

[insert organisation name/logo]

Understanding Values – Guide for Staff¹

Recovery-orientated services are focused on an understanding of people's values, beliefs and preferences, in general and in relation to support. This may involve learning more about their life story, support with the development of a personal narrative, and finding out about the individual's values. This is needed to assist with planning and recognises that individualised support planning takes place within a social context.

Mental health workers who support recovery orientate their actions around the values in life and support preferences of the person using the service. Only when the person's values are shared, and inform decision-making, will our service be working with the person (not 'on' the person).

Understanding values contributes to ensuring that support planning is consistent as far as possible with the individual's values.

It is important to actively encourage people to focus on what they would like you to know, and what they particularly value, rather than feeling they have to tell you everything. An agreed summary is developed and is then recorded in the Values and Support Preferences Form.

¹ From Bird et al (2011)

What does understanding values involve?

- Learning more about the individual's life history
 - where does the person come from and what important influences have shaped their personality?
- Learning more about their rich identity
 - considering race, culture, ethnicity, gender, spirituality, sexual orientation, etc.
- Supporting the development of their personal narrative
 - what is their story about how they came to be where they are in their life?
- Understanding values
 - what matters to the person?
- Support preferences
 - what kind of help does the person want from both mental health services and other sources?

General principles in conversations:

Use coaching skills to support the development of new learning and understanding in you and the person.

- Don't assume any particular aspect of the person is or is not important.
- Be respectful of boundaries – the person may not want you to know everything about them
- Be open to all conversations – give individuals a chance to discuss areas, even if it may be a sensitive topic

The process of getting to know a person may involve talking about sensitive areas such as the experiences of stigma, discrimination, racism and previous relationships with services. This process will take time and involve many conversations so trust can be built and boundaries changed to allow the discussion of these topics to take place.

As people's values and treatment preferences may change over time, it cannot be a one-off conversation.

Individuals vary in the approach that they find most helpful. A combination of conversational, narrative and visual approaches may be used, or other approaches that are appropriate.

1. Conversational approach

For some people, having an open conversation with the worker may be the preferred approach. The Values and Support Preferences (VSP) interview gives a framework for conversations about areas which have been identified as important for people in their recovery journey. The VSP starts with personal values and then considers support preferences. It contains possible questions which would be used within a conversation. The intention over time is to work through the topics covered in the interview guide, though not necessarily in the order given.

One helpful approach to start these conversations is that of respectful curiosity – *“I want to work with you in ways which fit with who you are and your values in life, so I’ll be interested to learn about whatever you decide to share with me”*.

2. Narrative approach

The second approach to understanding values is to support the person to write their story down and then share it with the worker. Since narratives may be developed wholly or partly outside of meetings, it is important to be clear that not all parts need to be shared with the worker. The person may want to write some bits either just for themselves or to share with family or friends.

One approach to start with is to give the person a blank copy of the VSP interview guide as a template. Alternatively, suggesting the following questions or themes may be helpful:

- Your life so far, including significant positive and negative life events
- What is important to you?, What things in your life do you value?
- How would you describe yourself to another person? (e.g. your background, your values, beliefs and experiences)
- How have your mental health experiences shaped your life?
- What makes your life meaningful?
- What has helped or would help you on your recovery journey?
- What things have had a negative effect on your wellbeing and recovery journey?
- How would you describe your mental health experiences, what have you learned from your experiences?
- I know people respect me when...

3. Visual approach

The third approach to understanding values is to support the person to create life maps. These are based on mind-mapping approaches, and have been developed as person centred planning tools that offer one way of finding out about an individual’s values and treatment preferences. They can be completed in partnership with the individual and can use a variety of different media including photographs, pictures and words. They can also take many forms, including those suggested below.

Some people find having a template a helpful way to start. Template life maps are available on websites listed in Resources.

Common life maps include Relationships, Background, Who am I?, Preferences, Choices, or Respect maps. Some or all of these may be combined in a single map, or the focus may be on just one area or map at a time.

Relationship Map

The relationship map can be divided into sections such as family, friends, community, and mental health staff or providers. People can place pictures or words of individuals who are important or close to them on the map.

Background Map

This map focuses on what life has been like for the person. Many people find it helpful to include a timeline usually from birth to the present time and record events and experiences which they feel have been significant. The timeline may include positive experiences and achievements as well as times of trauma, loss and grief.

Who am I? Map

This map may be used to find out about areas of a person's identity which are important to them and their treatment. Individuals may wish to include sections for ethnicity, gender, culture, spirituality etc. as well as other areas important to them. The VST interview guide may be a useful tool for some people to help identify important areas to include.

Preferences Map

This map describes the person's personal preferences, interests and gifts. It may be linked to many of the other maps, particularly the Background and Who am I? maps. People should be encouraged to include what they like as well as dislike. Although this may be related to mental health services, this doesn't have to be the case.

Choices Map

One way to draw the Choices map is to divide a page into two, with one half representing the decisions the person makes in their life, with the decisions made by other people in the opposite half.

This map could also be used to demonstrate areas in which individuals would like more control over their life, and the barriers they may face (re)gaining this control.

Respect Map

One question that may be included in this map is "I feel respected when...". It may also be used to highlight times when the person has and hasn't felt respected and to illustrate what the person respects and values about themselves and others. Some people may also chose to include barriers to respect in their maps.

Electronic resources

Personal narratives

www.scottishrecovery.net – Details of the narrative project and example narratives, alongside extensive information about ways to promote recovery.

Life maps

www.docstoc.com/docs/947552/FREE-Mind-Map-

Templates – mind mapping templates

www.mindmapinspiration.co.uk – examples of completed mind maps.

References

Bird V, Leamy M, Le Boutillier C, Williams J, Slade M (2011) *REFOCUS: Promoting recovery in community mental health services*, London: Rethink.