

(Resilience, Education, Action, Community, Health)





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The Copeland Center for
Wellness & Recovery





The Copeland Center for Wellness & Recovery partners with Temple University Collaborative on Community Inclusion and Integration to translate concepts, research and tools on community inclusion into practical approaches for peer support facilitators to promote increased community participation.

R.E.A.C.H. (Resilience, Education, Action, Community, Health) is a product of the ongoing partnership between The Copeland Center and the Temple University Collaborative. Utilizing the extensive work of the Temple University Collaborative and developed through the lens of the Copeland Center approach to peer/group work, REACH serves to inspire and create an environment for empowerment and the incorporation of meaningful activity.



About Our Approach:

The Training Design Process

The training curriculum was designed by a team of peers/consumers who are staff persons, contractors, and consultants working for and with the Copeland Center. The development of the curriculum drew on the best practices from the field of recovery and peer support, as well as the influence of thousands of peer service providers and peer service recipients connected with the Copeland Center. The curriculum has been designed based on over a decade of experiential approaches to be practical and adaptable to anyone's situation. Our courses are designed for peer sharing and mutual learning at the center of every training session that we conduct.

Our Model of Co-facilitated Peer Trainings

Consistent with the practices that gained our implementation of co-facilitated *Wellness Recovery Action Plan®* groups the status of an evidence-based practice, all our training sessions will be co-facilitated by two peers with lived experience who can illustrate the application of our curriculum from an experiential knowledge by providing their personal applications, not giving advise. The peer-to-peer relationship is essential to upholding our ethic of equality and mutual learning.

The Official Science/Research Information

Protocol title

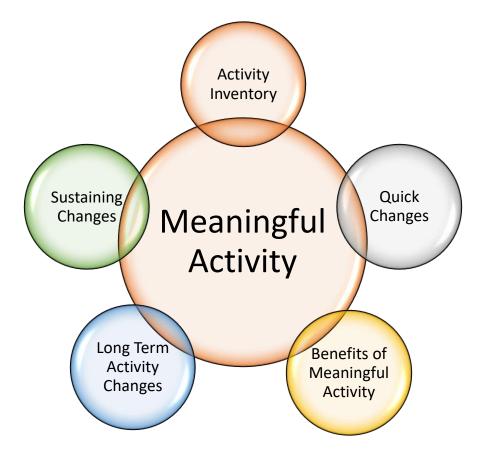
REACH: Resilience, Education, Action, Community, Health. A randomized, controlled trial to improve participation in meaningful activities.

Abstract of the study

The proposed study is a randomized, controlled trial (RCT) that will examine the effectiveness of Resilience, Education, Action, Community, Health (REACH); an intervention focused on increasing engagement in meaningful activities in individuals with a serious mental illness (SMI). The intervention is based on a previously studied intervention for people with SMI, Action Over Inertia (AOI). The peer-delivered intervention will be online to enhance engagement and impact. Participants will be assigned to one of two groups, the REACH intervention condition, or a control group. The intervention arm includes 12 weekly online sessions and review of recorded material and offline activities such as guided readings and homework assignments. Over the course of the intervention, participants will identify meaningful activities, barriers to accessing them, and develop an individualized plan to increase their participation in those activities. The ultimate goal of the intervention is to increase physical activity and community participation.

Recruitment will be national. Eligible participants must meet the criteria for schizophrenia, schizoaffective, bipolar, or major depression diagnosis based on the MINI, have access to the Internet, be fluent in English, and be able to identify meaningful activities and increase their level of participation in those activities. The data collection will take place over a 15-month timespan and include a baseline with follow up interviews at six, nine, and fifteen months post-baseline.

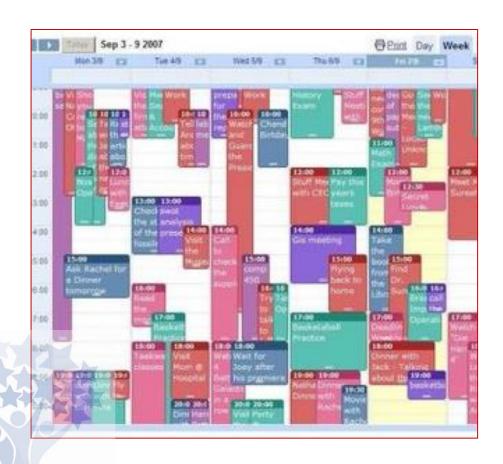
What is REACH?

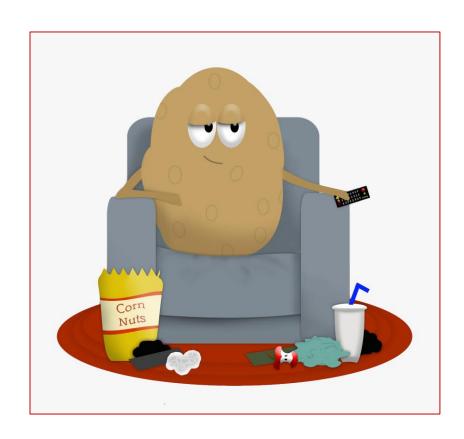




[Note: REACH, developed by the Copeland Center for Wellness and Recovery and Temple University Collaborative on Community Inclusion and Integration is based on and inspired by an adaption of Action over Inertia Intervention as designed by Dr. Terry Krupa, Megan Edgelow and colleagues. The structure, worksheets and resources have been informed, modified, or taken directly from the Action over Inertia Intervention. We are deeply grateful for the powerful work and support of the Action over Inertia creators.]

Why REACH? Who Can Benefit from REACH? What is "Meaningful Activity"?





Intervention:

DEACH

Weekly meetings: 9 weeks, followed by 3 monthly follow-ups - Peer-led - Discussion, Updates, Workshops Activities



Phase 1: Meaningful Activity Inventory

Participants evaluate their time use patterns.



I engage in activities that provide the opportunity for	Currently	Future	Examples/Comments
Skill and/or knowledge			
development			
Contributing to society			
The enjoyment of beautiful			
things			
Self-expression and creativity			
A range of social interactions			
Expressing personal values		_	
Earning a personal income			
Giving to others, such as			
family or friends			
Other			

Phase 2 Quick changes: Facilitation of participation in at least two quick meaningful activity changes linked to desired changes in meaningful activity patterns.

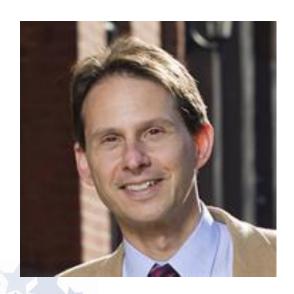
- Dressing up
- Try a new style
- Going to a salon
- Shopping
- Window shopping
- Meeting a friend for coffee or tea
- Massage
- Walking/Hiking
- Trying a new restaurant
- Trying a new ethnic food maybe one that a friend enjoys. (at a restaurant, with a friend or cooking)

- Eat by candlelight
- Plan a trip
- Go for a bike ride
- Take a walk (alone or with a friend)
- Go to a local park
- Go out for coffee
- Explore your city
- Explore job market (friends, work fairs)
- Do an interest inventory
- Brighten up your current job

Wheel of Activity

Phase 3: Education

Two pre-recorded sessions on the science of activity. Mark Salzer, PhD, provides information about activity, health and recovery and the factors associated with disengagement.

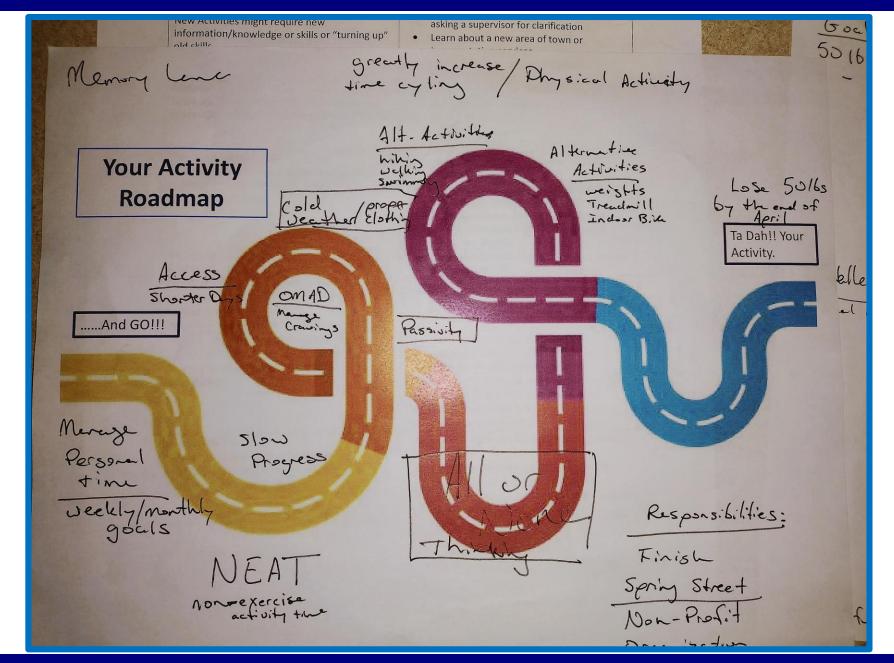


Mark Salzer, PhD is a professor and former department chair in the College of Public Health at Temple University. He has also been the principal investigator and director of the Temple University RRTC on Community Living and Participation For People with Serious Mental Illnesses, a Rehabilitation Research and Training Center (RRTC) funded by the National Institute on Disability, Independent Living and Rehabilitation Research, since 2003. The RRTC is part of the Temple University Collaborative on Community Inclusion of Individuals with Psychiatric Disabilities (www.tucollaborative.org).

Phase 4

Longer-term changes: Facilitation of personal activity planning for at least two longer-term activity changes, including intervention related to explicitly identified expected challenges.



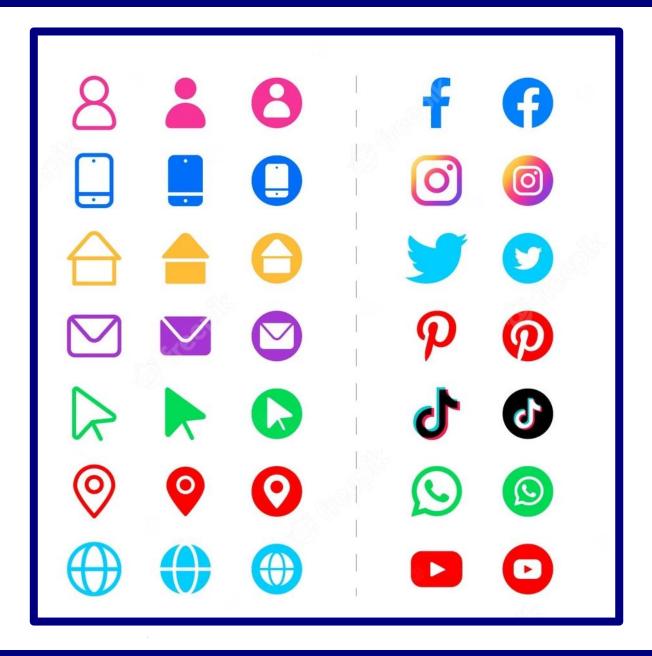




Phase 5

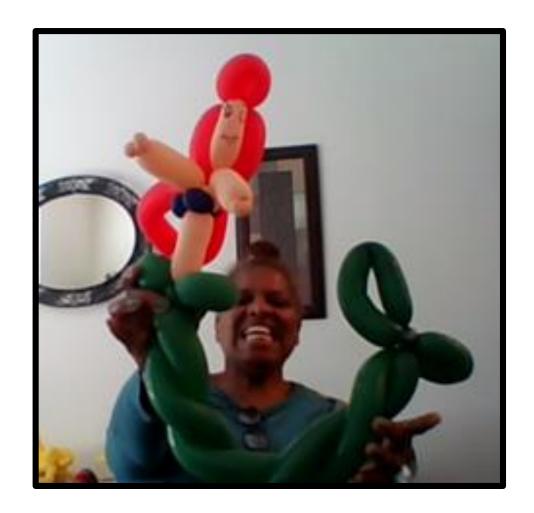
Sustained changes: Facilitation of sustained participation by explicit reflection on activity performance and positive activity experiences.





Tangible Outcomes

- ✓ Trip to Yellowstone & Ireland
- ✓ 2 people back to school
- ✓ Significant increase in exercise & activity
- ✓ Facebook group involved monthly dinners
- ✓ Joined senior bowling league
- ✓ Went to state legislature to take part in protest
- ✓ Stayed in touch via emails and texts



Next Steps & Peer Power & Evolution

Co-facilitators and consultants and contributors:









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Temple University Collaborative on Community Inclusion https://cph.temple.edu/departments-research/research-centers/temple-university-collaborative-community-inclusion

