

Changing the Story I Tell Myself

Visualising an empowering
story for well-being

A Toolkit

Acknowledgements	3
Foreword.....	4
Introduction.....	5
Research Findings	11
Thematic Workshops and Tools Resource	23
Eimear McCartney’s First Day Out in Months - A Creative Resource.....	57
Appendices.....	71

This project and resource were made possible by The Ideas Fund (British Science Association). The Junction has valued The Ideas Fund partnership approach which provided the time, space and support needed to enable the project to be peer-led and responsive to group needs, throughout the process. We are thankful for the support of Jill Cornforth, Paula McCool (DHCNI) and Roisin McLaughlin (NWCN).

The Junction is grateful to Ulster University's Community Outreach Team Anne Mooney and Paul Cassidy for their support, and to our researchers, Philip McDermott, Senior Lecturer in Sociology, for his guidance and to Andrew Maguire, who as Researcher worked closely with the participants, co-designing qualitative and quantitative research, and writing up the findings. We are also deeply grateful to all Facilitators who engaged with us, delivering meaningful workshops including the playwright, Damian Gorman.

The Junction wishes to acknowledge our core funders NI Community Relations Council and Department of Foreign Affairs, Ireland; and the logistical support provided by Kerona McDowell, The Junction's Finance Admin Officer, and the oversight and guidance provided by Helen Henderson (acting CEO) and Ruth Gonsalves Moore, CEO of The Junction.

The Junction wishes to dedicate this Resource to:

The core group of peer participants and professionals leading out on this project, as part of an ongoing journey of learning; namely, Sara Anderson, Catharine Condren, Jacqui Condren, Jennifer Goddard, Tracy Healy, Josh Kuzma, Jotham Jackson, Colleen Maguire, Declan Pickering, Sorcha Shanahan; also Frances Breslin, Chloe Brown, Karen Conlon and Erin Toland.

Maureen Hetherington, who as former CEO of The Junction, as the progenitor of the *Changing The Story I Tell Myself* project and who, since its inception, co-led this project, developing new resource materials alongside Seamus Farrell; their combined peace-building insights, and inclusive and compassionate approach has enabled much community learning and growth.

The Junction, operating out of an integrative peace-building approach acknowledges the social, economic, environmental, political, and psychological dimensions to our evolving and everyday peace needs. Within this, we recognise the importance of mental well-being in our society, as a society emerging from recent conflict in and about Northern Ireland. We have all become more acutely aware of how the journey on the road to peace can become unsettled by macro politics such as Brexit and the resulting start-stop governance, which has been further impacted by the pandemic and in its wake a cost-of-living crisis. The resultant impacts on service delivery and waiting lists compound the many pre-existing social and economic challenges which individuals in Northern Ireland currently face.

The Junction has played a prominent part in the community and voluntary sector's efforts to promote peace in our society. Through its Ethical and Shared Remembering and its Towards Understanding and Healing programmes it has developed approaches which create and hold space for individuals from different backgrounds to hear each other's voices and move towards reconciliation and healing. The Junction believes that the insights gained and approaches it has developed through this work have relevance beyond peace-building, narrowly defined; they are pertinent also to work across the arena of individual and societal well-being.

The *Changing the Story I Tell Myself* project has been informative for all involved, enabling connections around common and shared needs for mental well-being and a yearning for an integrated peaceful society which places well-being at its core. We hope this Resource is helpful to individuals and group leaders in the community sector and those within civic society who wish to enable supportive spaces for mental well-being within our local community. It is our hope that the *Changing the Story I Tell Myself* resource further informs and shapes the psychological-social needs and services required for sustainable peace.

The Junction's Changing the Story I Tell Myself Project Team

1

Changing the Story I Tell Myself:
Visualising an empowering story
for well-being

Introduction

This project began as a process with the bringing together of young adults, all of whom have lived with mental health challenges, to explore the issues that contribute negatively or positively to their mental well-being. However, soon into the project, there was a realisation that there was much to learn from an intergenerational approach and across a range of disciplines to inform and enrich our discussions and information exchanges.

The project was focused on working alongside participants who, because of their own personal lived experiences, have had to pay special attention to their mental health and well-being, and professionals bringing insights from the field of well-being and commitments to personal engagement with mental health and well-being. It was made clear to all from the outset that within this project, all participants are regarded as the experts, and that through a peer enquiry process of sharing and learning together, a resource for mental well-being that could be of help to others struggling with their mental well-being, would be developed. The process of developing the resource might also act as a catalyst to create and develop communities of support and networks, help build relationships and make wider connections, towards fostering positive mental health and well-being.

Research was a core tenet of the project, and with the support of our researchers, considerable attention was given in sessions to determining the questions needing to be asked through SurveyMonkey and One-to-One interviews (see the Research Findings below, and in the Appendices).

There was an aspiration also that the research findings would inform and shape policy and practice within existing health services provision.

APPROACH AND METHODOLOGY:

Given the issues associated with mental well-being, the process of recruiting participants who were prepared to engage in such a sensitive topic, was slow. Word of mouth contacts through already trusted sources helped to form the group.

The trust within the group was gradually built over a series of workshops, gently exploring mental well-being. A two day residential enabled participants to get to know each other and build relationships. In addition, the following experiential workshops were offered:

- Dr Eamonn Baker, Director, Towards Understanding & Healing; delivered training sessions on Developing Facilitation Skills for Sensitive Group Dialogue Work. This was in anticipation of group members subsequently playing a co-facilitation role in offering workshops to their peers using the resources which they had helped to develop.
- Catharine Condren, Holistic Therapist; delivered a ‘sound bath’ experience using crystal bowls as a form of relaxation and reducing stress (developed and included in this resource).
- Dr Philip McDermott, Senior Lecturer in Sociology, Ulster University (one of our researchers); delivered a workshop on *Thinking about Stories and Our well-being* (included in this resource) and a workshop on *De-mystifying Research* to support participants with the research component of the project.
- Dr Jennifer Goddard, Lecturer in Drama, School of Arts & Humanities, Ulster University; delivered a workshop on *Drama and Trauma* (developed into Learning to Re-connect and included in this resource).
- Tracy Healy, Founder of M & T Mindfulness Training; delivered a workshop on *Mindfulness Isn't Difficult: We Just Need to Remember To Do It!* (Developed and included in this resource).
- Sara Anderson, Life Coach & well-being Facilitator; delivered a workshop on *Moving Forward and Being Your Best Self*.
- Maureen Hetherington, Founder of Towards Understanding and Healing; delivered a workshop on *Threading Your Life Story Using Beads* (adapted as a workshop entitled *Changing The Story I Tell Myself: Visualising an Empowering Story of Well-being*).
- Damian Gorman, Poet and Playwright. Delivered workshops exploring everyday realities around well-being in regard to personal agency, writing the script and directing the short creative film resource Eimear McCartney's First Day Out in Months.

WORKSHOP SESSIONS & FINDINGS:

During the sessions there was a great deal of sharing and learning from one another. Topics emerged and were discussed in-depth with participants sharing their own experiences of mental health, followed by discussions and how they coped or did not cope well in particular situations and the issues that continue to need attention. Strategies were also shared on what was helpful to overcome the obstacles to mental well-being.

Notes were taken at each session and fed back to the group as a means of capturing and sharing the learning. The following list is not exhaustive but reflects the breadth and depth and complexities of the group's discussions as to our well-being needs, and it represents some of what our inter-generational peer group considers necessary when looking after our mental well-being:

Journeying Together:

- o Being aware that none of us is alone in mental well-being struggles.*
- o Finding people with whom to share experiences for mutual benefit.*

Emotional Triggers:

- o Anger.*
- o Anxiety.*
- o Addiction.*
- o Isolation and loneliness.*

CHANGING THE STORY I TELL MYSELF:

- o Bringing balance to my life.*
- o Changing the mindset: healing the mind and healing the body.*
- o Dealing with low self-esteem and lack of confidence.*
- o Breaking negative patterns.*
- o Believing that I am worthy, and I am valued.*

Trauma:

- o Finding coping mechanisms for when trauma is triggered.*
- o Reconnecting with ourselves and others.*

Learning to Love Ourselves

- o Letting go: When you name it you can tame it!*
- o Separating facts from fiction.*

This thematic and peer-led process of enquiry alongside the formal research, the key findings of which are set out next, have been synthesised to create this new Toolkit, made up of Thematic Workshops and a Tools Resource which includes one creative film-based resource and a conversation starter.

2

Changing the Story I Tell Myself:
Visualising an empowering story
for well-being

Research Findings

Executive Summary

In synthesising the key findings of this research, the data gathered is a combination of qualitative and quantitative data – making it a mixed methods approach. The qualitative dimension was gathered by members of the group through 26 one-to-one semi-structured interviews that were recorded and transcribed. This transcribed data was coded using *NVivo* data analysis software to identify the dominant themes. Quantitative data was gathered via an online survey that was shared by email using *SurveyMonkey*, which had a total of 166 responses. The data from the online survey can be explored in the accompanying report in the form of tables and graphs (in the Appendices). In terms of demographics, the quantitative data shows that most respondents were female (82%) and from the Derry/Strabane council area (52%), with just over half in the 35-54 age bracket.

The data points to adequate housing and physical health as particularly important factors in relation to mental well-being, as is being treated fairly by society and not experiencing discrimination. The survey also tallies with the qualitative interview data as regards family and friends being vital components in the promotion of positive mental well-being. Additionally, the survey data reveals that accessing support, being able to afford basic goods, and connecting with others were deemed very important. What individuals found to be most helpful were alternative therapies, counselling, gym/sports club, or community groups/voluntary organisations. As indicated in the quantitative research, waiting lists for medical help featured as the major barrier to accessing support, with time and money also playing a significant part.

Overall, the quantitative survey data correlates with much of what was gathered via one-to-one interviews. From the qualitative research, the key findings are as follows:

- Firstly, there are many types of help and support that individuals can avail of when experiencing poor mental well-being. The research highlighted the importance of self-help and alternative therapies that start with the individual, thus creating a greater sense of empowerment. The various strategies/techniques, or forms of *useful support*, that this research has highlighted could be promoted and taught to individuals in need, thus reducing the pressure on other services.
- Although help is available from a wide range of sources, the research also points to a *lack of help*, which suggests that health professionals need more training and awareness in helping individuals struggling with their mental well-being.

- Additionally, the perceptions of wider society toward mental well-being need improvement through a variety of means, which might include initiatives from charities, health agencies, and community-based initiatives.
- More importantly, it is abundantly evident that health care provision is lacking in many regards in terms of waiting lists and the amount of time it takes to receive timely care and advice. This is something that can only be addressed through greater investment from statutory provision – ultimately, more support should be made available. This is particularly relevant in terms of an over-reliance on medication as a treatment method. Although medication has its place and is useful in many circumstances, other avenues of support and advice should be widely available to individuals seeking help.
- Overall, people want to feel a sense of belonging through sharing their experiences and learning from others who have had similar experiences to them, which can be achieved through groups of like-minded individuals working toward a shared goal. What the research clearly shows is that alternative and comprehensive support, through the likes of ‘communities of support’ and building networks can save so much time and resources. This need not be expensive, but it can mitigate suffering – more importantly, it can save lives.

Key Themes (emerging from the qualitative research)

Useful Support

A strong theme that emerged in the qualitative research was what specific forms of support individuals found most helpful in terms of promoting their mental well-being. Individuals pointed to group work as an effective type of support, as talking about their issues in a group setting “with people who understand, helps a lot more.” A group dynamic through the likes of group counselling was noted as a positive means of support as it enabled open and shared discussions with people facing similar issues – in other words, the opportunity for “sharing the knowledge of my own experiences.” For some, it was simply “other human contact.” Others stressed that talking/connecting “with a group or with others who have experienced similar things” was particularly useful, and that “Being able to talk openly about what I am feeling, what I am thinking, what I am scared about”; also simply communicating with others they trusted was “amazing and mind-blowing.”

People pointed to the benefits of talking to like-minded people who have shared experiences “because they know what they are talking about.” Participants also pointed to digital solutions such as apps, websites and podcasts proving to be particularly useful due to their overall

accessibility. At another level, family, friends, and work colleagues were also noted as positive elements in mental well-being as they are often the closest to hand when an individual needs help. What also came across in the research was the utility of alternative support via holistic approaches (sometimes self-taught) such as mindfulness, Lucia Light treatment, keeping a diary, hypnotherapy, diet, reflexology, nature walks, general self-care, with the arts in general (art therapy) noted as being “the things that inspire the human soul.” More traditional avenues of support such as counselling/talking therapy (sometimes paid for privately), specifically cognitive behavioural therapy, was highlighted as being an exceptionally effective treatment. For instance, one individual noted that CBT helped them to “understand what was going on chemically” in their brain and why they had certain feelings.

Although medication has been largely described in negative terms, a combination of the right medication and counselling was described as “most helpful” for two respondents. Other forms of useful support came from various organisations/charities and programmes such as: Well Women’s Centre, Samaritans, Salvation Army, Holywell Trust, various community centres, Communities in Transformation program, HURT, and Youth Life. Several interviewees also pointed to the invaluable role of their faith and associated organisations in promoting their well-being, when seeking out help.

Types of Help

In terms of the types of support that respondents availed of, their GP/doctor features high. But most popular was counselling, which was utilised both in person and remotely (via an App or by phone). Some were even offered counselling through their work, whilst private counselling also featured as an option for some. General mental well-being apps, podcasts, and various online resources were also types of support that individuals used. In terms of counselling, respondents highlighted the various forms of therapy that they used, which included group counselling, grief counselling/talking therapy, as well as CBT. Others forms of help were sought from charitable and independent organisations such as the Samaritans, local community centres, Women’s Centre, as well as relying on one’s faith and/or associated organisations such as the Salvation Army. Help was also sought from social workers, mental health practitioners, local mental health teams, CAMHS, Grangewood, psychologists, and Communities in Transformation. Additionally, individuals also pointed to the help they received from family and friends, as well as availing of self-help via exercise, yoga, mindfulness, reflexology - with hypnotherapy noted as an alternative option to more traditional methods of support.

Barriers

A dominant and important theme that emerged from the qualitative interviews was that of barriers. Most respondents pointed to a wide range of barriers that either prevented or restricted access to support. One such barrier in accessing support that stands out is that of excessive waiting times/lists to see the likes of GPs, counsellors etc. Additionally, respondents pointed to a lack of flexibility that often made it difficult (sometimes impossible) to attend appointments for support due to work and/or family commitments, which resulted in individuals having to decline support, or in the words of one individual: “I had to keep putting it off and putting it off.” Securing an appointment with a health professional has also been shown to be a barrier through not being able to get through on the phone to GP surgeries. Getting through to a surgery via telephone presented a major obstacle in that people reported having to call surgeries repeatedly over a prolonged period of time early in the morning in the hope of securing an appointment, with several stating that it was “impossible to get through.” Even when appointments with a GP were secured, a recurring theme was one of being dismissed and not being listened to. That said, even though there is a significant level of frustration in seeking help, people appreciated the strain that many health professionals faced in terms of lack of staff, funding, and resources - as one respondent put it, “the NHS just doesn’t have the staff to cope with the demand.” Stemming from this, was the issue of resorting to private professional support, which equated to the very real barrier of financial wherewithal.

For many, resorting to support outside of the NHS was considered, but paying for the likes of private counselling was simply beyond their means. Even for the few that could initially afford private support, they pointed to the cost eventually becoming a barrier with one respondent stating that “whenever I did the private counselling, I think it started off at £30, and then I think the last ones I went to were £40 an hour.” However, one of the most profound barriers to accessing mental well-being support is that surrounding perceptions. For instance, the research indicated that many felt as though they were being judged by health professionals, which compounded what some considered to be a sense of shame, stigma and embarrassment associated with their condition, culminating in a lack of self-worth. Covid also presented barriers in many forms, which appears to have continued to the present. Other individuals felt that their physical well-being took precedence over their mental well-being, with health professionals primarily seeking to treat the former with little or no consideration of the latter.

Lack of Help

Barriers to and gaps in support aside, a strong theme that emerged in the qualitative research was that of a lack of help. Respondents indicated a lack of empathy from doctors who “weren’t really very helpful at all” or “That’s the main problem in my mind, that they don’t care,” which also extends to mental health professionals who “wouldn’t be understanding, friendly or have empathy.” People highlighted that when they sought help from GPs, they often found them to be dismissive, and felt as though they were not being taken seriously – almost feeling as though they were a “botheration.” Some remarked that doctors were simply “just going to hand you out tablets” or “just pass you on to somebody else ... dismiss you like your feelings don’t matter or you are lying or something.” Another theme that emerges is in relation to talking therapy, whereby individuals expressed their discontent at having discussed traumatic events with a counsellor for an hour, only to be “then ushered out the door, [and] just left to deal with it”. One respondent asserted that “going over the trauma again and again can be quite harmful”. Therefore, for certain individuals, therapy does not work. Equally, where talking therapy was beneficial, some indicated that it ended too soon with a lack of follow on support, with a certain ambivalence toward counselling in that it can be either beneficial or detrimental, which is dependent “on how quickly you receive counselling, and also if you connect with the counsellor.” In response to what types of support they had received, some respondents stated that they had not received any support whatsoever.

Reasons

What emerges from the qualitative research are the all important reasons behind people seeking help in the first place. And what are these reasons? Stress and anxiety feature prominently in the research, with depression also forming part of it. Stress may stem from a variety of sources such as work or study, or even post-natal depression. Respondents also highlighted trauma(s) such as the death of a loved one, as a major contributor to poor mental well-being. Many others referred to emotional pain, a lack of self-confidence, feeling overwhelmed, and panic disorder as the reasons for their seeking out help. For others, it was eating disorders, low mood, unable to function, sleeping issues, self-harming, and having suicidal thoughts.

Time Scales

From the research, participants indicated that waiting times/lists for support were simply too long. Therefore, time scales presented itself as an important theme from the qualitative interviews. For instance, participants typically waited anywhere from 6-14 months before receiving a 'talking therapy', whilst others waited more than eighteen months. For some, the length of time to see a health professional was a relatively short eight weeks, but even this length of time was too long "when you are suffering". Even getting through to the GP surgery proved a challenge with people having to call repeatedly over a prolonged period of time, with one individual stating that "it took 230 calls before I actually got through to speak to somebody"; another commented that it took repeated calling over a three-day period to get through to the mental health nurse.

Gaps in Support

What can be ascertained from the one-to-one interviews is that more support is required. It needs to be more varied and more prompt with greater connectivity. Interviewees pointed to a lack of early intervention services and resources more generally – more funding needs to be made available. Respondents noted a major time gap between GP referral and seeing other healthcare professionals such as counselling, with a further gap emerging when such support ended. Quite often, there are time limits on support which might have a restriction on the number and/or duration of support sessions, with clear gaps during weekends and bank holidays etc. It also emerged that help should be available later in the evening as many services are only available from 9am to 3pm – i.e., "somewhere to be able to go to meet other people." As one participant noted: "It's nearly impossible to get the help you need, when you need it."

Alarminglly some participants pointed to there being no support in place whatsoever. Respondents also pointed to a lack of creativity in terms of support; what is needed is a more holistic approach, which should see "all of the person, their history, their circumstances, their coping mechanisms"; support should be offered to family members who support loved ones struggling with their mental health. Gaps were also identified in respect of the likes of holistic treatments that incorporate creativity, e.g. "arts and crafts, drama, yoga, for example." Connected to this, people highlighted that the health care system is primarily concerned with the physical above the mental side of well-being. Several respondents also point to a lack of group counselling/focus groups that might also be age or gender specific. An interesting

area that emerges in the research is that of compassion, with respondents pointing to a lack of empathy and understanding and feeling as though they are forwarded on by health professionals who clearly lack training “without much consideration”.

Medication

What came across in the qualitative research was a clear indication of how medication is utilised as a form of treatment. The over-riding theme was one of medication having a negative impact on their general health. Respondents pointed to being put on anti-depressants and anti-anxiety medication, which resulted in negative side effects such as hair loss, feeling numb, and even having suicidal thoughts. Many believe that medication was the first port of call for GPs in their treatment options, as opposed to exploring other alternatives; they felt as though they were simply being medicated and sent away. In the words of one individual “doctors just giving you medication and sending you away is hugely harmful”, and “when you’re going to the doctors, they’re just going to hand you out tablets”. Others pointed to addiction issues relating to medication, feeling more depressed, and that it “caused more harm than good,” with medications being increased over time when symptoms were not alleviated (one person even opted to self-medicate).

Tools for Coping

There was a wide array of responses pertaining to the theme of tools for coping. Respondents pointed to a plethora of tools and techniques (strategies) that enabled them to cope better. For instance, talking to, and relying upon, supportive family and friends was key. Additionally, exercise and sport were noted as a particularly important part of coping. For instance, respondents stressed the importance of getting “out of the house” to experience nature through the likes of walking – for example in the forest or on the beach, often utilising music to enhance the experience. This also extended to gardening, fishing, or the simple enjoyment gained from walking one’s dog. Exercise can also be indoors via yoga or using the gym. All of the above, as one participant noted, allows you to “refocus on things that I do enjoy.” Closely related to exercise is meditation, followed by the meditative aspects of yoga (although an exercise in itself). People pointed to meditation as the action of “time for yourself,” which also branches into other self-care practices such as: reflexology, Reiki, light/sound therapy, and other holistic treatments. Overall, meditation is highlighted as something that facilitates relaxation, mindfulness, gratitude, and appreciation.

The Arts are also highlighted as another tool in the arsenal of coping. People mentioned the importance of “having a creative outlet” and the positive and powerful impact that this can have on well-being. This included a wide range of artistic endeavours such as music, painting, theatre, creative writing – whether as a participant or not – they are “things that inspire the human soul.” Learning and self-education were also noted as essential elements in coping. For instance, participants stressed the importance of learning new skills, acquiring knowledge via the likes of short courses. Reading, whether for learning or as a pastime, was seen as containing many positive elements. Ultimately, individuals noted the importance of learning about themselves and how to improve their mental well-being through diverse types of education through formal and informal courses (i.e., post-graduate qualification, or short courses on self-esteem).

As something that compliments all the above, the importance of maintaining a routine and integrating healthy habits came across. Having sufficient sleep was pinpointed as critical in this regard, which helps the individual to maintain overall health and focus for other aspects of their day-to-day life.

Individuals also pointed to the inherent value of talking openly with others and sharing their knowledge/experiences whereby a “problem shared is a problem halved.” The opportunity to connect with groups and talk openly, undertaking group courses, and the ability to “talk or connect with a group or with others who have experienced similar things or different things and talk about it.” Essentially, human contact was deemed important.

Other strategies that individuals highlighted were self-support strategies such as writing things down in a diary, relying on faith-based organisations and associated networks, and also the importance of being able to “master acceptance – acceptance of the situation” and finding solutions to problems, rather than wishing they did not exist with a view to “changing what you can and leave alone what you can’t.”

Hope & Joy

In reference to the questions of what brings joy, and hope for the future, respondents clearly indicated that family brought them most joy: “There is always hope. Without hope we have nothing.” This was particularly the case for those who have children and the joy this brings them. They take joy from the fact that their children are happy and healthy, which also brings them hope for the future or as one person put it: “I’ve just recently found out that everything brings me joy.” Wider family networks and good relationships also featured prominently

in relation to joy and the security this brings, which also includes close friendships and associated bonds. Apart from family and friends, another theme that emerged was concerned with taking joy “from the simple things in life” – the trivial things in life in tandem with practicing gratitude. Respondents talked about joy in nature, pets, faith/religion, food, the sun, exercise, and helping other people. They also spoke of tranquility and time alone – one’s own space; but also, being creative and exploring the arts in its many forms. Networking and connecting with people also brought a significant level of joy for individuals. In doing so, it helped them develop more hope for the future – especially knowing that there are others in similar situations that are improving and “more comfortable not being okay all the time or are not pretending to be okay.”

Thoughts & Feelings

Another theme that emerged in the qualitative research was that of thoughts and feelings about their mental well-being. Individuals highlighted a wide range of feelings and thoughts. This included experiencing feeling anxious and depressed and poor self-esteem. With poor mental well-being individuals reported having suicidal thoughts and being at their lowest, which extended to feelings of panic and being out of control. Loneliness and isolation were also highlighted, as well as feeling they had let other people down, feeling empty and unable to cope.

How People are Treated

In terms of how individuals who suffer with poor mental-being are treated by wider society, the consensus was one of negativity. Individuals responded that they felt as though they were “treated like outcasts”; this is reflective of the lack of knowledge and understanding about mental health. Participants highlighted the levels of stigma attached to such conditions and that people needed to be “treated with more respect and more dignity.” People also pointed to a lack of empathy and that more care is needed on the part of society. Poor mental well-being was also described as being largely hidden due to stigma and societal judgement, and that people need a stronger voice, so that: “they are actually heard and seen.”

Trust

Another emergent theme was that of trust. Individuals reported that they generally did not trust people and organisations apart from those closest to them. This stemmed from previous experiences that diminished their ability to trust people they did not know. To build trust,

respondents highlighted the need for health care professionals to be transparent and honest; to show that they cared, and that confidentiality would be maintained. Trust can be built on developing a positive relationship over time with people who want to be there for you, who are interested, and listen to you – delivering on what they promise. Trust also emanated from a person-centred approach and with people with shared experiences and commonality so that a rapport can be established.

Value & Belonging

When asked about their sense of value and belonging to society, interviewees overwhelmingly pointed to not feeling valued by society, which results in a lack of belonging. For instance, one participant clearly demonstrates this point in stating that they feel “like a drain on society, and it feels like I’ve been conditioned to feel that way.” Added to this, several felt as though they did not feel valued at all by society, with one person commenting that they want to live in a society where they feel comfortable whereby “people with poor mental well-being shouldn’t be viewed as an inconvenience.” Some pointed to society as being selfish and they only felt value and belonging amongst family and close friends. The point was made that people should not need to be validated by society because everyone has value, regardless of their circumstances. Some questioned if it was their fault they were not valued; lack of employment played a significant part in such feelings.

3

Changing the Story I Tell Myself:
Visualising an empowering story
for well-being

Research Findings

Written by Maureen Hetherington

with three workshops developed and written
(in order of appearance) by
Dr Jennifer Goddard
Tracy Healy
Catharine Condren

HOW TO USE THIS RESOURCE:

This resource is for anyone who is interested in mental well-being. Mental well-being is defined as: *A state of emotional and psychological health characterized by a person's ability to cope with life's challenges, maintain positive relationships, experience a sense of purpose, and enjoy a good overall quality of life.*

The resource has been developed to stimulate discourse and exchange of ideas concerning positive mental well-being. Specifically, it is intended for use in workshops aimed at creating opportunities for others to develop ways to improve their mental well-being. The Toolkit is not designed as educative instruction, but rather as a means of creating '*communities of support*', and supportive spaces within community, whereby people can, perhaps for the first time, share their story and the life experiences that continue to have an impact on their mental well-being.

By sharing and listening to other experiences, participants may draw on other perspectives to help promote a healthy mindset. Core to a healthy mindset is the ability to '*change from a negative story that we tell ourselves to a positive story of ourselves*'.

APPROACH AND METHODOLOGY

Given the sensitive nature of the themes/topics it is recommended that two co-facilitators deliver the workshops.

At the beginning of the first session facilitators will:

- Set parameters: confirm the number of sessions to be delivered, the length of each session and the format for each session.
- Begin the process of building trust between the facilitators and the participants, enabling the participants to get to know each other (through Icebreakers).
- Negotiate a '*Group Agreement*' or '*Group Promise*' on how participants will conduct themselves during each session.

Each Session will comprise of:

- Icebreakers* - exercises at the beginning of each session to aid participants to switch off from other realities for the duration of the session, and to relax.
- An objective statement – setting out the purpose of the workshop.
- Information - inputs by facilitator.
- Discussion - about the theme, in large and/or small groups.

Thematic Workshops and Tools

- Feedback - feedback and general discussion in the large group.
- Plenary – reflections on the learning and moving forward.
- Debrief – taking time to ensure everyone is okay before closing.
- Support – discussing/providing support needed by anyone.
- Signposting – providing any other relevant mental well-being information.
- Close.

**Icebreakers are included in the Appendices.*

The following are our 9 WORKSHOP THEMES:

1. **Nurturing Mental Well-Being: Taking Care of Ourselves.**
2. **Isolation and Loneliness.**
3. **Addressing Anxiety and Addiction.**
4. **Understanding and Managing Anger and Conflict.**
5. **Bringing Balance to My Life: Cultivating Mental Well-Being.**
6. **Drama and Trauma: Learning to Re-Connect.**
7. **Changing The Story I Tell Myself: Visualising an Empowering Story of Well-Being.**
8. **Mindfulness isn't difficult to do, we just need to remember to do it.**
9. **Reducing Stress through Sound.**



Nurturing mental well-being: Taking care of ourselves

Welcome and Icebreaker.

Group Guidance. Always remember:

- *Share only what you are comfortable to share.*
- *You might take a risk to share what might be useful for others to understand you better.*
- *Be clear with yourself as to what you do not want to share, at this moment.*

Workshop Objective/s:

This workshop is going to explore mental well-being; what mental well-being means to us, and what we can learn from each other in looking after our mental well-being.

Introduction to Mental Well-being:

- Mental well-being is a process that requires our ongoing attention. Mental well-being is of paramount importance; it significantly affects our overall quality of life.
- You might ask yourself, what is the difference between mental health and mental well-being? Mental health addresses the absence of mental illnesses, mental well-being focuses on fostering positive mental functioning, personal growth, and overall life satisfaction.

Large group:

Facilitate a group discussion on identifying common challenges faced by participants such as stress, conflict, environment (home/work), past experiences, traumatic events, coping financially, physically etc.

Include the misconceptions and stigma surrounding mental health issues and how they affect the individual.

Small groups:

- What is the significance and/or importance of looking after our mental well-being, and what works for you?

Feedback (in large group): Recording on a flipchart, the facilitator leads on a discussion on the importance of taking care of our mental well-being and the effects and impacts of mental well-being in other areas of our lives.



Discuss how being able to maintain Emotional Balance can help us achieve Mental well-being. It leads to increased resilience and improved emotional stability. It allows us to navigate challenges, setbacks, and stress with greater ease.

Discuss how Mental well-being can Improve Physical Health. Mental well-being has a direct impact on our physical health. Poor mental health can contribute to various physical ailments, while good mental well-being promotes better immune function, higher energy levels, and overall vitality.

Discuss how Mental well-being can help our Relationships and Social Connections. Mental well-being plays a vital role in forming and maintaining healthy relationships. When we take care of our mental health, we are better equipped to communicate, empathize, and build meaningful connections with others.

Discuss how Mental well-being supports Productivity and Performance. A healthy mind is essential for optimal productivity and performance. When our mental well-being is prioritized, we experience increased focus, creativity, and motivation, leading to improved performance in various aspects of life, including work, academics, and personal pursuits.

Discuss how Mental well-being encourages Self-Care and Self-Compassion. It involves recognising our own needs, setting boundaries, and engaging in activities that promote self-nurturing, leading to a greater sense of self-worth and fulfilment.

Discuss how Mental well-being helps in the Prevention of Mental Health Disorders. Taking care of our mental well-being acts as a preventive measure against mental health disorders. By adopting healthy coping strategies, stress management techniques, and self-care practices, we can reduce the risk of developing mental health conditions.

Discuss how Mental well-being can bring about Enhanced Resilience. Nurturing mental well-being fosters resilience, enabling us to bounce back from setbacks, adapt to change, and cope with adversity. It equips us with the necessary tools to face life's challenges with strength and determination.

Discuss how Mental well-being can Improve Our Quality of Life. Ultimately, mental well-being contributes to an overall higher quality of life. It allows us to experience greater happiness, fulfilment, and satisfaction, enabling us to lead a meaningful and purposeful existence.



Feedback.

Debrief. Before closing, it is vitally important to ensure that everyone is okay before leaving.

Support: The Facilitator may wish to discuss with the group if the group would like to create a buddy system within the group, where everyone has a buddy. Buddies could exchange emails and/or telephone numbers if desired. The idea of the buddy is that everyone has someone they may reach out to when they feel they need someone to talk to, after the workshop. This is entirely voluntary.

Signposting: This is an opportunity for the Facilitator to provide the name or contact details of any local support organisation relevant to mental well-being.

Close.



Nurturing mental well-being: Taking care of ourselves **Self-Care Practices**

Emotional Self-Care: There are different techniques for managing emotions, such as journaling, mindfulness practice, breathing exercises and other relaxation techniques.

Physical Self-Care: The importance of physical health on mental well-being, such as exercise, nutrition and sleep; and creating routines around these which can be incorporated into your every-day life.

Social Self-Care: The importance of social connections and relationships. Healthy communication and boundaries, developing strategies for building and maintaining a support network for yourself.

Mental Stimulation and Growth: Engage in activities that challenge and stimulate the mind. There are many benefits from learning new skills or pursuing hobbies. Seek out resources for accessing educational and personal development opportunities.



Isolation and Loneliness

Welcome and Icebreaker.

Group Guidance. Always remember:

- *Share only what you are comfortable to share.*
- *You might take a risk to share what might be useful for others to understand you better.*
- *Be clear with yourself as to what you do not want to share, at this moment.*

Workshop Objective/s: This workshop explores isolation and loneliness, which can be major contributing factors to poor mental well-being.

- The Facilitator reads out a short story; asking the group to listen to the experience of one person describing the impact of isolation and loneliness on their life.

Story (read aloud/PPT/handout):

“In my life, there were many times when I felt down. It wasn’t anything except that I couldn’t make friends easily which made me feel excluded. This also impacted on my confidence and the more I kept to myself the lonelier I would feel. It became a vicious circle and certainly made an impact on me as a person, both mentally and I think physically as well.”

Large group:

(On a Flipchart): Identify the issues that relate to the theme of ‘isolation and loneliness’, including impact, for example:

- Feelings of not belonging, of being different and all alone.
- Diminished or shattered self-confidence.
- Falling deeper into a cycle and finding it difficult to move out of it.
- Mentally and physically debilitating.

Large Group:

- Is the story and the related issues or impacts familiar to you?
- What resonates with you the most?
- What is missing in your view/experience?



Small Groups:

There is now opportunity, in smaller groups, for individuals to share around their own personal lived experience of isolation and loneliness. Always keep in mind that there is no pressure on individuals to share anything they do not wish to share currently.

Feedback: Offer time for general discussion (only sharing what you wish to share).

Small Groups:

- Has this engagement with the theme of isolation and loneliness helped you to begin to find release from its impact?
- Arising from your engagement with the theme of isolation and loneliness, what steps or actions might you recommend to others as they struggle to find release from its impact upon them?

Plenary:

- From what has been said earlier about possible approaches to dealing with taking care of our mental well-being, do you think any of these steps, actions or ideas might be useful for you?

Feedback.

Debrief.

Support and signposting.

Close.



Addressing Anxiety and Addiction

Welcome and Icebreaker.

Group Guidance. Always remember:

- *Share only what you are comfortable to share.*
- *You might take a risk to share what might be useful for others to understand you better.*
- *Be clear with yourself as to what you do not want to share, at this moment.*

Workshop objective/s:

The workshop aims to provide participants with the opportunity to explore anxiety and addiction in a safe, non-judgemental environment. It aims to empower participants to better understand anxiety and addiction and its impact on mental well-being.

This workshop is in two parts: i) Understanding Anxiety and ii) Understanding Addiction:

Introduction to Understanding Anxiety

- Anxiety is a natural and common emotional response triggered by feelings of fear, unease, or worry. It is a normal part of life and can be experienced in various situations, such as before a test, job interview, or important event. However, when anxiety becomes excessive, persistent, and interferes with daily functioning, anxiety can have a significant impact on our mental well-being, leading to various emotional, cognitive, and physical symptoms.

Small groups:

- What are the ways in which anxiety affects your life, such as emotionally feeling fear and having negative thoughts etc., or physically creating a shortness of breath, sweating, shaking etc.?
- How does anxiety impact on your daily life, such as creating difficulties in maintaining relationships, leading to avoidance of certain situations or places that trigger anxiety, sleep disturbance etc.?



FEEDBACK (in large group):

- What coping strategies have you found to be effective in dealing with anxiety e.g., breathing exercises, mindfulness etc.?

Introduction to Understanding Addiction

- Addiction is a complex condition which drives a person to seek relief in substances or behaviours, despite negative consequences. It involves a persistent craving and dependence on the substance or behaviour, leading to a loss of control over one's actions.
- Addiction can affect various aspects of a person's life including physical health, mental well-being, relationships, and overall functioning. It is considered a chronic condition that requires professional treatment and ongoing support for recovery.

Small Groups:

- What are the common types of addiction?
- What treatments are available to deal with addiction (informal and formal)?

Feedback (in Large Group)/Plenary:

- Are there any participants willing to share their experiences and concerns?
- What coping strategies are available to help those who have an addiction or are vulnerable to addiction?
- Can we break the cycles of addiction?

Debrief.

Support and signposting.

Close.



Connection between Anxiety and Addiction

The connection between anxiety and addiction is complex and often intertwined. Here are some key aspects of their relationship:

Self-Medication: Individuals with anxiety may turn to substances or addictive behaviours to self-medicate and alleviate their anxiety symptoms temporarily. Drugs, alcohol, or certain behaviours like gambling or compulsive shopping can provide a temporary escape or relief from anxiety.

Dual Diagnosis: Anxiety disorders and addiction frequently co-occur, meaning they occur simultaneously in an individual. This is referred to as a dual diagnosis or a comorbidity. The presence of anxiety can increase the vulnerability to develop an addiction, and vice versa.

Shared Neurochemical Pathways: Anxiety and addiction involve similar neurochemical pathways in the brain. Both conditions are associated with dysregulation of neurotransmitters, such as dopamine, serotonin, and gamma-aminobutyric acid (GABA). The use of substances, or engaging in addictive behaviours, can temporarily alter these neurotransmitter levels and provide a sense of relief or pleasure.

Cycle of Escalation: Anxiety and addiction can create a self-perpetuating cycle. Anxiety may trigger substance use or addictive behaviours as a coping mechanism, providing temporary relief. However, over time, these substances or behaviours can worsen anxiety symptoms and lead to increased dependence or addiction, creating a vicious cycle.

Increased Risk Factors: Individuals with anxiety disorders may be at a higher risk of developing addiction due to various factors, such as genetic predisposition, coping mechanisms, and environmental factors. The presence of anxiety can also make it more challenging to quit or recover from addiction.

Co-occurring Treatment: Addressing both anxiety and addiction concurrently is crucial for successful recovery. Treating one condition without considering the other may lead to relapse or incomplete recovery. Integrated treatment approaches that target both anxiety and addiction simultaneously have shown better outcomes.

It's important to note that not everyone with anxiety develops an addiction, and not all individuals with addiction have anxiety. However, the connection between the two highlights the importance of comprehensive assessment, tailored treatment plans and ongoing support to address both conditions effectively. Seeking professional help from mental health and addiction specialists is crucial for proper diagnosis and treatment.



Understanding and Managing Anger and Conflict

Welcome and Icebreaker.

Group guidance. Always remember:

- *Share only what you are comfortable to share.*
- *You might take a risk to share what might be useful for others to understand you better.*
- *Be clear with yourself as to what you do not want to share, at this moment.*

Workshop Objective/s:

This workshop goal is to explore anger and conflict, to understand the differences and learn more about managing anger and conflict.

Large group: Discuss:

- What is the difference between anger and conflict? Is there a difference?

Introduction to Understanding Anger and Conflict

- Anger and conflict are natural and inevitable parts of human relationships; we are specifically concerned here with people who are struggling with the impact on their mental well-being.
- Anger is an emotional reaction to something that is (or is perceived to be) wrong or unfair. It can motivate us to express our feelings in actions or words.
- Conflict is a disagreement or clash between people with different opinions, interests, or goals. Conflict can be constructive or destructive, depending on how it is handled.
- Managing anger and conflict well involves recognizing and regulating your own emotions, communicating effectively with others, and finding positive and respectful ways to resolve differences.

Small groups:

- How do you react when you feel anger?
- How do you behave when you find yourself in conflict with others?
- Why do we need to pay attention to our feelings and actions for our mental well-being?



Feedback (in large group).

Large Group: Discuss the Handout

- Are any of the listed strategies familiar to you when confronting anger and/or conflict?
- What works best for you? What is the most difficult coping strategy? Do you have any other ideas?
- Are there any of these you think might be useful in supporting you, especially when managing your mental well-being?

Debrief.

Support and signposting.

Close.



Strategies for Managing Anger and Conflict

Identify and avoid your triggers. Knowing what situations or topics make you angry can help you avoid them or prepare for them in advance. For example, if you get angry when someone criticizes your work, you can try to avoid working with that person or ask for feedback in a more constructive way.

Know your body. Pay attention to the physical signs of anger, such as clenched jaw, racing heartbeat, tight shoulders, shallow breathing, sweating, or shaking. These signs can alert you that you need to calm down before you say or do something you might regret.

Breathe. Taking slow and deep breaths can help you relax and lower your blood pressure and heart rate. Breathing can also give you time to think before you react.

Take a time-out. Sometimes, the best way to deal with anger and conflict is to step away from the situation for a while. This can help you cool off, gain perspective, and think of possible solutions. You can take a break by drinking some water, going to the bathroom, taking a walk, or doing something else that distracts you from the problem.

Listen carefully. Active listening can improve communication and understanding between you and the other person. Active listening involves paying attention to what the other person is saying, asking questions to clarify their points, summarizing what you heard, and reflecting their feelings. Active listening can show respect, empathy, and interest, and can reduce defensiveness and hostility.

Use 'I' statements. When expressing your feelings or opinions, use 'I' statements instead of 'you' statements. 'I' statements focus on your own perspective and experience, while 'you' statements blame or accuse the other person. For example, instead of saying "You always interrupt me when I'm talking", you can say "I feel frustrated when I don't get to finish my sentences".

Seek common ground. Try to find areas of agreement or shared interests with the other person. This can help you build rapport and trust and reduce tension and hostility. You can also use humour or compliments to lighten the mood and show appreciation.

Be willing to compromise. Conflict resolution often involves finding a middle ground that satisfies both parties' needs and interests. Compromise means giving up something that you want in exchange for something that the other person wants. Compromise can show flexibility, cooperation, and respect, and can lead to a win-win outcome.



Bringing Balance to My Life: Cultivating Mental Well-Being

Welcome and Icebreaker.

Group Guidance - Always remember:

- *Share only what you are comfortable to share.*
- *You might take a risk to share what might be useful for others to understand you better.*
- *Be clear with yourself as to what you do not want to share, at this moment.*

Workshop objective/s:

The goals of this workshop are to have a conversation on the importance of identifying and bringing balance to our lives for our mental well-being, and to understand that cultivating good mental well-being may be different for everyone.

Introduction to workshop:

- It's important to note that mental well-being is not simply the absence of mental illness. Mental well-being is a proactive and holistic approach to nurturing and maintaining good mental health.
- By prioritising mental well-being, we can cultivate resilience, emotional balance, and a positive outlook, leading to a higher quality of life and overall mental health.
- For some, looking after one's mental well-being might include the need for self-care, the need to find healthy ways to manage stress; for others it might be the need to set boundaries, or to nurture more healthy habits, and more.

Large group: Discuss phrases such as...

'I'm all out of sorts!' Or 'I'm all over the place today!'

- Have you heard these phrases before?
- Are there any other phrases or sayings you might hear or use to express yourself when you don't feel grounded or in control?

Small groups:

- How do we identify signs of imbalance in our daily life - how do we feel mentally, emotionally, and physically?
- How do you take care of yourself when you feel you are 'out of sorts' or not in control?



Feedback (in large group):

- When receiving feedback on the question 'How do you take care of yourself when you feel you are *'out of sorts'* or not in control?', use a flipchart to explore the different forms of self-care under the following headings: Physical/Emotional/Mental.

Large group: Discuss the Handout:

Ask the group to read and consider the suggestions in the handout around finding and bringing balance into one's life, and as a group discuss the challenges and barriers.

- Are we good at managing stress, setting boundaries, nurturing healthy habits?
- Where do we find it difficult to build resilience?

Debrief.

Support and signposting.

Close.



Bringing Balance to My Life: Cultivating Mental Well-Being

Managing Stress

- Recognizing stress triggers and their effects on mental well-being
- Stress management techniques (e.g., deep breathing, mindfulness, relaxation exercises)
- Strategies for coping with overwhelming feelings and avoiding burnout.

Setting Boundaries

- Understanding the importance of setting boundaries for mental well-being
- Identifying personal boundaries and communicating them effectively
- Exploring strategies for maintaining boundaries in various areas of life

Nurturing Healthy Habits

- The connection between healthy habits and mental well-being
- Creating positive habits for physical and mental health (exercise, nutrition, sleep)
- Overcoming barriers and building sustainable habits

Resilience

- Mental well-being fosters resilience, which is the ability to bounce back from adversity and cope with life's ups and downs. When we have good mental well-being, we are more likely to handle setbacks and stressors with greater ease and adaptability.
- Emotional well-being: Mental well-being promotes positive emotional states such as happiness, contentment, and fulfilment.
- Self-Esteem and Self-Worth: A sense of self-worth and positive self-esteem are essential components of mental well-being.
- Cognitive Functioning: Mental well-being positively influences cognitive functioning, including our ability to concentrate, learn, and make decisions.
- Relationships and Social Connectedness: Mental well-being plays a crucial role in building and maintaining healthy relationships. It helps us establish meaningful connections, communicate effectively, and experience a sense of belonging.
- Physical Health: Mental well-being is closely linked to physical health. When we prioritize our mental well-being, we are more likely to engage in healthy behaviours such as regular exercise, proper nutrition, and adequate sleep.
- Productivity and Performance: Mental well-being enhances our ability to perform well in various aspects of life, including work, academics, and personal pursuits. It boosts motivation, creativity, and productivity.



Drama and Trauma: Learning to Re-Connect

Welcome and Icebreaker

Group Guidance. Always remember:

- *Share only what you are comfortable to share.*
- *You might take a risk to share what might be useful for others to understand you better.*
- *Be clear with yourself as to what you do not want to share, at this moment.*

Workshop objective/s:

In this workshop, drama is used as a means of connecting with oneself and others, while developing self-awareness and self-compassion.

Helping individuals to reconnect with their bodies may reduce the physical tension often associated with trauma.

Introduction to Trauma

- Trauma can have a profound impact on an individual's mental, emotional, and physical well-being. It often disrupts one's sense of safety, trust, and connection with themselves and others. Reconnecting after experiencing trauma is a crucial aspect of the healing process.
- There are two steps to reconnecting: acknowledgement and transformation.
 - (1) Acknowledge - What is trauma? What is it communicating/asking for?
Trauma is anything that overwhelms the system and cannot be processed. If it is not acknowledged or dealt with, it can become a problem as it wants and needs to be seen. The trauma is living in the body.
 - (2) Trauma is repetitive – What happens to you when you have a trauma-triggered experience? What can be done to work towards transforming the traumatic experience?
The re-triggering of trauma happens when we are not bringing awareness to it or working to transform it. It is about being stuck – even if the trauma is acknowledged there may be no moving on from it. It is not just about the mind it is also about the physical body. Post traumatic growth is an important factor when moving beyond the trauma: if we can work through the issues, it can make us stronger.



Introduction to Drama as a Tool

- Drama is one practical tool to deal with trauma. Trauma however can be complex, and it is important not to 'jump in'. There is a need to ease into the conversation about trauma gently, making connections with others before entering a workshop about trauma.
- Our bodies and our body language can reveal a lot around the impact of trauma in the body and where we are holding trauma, for example, how we hold our hands, what we do with our legs. Drama has the potential to free up the body and help to physically identify where tension exists.
- When trust is built, the drama approach can be useful for self-expression, and liberating for the participants.

Large group: A drama workshop

- *Standing stance:* Our stance is relaxed with feet apart and knees slightly bent with feet rooted in the floor. We are standing upright and feel as if a string is pulling us upwards.
- *Visualisation Exercise:* The Facilitator asks participants to close their eyes and begins to talk through a visualisation exercise: moving down through the body, being mindful and aware of all the major parts of the body, in the process notice how each major part of the body is feeling and what needs to be relaxed or loosened up, and allowing relaxation to occur.
- *Mirror imaging in pairs:* The Facilitator puts participants into pairs and, using our arms and bodies, the facilitator asks participants to take turns at mirroring the other's movements.
- *Changing our stories:* The Facilitator asks one person to enter the circle of participants and take a stance/position/shape. Another person enters and responds to that stance and the other person moves out. This is repeated several times. With this exercise, there is movement, response, creativity, interpretation going on, and the facilitator ensures an ongoing conversation about what is happening.



- *Creating a story:* The Facilitator asks one person to enter the circle and take up a position. A second person enters and responds to the scene. A third person enters and responds to the scene. A story is unfolding with different interpretations by those who are looking on, each one may see something different and while participants are in their positions, a conversation is initiated by the facilitator about what is happening. The remaining participants are invited to identify with one of the people in the story and they are then invited to enter the circle and make a single alteration in the stance of that person to give a different spin or interpretation. The Facilitator encourages a conversation about what is happening.

Feedback (in large group): How did that experience make you feel?

Debrief.

Support and signposting.

Close.

Developed from a workshop delivered by Dr Jennifer Goddard.



Changing the Story I Tell Myself: Visualising An Empowering Story of Well-Being

Welcome and Icebreaker

Group Guidance. Always remember:

- *Share only what you are comfortable to share.*
- *You might take a risk to share what might be useful for others to understand you better.*
- *Be clear with yourself as to what you do not want to share, at this moment.*

Workshop Objective/s:

To gain an understanding of the role of stories and storytelling, in particular the stories we tell ourselves and how these impact on mental well-being. This workshop includes two exercises. The first offers an opportunity for participants to share aspects of their personal stories, and to reflect and consider what some of the limiting impacts may be. The second storytelling exercise offers an opportunity for participants to share more deeply their personal lived experiences about mental well-being. It is important that this storytelling and sharing takes place in a supportive environment thus enabling individuals to be heard (perhaps for the first time), and new connections and shared understandings to be created.

Introduction to Stories:

- Stories are important to our lives. 12,000 years-old wall-paintings provide evidence of our prehistoric ancestors making connections through the telling of their stories. When you tell your story, you spark a connection. That is how humans have communicated since the beginning of time, by telling and sharing their stories. As human beings, we are automatically drawn to stories because we see ourselves reflected in them. We build trust and connection through sharing our stories. In telling our story, we help to give voice to those who have no voice, and we make visible those who have been made invisible or who are forgotten. This is particularly true of people who struggle with mental health and well-being.
- People can find their story difficult to tell, especially when their lives are complex and when their stories have many layers. It can take a long time to unpack; however, beginning to unpack a story can be liberating; it can bring better understanding and healing of self and others who listen with an open heart.



Large group: Beginning to unpack the Stories

- We are the stories we tell ourselves; they become core to our identity as we are shaped by our (past) experiences which in turn influence our present and future. However, sometimes in life, when others tell us things about ourselves (accurate or otherwise) we can and often internalise these so that they become part of our story; these can have negative impacts. For example, if others tell you repeatedly that you are stupid, this can undermine your self-confidence over time and you can begin to believe it, which may inhibit you in trying new things or hold you back from reaching your true potential.
- Ask participants if they can recall negative things that have been told to them that have impacted how they feel about themselves.

(Prompts, if needed):

- You're/I'm worthless/stupid...
- You're/I'm pretty useless...
- You /I can't draw/paint...
- You're/I am no good at maths...
- You're/I'm not very bright...

Sowing the seeds for Storytelling:

- The process of storytelling incorporates elements of both personal and group empowerment to:
 - a) strengthen our connection to our identities, cultures, and values,
 - b) build self-esteem and confidence through sharing,
 - c) build some common narratives from our experiences,
 - d) build a sense of group and belonging,
 - e) draw out issues for advocacy and speaking out,
 - f) understand and work towards healing.
- There is a very personal dimension to the process of sharing stories. There is a focus on listening and being heard. Connecting with the human and emotional detail is all-important in the process.



- Cultural boundaries and differences can be explored within a safe and non-threatening space that affirms and validates individual stories in the wider context of mental health and well-being (religion, schooling, community).
- All our visions of the past, present and future are shaped by the stories we have constructed to explain it, to give it value and meaning. However, stories, fundamentally are a construct that may or may not reflect actual reality, and we are not committed to the truth or authenticity of our own story which does mean, we can change the story we tell ourselves!

Large or Small Groups: A Storytelling Circle

This is an opportunity for each participant to share their personal lived experiences about mental well-being and what has led them to be here. This exercise offers an opportunity for individuals to begin to unpack their story, and to be heard, offering an opportunity to take a first step towards a better self-understanding and finding a way towards an empowering story.

- It is important to allow sufficient time for this kind of exercise to begin with so as to ensure that each person has time to share.
- Depending on numbers and time, ask the group to split into smaller groups and then come back to the large circle for debrief or ask each person to tell their story in a large group setting. Either way, carefully manage time to ensure each person has time to share.

Process for individual sharing/storytelling:

- One person speaking at a time in a safe, non-threatening, non-judgemental environment.
- No interruptions during the individual storytelling process.
- No interjecting to introduce a different narrative.
- No challenges during the storytelling process.
- Questions of clarity may be asked at the end of each input, with the option for the participant to respond or not.
- There is also the option to pass.



- After everyone has had an opportunity to share their story, the facilitator will check how each participant is feeling. Are there any individuals who need support?
- Begin by encouraging anyone in the group to start the process by telling their story.

Large group: Process the story-sharing experience.

Encourage conversation by asking:

- Are there commonalities within the narratives?
- What are the main obstacles to changing the story we tell ourselves?
- What affirmations and positive mindsets do we need to develop towards changing the story we tell ourselves?
- What coping mechanisms can we share?

Debrief.

- How did participants feel during the process and how do they feel now?

Before closing, it is vitally important to ensure that everyone is okay before leaving.

Support and Signposting.

Close.



Mindfulness isn't difficult, we just need to remember to do it.

Welcome and Icebreaker.

Group Guidance. Always remember:

- *Share only what you are comfortable to share.*
- *You might take a risk to share what might be useful for others to understand you better.*
- *Be clear with yourself as to what you do not want to share, at this moment.*

Workshop Objective/s:

The workshop aims to help participants to develop an awareness of mindfulness using the breath, and to begin to develop a habit of mindful breathing and more positive states of mind, such as, kindness, compassion and gratitude.

Introduction to the Mindfulness

- Over the past thirty years a growing body of evidence-based research is showing that mindfulness can be beneficial for our emotional/mental well-being, through reducing stress. It can be traced back thousands of years to ancient practices and traditions. However, despite this, many of us are still not clear about what mindfulness is.
- We strengthen our bodies through sports or exercise; however, we give very little thought as to how to strengthen our minds and thoughts. Thoughts are part of our human experience. We are not our thoughts; we have thoughts. Mindfulness isn't about getting rid of your thoughts but more about us learning how to be at ease with them.
- Mindfulness can be seen as a practice or more broadly understood as a life skill of attention/awareness training of the mind. Mindfulness tools can assist us to manage our emotions and reactions, noticing more about how we are feeling, and treating ourselves and others with more kindness and compassion. Mindful practices can help create a space between the stimulus, or the disturbance, or the event or emotion and reaction and can help to replace the impulsive reaction with a thoughtful response. Practising regularly is key to mindfulness being beneficial and developing mindfulness takes practice, practice, practice!
- **Attitudes of Mindfulness**
Non-judging, gratitude, patience, a beginner's mind, trust, non-striving, acceptance, letting go and generosity.



- **Mindfulness practices**

Mindful breathing, Mindful body, Mindful listening, Mindful senses, Heartfulness, Gratitude and Kindness

What is mindfulness and how can one build a mindful practice and habit into one's daily life?

Mindfulness means “paying attention in a particular way: on purpose, in the present moment, and non-judgmentally.” Jon Kabat-Zinn

- It also includes the intentional nurturing of positive states of mind. Studies indicate that grateful people enjoy higher levels of well-being and happiness, and reduced symptoms of depression.
- Mindfulness is a form of attention or awareness training that can be applied in any activity throughout the day. Its purpose is to increase self-awareness, emotional balance, impulse control, and overall focus.
- The best way to build and develop mindfulness habit is to anchor it to something you already do, by way of helping it to become a part of your daily routine; for example, develop the ‘habit’ of noting three things you are grateful for when washing your face, brushing your teeth, or boiling the kettle.
- Self Help Guides include the following tips for anyone wishing to begin to develop a mindfulness practice, which will help improve emotional well-being and build resilience: i) be consistent in your practice i.e. practice at the same time each day, ii) if possible, create a calm, quiet space for mindfulness, and iii) allow approx. 1-3 minutes per day.
- Developing a mindfulness practice is a long-term endeavour, which begins undertaking small practices now, which can blossom in the future.

“Between stimulus and response there is a space. In that space is our power to choose our response. In our response lies our growth and freedom.” Viktor Frankl



Large or Small Groups

(*This breathing exercise can be undertaken by a person on their own).

Introducing: a 1-minute breathing exercise, as a Mindfulness Practice.

Before starting the breathing practice, remind participants:

- that the breath is with us every day when we need it; ‘we can find our breath any time, right here in the present moment.’
- become mindful of their body, by ‘dropping in’ on themselves, and assuming a ‘Mindful Body’.

Suggest to participants the ‘mindful body’ guidelines of:

- sitting comfortably with back supported, hands rested on lap,
- in stillness,
- mind and body relaxed, yet alert,
- looking downwards or letting your eyes close.

Script for a 1-minute Mindful Breathing Practice

- I invite you in your mindful body, dropping in on yourself, with your eyes closed or lowered: to take 3 deep breaths. As you do so, notice how the breath flows in and flows out of your body. Simply notice the movement in your belly and in your chest.
- Try not to change your breath in any way, just notice it, just breathe in... and breathe out.
- When you notice your mind wandering just gently bring your awareness back to your breath. Continue breathing in this relaxed manner, in and out, for 1 minute.
- Concluding the practice in a group, the Facilitator invites participants to open their eyes.

Feedback

- How did that experience make you feel? What did you notice?
- How did it feel to focus on your breath?

Debrief.

Support & signposting.

AFH Meditation Film of one mindful breath v001 - YouTube

<https://www.mindfulschools.org>

Close.

Developed by Tracy Healy. Founder of M&T Mindfulness Training.



Mindfulness isn't difficult, we just need to remember to do it. Mindfulness practices.

Micro-mindful moments with your five senses.

Slow down and notice what is around you. Try focusing your attention on one sense; what can you see, or smell, or feel, or hear, or taste?

Do you notice the coolness of the breeze across your skin, the smell of rain, the neighbour's dog barking near or far away?

Notice the different seasons from your backyard. What are all the ways it looks and feels different to other times of the year?

Dropping in on ourselves.

Take 3 deep breaths. Go back to your natural rhythm.

Notice how you are feeling right now?

Make a mental note in your mind: "Right now, I'm feeling..."

Setting intention.

The following example is meant to explore the intentions behind practicing mindfulness.

Simply fill in the gap with anything that you wish to explore:

My intention and purpose today are to ...

I want to learn about (____) because...

I am hoping that (____) will give me...

The real reasons that I want to (____) are...

When I (practice mindfulness), it makes me feel (____)

Developed by Tracy Healy. Founder of M&T Mindfulness Training.



Reducing stress through sound

Welcome and Icebreaker.

Group Guidance. Always remember:

- *Share only what you are comfortable to share.*
- *You might take a risk to share what might be useful for others to understand you better.*
- *Be clear with yourself as to what you do not want to share, at this moment.*

Workshop objective/s:

The goal of the sound bath is to experience deep rest, relaxation, and balance your life energy.

Introduction to Sound bathing

- Sound bathing is the practice of being deeply immersed in sounds and vibrations that have the power to cleanse and heal. It is a journey of self-discovery through deep relaxation and meditation. A sound bath is a holistic approach to relaxation and healing. It can be a perfect escape from the modern stresses of life. A sound bath can cleanse your soul and restore your balance. Sound has a great influence on our emotions and health and can make us feel happy, energised, and relaxed.
- During a sound bath, a profound sense of peace and tranquillity will surround you. If your sound bath is being conducted using singing bowls, for example, you will feel the healing and cleansing power of the various singing bowls which surround you. All your stress, tension, and depression can become washed away with these vibrations. Both your emotional and physical trauma can be released, helping you feel more vibrant and livelier.
- Sound has a powerful impact on our lives. Whether or not you use sound-producing instruments such as singing bowls or you are out in nature, there is always music around you. Music provides relief from pain and discomfort, and makes you feel relaxed. The sound bath intentionally creates waves of harmonic sound which will envelop and surround your body.
- When done regularly, sound bathing can have profound health benefits. Sound bathing can help the mind achieve a more relaxed state. It can lead to a release of stress and anxiety, and be an aid in decreasing blood pressure, balancing the body's energy flow and balancing the nervous system, which can help you find inner peace.



- Every person will experience a sound bath differently. During a sound bathing session, you may feel some vibrations surrounding your body or small sensations in your body which are energy-shifting. Receiving the vibrations, you may become aware that you are moving into a more relaxed state, or you may even find yourself falling asleep. Others may experience some form of emotions and emotional release. Whatever happens is okay. If emotions arise, let them do so, and accept the release. Being open in this manner can help release and shift more deep-rooted emotions.

Large group (or Small Groups)

- Set up your chosen instruments in the centre of your room.
- Invite your participants to either sit or lay down in a circle, ensuring that everyone is comfortable. Pillows or blankets can be offered, if required.
- Begin by clearing negative energy from your space, either using incense or by moving around as you strike a singing bowl.
- Ask your participants if they would like to inwardly set an intention for the session, e.g., inner peace.
- Invite the participants to become aware of their breath for a few moments, not changing it in any way, as they focus on their intention.
- Begin to play your chosen instruments. A digital recording of a sound bath may also be used effectively. (Links to sample digital recordings available in hand-out) The session can last between 30 and 90 minutes.
- When the session is complete, allow the participants a few moments of quiet time before inviting them to bring their attention back into the room, opening their eyes whenever they are ready.
- Ensure participants are offered a glass of water after the sound bath session.

Feedback:

- How did that experience make you feel?

Debrief

Support and Signposting.

Close.

Developed and written by Catharine Condren



How to create a sound bath

Begin by clearing out negative energy from your space by holding a singing bowl in one hand and using your other hand to strike your bowl with your mallet as you move around.

Light a candle to set the mood for increasing the flow of spiritual energy.

Sit in a comfortable position and surround yourself with your singing bowls. If you only have one singing bowl, you can hold it in your hand.

Before you start to strike your bowl again, set an intention for the session e.g., think about the peace you are seeking for yourself and others. Relax and begin to play with your singing bowl and connect with the sound resonating from your singing bowl.

Breathe gently and deeply, focusing your mind only on your intentions, and allow yourself to continue to feel relaxed, letting the sound vibration bring deep harmony and inner peace.

Let your intentions guide you. When you give yourself completely to your practice, you will have a wonderful experience and feel vitalised.

When you are finished, sit silently for a few seconds. Consider expressing inner thanks or gratitude for being able to take the time to help yourself today.

As an alternative, create a sound bath by listening to digital recordings of singing bowls or other sound bathing tools. The benefit of this method is that you need not occupy yourself with playing any singing bowls. Instead, you can lay down in a relaxed position and listen to the digital sounds while attempting to attain a deep relaxed state.

Links for sample digital recording of Sound baths:

<https://www.youtube.com/watch?v=U5LhAFvK9VY>

<https://www.youtube.com/watch?v=a5ky5tmQTws>

Developed and written by Catharine Condren

4

Changing the Story I Tell Myself:
Visualising an empowering story
for well-being

Eimear McCartney's First Day Out in Months

by Damian Gorman

https://www.youtube.com/@thejunction_peace

Eimear McCartney's First Day Out in Months

Fade title up, white out of black. Hold, then fade up By Damian Gorman. *Hold, then fade title and credit.*

Close up of Eimear. Relaxed, on her own, in the daytime.

Beat.

EIMEAR (*To camera*)

... I do remember the date. It was March the 12th. I hadn't been out of the house in 19 weeks – I had literally not been over the door since the autumn. But something inside me broke out, rebelled like a buried seed. Right, it said, here's what you're going to do, *tomorrow*: you're going to the Honesty Café for your usual, or what used to be your usual; then you're meeting Mo to see about a new tattoo – the big one: the words 'To Fly', in Irish, spread over the width of your back like wings themselves.

So that was on the 11th. I didn't sleep a wink, but in a good way. I'd tried everything up to that point, every damn thing, to change a story that was stuck in my throat and close to choking me. I'd even tried opening my friend Tracey's bible at random. But what I got was, '*The King desires no brideprice except a hundred foreskins of the Philistines*'. Samuel chapter 18, verse 25 – I'll never forget it ...

I got up on the 12th itself and it made me shiver - like a very cold sea I had definitely decided to enter. Something was going to change that day – it was already changing. It was scary. I was stepping into space. But I knew it was time.

And my Mum? She was there, and thereabouts. She was worried. She was ... (*smiles*) ... Mum.

Fade on her smiling. Hold.

Fade up on the actual Honesty Box of the café, and ambient café sounds – of crockery, a low hub-bub of voices etc.

Eimear comes in. After a moment's hesitation, she settles herself at a table and exhales.

No sooner has she done so than her friend Victor appears in front of her, really glad to see her.

VICTOR

Well my god, it's either Eimear McCartney or a kick-ass tribute act!

Eimear McCartney's First Day Out in Months

EIMEAR

Hiya Victor. How's it goin'?

VICTOR

'How's it goin'?! C'mere till I get a squash of ye.

He moves in to envelop her. But that's not happening, not just now.

EIMEAR (*Putting her hand out*)

Coffee first Victor, *please*. Squashing later ... (*sotto voce*;) maybe. Let me get my order in.

VICTOR

Your order in! Who are you talkin' to? Sure isn't it engraved on the notebook of my heart: 'Half-fat caramel macchiato – no chocolate, no nuthin' '. That still it Eimear?

EIMEAR

That's still it Victor.

VICTOR

Coming right up.

And no sooner has he cleared the frame than Eimear's phone vibrates. She glances at it.

EIMEAR

Ah no ...

She answers.

EIMEAR (*Exhaling*)

Yes Mum.

MUM (*All gentle concern*)

How are you doing love? How are you feeling?

EIMEAR

I've hardly my ass in the chair Mum. I've had no time to be doing or feeling ... anything.

MUM

I know, I know love. But it's been a long time.

EIMEAR

It has Mum.

Beat.

MUM

I was only wondering ...

EIMEAR

I know you were Mum.

MUM

And you'll ring me if ...

EIMEAR

I'll ring you if there's any *IFs* Mum, yes. But there won't be.

MUM

I know there won't Eimear. I'm sorry. It's just ...

EIMEAR (*Tenderly*)

I know Mum.

Beat.

MUM

Love you.

Eimear McCartney's First Day Out in Months

EIMEAR

Love you too ...

She turns off her phone.

Close-up of her face, thoughtful, as she bobs the phone on her lower lip. Until a nearby voice takes her out of herself.

VOICE

Dia dhuit.

A wider shot reveals the source of the voice, her Dad, who is sitting at the adjacent table.

EIMEAR

What's the craic Dad?

DAD

Ah sure you know what the craic is Eimear.

Beat. Then, with real gentleness:

DAD

Give her time love.

EIMEAR (*Flares*)

It's me needs the time Dad – it's me!

DAD

I know, I know.

Beat.

EIMEAR

What are you doing here?

DAD

Do I need a special reason?

EIMEAR?

Yes.

DAD

Alright. Well there's 2 things.

EIMEAR (*Mutters*)

There always are.

DAD (*Ignoring that*)

The first is ... you're going to be ok love. You're going to be grand.

EIMEAR

How do you know that Dad, how do you *know*?

DAD

Because –

EIMEAR

Naw, I've remembered: 'There's always going to be light up ahead/ because I am so full of light myself'. You used to say that to me when I was wee, and bright and happy. But I'm not wee and bright and happy now Dad, in case you hadn't noticed.

DAD

Naw I had, but you're still going to be grand Eimear.

EIMEAR

How do you *know* that Dad?!

Eimear McCartney's First Day Out in Months

DAD (*Standing up to go*)

Because I've paid money to every bugger around you to make sure you are.

Wipe, as Victor arrives back with the macchiato.

VICTOR (*Chirpily, as he places the coffee on the table and flops down beside her*)

You know what I hate Eimear?

EIMEAR (*With a bit of snark in her*)

Yourself Victor?

VICTOR

Au contraire dear – *ouch*. I hate handovers to the weather-girl.

EIMEAR (*In utter exasperation*)

Whaaat?!

VICTOR

You know all that absolutely gormless banter where they blame *Suzi* or *Helen* or *Brid* for the wind and the rain (*puts on funny voice*): 'I was cursing you on my way into the studio this morning, Helen...'

People who indulge in that sort of drivel should be horse-whipped!

EIMEAR (*A bit taken aback*)

Steady Victor ...

Someone has come in.

VICTOR (*Expansively*)

Here she is now – the Cezanne of Skin (*Stands up, and indicates Eimear with a flourish.*) Mo, your canvas awaits ...

MO

Morning Victor. Hiya Eimear love.

She gives the other woman a light hug. Which this time Eimear is ready to receive.

MO (*Rooting in her bag*)

I got the 2 words you messaged me.

VICTOR

Is this a private conversation?

EIMEAR

Yes.

VICTOR (*Sitting down again*)

Oh good ...

MO

I had a think about the words ... And here's what I'm proposing (*Hands Eimear a sheet of paper retrieved from her bag.*)

Eimear gazes intently at the sheet.

Beat.

MO

... Are the accents right?

EIMEAR (*Still gazing*)

The fadas –

MO

Fadas.

Eimear McCartney's First Day Out in Months

VICTOR

Can I see?

EIMEAR

They're perfect. *It's* perfect Mo.

MO (*Standing up*)

So are we good to go?

VICTOR (*Pushing her down again*)

No you are not – not till you hear my news!

EIMEAR (*Weary and sceptical*)

What news Victor?

VICTOR

I'm opening another café!

MO

Where?

VICTOR

In Screw-Fix.

EIMEAR

Screw-Fix ?!

VICTOR

Yes. They've that many people in and out they thought it only made sense. IKEA does it, Dunhelm does it – The Range does it now for god's sake! If there's people about you, sit them down for a coffee – it's god's will. I put in for the business and I got it.

MO

Good for you.

EIMEAR

But *how* did you get it Victor?

MO

Eimear ...

VICTOR (*Putting a hand up*)

No, it's a perfectly fair question. I think I got it because I gave them something extra – my idea for the late-night openings: 'Have your community group meetings here in Screw-Fix'. Why not?

MO (*Affably*)

Indeed.

She stands up to go again. Eimear puts her hand on her shoulder, lowering her, this time.

EIMEAR

I'll tell you why not – because it's bonkers Victor, it makes no sense. Imagine your yoga or your ... well-being group meeting in Screw-Fix, of all places. That would be brilliant wouldn't it, your mental health group meeting in *Screw-Fix*?!

VICTOR (*Sincerely*)

Yes. It would.

EIMEAR

You think?

VICTOR

That bit of humour would make it beautiful, perfect. You're a genius Eimear!

She tuts audibly.

VICTOR

Seriously, I think it's a great idea – and *you've* got the personality to make it work.

Eimear McCartney's First Day Out in Months

EIMEAR

Me? I've got a tattoo to do Victor.

MO (*Definitely getting up this time*)

Right!

VICTOR

Would you help me with it – would you Eimear?

EIMEAR (*Mutters*)

Nothing could help you Victor.

MO

My parking's run out. (*Smiles at Eimear*) I'll see you in the car.

Leaves.

VICTOR (*As he's going back to work*)

Will you think about it Eimear?

EIMEAR (*Announces*)

I will Victor. (*Sotto voce:*) Until I finish this coffee ...

Close-up of her doing so.

A wider shot reveals her Dad, sitting adjacent again.

Beat.

DAD

And is it bonkers?

EIMEAR

Oh come on Dad – '*Get your loose screws tightened here at Screw-Fix on Thursday nights!*'

DAD

I think he had that factored in. He's his head screwed on.

Eimear McCartney's First Day Out in Months

EIMEAR

Has he, aye?

DAD

I think so. I'll never forget what he said to you ... at the time.

EIMEAR

Don't Dad –

DAD

But he was right. The fact that I was drowned crewing the Search and Rescue boat was nobody's fault – and certainly not the fault of the poor souls we were trying to save.

EIMEAR (*Putting her hands over her ears*)

I don't want to hear this.

DAD (*Gently*)

You've heard it.

And that's all I have to say...

Beat.

EIMEAR

I thought there was a second thing. (*Her phone vibrates.*) You said you had 2 things to tell me.

DAD

That'll be your mother again. (*Smiles.*) You'd better take it. (*And very gently:*)

Bye love ...

Close up of Eimear. Shot of her Dad's empty chair.

Fade to black.

And cut up on Dad, spot-lit against a black curtain, about to speak to camera.

Eimear McCartney's First Day Out in Months

DAD

... The other thing I had to say that day was harder to carry to her.

Something about how ... when we think that we're saying one thing, we're sometimes not. We're actually saying something very different.

Like the Irish for 'To Fly' is *A Eitilt*, and not what some robot or app told Eimear – not what she had put on her back on the 12th of March. *Dha Cuileog* actually means two flies, as in one, two bluebottles. But do you know something? I'm not a bit worried about her finding that out, not now. For now she will know, or she'll work out, what to do. Which is *not* to dig a hole for her shame, away from the world; but to roar out a full-throated, genuine, *healthy*,
AW F –

Immediately cut to black, as the chorus of Queen's Flash accompanies the roll of the credits.

Written by
DAMIAN GORMAN

Cast (in order of appearance):

Eimear
JACQUI CONDREN
Victor
JOTHAM JACKSON
Mum
GRETA Mc TAGUE
Dad
PAT LYNCH
Mo
JENNIFER GODDARD

https://www.youtube.com/@thejunction_peace

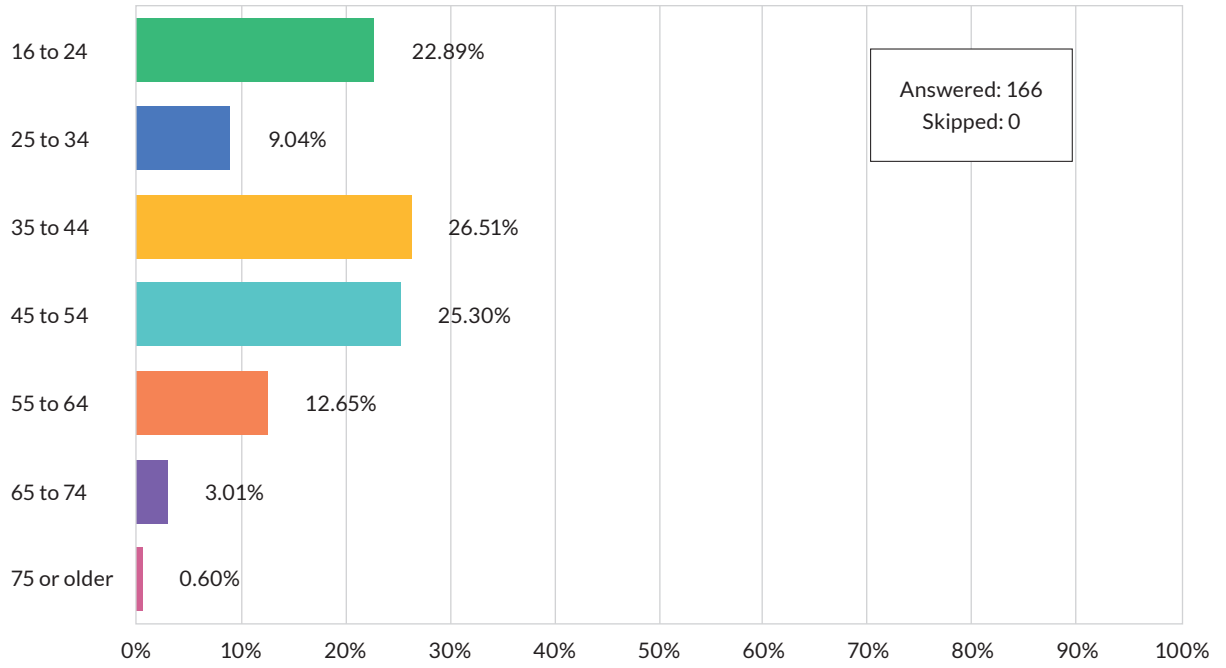
Film Production
Independent Productions Ltd

5

Changing the Story I Tell Myself:
Visualising an empowering story
for well-being

Appendices

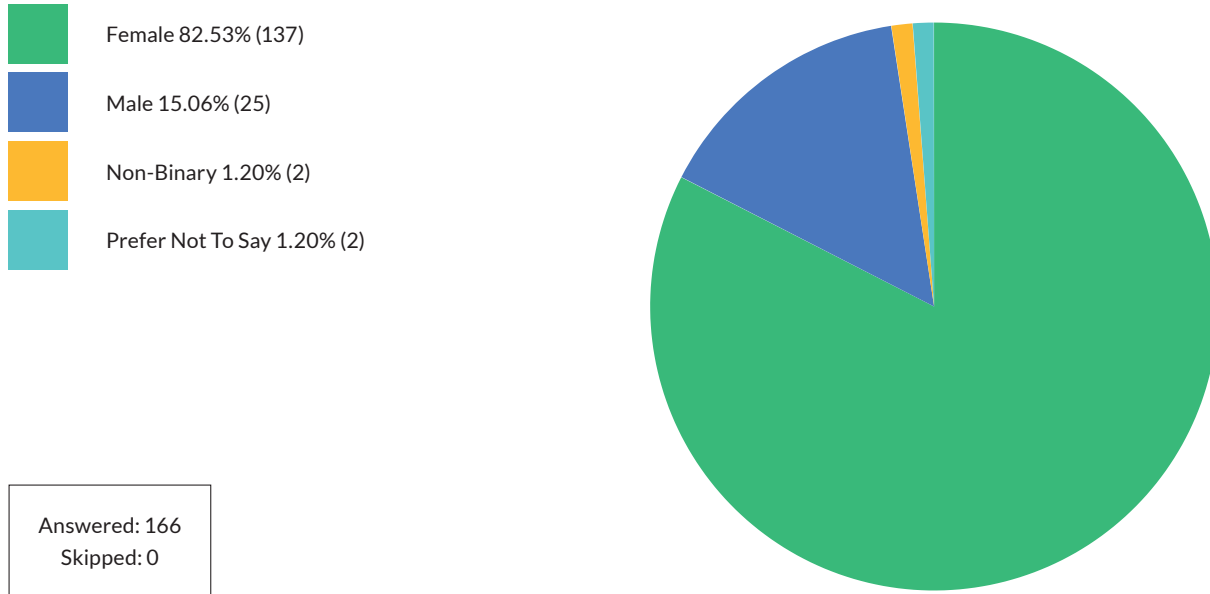
What is your age?



Answer Choices	Responses	
16 to 24	22.89%	38
25 to 34	9.04%	15
35 to 44	26.51%	44
45 to 54	25.30%	42
55 to 64	12.65%	21
65 to 74	3.01%	5
75 or older	0.60%	1
Total		166

Question 2

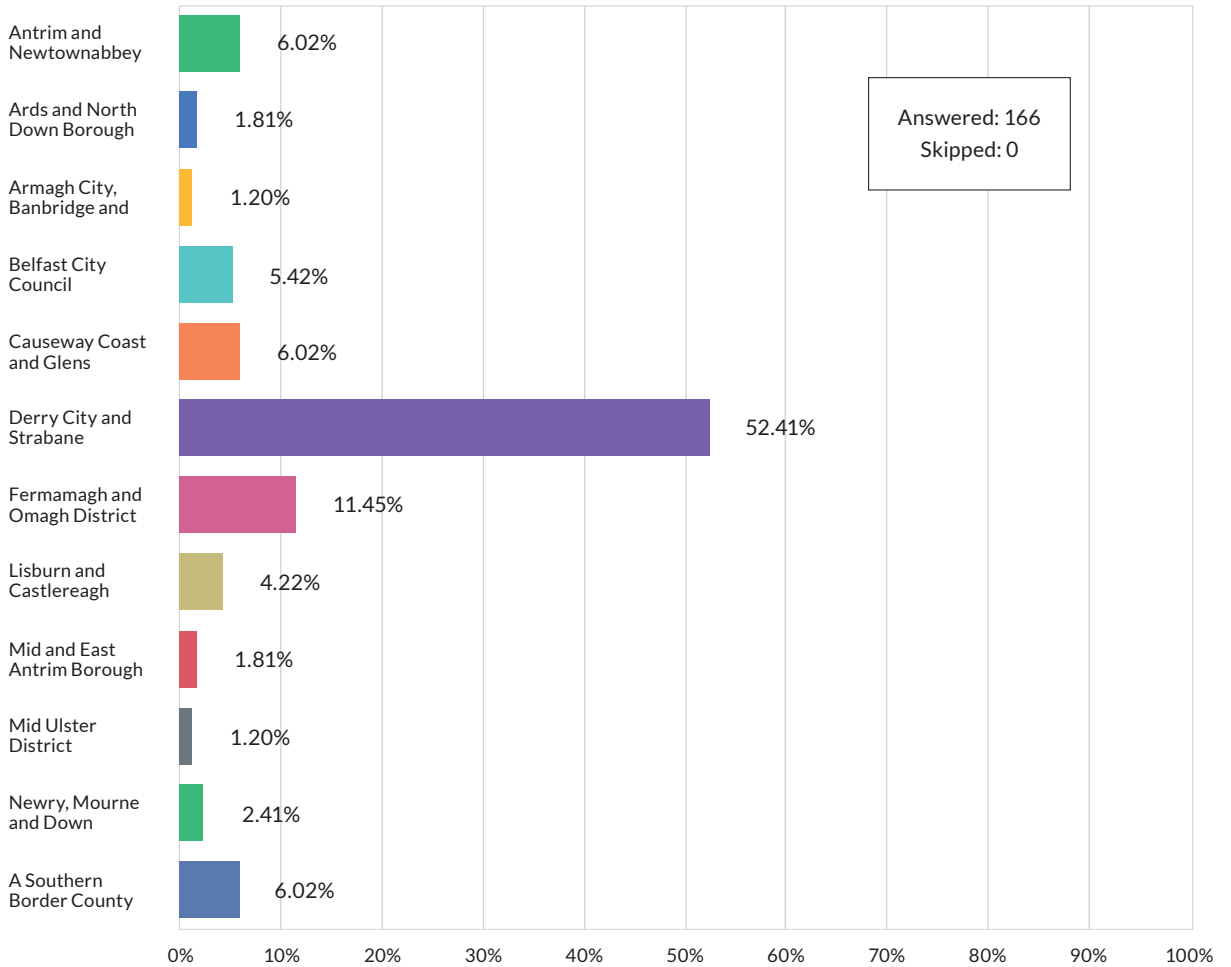
What is your gender?



Answered: 166
Skipped: 0

Answer Choices	Responses	
Female	82.53%	137
Male	15.06%	25
Non-binary	1.20%	2
Prefer not to say	1.20%	2
TOTAL		166

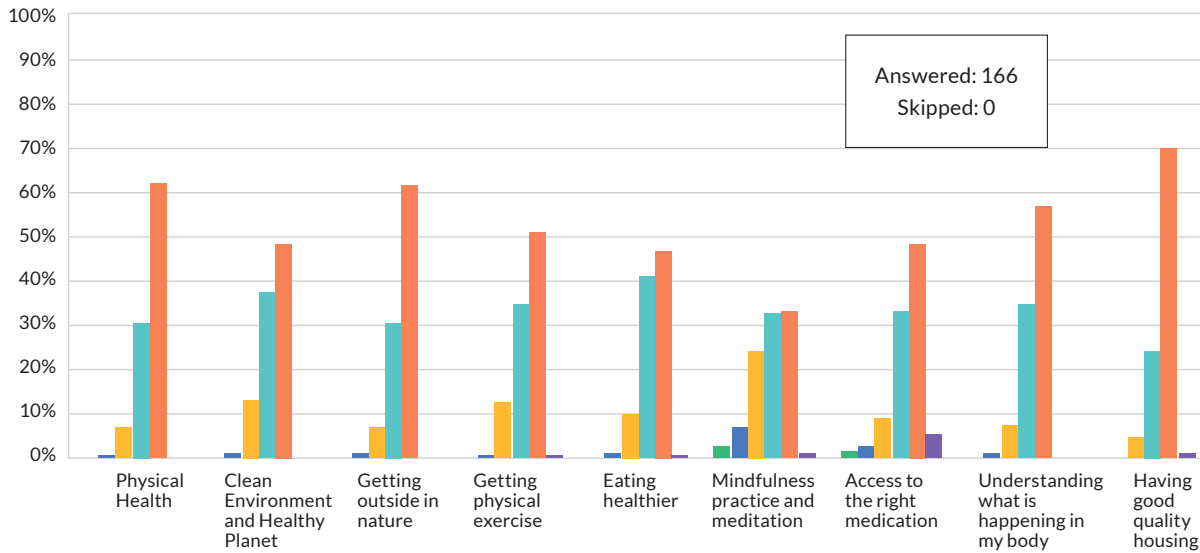
Which district / council area do you live in?



Answer Choices	Responses	Count
Antrim and Newtownabbey Borough Council	6.02%	10
Ards and North Down Borough Council	1.81%	3
Armagh City, Banbridge and Craigavon Borough Council	1.20%	2
Belfast City Council	5.42%	9
Causeway Coast and Glens Borough Council	6.02%	10
Derry City and Strabane District Council	52.41%	87
Fermanagh and Omagh District Council	11.45%	19
Lisburn and Castlereagh City Council	4.22%	7
Mid and East Antrim Borough Council	1.81%	3
Mid Ulster District Council - Dungannon	1.20%	2
Newry, Mourne and Down District Council	2.41%	4
A Southern Border County (Donegal, Sligo, Leitrim, Cavan , Monaghan)	6.02%	10
Total Respondents:		166

Question 4

Health & Environment: How important are the following factors for mental well-being?



■ Not important at all ■ Not important ■ Neutral
■ Important ■ Very important ■ N/A

	Not important at all	Not important	Neutral	Important	Very important	N/A	Total
Physical health	0.00% 0	0.60% 1	6.63% 11	30.72% 51	62.05% 103	0.00% 0	166
Clean environment and healthy planet	0.00% 0	1.20% 2	13.25% 22	37.35% 62	48.19% 80	0.00% 0	166
Getting outside in nature	0.00% 0	1.20% 2	6.63% 11	30.72% 51	61.45% 10	0.00% 0	166
Getting physical exercise	0.00% 0	0.60% 1	12.65% 21	34.94% 58	51.20% 85	0.60% 1	166
Eating healthier	0.00% 0	1.20% 2	10.24% 17	40.96% 68	46.99% 78	0.60% 1	166
Mindfulness practice and meditation	2.41% 4	6.63% 11	24.10% 40	32.53% 54	33.13% 55	1.20% 2	166
Access to the right medication (prescribed/complimentary medicine)	1.81% 3	2.41% 4	9.04% 15	33.13% 55	48.19% 80	5.42% 8	166
Understanding what is happening in my body when I am stressed	0.00% 0	1.20% 2	7.23% 12	34.94% 58	56.63% 94	0.00% 0	166
Having good quality housing	0.00% 0	0.00% 0	4.82% 8	24.10% 40	69.88% 116	1.20% 2	166

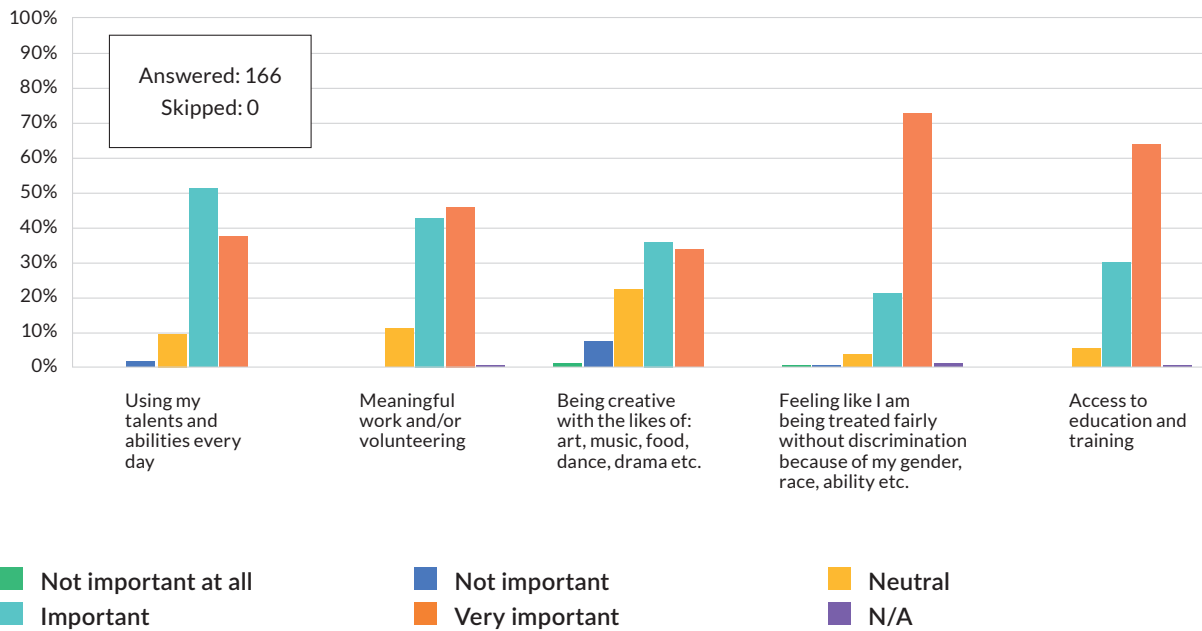
Health & Environment: How important are the following factors for mental well-being?

Other (please specify)

- | | |
|----|---|
| 1 | Having networks of support where I can lean on others and be leaned on also. |
| 2 | The problem with mental health problems such as depression are: What could be a mitigating factor, like exercise. You dont/wont have the energy for! In fact, your brain rebels against! |
| 3 | Understanding what is going on in me , when I am stressed, not just the body. in my mind etc...understanding and getting to know me. |
| 4 | Having a good support network of family, friends and work colleagues. |
| 5 | Need to have contact with supportive people. |
| 6 | I know what's important for mental health but, when you have a full-time job and children to care for, it is difficult to make space for physical exercise, to eat healthily, or to practice mindfulness. |
| 7 | Having peer or adequate family support. |
| 8 | Access to mental health services. |
| 9 | Education around breathwork for stress and anxiety. |
| 10 | Sleep. |
| 11 | Money. |
| 12 | We need to increase the protective factors that will reduce the risk of an individual developing poor mental health or illness. |
| 13 | Work/life balance must be right. As an NHS worker my job is very stressful. |

Question 5

Work/Education: How important are the following factors for your mental well-being?

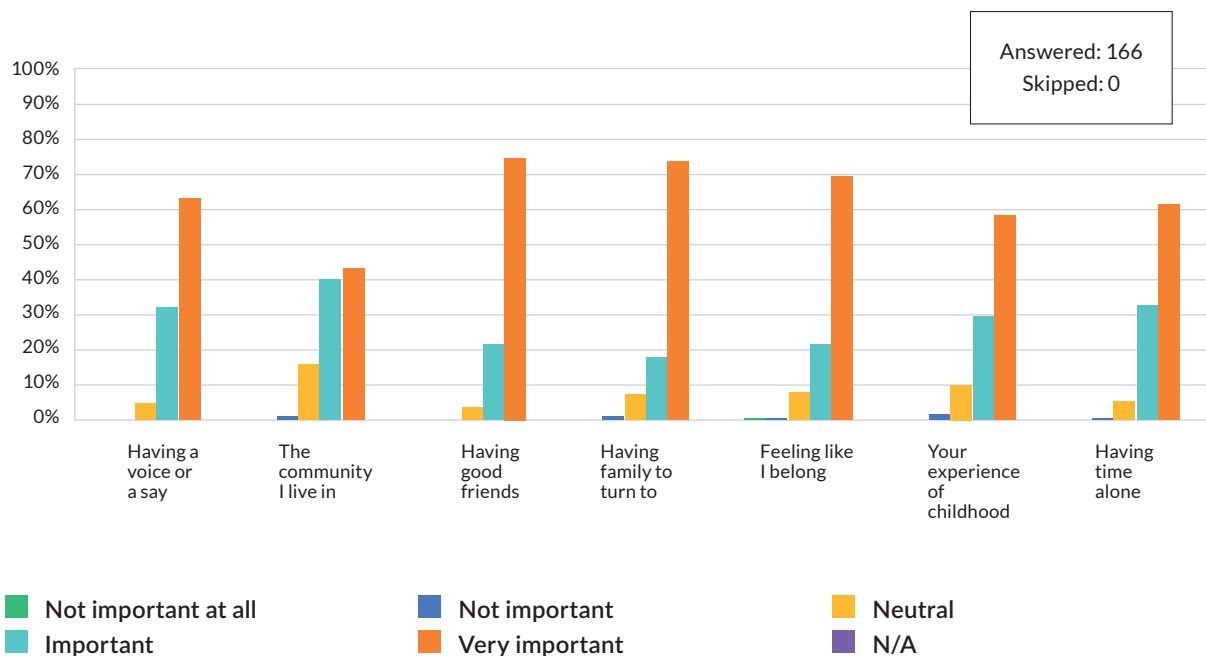


	Not important at all	Not important	Neutral	Important	Very important	N/A	Total	Weighted Average
Using my talents and abilities every day	0.00% 0	1.81% 3	9.64% 16	51.20% 85	37.35% 62	0.00% 0	166	4.24
Meaningful work and/or volunteering	0.00% 0	0.00% 0	10.84% 18	42.77% 71	45.78% 76	0.60% 1	166	4.35
Being creative with the likes of: art, music, food, dance, drama etc.	1.20% 2	7.23% 12	22.29% 37	35.54% 59	33.73% 56	0.00% 0	166	3.93
Feeling like I am being treated fairly without discrimination because of my gender, race, ability etc.	0.60% 1	0.60% 1	3.61% 6	21.08% 35	72.89% 121	1.20% 2	166	4.67
Access to education and training	0.00% 0	0.00% 0	5.42% 9	30.12% 50	63.86% 106	0.60% 1	166	4.59

Other (please specify)

- 1 Having adequate money to pay bills and needs and some of my wants.
- 2 Adequate nutrition and good nutritional information which appears to be so lacking in our community. Gut health information is not being promoted within many GP practices. It's a vital connection in good mental health.
- 3 Managing my responsibilities as a parent.
- 4 Access to Public Health Care.
- 5 Meaningful relationships.

Connecting with Self and Others: How important are the following factors for your mental well-being?



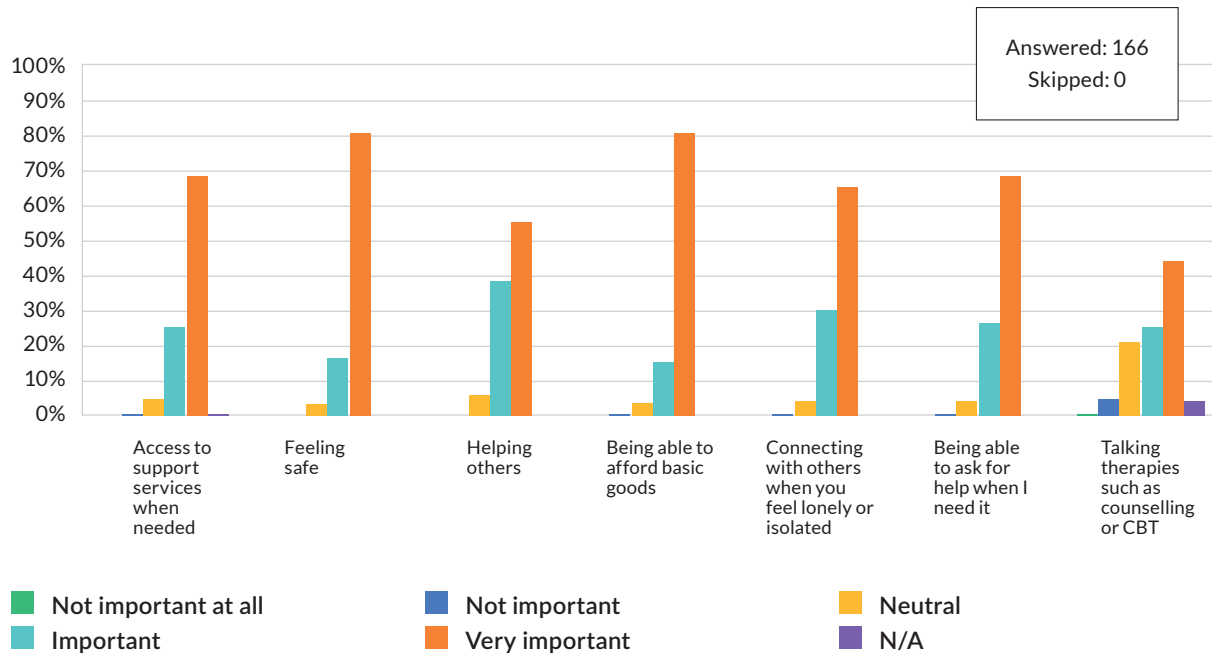
	Not important at all	Not important	Neutral	Important	Very important	N/A	Total	Weighted Average
Having a voice or a say	0.00% 0	0.00% 0	4.82% 8	31.93% 53	63.25% 105	0.00% 0	166	4.58
The community I live in	0.00% 0	1.20% 2	15.66% 26	39.76% 66	43.37% 72	0.00% 0	166	4.25
Having good friends	0.00% 0	0.00% 0	3.61% 6	21.69% 36	74.70% 124	0.00% 0	166	4.71
Having family to turn to	0.00% 0	1.20% 2	7.23% 12	18.07% 30	73.49% 122	0.00% 0	166	4.64
Feeling like I belong	0.60% 1	0.60% 1	7.83% 13	21.69% 36	69.28% 115	0.00% 0	166	4.58
Your experience of childhood	0.00% 0	1.81% 3	10.24% 17	29.52% 49	58.43% 97	0.00% 0	166	4.45
Having time alone	0.00% 0	0.60% 1	5.42% 9	32.53% 54	61.45% 102	0.00% 0	166	4.55

Other (please specify)

- 1 Being valued at work and at home.
- 2 Appropriate upstream interventions need to be in place to promote, support and encourage resilience. This coupled with increased mental health literacy is essential.

Question 7

Help & Support: How important are the following factors for your mental well-being?

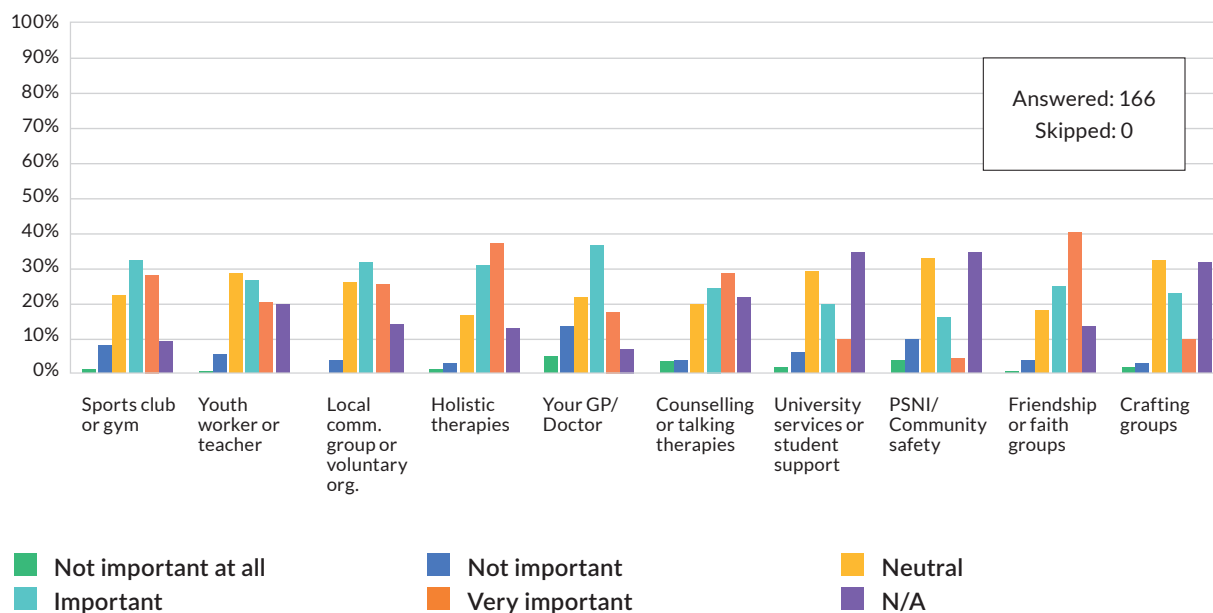


	Not important at all	Not important	Neutral	Important	Very important	N/A	Total	Weighted Average
Access to support services when needed	0.00% 0	0.60% 1	4.82% 8	25.30% 42	68.67% 114	0.60% 1	166	4.63
Feeling safe	0.00% 0	0.00% 0	3.01% 5	16.27% 27	80.72% 134	0.00% 0	166	4.78
Helping others	0.00% 0	0.00% 0	6.02% 10	38.55% 64	55.42% 92	0.00% 0	166	4.49
Being able to afford basic goods	0.00% 0	0.60% 1	3.61% 6	15.06% 25	80.72% 134	0.00% 0	166	4.76
Connecting with others when you feel lonely or isolated	0.00% 0	0.60% 1	4.22% 7	30.12% 50	65.06% 108	0.00% 0	166	4.60
Being able to ask for help when I need it	0.00% 0	0.60% 1	4.22% 7	26.51% 44	68.67% 114	0.00% 0	166	4.63
Talking therapies such as counselling or CBT	0.60% 1	4.82% 8	21.08% 35	25.30% 42	43.98% 73	4.22% 7	166	4.12

Other (please specify)

- 1 Being part of a community, for example a 12-step programme.
- 2 Talking therapies are not important to me at present as I don't need them. If my circumstances were different, they could be very important.
- 3 Being supported to remain in your own home rather than receiving long term hospital inpatient treatment.
- 4 Prefer CBT, Mindfulness.
- 5 Soundbath meditation and Lucia light 3 is excellent for clearing the mind and de-stressing.

We would like to know more about what types of support you have found unhelpful or helpful in the past. How have you found these support services in the past?



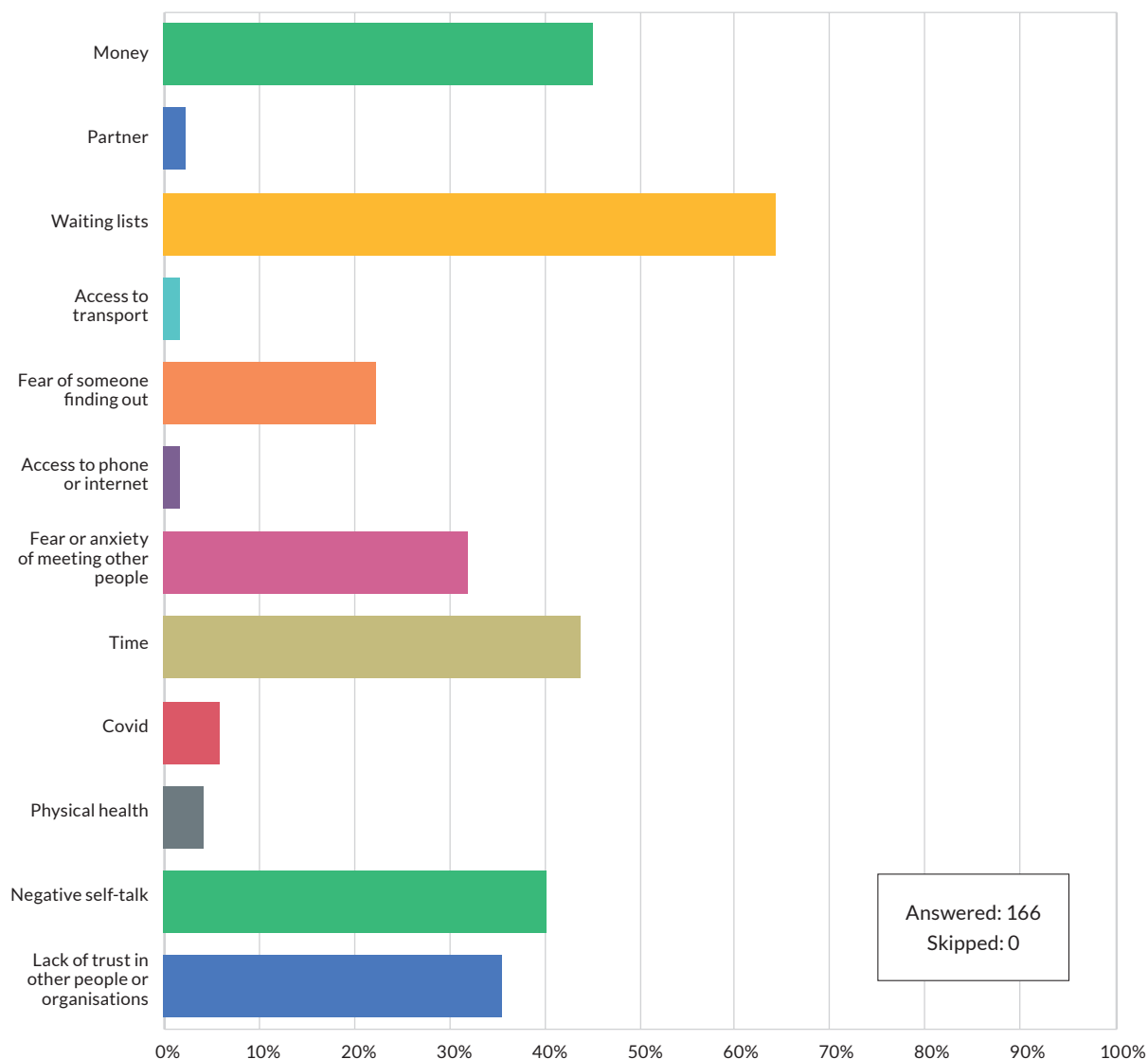
	Really unhelpful	Unhelpful	Neutral	Helpful	Really helpful	N/A	Total	Weighted Average
Sports club or gym	1.20% 2	7.83% 13	22.29% 37	31.93% 53	27.71% 46	9.04% 15	166	3.85
Youth worker or teacher	0.60% 1	5.42% 9	28.31% 47	26.51% 44	19.88% 33	19.28% 32	166	3.74
Local community group or voluntary organisation	0.00% 0	3.61% 6	25.90% 43	31.33% 52	25.30% 42	13.86% 23	166	3.91
Holistic therapies (Reiki, massage, reflexology, yoga etc.)	1.20% 2	2.41% 4	16.27% 27	30.72% 51	36.75% 61	12.65% 21	166	4.14
Your GP/Doctor	4.82% 8	13.25% 22	21.69% 36	36.14% 60	17.47% 29	6.63% 11	166	3.52
Counselling or talking therapies	3.01% 5	3.61% 6	19.28% 32	24.10% 40	28.31% 47	21.69% 36	166	3.91
University services or student support	1.81% 3	6.02% 10	28.92% 48	19.28% 32	9.64% 16	34.34% 57	166	3.44
PSNI/Community safety	3.61% 6	9.64% 16	32.53% 54	15.66% 26	4.22% 7	34.34% 57	166	3.11
Friendship or faith groups	0.60% 1	3.61% 6	18.07% 30	24.70% 41	39.76% 66	13.25% 22	166	4.15
Crafting groups	1.81% 3	2.41% 4	31.93% 53	22.89% 38	9.64% 16	31.33% 52	166	3.53

Question 8

Other (please specify)

- 1 Groups that meet around activities in nature like sea swimming or walking.
- 2 Swimming group.
- 3 Access to natural environment. Nature is a healer.
- 4 Hospital social work staff.
- 5 Self help.
- 6 I would not use some local community based services as I would not have confidence in their competence or their GDPR compliance. I would avoid contact with the PSNI unless absolutely necessary. I would not engage with community safety or CRI and similar.

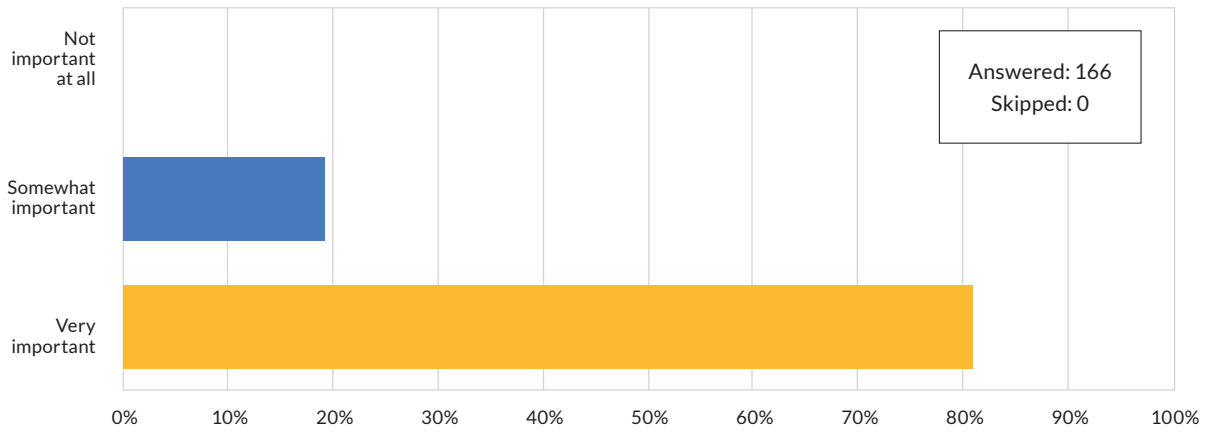
What barriers prevent you from accessing support for mental well-being when you need it? Please select your top 3.



Answer Choices	Responses	
Money	45.18%	75
Partner	2.41%	4
Waiting lists	64.46%	107
Access to transport	1.81%	3
Fear of someone finding out	22.29%	37
Access to phone or internet	1.81%	3
Fear or anxiety of meeting other people	31.93%	53
Time	43.98%	73
Covid	6.02%	10
Physical health	4.22%	7
Negative self-talk	40.36%	67
Lack of trust in other people or organisations	35.54%	59
Total Respondents:		166

Question 10

Please rate, how important are individual and cultural characteristics such as trust, hope and joy to mental well being?



Answer Choices	Responses	
Not important at all	0.00%	0
Somewhat important	19.28%	32
Very important	80.72%	134
Total		166

Research – One-to-One Interview Questions

A: Accessing support

1. Have you sought out help or support to help you deal with your own mental well-being?
2. What barriers, if any, did you face when seeking help or support?
3. What support did you find most helpful?
4. Did you find any of the support caused more harm than good?
5. What gaps do you think there are in support for mental well-being?

B. Individual vs. collective approaches

1. What individual tools do you find helpful in improving mental well-being? (e.g., self-care)
2. How can you stop your mental well-being deteriorating when you notice it declining?
3. What collective/group tools have you found helpful in improving your mental well-being?
4. What part of mental well-being is the most difficult for you? Such as stress, isolation, trauma, lack of self-esteem/self-confidence etc. (please add to this where applicable)
5. Are you involved in any networks that help your mental well-being?

C. Cultivating trust and hope

1. What helps you trust people and organisations?
2. What helps you have hope for the future?

D. Values and Belonging

1. Do you feel valued by society?
2. What is important to you about how people with poor mental well-being are treated in our community?

Peer Participants/Resource Contributors

Biographies

Sara Anderson. Life Coach well-being Facilitator: Admiring the compassion and commitment to communities of Maureen Hetherington and Seamus Farrell, I offered to join this project as a well-being facilitator. I have loved the atmosphere of the project's meetings, the space created for everyone and the sense of mental well-being 'mattering for all'. Poor mental health can be all consuming, and I know when I look after my mental health, I feel better in myself and make a more positive impact on others. <https://saraanderson.ie/e-ft/>

Jacqui Condren: Student. Having lived with both anxiety and depression for over 10 years, I have experiences of managing my own mental well-being, daily. These personal experiences enable me to empathise with others with similar experiences. I got involved in this project to further my understanding so I may be a help to those in need. I hope to continue this path, helping others to change the story they tell themselves and going on to live fuller lives.

Catharine Condren: Lucia N°03 Light Practitioner and Holistic Therapist. I became involved in the *Changing the Story I Tell Myself* Project in the hope of gaining further understanding so that I could better support my children with their mental well-being, and also incorporate that understanding into my own holistic work in the community.

Seamus Farrell: Peace Educationalist. Peace-building work with The Junction over many years has starkly revealed mental well-being issues as a major legacy of conflict, one that persists into subsequent generations. Bearing in mind the multiple interconnected challenges facing young people today, for me this programme is the place to be.

Dr Jennifer Goddard: Lecturer in Drama, School of Arts & Humanities, Ulster University. My specialist areas of research are in performance and disability (including mental health), well-being, trauma-informed practice and post-traumatic growth. I am particularly interested in how, through performance practice, we can change and re-tell commonly held stories about our being-in-the-world that do not serve us, especially if they have contributed to marginalising and/or silencing particular voices. Through my own personal experience of grief, loss and in recent years of both domestic abuse and of chronic nerve pain, this particular area of research has chosen me. It has been a pleasure and a great source of support and creativity to be involved with the Junction for the *Changing the Story I Tell Myself* project.

Appendix 3: Biographies

Tracy Healy: Experienced Officer in Education, Health, and Social Care for 30 years and Founder of M&T Mindfulness Training. I am passionate about mental well-being, understanding it to be something that affects everyone. For me, looking after my mental well-being involves daily habits and routines of mindfulness practices, such as, breathing exercises and walking in nature and practising self-compassion and gratitude all of which help me pay more attention to the things that bring joy. One mantra I use is ‘we are not our thoughts; we have thoughts’. With personal knowledge of ‘dark days of despair’, I was eager to get involved with this project to share professional knowledge and tools which can help to bring about change.

Maureen Hetherington: Former CEO of The Junction. The progenitor of the *Changing the Story I Tell Myself* Project, I co-led the project with Seamus Farrell, leading out on writing all the new workshop materials (excluding those attributed to other core group contributors). As a community relations practitioner and peace builder, I recognise mental well-being as an essential component to building a healthy, harmonious, and peaceful society.

Jotham Jackson: Student. My personal journey is one of endurance as I grow alongside the persistent pain brought on by chronic/ acute migraines. I continue to strive for a stronger understanding and connection with others through my academic studies in Theatre, Psychology, and Drama Therapy. Being involved in the *Changing the Story I Tell Myself* project has been an incredible journey enabling a very worthwhile exploration of mental well-being.

Josh Kuzma: As a young person who was involved in the *Live to Learn* project in HURT, I have learned how to build life skills, resilience, and confidence. I got involved with the *Changing the Story I Tell Myself* Project in order to help create a resource that would have helped me to take better care of myself when I was going through my hardest times. I’ve learned so much from working on the resource with the group, and I hope that the resource will help other people to take better care of themselves.

Colleen Maguire: Graduate. Being involved with Creggan Day Centre, I know the support I receive there helps me maintain routine and structure and this is an aid to my mental well-being. I am learning that making small changes and having compassion for yourself can also go a long way in supporting your own mental well-being. I am involved in this project as I believe it is extremely important to promote mental health so that the stigma is reduced, and I hope in time, mental health is easily talked about in public.

Kerona McDowell: Administrator for The Junction and a mother of four children. I have enjoyed helping with the logistics for this group which has had a positive spin-off and encouraged my own interest in developing positive mental well-being.

Ruth Gonsalves Moore: CEO, The Junction. With a community engagement background, I value self-help and community led approaches, and it has been an enlightening experience working alongside a diverse group of people determined to bring their insights forward, to inform a new resource. Recognising the impact that conflict and division, along with other everyday realities has on our mental well-being, means that supporting individual and societal well-being is an important dimension to an integrative and sustainable peace.

Declan Pickering: As a young person who experienced the loss of my father to lung cancer when I was 11 years old, the anxiety and depression I experienced after that led to me leaving school at 15. Having, more recently, decided to talk to a mental health specialist about my past traumas I have been introduced to CBT (Cognitive Behavioural Therapy) and have been given tools to begin my journey of managing my symptoms and getting my life back together. My hope is that this resource we have developed will be used to help those in need and will inform others around the importance of mental well-being.

Sorcha Shanahan: Artist, actor and one half of the creative-duo MakeyUppers. Passionate about creativity and about how it can support mental well-being, I was delighted to get involved in the project and its processes. As a creative facilitator, I have enjoyed and learned from the inter-generational aspect to this group.

Icebreakers

Icebreakers are very important at the beginning of a workshop. They can help to create a relaxed atmosphere for participants; keep this in mind when choosing an icebreaker, particularly if people are shy or vulnerable. Icebreakers help in relationship building, creating trust and building rapport. Here are a few suggestions:

1. Ask participants to share their full name and how they got that name.
2. Ask participants to share their name and two words that describe their mood or personality at the moment.
3. Ask participants to share their favourite song and what it means to them.
4. Ask participants to share their favourite movie and why they chose it.
5. Give each person two minutes to introduce themselves, sharing their name, job, hobbies, and a fun fact.
6. Ask participants to choose three items they would take with them if they were stranded on a desert island.
7. Have everyone share one item from their bucket list, whether it's a place they want to visit or a skill they want to learn.
8. Begin a story with a sentence, and then have each person in the group add a sentence to continue the story. It can lead to creative and funny narratives.
9. Ask participants to describe where and when they would go if they could travel in a time machine. This can spark interesting conversations about history and personal interests.
10. Ask participants to choose a hero/famous person (past or present) and the question/s they might ask of them.
11. Ask participants to share their first concert / first job / first holiday and what went well or didn't go well!
12. Ask participants to bring an object that represents them or tells a story about their life, and share it with the group.

