



## Lived Experience Co-design Community of Practice Information Guide



Co-design is a way of working together which seeks to ensure that people who use services are meaningfully involved in the design of those services. Co-production takes this a step further (see below). Co-design is a widely used way of engaging with people. It is not limited to the areas of mental health and alcohol and other drug use. However, the principles of co-design reflect those of Recovery and Wellbeing which include: the importance of connection, empowerment, hopefulness, identity and having a meaning or purpose. When properly implemented, co-design can also play a powerful role in reducing stigma and discrimination for individuals, families and supporters in the mental health and alcohol and other drug areas.

### Why have a Lived Experience Co-design Community of Practice?

**Because people with lived experience said they wanted it as a next step!**

The co-design community of practice is an initiative co-developed by participants in Co-design Cafes which were held in Perth in July 2020. The cafes were supported by the WA Association for Mental Health [www.waamh.org.au](http://www.waamh.org.au) and facilitated by WellRounded [www.wellrounded.life](http://www.wellrounded.life) and Mental Health Matters 2 [www.mentalhealthmatters2.com.au](http://www.mentalhealthmatters2.com.au).

The Lived Experience Co-Design Community of Practice is being co-produced to create a space where people with experiences as consumers, families or supporters in the mental health and alcohol and other drug areas can come together, learn about co-design, and create and share resources as a community. The set-up of the community was supported by the Mental Health Commission via the WA Association for Mental Health (WAAMH).

### Mission Statement (this is what we're about)

*The Lived Experience Codesign Community of Practice is a space where individuals, family members and supporters with experiences of mental health and/or alcohol and other drug use come together in authentic, safe, equal and respectful relationship to learn, share, discover and grow for the purpose of strengthening and safeguarding the integrity of co-design processes and for the positive benefit of all concerned.*

### Logistics (what, where and how...)

This Community of Practice is hosted on WAAMH's Care Hub. Joining the Hub is FREE via <https://waamh.org.au/sector-development-and-training/collaborative-and-responsive-engagement-care-hub>.

(There are lots of other groups and free training available there too).

Meetings will generally be held online via Zoom and a link shared on the group's CARE Hub page. If you're not on Care HUB, please let us know and we'll send an email.

The community needs to be a safe space for all. This is particularly important when we consider how many individuals, family members and supporters in the mental health and alcohol and other drug areas have experienced trauma and distress. Here are the guidelines we've come up with to help make and maintain a safe space, whether that's face-to-face or online.

Joining this community assumes that you agree with and are willing to uphold the guidelines and reflect the following principles.

## Guidelines

<b>SAFEGUARDING</b>	<ul style="list-style-type: none"> <li>• Confidentiality – no naming of individuals or services in a negative way</li> <li>• Agree to disagree</li> <li>• Respond, don't react</li> <li>• Privacy – 'what happens in Vegas, stays in Vegas'</li> <li>• Sit with discomfort, not distress</li> <li>• Label-free environment</li> </ul>
<b>COMMUNICATION</b>	<ul style="list-style-type: none"> <li>• 1 mouth, 2 ears: talk less, listen more</li> <li>• Approach discussions with care</li> <li>• Be aware of the different times individuals take to process information</li> <li>• Be open to different ways of communication</li> </ul>
<b>UNCONDITIONAL POSITIVE REGARD</b>	<ul style="list-style-type: none"> <li>• Be comfortable with who you are</li> <li>• Adopt Mindful Listening</li> <li>• Have fun, stay light, enjoy humour</li> </ul>

## Principles

The five co-designed, guiding principles which underpin the WA Mental Health Commission's Working Together Framework are accepted as working principles for this community. They are:

<b>SAFETY: Start Here</b>	<p><b>Developing cultural, physical, moral, ethical and emotional safety for everyone involved.</b></p> <p>Safety is creating an environment where everyone feels comfortable to share their experiences, perspectives and opinions in an inclusive and respectful space.</p>
<b>AUTHENTICITY: Be Real</b>	<p><b>Being reliable and trustworthy with a real motivation to work together to improve things.</b></p> <p>Authentic engagement means working with people in an open, honest and trustworthy way.</p> <p>People can then work together in genuine partnership.</p>
<b>HUMANITY: People First</b>	<p><b>Showing empathy, kindness and graciousness in our relationships and understanding that what happens affects us all.</b></p> <p>Humanity is about showing compassion for the human condition and valuing people's experiences, perspectives, knowledge and beliefs.</p>
<b>EQUITY: Equals Fairness</b>	<p><b>Treating people with equal worth and value, therefore sharing power, resources and knowledge.</b> Equity is about fairness. It is about making sure people get access to the same opportunities. In order to achieve equity, it is important to recognise people's needs and value their culture, unique diverse needs and perspectives. This includes addressing inequalities, and barriers to ensure all people are able to engage in an equal and fair way.</p>
<b>DIVERSITY: Everyone In</b>	<p><b>Valuing uniqueness as a strength and ensuring ways of belonging.</b></p> <p>Diversity includes acceptance and respect of all people involved.</p>

Source: <https://www.mhc.wa.gov.au/media/2531/170877-menheac-toolkit-web.pdf>

## Definitions (here's what we mean by....)

It's important that community of practice members share the same understandings of commonly used terms. Here are the definitions we use.

**Co-design:** “Co-design engages end-users in the design of products or services so they will better serve their intended purpose”. (Roper et al 2018)

**Community of Practice:** A community of practice has three distinct elements which make it different from, say, a book club, or a neighbourhood community. A community of practice continues for as long as people are interested in coming together.

<b>Shared topic or domain</b>	People have a shared interest or concern about a particular topic or domain.
<b>Community</b>	People come together (face-to-face or online) and learn how to do it better together.
<b>Practice</b>	Members are practitioners. They contribute, share and develop resources, experiences, stories, tools and ways of addressing the topic or domain.

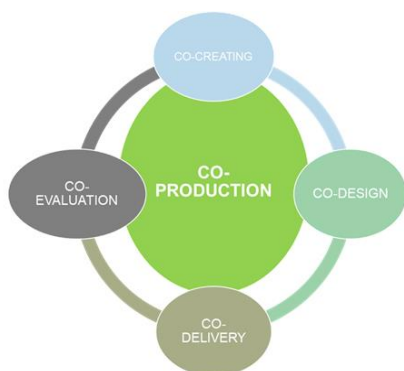
(Adapted from *Introduction to communities of practice*. Etienne and Beverley Wenger-Trayne 2015)

**Co-production:** “Co-design and co-production are not models but approaches to transforming how services are designed and delivered. It differs from consultation and involvement, but may incorporate some of the techniques and tools used in these approaches. The real difference is how co-production deliberately sets out to create a culture that values all expertise and knowledge, particularly the expertise and knowledge of the people that are most affected by the problem and solution. Co-production recognises and seeks to address power differentials within partnerships. A co-production approach sees consumers, families and carers involved in defining the problem, designing and delivering the solution, and evaluating the outcome”.

(Mental Health Commission Working Together Framework, p27).

Co-production is ‘the whole enchilada’.

It includes co-creating, co-design, co-delivery and co-evaluation or review. Co-design can happen as a separate element without co-production. Co-production can't happen without co-design. Co-design is governed by the principles of co-production.



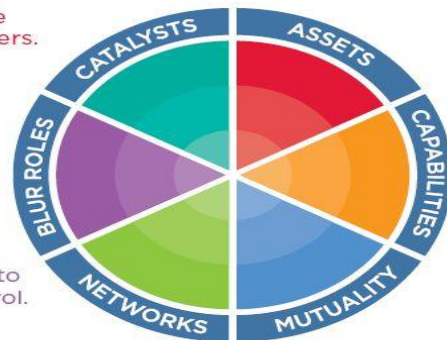
The **Principles of Co-production (Assets, Capabilities, Mutuality, Networks, Blur Roles, Catalysts)** are the same principles which underpin co-design. Putting these principles into practice ensures that co-design maintains an ‘**integrity of process**’. This also helps to avoid having a co-design process drift into consultation or another engagement process.

The principles of co-production also underpin co-design.

They can be summed up as Assets, Capabilities, Mutuality, Networks, Blur Roles and Catalysts.

# 6 Principles of Coproduction

- Assets:** Transforming the perception of people from passive recipients to equal partners.
- Capabilities:** Building on what people can do and supporting them to put this to work.
- Mutuality:** Reciprocal relationships with mutual responsibilities and expectations.
- Networks:** Engaging a range of networks, inside and outside 'services' including peer support, to transfer knowledge.
- Blur roles:** Removing tightly defined boundaries between professionals and recipients to enable shared responsibility and control.
- Catalysts:** Shifting from 'delivering' services to supporting things to happen and catalysing other action.



People Powered Health Coproduction Catalogue

Source: Google Image. Content derived from Slay & Stephens 2013

**Lateral Violence:** Lateral violence is a type of bullying that takes various forms including shaming, gossip, and blaming others; and the result is often social isolation. Lateral violence is predominantly common among people in powerless positions who commonly vent their frustrations, anger, fear or dissatisfaction towards their peers, and to those who are in lesser positions of authority than they are. Lateral violence can be viewed as a coping mechanism and fuels the increasing cases of mental health challenges.

(Your Mob Learning. 2021. Indigenous Cultural Awareness Work Ready Course.)

**Lived Experience:** This term includes individuals with a personal experience of mental distress and/or alcohol and other drug use as well as families, supporters and carers.

**Recovery:** "There is no single definition or description of recovery. For the purposes of this framework, recovery is defined as 'being able to create and live a meaningful and contributing life in a community of choice with or without the presence of mental health issues'".

(A national framework for recovery-oriented services: Guide for practitioners and providers' 2013. P.2.)

In this community of practice, we expand this definition to include 'with or without the presence of alcohol and other drug issues.' We also differentiate between **Personal Recovery** which focuses on the individual's journey; **Relational Recovery** where relationships are identified as being at the heart of mental health recovery; **Clinical Recovery** which focuses on reduction of symptoms of an illness; **Functional Recovery** where the aim is to gain back functionality in order to gain independence and support a return to community engagement, work or education and **Recovery in the alcohol and other drug area** which refers to abstinence (as distinct from harm minimisation). We are also aware that **Recovery** in the general community is often understood as a predictable journey from illness to improvement or wellness for example when a person is recovering from having broken a bone.

## References & Resources

The following books, articles & You Tube clips (📺) have been identified by lived experience co-design members as being useful guides to the work.

### **Communities of Practice**

*Community of Practice Guide. Creating, reinvigorating or transforming a community of practice.* Lupton, Christine; Webne-Behrman, Harry; Hunt Johnson, Julie; Merrill, Margaret, Schneider, Tetyana.

<https://www.talent.wisc.edu/home/LinkClick.aspx?fileticket=B6rgxakCMtI%3D&portalid=0>

*Introduction to communities of practice. A brief overview of the concept and its uses.*

Etienne and Beverly Wenger-Trayner, 2015.

<https://wenger-trayner.com/introduction-to-communities-of-practice/>

📺 *Introduction to communities of practice.* Wenger-Trayner. 2015.

[https://www.youtube.com/watch?v=gVTkpEvT\\_9k&ab\\_channel=mysimpleshow](https://www.youtube.com/watch?v=gVTkpEvT_9k&ab_channel=mysimpleshow)

### **Co-design, Co-production and general Engagement**

*Co-production in mental health: A literature review.* Slay, J. & Stephens, L. 2013 London: new economics foundation.

[https://b.3cdn.net/nefoundation/ca0975b7cd88125c3e\\_ywm6bp3l1.pdf](https://b.3cdn.net/nefoundation/ca0975b7cd88125c3e_ywm6bp3l1.pdf)

*Co-production. Putting principles into practice in mental health contexts.* Roper, Cath; Grey, Flick; Cadogan, Emma. 2018

[https://healthsciences.unimelb.edu.au/\\_data/assets/pdf\\_file/0007/3392215/CoproductionPutting-principles-into-practice.pdf](https://healthsciences.unimelb.edu.au/_data/assets/pdf_file/0007/3392215/CoproductionPutting-principles-into-practice.pdf).

*Foundational Engagement* 2018. Mental Health Matters 2, ConnectGroups WA.

<http://www.mentalhealthmatters2.com.au/wp-content/uploads/2018/10/Foundational-Engagement-report-2018.pdf>

📺 *Habit 1: Co-design thinking.* Western Sydney Health. 2017

<https://www.youtube.com/watch?v=wNMs5TXt-Ek>

📺 *The Parable of the Blobs and Squares.* Aberdeenshire ADP Alcohol and Drugs. 2018.

[https://www.youtube.com/watch?v=eJDO1rcJbBw&ab\\_channel=AberdeenshireADPAlcoholandDrugs](https://www.youtube.com/watch?v=eJDO1rcJbBw&ab_channel=AberdeenshireADPAlcoholandDrugs)

📺 *What is Co-production?* Headstart FM Wolverhampton. 2016.

[https://www.youtube.com/watch?v=u-f7hHa8xN4&ab\\_channel=OWN](https://www.youtube.com/watch?v=u-f7hHa8xN4&ab_channel=OWN)

*Working Together: Mental Health and Alcohol and other Drug Engagement Framework and Toolkit.* Mental Health Commission (WA). 2018

<https://www.mhc.wa.gov.au/about-us/consumer-family-and-carer-participation/statewide-engagement-framework-and-toolkit/>

## **Non Violent Communication**

👁️ The Four Non-Violent Communication Steps Made Simple. Cup of Empathy.  
<https://www.youtube.com/watch?v=NYkqbrZSAY0&t=2s>

👁️ Nonviolent Communication and Self Awareness. Maria Engels. TEDxAllendale Columbia School  
<https://www.youtube.com/watch?v=cZM6ZLWm2eA>

👁️ Non-violent communication: how to get your point across. Sylwia Wlodarska. TEDxUWCRCN  
<https://www.youtube.com/watch?v=jCbXAMgfkM>

## **General Resources**

👁️ Embracing Vulnerability. Dr Brene Brown.  
<https://www.youtube.com/watch?v=AO6n9HmG0qM&t=243s>  
Brene Brown has a range of additional books and clips including The Gifts of Imperfection and Daring to Lead.

👁️ Chatter: The Voice in Our Head and How to Harness It. Ethan Kross.  
<https://www.youtube.com/watch?v=-SxNFdMUxPg>

Recovery Oriented Language Guide (Second Edition) 2018. Mental Health Co-ordinating Council.  
[https://mhcc.org.au/wp-content/uploads/2019/08/Recovery-Oriented-Language-Guide\\_2019ed\\_v1\\_20190809-Web.pdf](https://mhcc.org.au/wp-content/uploads/2019/08/Recovery-Oriented-Language-Guide_2019ed_v1_20190809-Web.pdf)

## **For further information**

Please contact Mental Health Matters 2 at [mentalhealthmatters2@gmail.com](mailto:mentalhealthmatters2@gmail.com) or check out our website at [www.mentalhealthmatters2.com.au](http://www.mentalhealthmatters2.com.au)

*This Information Sheet was co-designed by members of the core group involved in co-designing the Lived Experience Co-design Community of Practice in July 2021 and updated November 2022.*