



Depression and Bipolar  
Support Alliance

55 E. Jackson Blvd, Ste. 490

Chicago, IL 60604

(800) 826-3632

[chapters@DBSAlliance.org](mailto:chapters@DBSAlliance.org)

# Support Group Facilitation Guide

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## Definitions

*Facilitation -- The act of assisting or making easier the progress or improvement of something*

### What is DBSA support group facilitation?

Empathetically guiding peers in a healthy, confidential, and purposeful discussion that strives to improve the lives of people living with mood disorders.

To assist...

To make easier...

To *facilitate*...

Support groups sponsored by DBSA chapters depend upon volunteer leaders to guide their peers through the process of a support group meeting. The support groups are not led by professionals or certified experts. They are led by peers and family members that are willing to serve as a facilitator. DBSA support group facilitators are not licensed or certified by any authority, but they do have a shared purpose: to improve the lives of people living with mood disorders.

The information included in this guide is provided as a collection of suggestions based on the experience of DBSA and its constituents. There are lists and guidelines and principles and definitions, but if a DBSA chapter participant takes one thing away from all of this information, it should be the spirit of helpfulness and compassion that is the fuel of DBSA support services.

### Peer-Based, Self-Help

These words are the foundational pillars upon which we base who we are and what we do. Let's start with some definitions.

**Peer-Based:** Webster's first definition of *peer* is: "one that is of equal standing with another." In the DBSA context, a peer is a person with a mood disorder or a family member of someone with a mood disorder (if the group is serving family and friends). Another distinction of peer is that our facilitators are not professionals — physicians or other mental health providers. Peers are not those providing treatment. If degreed or credentialed mental health professionals participate in DBSA groups, they always must do so as peers.

So then, peer-based simply means that everything we do, we do as a peer. Whether it's leading a chapter, facilitating a support group, etc.. it's all done from the perspective and within the context of a peer.

**Self-Help:** Simply, helping oneself. We tend to say that at our meetings we are here to help each other. To be more accurate, we are here to assist, encourage, and enable each other in helping *ourselves*. Here are some important distinctions:

- DBSA groups are also not peer help. We are not an alternative to professional care or a 12-step program. While there are some similarities to such programs, we have no steps, program, or official guidebook.
- DBSA groups are SELF-help.

Why is self-help an important distinction? Each person's path to wellness is uniquely their own. Wellness is each individual's own personal responsibility and as peers, we cannot guide anyone else to wellness. We can, however, assist, encourage, and enable each other in our own individual pursuit of wellness, and we can choose to make the journey to wellness in the company of others.

If we were to put forth a definition of a DBSA peer-based, self-help support group it might look something like this: *A gathering of peers who assist, encourage, and enable each other in helping themselves. Each one follows his or her own unique path to wellness and chooses to make that journey in the company of others headed in the same direction.*

## **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 will 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.

## 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.

## Guiding Ethics of Facilitating Peer-Based Self-Help Support Groups

1. Facilitators are not leaders, certainly not therapists, and not even guides. 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.
2. It is the facilitator's role to assess the room. Keep the conversation going when necessary or assist the group to be comfortable in a quiet moment. Facilitator's are there to aid, enable, and encourage others in helping themselves, not to take the lead role in another's recovery.
3. Facilitators do NOT diagnose, suggest a course of treatment, or instruct. We do not do what the professionals do, and peer support groups are not a substitute for qualified professional care.
4. Remember facilitators are there to *assist*. Everything must be from this perspective, whether it's keeping time, or handling challenging issues that might arise.
5. Support group guidelines are *guides*, not *rules*, and MUST be applied with understanding and compassion.

To be an effective facilitator, one does not need an advanced degree, in-depth study, or an extensive internship. What is needed is relatively simple: the willingness to be helpful to peers ....

### Qualities of a Support Group Facilitator:

- Is a PEER
- Attends support group meetings on a regular basis.
- Arrives before the meeting starts.
- Responds in an unbiased and non-judgmental way.
- Is self-aware:
  - of his/her own situation, and how his/her mood disorder or that of a loved one may color their responses
  - and in reasonable control of their own emotions
  - and able to know when they are having a bad day and should step aside from primary group facilitation
- Open to peer review and suggestions from other participants, facilitators, chapter leadership, and the professional advisor
- Genuinely interested in helping others

- Opens the support group, reminding participants of the basic principles, and closes the discussion
- Monitors the time, giving each person who wants to share a chance to do so in the time allotted
- Keeps the discussion on track, on an appropriate subject matter, in an appropriate tone and behavior
- Clarifies and paraphrases, or summarizes, people's statements when necessary to assure general understanding
- Models appropriate behavior for group participants
- Participates as an equal peer
- Remains neutral and unbiased throughout the discussion



## Facilitator Do's

- Dictate content
- Dominate the discussion
- Preach or lecture participants
- Overtly inject personal opinion or values
- Show surprise, hostility, or disgust to any participant
- Attempt to run a “therapy session”
- Instruct any participant to try a particular course of treatment, medication, physician, or take a certain course of action

## Facilitator Don'ts

### Facilitator Sensitivity

A facilitator needs to be sensitive to a variety of things concerning peer support group participants.

A facilitator needs to be aware of when someone:

- Is hurting
- Needs more time to talk
- Is made uncomfortable by excessive talk on a certain subject or the attitudes or actions of others in the group
- Needs a chance to talk one-on-one to someone
- Seems to be in critical need of professional help
- Seems suicidal or in crisis

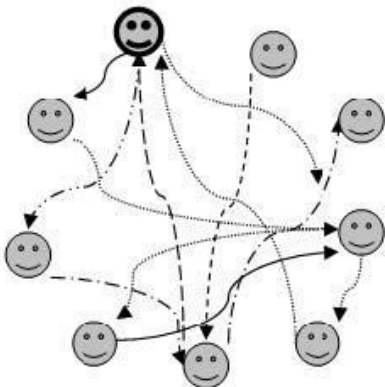
## The Healthy DBSA Support Group Meeting

DBSA support groups are meant to help people living with mood disorders live healthier, happier lives. It is integral to this goal to create a support group environment that is healthy and happy itself. This task can be challenging with many personalities, backgrounds, and needs that participants bring to the group.

Managing the health of a support group begins by managing the health of the support group facilitator. Facilitators should always be very aware of their own mental health. It is not expected that all support group facilitators are “mood-disorder-free.” On the contrary, all facilitators, with the exception of friends and family groups, are people who live with mood disorders. However, if the energy it takes to facilitate a support group is detrimental to the facilitator’s health, then he/she should be prepared to transfer that responsibility to another facilitator for the time needed to heal. Considering co-facilitators can be helpful. With co-facilitators, two people share the responsibilities of facilitating, and can work off of one another’s energy.

Following the health of the facilitator in importance, is the healthiness of the group dynamic. Many people refer to this as the “flow” of the discussion. *Are all participants being heard? Is discussion shared equally among participants? Do group participants feel free to interject helpful information without it being ‘their turn’? Are participants free to express their emotions in appropriate ways? Do participants respond to the other participants, or just the facilitator?* These are important questions for facilitators to answer when assessing the health of their group. *What does a healthy flow of conversation look like for your group?*

### Healthy Flow



In a healthy discussion, the facilitator starts the conversation, and makes sure it stays on track. Participants should not respond only to the facilitator. There is a natural, conversational flow to the discussion. This diagram shows several conversations that have taken place. In practice, a healthy

group has many people acting as facilitators (starting & guiding conversation), even if they are not designated as the official facilitator. This provides for the future possibility of other participants serving in the facilitator role.

## Creating a Wellness-Oriented Environment

Let's dig deeper into the atmosphere to cultivate in support group meetings. Being wellness-focused highlights the real truth that wellness is possible for individuals living with a mood disorder and keeps the group focused on creating productive and thriving lives.

What is wellness? DBSA uses the following definition: a full and meaningful life in the community. However, each person's path to, and definition of, wellness is uniquely their own. Wellness encompasses an individual's whole life, including mind, body, spirit, and community.

### Core Elements of a Wellness-Oriented DBSA Support Group

- Provide **hope** in every interaction.
- **Empower** others in simple ways.
- Use **person-first** language.
- Focus on **strengths**.
- Promote personal **choice**.
- Help everyone leave committed to **action**.

### Ten Tips for Creating a Wellness-Oriented Support Group

1. Start all meetings with a reminder that people can and do get better.
2. Hold a discussion around wellness-centered goals.
3. During introductions ask people to give their name and something they like to do, rather than their diagnosis.
4. Encourage participants to take on leadership or facilitator roles.
5. Dedicate time in every support group to share successes.
6. Help participants identify their strengths.
7. Avoid language such as "high- or low-functioning."
8. Focus conversations on what is within our control and encourage other participants to do this as well.
9. Encourage participants to take an active role in their wellness plan by helping them to determine what they want to discuss with their providers and what they want to get out of their plan.
10. Develop a regular forum for sharing all kinds of recovery stories, verbally and in print.



## 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 discussion 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 leader 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?

### **Preamble**

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

You are encouraged to duplicate the preamble at the end of this guide for distribution to those present and perhaps display them on a flip chart or whiteboard in your meeting room.

### **State the DBSA support group guidelines**

*Everyone should know the guidelines and is responsible for following them*

You are encouraged to duplicate the guidelines at the end of this guide for distribution to those present and perhaps display them on a flip chart or whiteboard in your meeting room.

### **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.*

Each person has an opportunity to introduce themselves by their first name and tell the group why they came to the meeting that day. To maintain a person-first environment, DBSA advises against requesting that participants share their diagnoses when introducing themselves. Instead, sharing a fact about themselves, for example, something they enjoy doing, helps remind each other that there is more to each person than a diagnosis.

The most important thing to remember about check-in is that it's intended to be very brief. 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.

*What you might say/hear:*

“My name is Mary, AND ...

- “I think I might be depressed – I’m not sure.”
- “I’m here to learn more about ...”
- “I’m just here to listen.”
- “I just spent two weeks in the hospital.”
- “I want to know how I can make my brother stay on his medication.”
- “I was just diagnosed with bipolar disorder and need more information.”
- “I just can’t go on the way I have been.”
- “My doctor told me I should come to this meeting.”
- “My medication just isn’t working.”
- [Crying]
- [Silent]

The facilitator briefly reacts to each person as a way of acknowledging his or her presence.

*What the facilitator might say after each person has an opportunity to speak:*

- “Thank you, Mary.”
- “We’re glad you’re here.”
- “Thank you for sharing that.”
- “Each of us has a lot of questions. We’ll be talking about [particular subject of interest] more after we’re done checking in.”
- “It took a lot of courage for you to come here tonight – thank you.”
- “No one is required to speak. We’re glad you’re here.”

## **Open Group Discussion**

*The heart of why a DBSA support group exists*

After Check-In, the facilitator can begin discussion in several ways. Sometimes a topic of common concern is identified during the check-in, and the facilitator can begin discussion using this topic. For example, if several participants have expressed frustration about communicating with their psychiatrists, the facilitator might say, “It sounds as if a number of us are having challenges in working with our doctors. Let’s start by talking about any challenges or successes that any of us have had in partnering with our doctor along with anything else you’d like to discuss. Perhaps we can determine a number of possible approaches in addressing with this concern.”

The facilitator can also begin discussion by asking 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. Again, no one dictates discussion, but introducing possible topics is a great facilitator tactic. Some potential topics are:

- 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. To do this:

- **Restate** – Participants need to know that others have been listening. 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: “Maurice, can you tell us more about ... ?”
- **Redirect** – Ask other group participants to respond to what has been said: “I wonder if anyone has some thoughts about what Jennifer has just shared.” 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. You can do this without agreeing with someone or condoning unacceptable behavior.
- **Summarize** – Review what the conversation has been about up to the present. This puts things in perspective. 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.

The facilitator should be prepared to deal firmly, but kindly, with individuals who are hypomanic, hostile, antagonistic, discouraged, and depressed. Remember that everyone in the group, including you, has experienced difficulty in their lives. 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, for example, it is appropriate for the facilitator to intervene and move on 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 “Handling Challenges” section on pg. 16 for more.

## **Close the Meeting**

*Facilitator brings closure to the session*

How to do it:

- 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. Some sample questions include:
  - What will we take away from the meeting that will help us?
  - What will we commit to doing as we move forward into the week?
  - What new strengths will we explore?
  - What part of our wellness plan will we work on this week?
- 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

There is no single way to facilitate effectively, but if you follow these basic concepts and trust your own good instincts, you will do just fine. Every facilitator finds their own style and rhythm over time. Even if you feel anxious and awkward at first, as you gain experience you will be pleasantly surprised at how comfortably you and other participants of the group slip into this role.

## **10 Tips for Preventing Conflict**

The first step in successfully managing conflict is working to prevent it altogether. Here are ten tips to remember to help you prevent the challenges of conflict before they arise.

1. **Gossip: just say no:** No one trusts a gossip. Gossiping is a great way to signal to your group participants that you're not caring or trustworthy, and more importantly, it violates the rules of group confidentiality.
2. **Praise: always in short supply:** If you use someone's idea or work product, give them credit and announce their contributions publicly. You would expect for the same courtesy from them.
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 apologize. It takes courage to apologize. Also, accept an apology when offered.
4. **Communicate:** Be open and honest. Rumors feed on themselves in the absence of reliable information. Regularly communicating with co-leaders and group participants about what you're working on is the key to preventing people from jumping to the wrong conclusion.
5. **Forego public shame and blame:** Public humiliation is not a positive way to force another person into more productive habits or behavior. People will make mistakes and appreciate when concerns are discussed 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. Involving everyone is so important, especially in the self-help arena.
7. **Include the group in decisions:** A democratic process has proven to be an effective manner with which to govern the group's decisions. Not many things can cause more conflict than one person making all of the decisions for others. Sometimes it may seem as though you are being helpful by taking responsibility for a decision. Always make sure that all stakeholders are considered and included in the decision-making process
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. Prevent conflicts before they start by providing constructive feedback along the way.

9. ***Intentionally seek participants outside the “inner circle:”*** Most groups, including DBSA chapters, have an inner circle of participants that are always there, always volunteer, and everyone knows. If you are a part of this inner circle you may sometimes find that you only interact with people within this group. 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 and removing a member of the board/leadership of a chapter. Having these policies in place beforehand makes conflicts that can arise much easier to manage (see “Policies that Solve Problems” in the DBSA Chapter Conflict Management Guide).

## Handling Group Challenges

We 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. Because you are a peer, and not a professional, it is acceptable and responsible to ask the group to determine how to handle a situation that has gotten out of hand.

Jot down challenging situations and share them with other facilitators or bring them up when meeting with the professional advisor. To maintain confidentiality, focus on the concerns and leave out any personal information.

Reference DBSA conflict management tools and crisis intervention tools for assistance with challenging situations.

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 (as opposed to something that should be addressed in a one-on-one setting), here are some suggestions to help you facilitate the discussion:

1. **Clarify the issue.** What exactly is each person angry about? Can each person state clearly his or her own viewpoint and how it differs from the other person’s? 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 making statements about "you" and "your" behavior. Help the group avoid judgmental statements.
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.

## 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 calmly with the individual.

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

### *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.

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.

## DBSA Support Group Facilitator Traits

Effective facilitators share many qualities. Here is a list of traits to work toward:

- Natural
- Authentic
- Focused on others
- Uses personal experiences
- Clear
- Non-judgmental
- Organized
- Confident
- Encouraging
- Team player
- Time-sensitive
- Detail oriented
- Flexible
- Adaptable
- Approachable
- Compassionate
- Trustworthy
- Inclusive
- Patient
- Open about themselves
- Equal participant
- Proactive

### **The Importance of Sharing**

Because everyone is equal and everything DBSA does is from the perspective of being a peer, it is crucial that support group facilitators share in group just like other participants. To some degree, participants, especially newcomers, are going to look to the facilitator as the leader or some kind of expert. This is natural and human but detrimental to the idea of being peer-based. Some new facilitators express feeling selfish sharing about what's going on in their life, and that they should instead focus on their role as a facilitator. However, this usually results in creating a barrier between the facilitator and participants. Sharing as an equal peer is vital to preserving the peer-based environment. Also remember that in addition to helping you, sharing your experience and feelings can be very helpful to your fellow peers!

## Helpful Tips for Facilitators

There is an endless amount of resources available to assist support group facilitators. There are countless tips, tactics, guidelines, principles, articles, books, videos, etc. available to assist the improvement of your facilitation skills. Below is just one short list of helpful tips for facilitators. Remember that to be a good facilitator 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...

- o Keep eye contact with all participants. By simply looking at someone and smiling, you help the person feel part of the discussion, even if they haven't said anything for a while.
- o Address people by their names. This helps everyone learn each other's names and provides a way to let support group participants know that you care what happens to them.
- o Notice who talks and who doesn't. Don't press newcomers to talk. If someone who has been quiet talks, encourage more discussion of the point.
- o Be aware of group energy and individual relations. Glance around the room frequently, checking expression and body language. You may want to include people who appear bored in the discussion.
- o Let one person talk at a time. If someone does not get to finish a point, go back to that person. If someone tries to contribute but can't get into the conversation, give that person the floor.



- o Keep discussions on a personal and feeling level. Challenge generalizations such as “all men/women are...” by asking those present if the statement just made pertains to them. Encourage “I” statements along the way. You may feel that you need to share some of your own experiences to pave the way.
- o Listen so that you can give positive feedback, extend support, and call attention to similar or conflicting points of view.
- o Let participants speak first and throw questions directed at you back to the group. For instance, ask, “What do all of you think?”

**SOURCE:** Michigan Protection and Advocacy Service, [mpas.org](http://mpas.org)

## Other Training Resources

In addition to this guide, many facilitators find it helpful to go through the other facilitation training materials provided by DBSA. These are available for your chapter to order and are also posted on the Chapter Management website at [DBSAlliance.org/chaptermgmt](http://DBSAlliance.org/chaptermgmt).

The DBSA Facilitator Training Kit includes:

- At-A Glance Support Group Facilitator Guide
- Meeting Sign-In Sheet (for optional use)
- Facilitator Case Studies/Sticky Situations
- DBSA Support Group Participant Feedback Survey
- Meeting Place Tips
- Tips for recruiting new facilitators
- Fillable flyers and ideas on how to advertise your group
- New participant welcome packet ideas

## Helpful Books and Resources

The following materials may also be helpful to review. They range from facilitation guides to resources for incorporating wellness principles into support groups.

- *Effective Support Groups* (James Miller, 1998)
- *The Art of Facilitation* (Hunter, Thorpe, Brown, & Bailey, 2009)
- Stories of recovery such as DBSA’s Life Unlimited series ([DBSAlliance.org/peer\\_life\\_unlimited](http://DBSAlliance.org/peer_life_unlimited))

- Leading Peer Support and Self-help Groups: A Pocket Resource for Peer Specialists and Support Group Facilitators (Charles Drebing, 2016)

## Preamble

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?

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## 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.

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