

# Recovery to Practice Monthly Report

## August 2013

### InterNational Association of Peer Supporters

In August, the iNAPS RTP team finalized five of the eight recovery curriculum modules. This means that five modules are now complete and ready for distribution.

The iNAPS RTP team has begun discussions with key advisors regarding implementation/marketing/evaluation of the curriculum for the last year of the RTP project. Discussions have occurred one-on-one and on August 27, during the national peer support annual conference, a group of advisors met to examine options.

Of particular concern is quality control, especially as it relates to the delivery method we have dubbed “collaborative learning.” We recognize that, as a public domain product, the curriculum will be available on websites and we will also provide it to those who request it. While the ready access of this curriculum facilitates use, a measure of quality control is necessary to ensure it fulfills the purposes of the RTP project.

The issue of quality control arose early in the project and poses a particular challenge for our field. Unlike other professions that have more structured and credentialing processes, peer supporters are trained and certified in a great variety of ways. The only “constant” appears to be a great hunger among the field for meaningful continuing education. For example, the iNAPS RTP team has already received more than a dozen requests for the recovery curriculum in draft form.

Options for maintaining quality control include: 1) offer a series of train-the-trainer sessions at peer and peer support conferences; 2) create an online train-the-trainer course; 3) conduct one or more sessions independent of other events and solely dedicated to the RTP curriculum; 4) return to the pilot sites to conduct a train-the-trainer session recruiting those who have already experienced the curriculum; 5) partner with an organization such as Community Access to market and conduct train-the-trainer sessions across the country and 6) use a combination of all of the preceding strategies.

The advisors who met on Aug. 27 suggested a thorough review of the RTP-NAPS contract to determine exactly what the requirements are regarding train-the-trainer responsibilities. Some suggested train-the-trainer responsibilities may be outside the scope of the contract.

Challenges for train-the-trainer sessions include: 1) lack of a structured training and credentialing process for all states; 2) the nature of the curriculum which shifts from a traditional didactic approach to emphasis on participation; 3) limited funding; 4) based on experience to date, the expectation that, many training and certification entities will seek to quickly adopt the curriculum in whole or in part and 5) the great variety of training strategies already in place.

Assets that will facilitate train-the-trainer endeavors include: 1) an apparently great demand for the curriculum particularly for continuing education purposes; 2) growing interest and adoption of the collaborative learning approach in a variety of peer education contexts; 3) the iNAPS network of contacts that reach across the U.S.; 4) a corps of people who have participated in the pilot trainings and have great familiarity with the content and delivery method; 5) funding for outreach and training and 6) access to a variety of advisors and consultants to help guide the implementation process as we recognize that this type of effort is new to the profession and, as a result, modifications are likely to be necessary.

During September, the iNAPS RTP team will be finalizing a plan of action to implement the curriculum. It is likely the plan will incorporate several options described previously to offer train-the-trainer sessions with subsequent monitoring.

Other August endeavors include preparation for the September RTP meeting at SAMHSA headquarters in Rockville, MD; continuation of the webinars based on RTP curriculum content; distribution of RTP information through the iNAPS website and newsletters and a presentation about the RTP project at the 7th annual national peer support conference.

The presentation at the annual peer support conference was especially well-received. Rita Cronise was the primary presenter and used an activity featured in the curriculum to engage the audience of about 225 peer supporters. Following the activity, a debriefing was performed by the large group so they could see how such activities could be used to facilitate learning and skill development.

The presentation resulted in an unexpected demonstration of how creativity and insight can lead to exciting learning opportunities. The activity was primarily intended to show participants the importance of self-awareness of one's own struggles so as to ensure authentic communication and appropriate self-disclosure. The activity involved the use of black beans that were associated with negative aspects of our lives and white beans were used in relation to hopeful or positive aspects of our lives. During the debriefing, an audience member noted how the color black had a negative connotation while the color white was positive.

The resulting discussion focused on historical societal perspectives of the two colors noting that in western films, the outlaws wore black hats and the heroes wore white hats. Other examples were identified and the discussion ended with the conclusion that while the activity was intended to address one area, it could be used to explore multiculturalism and trauma. Thus, the presentation became a real example of the collaborative learning approach. Because the audience found the approach particularly exciting and applicable in a variety of training contexts, questions and the many requests for additional information were addressed later in the conference.

Overall, we are finding that awareness of the RTP project among peer supporters and other disciplines has increased dramatically over the last year. It appears that websites, newsletters, pilot testing, webinars and other activities have fostered this awareness.

In September, the RTP project will be covered as part of a presentation at the San Francisco VA Medical Center (grand rounds), and the Wellness Recovery Action Planning (WRAP™) conference in Philadelphia. In addition, the iNAPS RTP team will be preparing a presentation and attending the annual RTP meeting in Rockville. Finally, the team will be preparing the annual RTP report and the implementation plan.