a focus point.*

**Welcome Statement**

“Welcome to DBSA [Support Group Name], an independent support group of the Depression and Bipolar Support Alliance! We are led by and created for peers—individuals living with mood disorders--and that experience informs everything that we do. Another distinction of peer is that we are not professionals – physicians and other mental healthcare providers. Being peer-run makes our tagline, “We’ve been there, we can help,” a reality. Our mission is to provide hope, help, support, and education to improve the lives of people who have mood disorders.

My name is \_\_\_\_\_, and I will be facilitating tonight’s meeting. I am here as a volunteer and a person with a mood disorder. This is OUR group, and I am not here as the person with all the answers. My role is to simply keep our discussion on track and to help maintain a productive environment. To do that, I may occasionally ask a question, make a comment, or help move discussion along.

Now we will read the DBSA Support Group Preamble. Would anyone like to volunteer to read tonight?”

**Handling Group Challenges (continued)**

4. **Allow people to finish statements**. Insure that people are given the opportunity to complete their thoughts. Conflicts are often resolved simply by letting everyone be heard.

5. **Keep the discussion focused**. Try not to allow side issues to be brought in unnecessarily to complicate matters. Keep people talking about one issue at a time.

6. **Encourage and model active listening**. Occasionally restate what each party is saying or ask the group to do it. People want to know they’re heard.

7. **Take a short break**. When things feel out of control, it may be useful to ask for a moment or two of silence, or perhaps to encourage a brief stretch, or a coffee break. A cool-down period can be very helpful.

8. **Invite others to help out**. Peer-led support groups are, by definition, led by equal peers. Sometimes it can be helpful to ask another peer to step in for a while and guide the discussion. Often, this change of voice can change the group’s attitude as well.

9. **End the meeting with a “round-robin.”** Whether or not there is still anger in the air, it might be useful to give people in the group a chance to have a “last word” or two about what happened during the meeting, and about what they might want to see happen next time.

**Handling Group Challenges**

DBSA Facilitators are peers, not professional counselors. Don’t expect to be able to deal effectively with every challenging situation that arises.

If you become overwhelmed or things get out of hand, GET HELP.

Quietly ask another person in the group to go get one of the chapter leaders or another facilitator.

**Navigating challenges that are processed by the support group**

If you determine that a challenging situation, where personal anger is involved, is one that can be or should be processed by the entire group here are some suggestions to help you facilitate the discussion:

1. **Clarify the issue**. What exactly is each person angry about? Sometimes a simple misinterpretation is at the root of the problem.

2. **Ensure group back-up support**. If each party in an argument feels some degree of support or understanding from people in the group, the intensity of their anger may be somewhat reduced, as they don’t feel so alone.

3. **Encourage “I” statements**. Speaking from one’s own experiences and feelings is more conducive to productive conversation in a conflict situation than accusations. Help the group avoid judgmental statements.

**DBSA Support Group Preamble**

*Facilitator asks for a volunteer to read the Preamble. If no one volunteers, facilitator reads it.*

“This support group of DBSA [Chapter Name] is a gathering of peers who assist, encourage, and enable each other in helping themselves. Each participant follows their own unique path to wellness and chooses to make that journey in the company of others headed in the same direction.

Our meetings are designed to give everyone an opportunity to participate as they are comfortable. After reading our group

guidelines, we will begin the meeting with a brief check-in.

After the check-in, we will have an open discussion about our mood disorders and share experiences, personal feelings, and

strategies for living successfully with these conditions. After that, we will have a closing activity to help us leave committed to

action and will finish at [time].

Before we begin to talk with each other, we will review the guidelines for our discussion. We read the guidelines before each meeting to remind us that we are all responsible for

following and committing to the group standards, which are in place to keep this group a safe place to share. Would anyone

like to volunteer to read the guidelines?”

*Note: The DBSA Support Guidelines should be read at every meeting as everyone should know the guidelines and be held responsible for following them.*

**DBSA Support Group Guidelines**

**Share the Air**

Everyone who wishes to share has an opportunity to do so. No one person should monopolize the group time.

**One person speaks at a time**

Each person should be allowed to speak free from interruption and side conversations.

**What is said here stays here**

This is the essential principle of confidentiality

and MUST be respected by all.

**Differences of opinion are OK**

We are ALL entitled to our own point of view.

**We are all equal**

We accept cultural, linguistic, social, and racial

differences and promote their acceptance.

**Use “I” language**

Because we do not participate in discussion groups as credentialed professionals, NO ONE CAN INSTRUCT. However, we can share from our own personal experiences. For example, we cannot say – “you should do X.” We can say: “when I was faced with a similar problem, I…” Always put things in the context of our own experiences.

**It’s OK not to share**

People do not have to share if they do not wish to. Much can be gained by just listening.

**It’s everyone’s responsibility to make the discussion groups a safe place to share.**

We respect confidentiality, treat each other with respect and kindness, and show compassion.

**10 Tips for Preventing Conflict (continued)**

8. ***Give constructive feedback often***: Constructive feedback means more than telling someone when they’ve done something wrong. It means making positive suggestions that are future-oriented.

9. ***Intentionally seek participants outside the “inner circle:”*** Be intentional about seeking out those participants that are beyond the inner circle of leaders and grow your relationships with them.

10. ***Have agreed upon policies for conflict management in place***: Every chapter should have a policy in place for removing a disruptive participant from activities. Having these policies in place beforehand makes conflicts that can arise much easier to manage.

**10 Tips for Preventing Conflict**

The first step in successfully managing conflict is working to prevent it altogether.

1. ***Just say “no” to gossip.***  No one trusts a gossip.

2. ***Praise is always in short supply***: If you use someone's idea or work product, give them credit and announce their contributions publicly.

3. ***Don't burn bridges***: Everyone gets angry or occasionally says something they wish they had not. When this happens to you, go back as soon as feasible, preferably the next day, and have the courage to apologize and accept an apology when it is offered.

4. ***Communicate***: Be as open and honest as possible. Rumors feed on themselves in the absence of reliable information.

5. ***Avoid public shame and blame****:* Public humiliation is not a positive way to persuade another person into more productive habits or behavior. Discuss issues that arise in private.

6. ***Be inclusive. Talk to everyone***: Cliques form quickly. It's okay to have a select group of people you talk to most often but be careful not to close out others.

7. ***Include the group in decisions***: A democratic process is an effective way to deal with the group’s decisions. Always make sure that all stakeholders are considered and included in the decision-making process.

**Check-In**

*Facilitator opens the meeting up with a “check-in.” This is a chance for each person to find out who else is at the meeting, and what their feelings are… to know that they are not alone.*

Ask each person to very briefly:

* Introduce themselves by their first name
* Tell the group why they came to the meeting today
* Share a fact about themselves (for example, something they enjoy doing,). This serves as a reminder that there is more to each person than a diagnosis.

Note: To maintain a person-first environment, DBSA advises against requesting that participants share their diagnoses when introducing themselves.

Caution:

* Don’t start discussion of specific questions or topics at this time; keep the introductions going. **It is natural for some people to want to tell their whole story now, but it is essential that the facilitator remind each person that this is a check-in time only, and that everyone will have the opportunity to talk more soon.**

To help achieve a brief check-in, have an experienced participant model the check-in before calling on newer people.

The facilitator should briefly react to each person’s check-in as a way of acknowledging his or her presence.

**Open Discussion**

*The heart of why a DBSA support group exists*

**Options for opening the conversation**

* Sometimes a topic of common concern is identified during the check-in, and the facilitator can begin discussion using this topic.
* The facilitator can ask if anyone would like to be the first to share or just ask the person to their left or right to begin.
* If you have a consistent group of attendees and they seem to talk about the same topics each time the group gathers, consider asking participants to share their thoughts on a particular topic when it is their turn.

No one dictates discussion, but introducing possible topics is a great facilitator tactic.

**Back-Pocket Potential Topics**

* Recognizing the signs of a mood disorder
* Talking to a therapist or doctor
* Working with medications
* Effects of the mood disorder on family and friends
* Fears participants share
* Stigma people face
* Doing things that make you feel good

During discussion, facilitators do only what their position calls for: facilitating smooth discussion. The main role of the facilitator is to be an active, supportive listener.

**Ethics of Facilitating Support Groups**

* **Facilitators are not leaders.** They are at the table to aid, enable, and encourage others in helping themselves, not to take the lead role in another’s recovery. This is peer-based self-help.
* **Assess the room.** Keep the conversation going when necessary or assist the group to be comfortable in a quiet moment.
* **Don’t try to be a professional.** Facilitators do NOT diagnose, suggest a course of treatment, or instruct.
* **Facilitators are there to *assist*.** Everything must be from this perspective, whether it’s keeping time, or handling challenging issues that might arise.
* **Support group guidelines are *guides*, not *rules*.** They should be applied with understanding and compassion.

**DBSA Core Beliefs**

DBSA’s Core Beliefs are meant to reflect DBSA’s current thinking around mood disorders, wellness and patient rights. The following Core Beliefs were drafted in August 2019. While they are still a work in progress and not final, they are a comprehensive compilation of beliefs.

1. Mood disorders, while life threatening, are highly treatable, and people living with a mood disorder can and do thrive.
2. The lived experience of people should inform everything DBSA does.
3. DBSA recognizes several pathways to treatment including peer support, personal wellness strategies, therapeutic and medical interventions. All individuals have the right to direct their own treatment.
4. Peer support is a powerful wellness tool and can be beneficial to both peers and their supporters.
5. Having the peer perspective at the center of conversations about mental health result in better outcomes.
6. Wellness encompasses an individual’s whole life, and each person’s wellness journey is unique.
7. DBSA provides support for all individuals living with or affected by mood disorders at all points in their wellness journey.
8. Clinicians should collaborate with peers to provide options when developing personalized treatment plans that target complete wellness, not merely improvement.
9. Researchers should work to provide treatment options that target complete wellness, not merely improvement.
10. All people should have access to quality mental health care.

**Active Listening Skills**

* **Restate** –Restating what others say in other words is the simplest way to let them know you are paying attention.
* **Question** – Ask questions that seek more information or clarify what someone has said
* **Redirect** – Ask other group participants to respond to what has been said.

*Note: This can be a good technique for drawing out quieter group participants and involving them in the discussion.*

* **Reflect** – Identify the feelings that underlie what is being said. This is done in an intentionally tentative way: “It sounds as though … ”
* **Validate** – If you have experienced some of the feelings being expressed by a participant, say so and tell them you understand why they feel that way.
* **Summarize** – Review what the conversation has been about up to the present. Refocus discussion and show where discussion can go.
* **Share** – Facilitators shouldn’t forget that they are also group participants. They should share feelings and experiences when it is their turn.

There is nothing wrong with silence at any time during the discussion. A break in conversation allows people to reflect on what was said and collect their thoughts. Silence sometimes encourages people who haven’t talked to speak up.

**Challenging Situations**

The facilitator should be prepared to deal firmly, but kindly, with individuals who are hypomanic, hostile, antagonistic, discouraged, and depressed. Strive to be patient, kind, and empathetic, but remember that the purpose of the meeting is to provide productive support for everyone.

If one individual is dominating discussion, it is appropriate for the facilitator to intervene and move discussion to another person. If someone appears to be unable to participate productively in the discussion, seems to be in crisis or suicidal, be prepared to ask for assistance or make sure that the individual in question gets the help they need from another resource. See the 10 Tips for Preventing Conflicts, Handling Challenges, and the 10 Principles of Verbal De-escalation sections on pages 12-17.

**Close the Meeting**

*Facilitator brings closure to the session*

* Give a 10- or 15-minute notification before discussion is scheduled to end.
* Ask people to make any final comments
* Briefly summarize what has happened at the meeting
* Ask people how they will move toward wellness before the next meeting.
* Announce next meeting date/time/place OR (if this is your first meeting) get commitment from attendees to meet again and determine date/time/place
* Encourage new attendees to attend 3 or 4 times before deciding whether a support group is right for them or not.
* Encourage attendees to tell others about the group, including their doctor or other mental health professional
* Ask for help with the next meeting (volunteers)
* Refer to fact sheets or other information/materials that are provided to participants
* Thank everyone for coming