

Valuing and Using Personal Experience in IPS Practice

IPS Grow Briefing Paper

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Everyone working in IPS services brings not only their professional expertise but also a wealth of personal experience that, when used appropriately, can be valuable in helping people to gain and sustain employment. Attention has traditionally been focused on the development and use of professional IPS expertise, with scant attention to the value and use of personal experience. The purpose of this Briefing Paper is to provide guidance to IPS Services and their practitioners about the value of personal experience, how this might be appropriately used within IPS practice and the creation of a culture within IPS services that values such experience.

This briefing paper drew on the extensive experience of people involved in IPS Grow from across England: IPS Grow National and Regional Leads, Employment Specialists (including Peer Employment Specialists) and IPS Team and Service leaders (see Appendix 1). This group was chaired by Dr Rachel Perkins, BA, MPhil, PhD, OBE who drew together the experience of the group, as well as published work in the area, to produce this Briefing Paper.

We are enormously grateful to all the IPS practitioners who gave us examples of the ways in which they have used their personal experience to good effect in their work. All the quotes that appear in this briefing paper are taken from what these practitioners said. Sadly, in a document like this, we have not been able to include all the material that they gave us, but we hope that the quotes we have included give a flavour of their experiences.

Setting the Scene

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Our personal experience comes in all shapes and sizes.

Recognition of the value of personal, lived experience in mental health services is not new. In 18th century France at Bicetre Hospital, Pinel recommended that recovered and convalescing patients be employed because, as a result of their own experiences, they were better placed to understand, and respond sensitively to, patients (see Donald, 1997). Although there have been times when guidance has actively discouraged the employment of people with mental health challenges in the NHS because they were considered a potential danger to patients (see the 'Clothier Report', Department of Health, 1994) today, once again, the value of personal experience of mental health challenges has been recognised.

Many NHS Trusts in the UK are actively recruiting people with personal experience of mental health challenges into newly created 'Peer Support Worker' positions (see Lovell et al, 2020; Health Education England, 2020) and, increasingly, designated 'Peer Employment Specialist' positions are also being created in IPS services. The added value that such employees can bring is widely recognised (see Repper et al, 2013; Watson and Meddings, 2019). Research has demonstrated that the peer support that such workers provide has benefits for those receiving the support, including increased self-esteem, confidence, problem solving skills and a sense of empowerment; greater feelings of being accepted and understood; greater hopefulness about their own potential and more positive feelings about the future; as well as reduced self-stigmatisation (see Repper et al, 2013a). They also provide positive benefits for the teams in which they work by providing inspiration and challenging negative attitudes, and facilitating a better understanding of the challenges people using the service face.

However, there is a risk that only employing people with lived experience of mental health challenges in special, designated 'peer' roles could reinforce the destructive 'them and us' barriers that remain within mental health services. There are many other mental health practitioners, employed in different professional roles across mental health services, who have lived experience of mental health challenges (see Meddings, Morgan and Roberts, 2019). In IPS services, many practitioners (and in some teams a majority of them) have such lived experience. Arguably, breaking down barriers, and decreasing the prejudice associated with mental health challenges, can only be achieved if personal experience of mental health challenges is valued among all practitioners, not only those employed in designated peer roles.

"I have been working in IPS services for 18 years. For the first 13 years I felt unable to share my lived experience of mental health challenges due to fear of stigma leading to discrimination. The prevailing culture among my clinical colleagues was very much of a 'them and us' divide ... Now, knowing now how powerful and effective sharing lived experience can be in IPS practice, my only regret is that I did not share my experiences from day one as a ground level Employment Specialist."

IPS Service Leader

The sharing of such lived experiences has often been perceived as violating professional boundaries and codes of conduct (Lovell et al, 2020; Dunlop et al, 2021). Too often, organisational cultures seem to discourage disclosure and practitioners fear that sharing such personal experience might result in disciplinary action (Lovell et al, 2020; Dunlop et al, 2021). However, as Lovell et al (2020) and Dunlop et al (2021) point out,

across the 20 main codes of practice, standards and ethics for mental health professionals, the sharing of personal experience of mental health challenges is not forbidden.

However, personal experience of mental health challenges is not the only valuable sort of personal experience that mental health workers in general, and IPS practitioners in particular, bring to their work. Everyone working in mental health services brings 3 things to their work: their professional training and experience, their experience of life (skills, talents, knowledge, interests, beliefs, culture etc) and their experience of life's struggles, difficulties and traumas – including, but not exclusively, mental health challenges. In an IPS context, practitioners' experience of different kinds of employment, their cultural knowledge, their community contacts, and their experience of dealing with the ordinary challenges and difficulties of work may all be valuable both to individual clients and the IPS team.

In this briefing paper we will therefore consider the value and use of all types of personal experience:

- Personal information like education, age, marital status, sexual orientation, employment history.
- Interests, preferences, hobbies, skills, culture, knowledge of community contacts and resources.
- Thoughts, feelings and views.
- Past struggles, difficulties and identity-interrupting experiences in life, especially those which have impacted on your work.
- Past struggles and difficulties in relation to work, for example, coping with a difficult boss, being turned down for a job, being sacked or made redundant.
- Personal experience of mental health challenges and the issues that these have raised in the context of employment.

We will address the use of this range of personal experience by everyone involved in IPS services:

- 'Peer Employment Specialists' who have a unique and highly valuable role in being specifically employed to use and share their lived experience of recovery and employment with mental health challenges.
- Other IPS practitioners employed in generic IPS roles who also have personal experience of mental health challenges (either their own or in people who are close to them).
- IPS practitioners who do not have lived experience of mental health challenges but who can use other personal experience in their work.

We will think about the value and use of personal experience:

- In work with individual clients to assist them in gaining and sustaining employment.
- In employer engagement.
- Within the IPS team.
- Within the clinical team.

A note on language:

Traditionally the sharing of personal experience has been referred to as 'disclosure' or 'self-disclosure'. For many, the term 'disclosure' has connotations of 'disclosing a shameful secret'. For this reason, IPS Grow materials for helping clients to think about the pros and cons of sharing health information with employers talk about 'sharing personal information' rather than 'disclosure'.¹ However, others prefer to retain the term disclosure and challenge any negative connotations that it has. In this briefing paper we will use the term 'sharing personal information' because we are referring to the full range of personal experience that a practitioner might bring to their work.

1 <https://ipsgrow.org.uk/personal-information>

The Value of Personal Experience

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Relationships are central to recovery and to people’s experience of mental health services, in particular relationships that erode ‘them and us’ barriers and demonstrate a common humanity between mental health practitioner and the person using services (see for example, Gilbert et al, 2008; Wyder et al, 2013). As Wyder et al (2013) found “those who felt they were treated as somebody who could be counted on, or as a fellow human being ... felt respected and the experience allowed them to gain self-confidence.”

Evidence suggests that appropriate sharing of personal experience is important in creating such relationships: “... self-disclosure can help foster a trusting relationship between service user and practitioner through similarity, credibility and shared understanding.” (Dunlop et al, 2021). It is also noteworthy that sharing of personal information has been shown to have no effect on perceptions of expertise and that people using services were more willing to see a practitioner who shared personal information and experience (Henretty and Levitt, 2010). Audet and Everall (2010) found that sharing personal experience enabled people using services to form a connection with the practitioner and this led to perceptions of attentiveness and responsiveness.

There is much to be lost if mental health practitioners do not use their personal experience of mental health challenges in their work. As well as providing authentic human to human interaction that fosters feelings of equality and a trusting relationship, sharing lived experience of mental health challenges has been shown to be valuable in a number of ways (see, for example, Meddings, Morgan and Roberts, 2019; Henretty and Levitt, 2010; Audet and Everall, 2010; Dorset Mental Health Forum, 2013; Ruddle and Dilks, 2015; Lovell et al, 2020; Dunlop et al, 2021). It can:

- Model behaviour and encourage the person to talk more openly about their challenges.
- Foster hope.
- Build the person’s self-esteem.
- Facilitate self-exploration.
- Challenge myths and misconceptions about life with mental health challenges.
- Normalise experiences and assist the person to identify and label their emotions.

- Show similarities that can provide reassurance and offer alternative ways of understanding experiences and approaching challenges.

All of these are central to IPS practice in helping individual clients to gain and sustain employment. They may also be important in working with employers and clinical teams. Employment Specialists sharing aspects of the way in which they dealt with their mental health and other difficulties at work can erode myths and stereotypes, normalise such experiences, and increase understanding of ways of approaching challenges.

Sharing personal information can also be a valuable resource to the IPS team. It can provide a greater collective range of expertise (for example, knowledge of different employment sectors, understanding of the experience of different employment challenges and different ways of addressing these). It can also make the team a more supportive place and enhance staff wellbeing if everyone feels able to talk about challenges they are facing. It can also break down ‘them and us’ barriers within the team by recognising that everyone has their own experience of recovery as a consequence of the wide-ranging vicissitudes of life that leave no-one unscathed.

“Within the team, I have referenced some of my difficulties. It is an open environment from that point of view, however, I do think that one being open can bring more openness from others. It almost gives ‘permission’ for people to feel they have the opportunity to be open about the difficulties they face.”

IPS Employment Advisor

There may be some risks attached to the inappropriate sharing of personal experience (see Henretty and Levitt, 2010). For example, inappropriate sharing of information risks removing the focus from the client, burdening them with too much information, creating confusion about the nature of the relationship, invoking envy and creating difficulties for the practitioner when they share experiences that they are not ready to share and/or opening up subjects they are not comfortable discussing (see Henretty and Levitt, 2010; Audet and Everall, 2010; Ruddle and Dilks, 2015; Dunlop et al, 2021). Therefore, consideration needs to be given to what constitutes ‘appropriate’ sharing of information. There can be no absolute rules about using personal experience - individuals and situations differ – but guidance and key issues to consider are important.

The Emergence of Guidelines for Sharing Personal Experience

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The training of Peer Support Workers and Peer Employment Specialists explicitly considers use of personal experience of mental health and other challenges. The situation is quite different for other practitioners. Research shows that 90% of people have shared personal experience with people using services (Henretty and Levitt, 2010), yet there have been few guidelines about doing this and professional guidelines and codes of conduct remain silent on such issues (Lovell et al, 2020; Dunlop et al, 2021). As Ruddle and Dilks (2015) said “Everyone is doing it, but no one is talking about it. It is time we started.”

There have been a number of guidelines published relating to practitioners sharing their lived experience of mental health challenges. For example,

- Meddings, Morgan and Roberts (2019) recommend that practitioners think about what to share, when to share it, why – the reasons for sharing and how to share it. Within each of these domains, they suggest that mental health practitioners consider ‘Does it benefit the person you are sharing with?’ and ‘Is it okay with you?’ (for example, Are you happy to share this information? Is this the right time for you? Do you have adequate support and supervision? Are you feeling okay today?).
- Scior (2017) has developed ‘Honest, Open, Proud for Mental Health Professionals’ Guidance. This self-help intervention supports mental health professionals with lived experience of mental health challenges to make decisions about ‘disclosure’ (sharing their experience). It helps practitioners to think about the pros and cons of sharing, different contexts and levels of sharing and how to share their experiences in a meaningful and safe way.

More generally, guidance exists about professional client relationships that may be of value in thinking about the sharing of personal experience. For example, the College of Nurses of Ontario (2006) has developed a practice standard for the ‘Therapeutic Nurse-Client Relationship’ which provided the basis for the Nottinghamshire Healthcare Foundation Trust’s Personal Relations Policy. It offers a ‘decision tree’ to enable practitioners to work through whether a particular activity or behaviour (which could include personal experience) is appropriate within the context of the nurse-client relationship. This is designed to be a tool for self-reflection and for guiding client care discussions. This practice standard also describes ‘warning signs’ that a nurse may be crossing the boundaries of the nurse-client relationship.

Recently a number of NHS Mental Health Trusts have started to develop specific guidelines about sharing personal experience and information more broadly. For example:

- Dorset Healthcare University NHS Foundation Trust, in partnership with the Dorset Mental Health Forum have produced 'Guidance for Staff Sharing Lived Experience' (see Morgan and Lawson, 2015). In this document, 'lived experience' is defined as direct experience of overcoming challenges in health or life circumstances. It provides guidance for all Trust staff about how to safely and effectively share such personal experience with people who access services and their families as well as with colleagues. The guidance makes it clear that personal experience is an asset and that the benefits of sharing such experience are to reduce stigma and discrimination, inspire hope, improve partnerships with people who use services and their families and promote staff wellbeing by creating a culture of openness within teams. The guidance takes the form of a set of core principles that staff should consider in sharing their lived experience.
- Based on work by Dunlop et al (2021) Leeds and York Partnership NHS Foundation Trust have developed a 'Sharing Lived Experiences Framework'. This takes a broader view of experiences that might be shared, including mental health challenges, but also encompassing a wide range of things such as hobbies and interests, sexuality, religion and culture. The framework spans the 'disclosure process' "from pre-disclosure planning and reflection, to in-the-moment questions to consider internally and dialogically with the service user, and finally to post-disclosure

reflection. Such reflection should consider the impact of disclosure on the service user, the practitioner and the relationship, and how the experience should inform future disclosure decisions." (Dunlop et al 2021). It addresses six areas for consideration: preparedness, confidence, comfort, competence, relevance and supervision. Within each of these there is a series of questions designed to be used for guided self-reflection, clinical supervision and training. It also contains a series of questions relating to the practitioner's motivation for sharing: 'healthy' motivations (normalising/demystifying, offering hope, sharing learning, being seen as human, strengthening the relationship and offering ideas for coping) and 'warning signs' when "the motivation for disclosure is unhealthy". For example ... "wishing to spend more time than usual with a service user, developing personal feelings or wanting to only share information with one particular service user." (Dunlop et al, 2021).

Drawing on the above work, this briefing paper aims to provide guidelines about sharing personal experience for IPS practitioners. There can be no simple all or nothing rules about sharing personal experience. We cannot replace 'tell nothing' with 'tell everything': the relationship between Employment Specialist and client is not an ordinary friendship, it is a special, privileged relationship. Instead, we need to move into the grey areas of what should we share, why, when, with whom, how, how much, and these are likely to differ from person to person and situation to situation. However, ultimately decisions must be based on whether the sharing of our personal experience is helpful in supporting a person to gain and sustain employment.

Guidelines for IPS Practitioners Sharing Personal Experience

1. Preparation

It is important that every practitioner considers what personal information and experience they are willing to share about themselves. Once we have told one person, this is likely to be passed on – we cannot expect others to keep secrets so it is vital that we are not ‘bounced’ into sharing things that we do not wish to share or are not ready to share. Just as IPS practitioners support clients to think through the pros and cons of sharing their mental health/and or addictions history, as well as other personal information, with employers and when and how they might do this, IPS practitioners need to think about what personal information they want to share in their work.

Peer Employment Specialists and other Employment Specialists have the unique advantage that they, like the clients they work with, have the experience of returning to employment, and working with, mental health challenges. It can be particularly useful to share something of the learning from this experience with clients.

“I have only ever had positive feedback from sharing my experience with clients ... When we explore the pros and cons of disclosure, I know first-hand what it is like to actually face stigma and discrimination (direct and indirect) in life and at times in work. However, I do not share specific details, often just an overview ‘I’ve had my own mental health struggles.’”

Employment Specialist

“I have used my personal experience of anxiety and PTSD when supporting people in similar situations. Ways of using distraction techniques particularly when approaching an activity like an interview, that they have not done for a period of time.”

Employment Specialist

“I have at times shared some of my own experiences, understanding and perspectives with people who have the same diagnosis as me ... especially when choosing hours to manage work-life balance, and, in in-work support ... staying well at work, as I have my own plans.”

Employment Specialist

“I had a client with OCD (Obsessive Compulsive Disorder) who was having issues getting to work on time as her checking and rumination in the morning was making her late. I explained that I could relate to this as I also had OCD and had similar problems with time-keeping in relation to this. We worked out a plan for her to approach her employer and request a ‘reasonable adjustment’ so that she could start work slightly later in the morning.”

Employment Specialist

“On a few occasions I went into more detail when someone was really struggling with depression and trying to come to terms with the symptoms and impact ... I explained how it manifested for me as I sensed that there were similarities in the experience the client was trying to articulate. The feedback was amazing. The client could not believe that I had described exact experiences that he too had been through and how sharing my experience had helped him to be able to make sense of his own experiences. It seemed to be a turning point in the journey and the client focused more on work rather than mulling over ‘what’s wrong with me.’”

IPS Grow Regional Lead

“The general purpose is to inspire strength and hope by sharing experiences ... I mostly share the following tools that I have found crucial for myself:

- **Honesty:** Towards yourself, your family and employer.
- **Transparency:** Be willing to let people know how/what you're feeling, otherwise no support or reasonable adjustments can be arranged.
- **You're not alone:** You cannot think yourself better, but you can talk yourself better.

- **Reach out:** Try to be humble and courageous to reach out and ask for support/help.
- **Gratitude:** Try to find positive things in your life when you wake up. Even the smallest things can set you up in a positive mind-set for the day. [A bed to sleep in, clean sheets, a roof over your head].
- **Patience:** Healing/recovery takes a while. It will not happen, that one day you'll wake up and everything is ok; it's a gradual and quiet process. Evolution, not Revolution!!”

Advanced Lived Experience Employment Specialist

Some Employment Specialists may have relatives or friends who have mental health challenges and this too can be valuable experience to draw on with clients and colleagues.

“Seeing the difference having a job made to my dad’s mental health and wellbeing, providing for his family was so important to his sense of self-worth, and I know that work didn’t just keep him well, it kept him alive.”

IPS Grow Lead

“I often say that if it was not for my brother’s mental health problems I would not be in this job.”

Employment Support Officer

Other IPS practitioners may have experienced other life events, have other skills and cultural experience that can be helpful.

“I have worked with clients of the same ethnicity and I have been able to share knowledge with them about foods and herbs, commonly known to us, which I have found helpful with my own recovery. As a person with lived experience of taking anti-psychotic medication, I have also dealt with my own weight gain and increased blood glucose levels, and have been able to also discuss the benefits of rest, exercise and meditation with clients.”

Employment Specialist

“As a working mother of two children I have shared my personal experience with clients. Discussing the impact maternity had on me. Feelings of isolation, losing a sense of identity, I was very anxious about returning to work, worried that I had lost my social skills. Having spent over a year at home, often alone with my baby, I was worried that I wouldn’t manage both work and motherhood. Having open and honest conversations with my manager helped, we were able to agree a plan where I would return to work part-time and have the valuable time with my children”

Employment Specialist

“In 2018/2019 Blackpool welcomed a lot of skilled Spanish nationals to the nursing team at Blackpool Victoria hospital ... but the partners of the nursing staff were largely overlooked. Many partners who had enjoyed good careers in Spain became unemployed in the UK due to language barriers and a lack of awareness of the local job market. I took some of these people onto my caseload as I studied Spanish at university and have lived and worked in Spain, thus have experience of trying (and succeeding!) to find work in a foreign country. I took on 3 Spanish nationals to my caseload and signposted them to ESOL courses, created CVs and assisted with job applications and interview preparation. Of the 3 clients, 2 went on to find and sustain work ... I feel my lived experience (and language skills) meant that I was able to provide a better quality of Employment Support due to recognising the specific challenges the clients faced, and empathising with their emotional state.”

Senior Employment Specialist

However, all Employment Specialists have personal experience that can be valuable in their IPS practice and within the team in which they work.

“I often share with clients the challenges I’ve faced at different times in my career which may be similar to the challenges they are experiencing. Discussing these difficulties and sharing how they made me feel at the time can really help normalise the feelings of disappointment, regret, helplessness, loneliness, confusion, anger, fear etc. that we all experience at some point during our working lives. Surely this is a healthy thing to do?”

IPS Grow Regional Lead

“Setbacks, rejections and disappointments are part of everyone’s life. When you are in recovery, feeling vulnerable and fragile these are more challenging to deal with than when you’re happy, stable and strong. Many of our clients will not be successful in applications or job-interviews and this can contribute to a relapse in mental wellbeing. Consequently, we shall do everything to prevent disappointment, but more importantly help people to manage disappointments.

Unfortunately, I have had my own share of unsuccessful job interviews. I learnt from my disappointments, I learnt from my mistakes, and I learnt from how I dealt with these and learnt from not dealing with these.

These are lived experiences, I use to help anyone.”

Advanced Lived Experience Employment Specialist

It is reasonable to expect that every IPS practitioner will share something of their personal experience relevant to work (for example, work history, issues/challenges they have faced at work) and non-threatening information about themselves (e.g. pets, hobbies) that may be important in establishing a collaborative working relationship with clients.

“Talking about how I have used personal networks and the hidden labour market during my career to get jobs.

Talking about how none of us get every job, to help people deal with not getting the job they want.”

IPS Grow Lead

“Another personal example I share: my second part-time job involved me just walking into a local care home and asking if I could volunteer once a week. I did this for a few months and then was offered weekend health care assistant work. I worked for the care home for over two years and learnt a lot during this time. This has been helpful to share with Early Intervention clients”

Employment Specialist

“I used to struggle with imposter syndrome at the start of my career; it affected how I thought others saw me and what opportunities I would apply to, to the point where my rumination really affected my self-worth. I have shared my personal challenge many times and in various ways within my client work and in supervising staff over the years. I find it can be a common experience with people who have had to take time away from the workplace or maybe brought up in families where they have been the first into higher education or work or families where there is a high expectation. Techniques I use to facilitate the conversations have been looking over feedback clients have received (for interviews or from their line manager) to quiet the negative voice and maximise the impact and recognition of positive feedback, using the Tic/Toc technique, reflection on clients’ expectations of themselves and what is within their power of influence. Sharing my experience and, more accurately, leaning into my experiences is like a superpower to me now as I’ve learnt the most effective ways to share. Being open to recognising these same challenges in others can really help people to see the commonality in issues and see the way forward and be more hopeful.”

Employment Team Leader

“I have worked with clients within the IPS service for 18 months and discovered that I have used my lived experience regularly. The main experience I have been using is explaining to clients about part time work. I found when you mention part time there is a perception your working between 5 to 20 hours per week. Most clients stated that this amount of hours would not be enough to be financially balanced. I explain that company’s definition of part time has a wider scope than in the public eye. I find explaining and showing clients that under employment part time is actually anything under the full contracted hours.

I also use my experience of working at times that are suitable to myself ... This leads to me working 32 hours per week instead of 37 hours which classes me as a part time employee. Now

this doesn't sound like much of a difference but it's beneficial for me and helps promote my own physical and mental health recovery."

Employment Specialist

Key issues for reflection in preparing what personal information/experience I am willing to share about myself:

- What personal information am I comfortable about sharing with clients and colleagues at work?

Examples: hobbies, interests, cultural background, views about work, marital status, age, children, religion, sexuality

- What personal experiences have I had that might be useful in helping others to gain and sustain work?

Examples: work history; challenges you have faced at work, challenges outside work that impacted on your work; your own mental health challenges or mental health challenges that you or close friends/relatives have experienced; cultural understanding of the meaning of mental health challenges and employment.

- Which of these am I comfortable about sharing with clients and colleagues at work?
- If you share something with one client or colleague then others are likely to find out – are you happy for this information to be available more widely?
- How much of these experiences am I willing to share?
- What information will I not share?

- Could I explain why I am sharing this information to my manager or a sceptical colleague?
- What am I going to say if people ask me to share more than I am willing to share?
- How do I refocus/redirect the conversation if someone asks for details that I am not comfortable sharing?
- What information/experiences will I not share?

This might include:

- › Experiences that are too 'raw' for you and that you have not processed or that you only share with those who are personally close to you.
- › Information that would reach the boundaries of the professional relationship between the you and your clients, for example personal contact details and the intimate details of your life or anything that causes confusion about the nature of your relationship with the client and might suggest the possibility of a personal friendship or sexual relationship.

- What information do I put on social media?

This is public information that clients and colleagues can access.

A brief biography of each IPS Practitioner in the team

The way in which practitioners introduce themselves to people using the service is important: first impressions matter! If we are to create relationships that recognise our common humanity and within which people feel able to share their own ambitions, hopes, fears and challenges, then it is important that practitioners share something of themselves as people. We have background referral information about the clients we see; it is only reasonable that this is balanced by the client having some information about who they are seeing.

"During the first meeting I introduce myself and clarify the 'peer' addition to my job title by mentioning that I am a former service user of the mental health team, both in the community and as an in-patient on the ward. If the client wants to know more, I'll give a very short version of my recovery. In principle the meeting is about the service user, it is not about me! During our partnership I disclose more and share my experience when the situation requires it to give my clients strength and hope."

Advanced Lived Experience Employment Specialist

The Safe Wards initiative² designed to develop interventions to make psychiatric wards safer, more peaceful places and improve relationships between staff and people using the services included a 'Know Each Other' intervention³ in which all staff were asked to provide basic information about themselves (job title, years of experience, previous jobs, likes, dislikes, favourite film, TV programme, book, music etc.) They found that giving people some information about staff facilitated the formation of collaborative working relationships.

It can therefore be useful for IPS practitioners to prepare a brief biography of themselves that can be given to clients (and available to colleagues) describing something about themselves. This might include, for example, your current role, why you do the job that you do (e.g. "I have seen the positive impact that work has on people's lives." "I know how important work is to me and the way it has helped me get through some tough times in my life."), previous jobs you have done, interests and hobbies outside work, basic demographic information and any personal and life experience that may be useful and which you are happy to share.

The biographies of IPS team members might usefully be included in a 'meet the team' section of information materials about the service.

2. Decisions about sharing personal information in individual interactions

In thinking about what to share in individual interactions with clients it is important to weigh up each individual situation and think about your motivation for wanting to share it and the impact it is likely to have on the person with whom you are speaking (see Dunlop et al, 2021). What you plan to share, why you are sharing it, when it is appropriate to share it and how you might best use your experience and learning to assist the person. It is also important to think about the impact of sharing it on yourself (our emotional resilience varies and there may be some times when we do not feel able to share some experiences). While many clients value

practitioners sharing some of their personal experience and learning, others do not, and we must be sensitive to this. Sometimes it may be best not to share our personal experience and learning directly but to use it to show empathy, guide the content of the conversation with them and alert us to challenges they may face (e.g. coping with the anxiety that may accompany applying for a job, going for an interview, starting a job or going back to work after a period of absence).

“Although not experiencing exactly the same, as an Employment Specialist I can relate to people’s feelings in an unspoken way enabling me to provide empathy and appropriate help and support.”

Employment Specialist

“I have a stronger sense of compassion and empathy which is so important in my role as a team leader and in work with clients, and I have that experience of returning to work after a long period of absence.”

IPS Employment Supervisor

It may also be helpful to share personal experiences within the team. For example, you may have some personal experience/learning that might assist others in the team in their work with clients; or creating a team environment where people can talk about their worries and concerns – demonstrating that it is OK not to be able to cope with everything all the time; or expressing empathy and promoting the wellbeing of colleagues.

Equally, it may be useful to share some personal experience in employer engagement work or in interactions with a clinical team. For example, to normalise difficulties that people may experience or adjustments they may need or to demonstrate that it is possible for people who have experienced mental health challenges to work successfully.

2 <https://www.safewards.net>

3 <https://www.safewards.net/interventions/know-each-other>

“I find a good way to break down barriers with prospective employers is to talk to them about my own lived experiences. I do not go into detail, but will tell them I am also a service user and explain how being in work is not only good for my well-being but how having a weekly routine and feeling a valued team member has helped to keep me in recovery for many years. I think it is important that new employers can see a positive role model.”

IPS Team Leader

In IPS services, our goal is to help people to gain and sustain employment, therefore this is the yardstick against which we need to judge the value of sharing our personal experience and learning in all facets of IPS practice. However, we must always recognise that we can never know another’s experience and our way of dealing with challenges is not the only (or necessarily the best) way for that person to approach the situation. Even if our experience seems superficially similar to that of a client (or colleague) we must always remember that everyone experiences things in different ways. The salience of an experience and its impact on their life and feelings differs from person to person. We must never fall into the trap of saying ‘I know what you mean’!

Key issues for reflection on what personal experience/information to share:

What personal experience do I have that it might be useful to share?

- Do I have any personal experiences that might be useful in helping this person to gain or sustain a job?
- Do I have any experience or information that may be of use to a colleague who is assisting a client to gain or sustain their employment?

Why might it be useful to share this personal information?

- What is my motivation for wishing to share my personal experience/information?

- What do I hope to achieve by sharing this personal experience/information?
 - › Will sharing this personal information/ experience strengthen my working relationship with this person?
 - › Will it help the person to gain and sustain employment?
- Would I be happy telling colleagues or my manager that I had shared this personal experience/information?
- Does the information I intend to share cross the boundaries of my professional role (e.g. giving personal address and personal contact information)?

Examples of positive reasons for sharing personal experience/information

- Normalising/demystifying a person’s feelings or concerns
- Sharing learning
- Discussing different ideas about ways of coping with a situation derived from your learning
- Offering hope
- Showing similarities and offering reassurance
- Building the person’s self-esteem
- Encouraging the person to talk more openly about their challenges
- Fostering a relationship that recognises our shared humanity and promoting feelings of equality
- Strengthening a relationship

Examples of warning signs to beware of: reasons it might not be helpful to share or that you may be crossing boundaries

- Invoking envy in the person
- Sharing for personal reasons/my benefit rather than the other person's benefit (e.g. wanting to be liked, feel competent, get help for myself)
- Shifting the focus of the conversation from the client/colleague to the person who is sharing the information
- Causing confusion about the nature of the relationship
- Developing inappropriate personal feelings for the person
- Wanting to share information with only one person
- Frequently thinking about a particular person outside of work
- Feeling that other members of the team cannot really understand the client
- The person is only willing to speak with you and not with other members of the team
- Wanting to spend time with the client outside work
- Ignoring team policies and procedures
- Keeping secrets with the client
- Giving personal contact information to the client

Key issues for reflection on when, why and how to share personal experience/information:

When might it be relevant to share this personal experience/information?

- Is this the right time in my relationship with this person to share this personal experience/information?
- Does sharing this personal experience/information now fit with the current focus of the conversation/the current concerns of the person?
- Does the person want me to share this personal experience/information right now – if in doubt start small and gauge the person's response and/or check back with the person to see if it was helpful?
- Do I feel able to share this information or will it open up subjects I don't feel comfortable discussing right now?

Why might I share this personal experience/information?

- What is my motivation for wishing to share my personal experience/information?
- What do I hope to achieve by sharing this personal experience/information?
 - › Will sharing this personal information/experience strengthen my working relationship with this person?

- › Will it help the person to gain and sustain employment?
- › Will it assist a colleague personally or in their work with a client?
- Would I be happy telling colleagues or my manager that I had shared this personal experience/information?

How might I share this personal experience/information?

- How much information should I share about this experience?
- How much time do I talk for – often "less is more"?
- Is the focus remaining on the other person or has it shifted to me?
- Am I assuming that the person's situation, feelings and the impact of what has happened are the same as mine (everyone's experience is different)?
- Am I indicating to the person that my way of dealing with the situation is the correct way or offering different alternative courses of action (my way is not the only way and may not be the best way for the person)?
- Is the person valuing my sharing of this information?

“I gave very little detail but it was just a way of helping clients to feel at ease – that I may have experienced some of what they are experiencing, particularly in terms of the anxiety about going back to work. I also said that I had wanted and received IPS support which is why I do the job. I would often see them visibly relax.”

IPS Grow Regional Lead

3. Reflection after sharing personal experience/information

In order to inform future decisions, it is wise to reflect on how the sharing of personal information has gone, how useful it has been and what learning can be carried forward to future interactions. Personal reflections are important, but using supervision for this purpose is also important, as might sharing experiences with other members of the team. As with any interaction, it can also be really helpful to talk through the experience with an IPS manager or colleague.

Key issues for reflection after sharing personal experience/information:

- How did sharing my personal information/experience go?
 - › What impact did it have on the person with whom I shared?
 - › What impact did it have on our relationship?
 - › What impact did it have on me?
- › Did it help them in their quest for work or retaining their employment (or help a colleague in their work)?
- › What worked, what didn't work and why?
- How did sharing my personal experience/information feel at the time and how do I feel now?
- What learning can I take from my experience of sharing?
- Do I want to, and would it be useful for me to, share my learning with the team?

The Importance of Supervision

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Supervision has a key role in enabling IPS practitioners to use their personal experience alongside their professional training and experience.

Supervision can be crucial in supporting a practitioner to:

- 1. Think about what they are bringing to their work.**
This might include the things that brought them to this work, previous experience and current life circumstances, including health and well-being.
- 2. Consider how they feel about using their own personal experience in their work** and why such sharing might be important and valuable (see 'The Value of Personal Experience' above).
If someone is reluctant to share any personal experience or information at all this should be explored and the person encouraged to think about non-threatening things that may be relevant that they are prepared to share.
- 3. Make decisions about what personal experience they are willing and able to share with clients** that may be useful in forming a collaborative relationship with clients and assisting them to gain and sustain employment (see Box 1 above).
- 4. Make decisions about what personal experience they are willing and able to share with colleagues** that may be useful in assisting them to help them in their work (see Box 1 above).
- 5. Develop a short biography about themselves** to share with clients and colleagues (see 'A brief biography of each IPS Practitioner in the team' above)
- 6. Think about what, when, how and why to share personal information in their work** with individual clients, employers, clinicians and colleagues (see Boxes 2 and 3 above)
- 7. Reflect on and learn from their sharing of personal information and experience** (see Box 4 above).
- 8. Think about how, when and why they might**

use the personal information and experience in all facets of their work: with clients, with the IPS Team, with employers and with the clinical team.

9. **Understand relevant policies and procedures of their employing organisation** that relate to 'boundaries' in practitioner/client relationships (e.g. the giving and receiving of gifts, sharing of personal information).

Throughout, the supervisors should encourage practitioners to think about the breadth of personal experience should be considered, including:

- Demographic information such as education, age, marital status, sexual orientation.
- All the jobs that a person has done throughout their life.
- Interests, preferences, hobbies and skills outside work.
- Culture, knowledge of community contacts and resources.
- Thoughts, feelings and views.

- Past challenges and identity-interrupting experiences they have experienced, especially those which have impacted on their work.
- Past difficulties in relation to work, for example, coping with a difficult boss, being turned down for a job, being sacked or made redundant may all be valuable.
- Personal experience of mental health and related challenges (including those experienced by close friends and relatives) and the issues that these have raised in the context of employment.

Research shows that peer supervision is essential for Peer Support Workers (see Repper et al, 2013a and 2013b). The same is true for Peer Employment Specialists. For example, in Central and North West London NHS Foundation Trust, as well as professional supervision within their IPS Team, Peer Employment Specialists receive individual and group supervision from an Advanced Lived Experience Employment Specialist. Group supervision and reflective practice sessions on using personal experience may also be valuable for all IPS practitioners.

Building Skills and Creating a Culture within the IPS Team and Service that Values Personal Experience

Creating a culture where the expertise of personal experience is valued and used has benefits for our work in enabling people using our services to gain and sustain employment. It also has benefits for the well-being of IPS practitioners by enabling people to talk about and address the challenges that they are experiencing in their work and lives. If team members are able to support each other then a win-win situation is created: staff well-being is improved and we are better able to assist clients in their employment journey.

“When new members join my teams, very early on I talk about my own history of mental ill-health and experience of using mental health services. I share the fact that, at a young age, I was once told by clinicians that I would never work again and how I overcame my challenges, returned to work and have built a career. This has created a culture in our IPS teams where it is OK to speak out about challenges you are facing and accept vulnerabilities as a constructive and powerful tool.

It has led to a challenging of stereotypes and beliefs about what it is possible for the people who use our service to achieve. It has also helped Employment Specialists to be open about their day-to-day trials and tribulations and the challenges of keeping well and staying well in their highly stressful Employment Specialist roles, as well as opening-up well-being conversations in team meetings. Knowing that I, as their service leader, am open about my own history of mental illness and my experiences of using IPS services has enabled my Employment Specialists to share my experiences in their work with service users and clinicians to challenge traditional stereotypes. It has also helped Employment Specialists to feel more comfortable and confident in using their own personal experience in their work.”

IPS Service Leader

Leadership is critical to creating a culture where personal experience is recognised, valued and used within the team. Team Leaders and Service Directors/Managers have a major role to play, for example:

1. Ensuring that reference is made in the operational policy of the team/service to the value and use of relevant personal experience.

2. Modelling the appropriate sharing of personal experience by sharing some of their own experience with the team.
3. Creating expectations that everyone will use some of their personal experience in their work by, for example, establishing an expectation that all staff will prepare a brief biography of themselves to share with clients and colleagues (see 'A brief biography of each IPS Practitioner in the team' above).

Such biographies might usefully form part of the information about the team that is provided to clients, potential clients, and potential recruits to the team as part of the recruitment process. In addition, it may be useful for all practitioners to share with their colleagues their full employment history so that their expertise in different sectors can be used by colleagues.

4. Ensuring that use of personal experience is addressed in supervision (see 'The importance of supervision' above).
5. While ensuring that all staff are encouraged to share relevant personal experience, consider the creation of lived experience specific 'peer' roles.

Other enablers might include:

- Organising seminars within IPS Teams for the discussion of the value and use of personal experience based on this Briefing Paper.

- Creating opportunities for the staff team to explore their use of personal experience in 'reflective practice' sessions.
- Explicitly including the ways in which the personal expertise of practitioners has been/ might be used in team discussions of work with individual clients and team meetings.
- Collecting examples of the value and use of personal experience in IPS practice to act as a resource for practitioners.
- Organising specific training sessions on the use of personal experience in IPS practice.
- Including the value and use of personal experience in Employment Specialist Training and IPS Team Leader Training.
- Considering the value and use of personal experience in IPS Communities of Practice and IPS Team Leader Networks.
- Explicitly valuing the expertise of personal experience in the recruitment process.
- Integrating use of personal experience in the promotion of IPS within clinical teams.
- Promoting a culture in the organisation as a whole where personal experience is valued and used.

Valuing Personal Experience in the Recruitment Process

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If we are genuinely to value the expertise of personal experience alongside professional experience and expertise, then it must be clear that this is the case at all stages of the recruitment process.

For example,

- Job descriptions and person specifications might usefully be revised to indicate that
 - › Personal experience of mental health or other life challenges and an understanding of the ways in which these impact on employment is desirable.
 - › A willingness to appropriately use relevant personal experience is required for the role.
- Advertisements should indicate that applications are welcome from people who have experienced mental health or related challenges or other challenging life experiences that have impacted upon the person's work.
- Information sent to potential applicants should

indicate that personal experience alongside professional and employment expertise is valued and used by practitioners in the team. This might be achieved by sending biographies of IPS team members in a 'meet the team' section of information materials about the service (see 'A brief biography of each IPS Practitioner in the team' above).

- In interviews candidates could be asked to reflect on their personal experience. For example,
 - › In the form of questions or a short presentation, they could be asked to describe a challenge they have faced in relation to employment (like being turned down for a job, losing a job, or having difficulties getting on with a boss or colleague), how they coped with this and what they have learned from it that might assist them in their IPS role.
 - › They could be asked if they have had challenging life experiences (which might include mental health challenges either themselves or supporting someone with mental health challenges) and, if so, what they have learned from these and how they might use this experience in their work assisting clients to gain and sustain employment.

End Note

IPS practitioners come from diverse backgrounds and have a wide range of skills and experience. Too often, the focus is only on professional IPS skills and expertise to the exclusion of the learning they have gained from personal experiences of life and adversity, including personal experience of working with mental health challenges.

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As in other areas of mental health and related work, alongside professional expertise, such personal experience can add value in IPS practice and greatly increase the expertise available to the team. Helping people with mental health challenges to gain and sustain employment is not easy and it is critical that we use all the expertise and experience available within our midst to enable those whom we serve to gain and prosper in employment.

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Appendix

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