

# Adapting lived experience training and co-design to the virtual environment



# **Table of Contents**

Executive Summary	3
Roses in the Ocean	3
Bringing lived experience online	3
Purpose	3
Key considerations	4
Our Voice in Action Workshops	5
Peer CARE Companion Workshops	6
Co-design of NSW Safe Haven services	7
Outcomes	9
Key learnings	10
References	12



# **Executive Summary**

#### Roses in the Ocean

Roses in the Ocean is a leading exponent of the value of lived experience expertise in the context of suicide prevention, and the driving force behind and/or collaboratively involved in several ground-breaking initiatives to influence, enhance and inform suicide prevention policy and strategies, health system reform, integration of suicide prevention into workplace health and wellbeing projects, and embedding lived experience through community-based initiatives. We collaborate with government and non-government organisations within the national and international suicide prevention sector to ensure sustainable investment in, and meaningful inclusion of, lived experience expertise in all aspects of suicide prevention.

Roses in the Ocean is committed to developing a quality and sustainable national lived experience workforce by ensuring individuals are provided with best practice training and ongoing professional support. We do this through a range of capacity building workshops and co-design services developed and delivered by people with a lived experience of suicide, as well as a suite of professional development and support services, including a National Mentoring Service and specialist SP Peer Worker training and support services.

### Bringing lived experience online

In 2020, our capacity to deliver face-to-face services was radically reduced due to the public health restrictions associated with the COVID pandemic that included national lockdowns, state border closures, and restrictions on public gatherings. This unique situation required Roses in the Ocean to quickly adapt its programs and services to the online environment in ways that would continue to enable us to set industry-leading standards in terms of lived experience of suicide engagement and capacity building.

#### Purpose

This paper provides an overview of the organisation's experience of adapting our workshops and co-design processes to an online environment, highlighting the specific strengths and limitations of working virtually with people with a lived experience of suicide. The following discussion focuses on three projects that required a pivot from face-to-face to virtual delivery: Our Voice in Action workshops; Peer CARE Companion workshops; and the Codesign of the NSW Ministry of Health's 'Alternatives to ED: Safe Haven' services across all NSW Local Health Districts (LHDs). It highlights some of the key considerations and challenges that arose, the lessons learned throughout this transition from face-to-face to online, as well as the unique opportunities that the move to virtual delivery has provided Roses in the Ocean in terms of its capacity to empower people with a lived experience of suicide to be more actively and meaningfully involved in suicide prevention activities.



# Key considerations

In March 2020, Australia was subject to a national lockdown as a result of the COVID pandemic. This shutdown caused all our planned workshops to be postponed, with no real certainty about when people could be again brought together in a room. As a result, we were required to consider, for the first time, the prospect of virtual delivery and whether it could enable us to continue our work and deliver on key projects. In the first instance we had to determine which workshops and services we were prepared to take online, and which ones face-to-face delivery remained essential. Above all, we had to be confident that we could continue to create a meaningful experience for our participants in a safe, supportive and compassionate environment that is the trademark of all Roses in the Ocean activities.

In consultation with our facilitators, we determined that Our Voice in Action (OVIA) and Peer CARE Companion (PCC) workshops, as well as the co-design processes we lead for the development of suicide prevention services, were potentially amenable to the online environment. Delivery of the OVIA workshop across each Local Health Districts in NSW and the co-design of the Alternatives to ED: Safe Haven project also formed key elements of our contractual obligations to the NSW Ministry of Health as part of the NSW *Towards Zero Suicides* initiatives, and we were required to continue to deliver on this project, irrespective of the public health restrictions associated with COVID-19.

At the same time, the organisation decided that Our Voices of Insight workshop, which involves participants taking a deep dive into their personal lived experience story, was not suitable for online delivery. We determined it was not appropriate for people to do this workshop away from the physical connection of being around fellow participants and our experienced facilitators. The deep connections created in this workshop when delivered face-to-face are of paramount importance to the experience and overall outcomes.

Once it was decided which workshops Roses in the Ocean would take online, we identified a number of key considerations that would help shape our move to online delivery modalities. These included:

- Ensuring equity of power and access for those who would take part in an online workshop or co-design. This is an imperative for all the work we do, but with online delivery we were keenly focused on ensuring we could be inclusive to those with lower digital literacy levels and/or access to technology in their domestic environments, as well as that these domestic contexts provided a safe and private space for people to participate.
- Focusing on building rapport and keeping participants engaged with online content and workshop sessions.



- Establishing a way to effectively translate the emotional connection that is so powerful in our face-to-face workshops.
- Logistics planning for how we will support people emotionally as they talk about their lived experience and hear other lived experience stories, and support individuals with IT issues as they arise.

#### Our Voice in Action Workshops

The OVIA workshop is designed to develop specific skills for impactful engagement in suicide prevention activities and is often the foundational training for people entering the sphere of utilising their lived experience for suicide prevention purposes in an advisory or community action capacity. When delivered face-to-face, it runs over two consecutive days. Our lead facilitators determined how to deliver the various components of content while creating the supportive environment and experience so important to achieving the desired outcomes of OVIA.

The first delivery of OVIA online was planned for participants in the Nepean Blue Mountains region in NSW in June. In the lead up to this first online workshop, the facilitators spent considerable time on the preparation of materials that were fit-for-purpose and practised extensively to work through some of the anticipated challenges with building rapport and trust quickly with participants. One facilitator noted that in a face-to-face workshop, "there are natural ways where rapport and connection can be built seamlessly, such as chatting with participants before the workshop begins, reading body language, and easing the group into the program content." The facilitators appreciated that the online environment would require them to connect instantly with people or risk the participants losing interest or feeling uncomfortable to interact with the facilitators and each other in this unfamiliar environment.

Another facilitator stated that he knew "the emotions attached to the content would be difficult to translate to online delivery." With this as a key consideration, the content was built to engage participants at various contact points and with selected activities that would bring participants into the emotions that are necessary to this workshop, but in a safe and supported way, always guided by the facilitators. A key component of this initial OVIA online structure involved converting the two-day workshop into a two-week program, the rationale being that this would minimise the need for participants to spend large blocks of time in front of a screen, thus reducing screen fatigue and the potential for disengagement.

In the first iteration of the online OVIA workshop, participants engaged with four 1.5-hour Zoom meetings spaced over two weeks, two 1-hour 1-on-1 mentoring sessions with the facilitators, and finally the ability to engage with extra workshop content in their own time via 'Thinkific', an online learning platform. It became quickly apparent, however, that the two-week timeframe was not the ideal format for participants; taking extra time to engage



in workshop content was hard to balance with other life commitments. Further, the emotional momentum which, according to the facilitators, is fundamental to the success of this workshop was missing when the workshop was spread over a longer period. Despite initial hesitations about asking people to be online for longer periods of time, the facilitators reported that there was an appetite for this type of structure. The broader cultural circumstances had resulted in a very rapid adaptation by people everywhere to the online environment, and therefore an increased capacity for working in this new way. As a result, the facilitators revised the content structure to more closely align with the original two-day, face-to-face workshop format, with strategically positioned breaks and plenty of flexibility. These breaks included a 5-minute break every 45 minutes or so, plus lunch and morning and afternoon tea breaks, so that people can stand up, stretch, and walk away from their computer. Also, the workshop content is incredibly varied, with the facilitators bringing not just group discussions and activities into the space, but also videos, time for reflection, and a bit of fun and humour woven throughout the day to lighten the load of what can be emotionally heavy content.

In terms of the benefits of online delivery, one of the workshop facilitators has noted that the virtual environment allows them to respond quickly to the room, noting that he can "bring content in or take content out easily due to online delivery providing the ability to share different resources on the spot." The online version of OVIA has now been delivered to numerous groups across the country over the past few months and has had great success in its ability to bring people together despite the challenges of border closures and restrictions on gatherings. Feedback about this online workshop has been positive; for instance, one participant told us that the online delivery of this workshop was full of "genuine support and a caring approach"; another said they believe that the facilitators "did very well with the online environment."

#### Peer CARE Companion Workshops

Roses in the Ocean's Peer CARE Companion (PCC) workshop is designed to assist people with a lived experience of suicide to understand themselves as valuable contributors to suicide prevention and to appreciate what it takes to walk as a peer alongside someone who needs support. This is an entry level capacity-building workshop for people interested in 'light touch' volunteer or paid peer roles in environments such as Peer Enhancement of existing blended workforce model services, suicide prevention lived experience warm lines, or for volunteer staffing within non-clinical safe spaces.

This workshop was due to be delivered for community services organisation Wellways in Wagga Wagga NSW as part of the Peer Enhancement Model trial of The Way Back Support Service. While initially postponed due to restrictions on gatherings, it became a matter of priority to deliver this to the people who would be working in this new regional service.



Facilitators began to reimagine the workshop for online delivery with a key emphasis on ensuring that the content remained focused on harnessing the existing strengths and wisdom of participants, as well as equity of access for all participants. According to one facilitator: "Everything that was adapted comes back to that principle of equity". The facilitators were particularly sensitive to the fact that, while most of us take for granted our ability to use technology, for many people access to IT and their level of digital literacy can be not only a practical barrier to participation, but an emotional and psychological one.

With this in mind, the PCC workshop was built around the need for simplicity and ease of access. The facilitators chose to use Zoom only, instead of other, more sophisticated online platforms that had the potential to cause anxiety for participants, "breaching the trust of participants in the facilitators and the process and therefore the ability to build rapport". This required significant testing, reworking of content, and practising to ensure content and delivery style were the right fit for online delivery. There was also considerable work done on adapting the structure of the content to mitigate the fatigue associated with working online for extended periods.

The first iteration of the PCC workshop was delivered to a group of four people and was broken up in short blocks of time over the course of three days, in order to ensure sufficient downtime. The content also consisted of self-reflection activities that were built over the three days to give participants the opportunity to take the time both during the workshop and outside of the sessions to reflect on their role of supporting people in distress.

When it came time to deliver the Peer CARE Companion workshop for Wellways in August, one facilitator stated that she "had some insecurities about how it would run online despite the preparation put into it, but it went really well, and the feedback from participants was positive". For the facilitators, there was an instant realisation that conducting a workshop online meant that you could easily see everyone on the screen and gently encourage everyone to contribute without putting people 'on the spot'. According to the facilitators, this helped to ensure that everyone had equal opportunity to engage and created a "more level playing field", with the more outspoken participants being very respectful of more reserved people and ensuring they had 'airtime.' The facilitators also reported this ability to see every person in this direct way also supported instant connection. In terms of opportunities for improvement, feedback from participants included the fact that three days is perhaps too much time commitment and so facilitators are currently adapting the workshop to a two-day offering.

#### Co-design of NSW Safe Haven services

In late 2019, Roses in the Ocean, in partnership with Beacon Strategies, was engaged to lead the co-design process for twenty "Alternatives to ED: Safe Haven" services across all NSW LHDs as part of the NSW Ministry of Health's *Towards Zero Suicides* initiatives. Again,



COVID-19 public health restrictions dictated that Roses in the Ocean pivot quickly and adapt our co-design process to the online environment.

In late April, Roses in the Ocean was approached by the Illawarra Shoalhaven Local Health District to expediate our planned delivery of the co-design in their local Safe Haven in order to complete the process within a tighter than expected deadline. We were therefore required to adapt our generic face-to-face co-design process quickly and smoothly so that it would be ready for an entirely online delivery from mid-May, with a project completion date of late June. As a result, two fundamental challenges faced our team: moving to a virtual delivery process; and delivering the full process in a tighter timeframe than usual.

As our first experience of leading a virtual co-design process, Roses in the Ocean (in consultation with Beacon Strategies) needed to creatively design a customised process that held to the values and principles of genuine co-design. The essence of co-design is to bring a diverse range of stakeholders together and support them to uncover the needs of the people for who the service is being designed, work together to find ways to meet those needs, often fitting within various pre-determined parameters, and to do so in an equitable and empathic way. A primary feature of any effective co-design process is to create an environment in which people feel supported and comfortable to 'speak their truth', and to do so in way that is respected and valued by all other co-design participants. In particular, people with a lived experience of suicidal crisis and/or attempt must be brought into the process in an equitable way that promotes power sharing and collaboration between them and the health professionals who are involved.

To honour these essential elements, efforts were focused on making the virtual co-design experience a simple, supportive and empowering process for all participants. At this early stage of developing this online co-design process, Roses in the Ocean was hesitant to bring people online for many hours at a time, so the process was broken up into short sessions. The final format included 3 x 1 hour focus group conversations with 3 participants each conversation (these conversations were held for separately for lived experience participants and health professionals), 1 x 4hr session with all lived experience participants, 1 x 2hr session with all health professionals, then a final combined session in which we brought together a selected mix of 9 lived experience and health professional participants.

Another key component of this co-design process became the presentation of three live webinars and follow-up surveys, termed "Feedback Loops", in which facilitators presented the outputs from the co-design sessions to co-design participants and the broader community. A feedback survey distributed after these webinars provided an avenue through which we could gain further feedback on the co-design workshop outputs from a wider and more diverse range of community stakeholders. These feedback loops therefore enabled far more people to participate in the co-design process, creating multiple opportunities for



broader consultation, sense checking of outputs captured, as well as a deeper enquiry into key issues.

Roses in the Ocean engages a third-party organisation, Beacon Strategies, to listen and capture all that is shared and to collate and provide thematic analysis of co-design outputs which is then translated by Beacon into a draft service specification report to each LHD. Beacon's role 'in the room' is not only to capture what is spoken, but also to encapsulate the emotional force and meaning behind this. Being present in sessions enables Beacon staff to hear the passion behind a particular point, understand areas of contention or misalignment, and get a good feel for the direction the co-design is heading. However, when small focus group conversations are held with a small group of participants, the potential impact of power resulting from too many facilitators versus participants meant that Beacon Strategies did not participate in Focus Group Conversations, leaving the group to connect with the facilitators only at this early stage in the co-design.

For the first Focus Group conversation sessions run with the lived experience participants in Illawarra Shoalhaven, the facilitators trialed getting participants to use Mural – a digital software platform that allows users to simultaneously write notes on a virtual "board," effectively replacing the use of post-it notes or butcher's paper. In the first iteration of using Mural with this group, one facilitator noted that it was necessary to "drop the use of this more sophisticated software platform when it became apparent it was a barrier to participation, and quickly adapt the process to a simpler approach." This process now involves the co-facilitator taking notes in Mural, with all data being "sense checked" with participants at the end of the Focus Conversation sessions to ensure fidelity to the meaning of what's being said during the session.

Overall, adapting co-design processes to the online environment has enabled Roses in the Ocean to bring people together in ways that we weren't imaginable could before. One participant of the Illawarra Shoalhaven co-design project told us that the being able to do co-design online was more "comfortable .... more manageable ... [and there was] more opportunity to speak up [because] everyone was heard." Participants also told us that "co-design lends itself to being delivered online" and for those who were at their day jobs during the sessions they found it easy "to be at work and log on." Not having to travel long distances for a workshop broke down barriers for participation, and, balanced with our commitment to ensuring the technology was simple and easy for participants to access, made for a co-design service that we've been to continue to rollout across NSW in an online format, reaching more communities in remote areas than ever before.

#### Outcomes

In sum, the challenges presented by the COVID-19 shutdown were also opportunities that Roses in the Ocean took up in order to be more agile and responsive to our mission of



building the capacity of people with lived experience of suicide to use their voices in an active and meaningful way. Bringing our work online has also opened new and exciting pathways, including the possibility of taking our work overseas, as well as rolling out a national delivery of the Peer CARE Companion workshop in order to upskill volunteers to be involved in our SP Peer CARE Connect Warmline service. Roses in the Ocean can also now be flexible in its offerings, including blended delivery modes such as a bespoke co-design that is face-to-face for lived experience participants but online for health professionals who are attending as part of their work commitments.

# Key learnings

Our key learnings from these online delivery experiences to date are:

- 1. Be extra prepared with content online workshops are particularly time sensitive and facilitators need to be prepared for just about anything.
- 2. Facilitators need to plan how they will communicate with each other during the session. For instance, via text message or through private chat on Zoom.
- 3. Provide a dedicated IT support person to each session to assist participants to connect. This means that participants know they have someone they can contact if they experience any difficulties and this can significantly ease any IT anxieties.
- 4. Include an online mentor who can provide extra support for participants should they need it. The role of the mentor is to attend the beginning of each session and to introduce themselves before logging off to let the workshop begin. The online mentor is available during the session should anyone leave the online session or should they ask the facilitators for extra support. Facilitators have the responsibility of contacting the mentor if someone leaves the session and the Mentor calls them immediately.
- 5. Be flexible and prepared to adapt as necessary. Respond to feedback quickly and remove all barriers to participation and engagement.
- 6. Ensure all aspects of the online process are designed with the principle of equity in mind consider not only the practical barriers to participation, but the emotional and psychological ones too.
- 7. Don't assume that face-to-face environments are always superior to virtual ones. For example, digital technology can increase access to participation for people in regions without reliable public transport, or for single parents who can't afford childminding and so need to participate from home.
- 8. Have fun and enjoy the press! Being able to bring people with lived experience together online is a rewarding and empowering experience. If something goes wrong, such as someone's internet drops out, support the person and then just



move on. This light-hearted and supportive approach builds an invaluable connection across computer screens.



## References

- Agency for Clincal Innovation. (2019). Patient experience and consumer engagement A guide to build co-design capability. New South Wales Government.

  <a href="https://www.aci.health.nsw.gov.au/">https://www.aci.health.nsw.gov.au/</a> data/assets/pdf file/0013/502240/Guide-Build-Codesign-Capability.pdf</a>
- Farr, M. (2018). Power dynamics and collaborative mechanisms in co-production and co-design processes. *Critical Social Policy*, *38*(4), 623-644. <a href="https://doi.org/10.1177/0261018317747444">https://doi.org/10.1177/0261018317747444</a>
- Han, J., Torok, M., Gale, N., Wong, Q. J., Werner-Seidler, A., Hetrick, S. E., & Christensen, H. (2019, Oct 4). Use of Web Conferencing Technology for Conducting Online Focus Groups Among Young People With Lived Experience of Suicidal Thoughts: Mixed Methods Research. *JMIR Ment Health*, 6(10), e14191. <a href="https://doi.org/10.2196/14191">https://doi.org/10.2196/14191</a>
- Mental Health Commission of NSW. (2018). Strategic Framework for Suicide Prevention in NSW 2018–2023.

  <a href="https://www.aci.health.nsw.gov.au/">https://www.aci.health.nsw.gov.au/</a> data/assets/pdf file/0013/502240/Guide-Build-Codesign-Capability.pdf</a>
- New South Wales Health. (n.d ). *Towards Zero Suicide*. New South Wales Governement. https://www.health.nsw.gov.au/mentalhealth/Pages/services-towards-zero-suicides.aspx