THE MAGIC OF PRODUCTION

CO-

Lessons from Australia's first Recovery College and beyond

June 18, 2015

Who am I?

- Kiwi consultant in Melbourne
- Evaluation and service design: mental health and AOD
- Australian project: the Mind Recovery College

Outline

- Snapshot of the Mind Recovery College
- Experiments in co-production

Traditional consultation asks, what can we do for you?

Co-production asks, what can we do together?

What is a Recovery College?

- Hub for knowledge about mental wellbeing
- Anyone can be a student
- Mix of teachers, emphasis on lived experience

When it comes to mental wellbeing, no one has all the answers.

So it helps to share what we know.

Recovery Colleges in Australia

- Mind Recovery College (Victoria & South Australia)
- South Eastern Sydney Recovery College (Sydney)
- Headspace (Melbourne)
- NSW Recovery College (Sydney)
- WA Recovery College (Perth)
- South Australia Local Health Network (Adelaide)

The Mind Recovery College

- Mind Australia commissioned 3-year pilot: from July 2013
- Pop ups across Victoria since Nov 2013
- First dedicated campus in Melbourne opened Aug 2014
- Aim to teach 1000 students in first 3 years

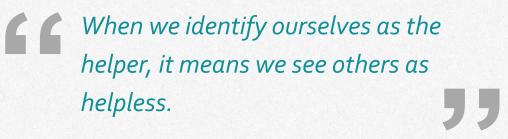
Graham Panther, 2015 6

Why try this in Australia?

Two key drivers:

- Recovery-oriented practice
 - Great! But how do you do that?
- National Disability Insurance Scheme

We often get stuck in our roles, which can be a barrier to understanding



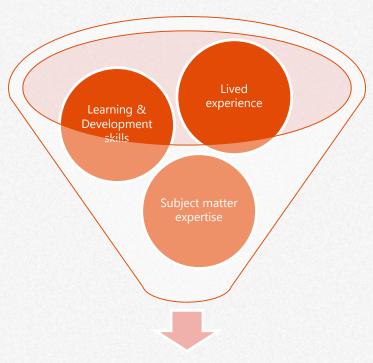
- Pema Chodron

What it looks like



Mind Recovery College - a snapshot

Co-production: the right ingredients



Co-produced course

Panther & Hardy, "The Mind Recovery College: Co-production Model" (2015)

The community is a resource



No service that ignores this resource can be efficient.

- Boyle & Harris (2009)

Co-producing 'medications'

Designing a course about medications

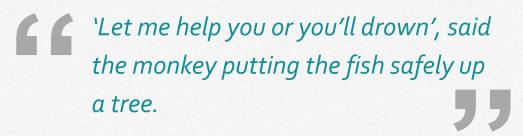
- Appetite for something new
- Need for credibility
- Need for dialogue between stakeholders

Experts have blindspots

Pat Bracken (2014) cites one study which found the following trend regarding adherence to psychiatric drugs.



Why that matters...



- Alan Watts

Co-production workshops

3 workshops, each with a mix of expertise

- 37 people attended overall
- 10 clinicians, including senior figures
- 8 family members
- 1 Mind Board member
- Range of cultural perspectives
- Of these, 24 mentioned having taken psych medications

The workshop process

Introductions

- Whanaungatanga
- Guess the psychiatrist!

Narrative technique

- Professional or personal experience
- Processed into themes and possible lesson content

A new discursive space

"It's like slipping behind the scenes and having the kinds of conversations you'd usually get locked up for."

Workshop participant

Graham Panther, 2015 RED PANTHER | 17

Workshop outcomes

Design outcomes:

Many heads are better than one

Spinoffs:

- Learning outcomes for participants
- Direct result of new discursive space
- Listening in new ways
- Sharing new things e.g. clinicians sharing lived experience

Layers of co-production

Design & Delivery		Expertise involved
Consultation with segmented stakeholder groups, ideas collated and processed later	Professionals deliver initiatives, with some input from clients, e.g. "guest speakers"	MH professionals and people with lived experience
Mix of stakeholders, some processing done in the room	Professionals and clients work together, with clearly defined areas of expertise	MH professionals and people with lived experience
Creation of new discursive spaces; not always clear who has which role	Expertise not tied to specific individuals; people wearing many hats at once	Actively seek any relevant expertise, including L&D develop skills where needed

Co-production in New Zealand?

Co-produced education

- Like Minds, Like Mine
- PeerZone

AOD

- Delivery: clinicians and peers working together
- Co-produced education?
- Co-produced service design?