Let’s get real
REAL SKILLS FOR PEOPLE WORKING IN MENTAL HEALTH & ADDICTION

Values and Attitudes

Learning module

Te Pou
o Te Whakaaro Nui

MINISTRY OF HEALTH
MANATU HAUORA
Contents

Introduction .......................................................................................................................... 4
1. Understanding your own values and attitudes ............................................................... 5
2. Let’s get real values and attitudes ............................................................................... 11
References and recommended reading ........................................................................... 21
Learning Review Tool ...................................................................................................... 24
Individual Professional Development Plan ....................................................................... 26
Introduction

Values and attitudes underpin all the work of mental health and addiction treatment services. They are expressed in action through each of the seven Real Skills (Ministry of Health, 2008).

This Values and Attitudes learning module supports every person working in mental health and addiction services to actively reflect on their own values and attitudes, understand the impact of them on their practice, and make a commitment to improving practice on the basis of the shared values of Let’s get real, their organisational and professional values, and the values of mental health and addiction sector.

Goals of the values and attitudes module

By the end of this module you will be able to:

• clearly articulate your personal values in relation to the work that you do
• develop an understanding of the shared values and attitudes that exist in the mental health and addiction sector
• recognise and understand the impact that values and attitudes can have on the experiences of service users, their families and whānau, and staff working in the mental health and addiction sector.

Preparation

This Values and Attitudes learning module is intended to be completed immediately after the Getting Started module and before commencing the Real Skills modules. Understanding how values and attitudes influence the work you do is critical to ensuring that you meet the goals of Let’s get real.

The module should be completed in partnership with other team members or colleagues. When working with colleagues, think about how values influence not only your relationships with service users and their families and whānau, but also how they influence your relationships with each other.

In completing this module you will need to reflect on your own values, those expressed by your organisation and also those of the mental health and addiction sector. To gain the maximum benefit from this module you are encouraged to think about how the learning module applies to you and your work context. When you have finished working through this module use the Learning Review Tool to help you reflect on how your values and attitudes influence your work. This will enable you to identify where your strengths are, along with any areas you may need to further explore in your Individual Professional Development Plan.
1. Understanding your own values and attitudes

Within the mental health and addiction sector, values are often explicit and visible. This is evident in policy documents, organisational profiles and objectives, professional and occupational standards, and codes of ethics. Whether explicit or not, values and attitudes underpin our decision making throughout all levels of our services.

1.1 Define below your understanding of the following terms.

Values

Attitudes

Principles
1.2 Find a colleague who has also responded to the questions above and compare your answers with the intent of coming to an agreed understanding or definition. How easy or difficult was this to reach? Why was this so?
1.3 Thinking about the work you do with service users within mental health and addiction services, list your values that inform your work.

1.4 Where do you think these values arise from? What experiences, events and people have influenced them?
1.5 Find someone you work with who has a different role and function to yours and compare your responses to the two questions above. What new awareness have you gained from sharing together your values and their sources?

1.6 When there are differences in values between members of your team, how are these dealt with?
1.7 When differences in values have an impact on the way in which a service is delivered, identify creative ways that these could be addressed.

1.8 Roy (brother of Walt) Disney said, “When your values are clear to you, making decisions becomes easier.” In the box below, indicate what your understanding of this statement is. How does this impact on you? How does it impact on the service users you work with? How would you find this out?
1.9 Locate your organisation’s mission or vision statement. What values are expressed in this statement?

1.10 Give an example of how these values are demonstrated within the work of your organisation.
2. Let’s get real values and attitudes

The Let’s get real values and attitudes express the fundamental shared values and attitudes for the mental health and addiction sector. These values and attitudes apply to all staff, from all services, from:

- child and adolescent to adult, older adult, specialist, and addiction services
- district health boards to non-government organisations and primary care organisations
- rural-based services to large urban or regional services
- mainstream, kaupapa Māori, Pacific, Asian and other culturally specific services.

The values and attitudes of Let’s get real are not intended to replace organisation specific value statements. Instead, they provide a foundation to assist and support practice and decision making for people working in mental health and addiction services.

2.1 Each of the six Let’s get real values are identified and described in the table below. Review each value in relation to your work environment, and in the adjacent column, indicate how you demonstrate these values in your relationships with service users and their families and whānau.

<table>
<thead>
<tr>
<th>Let’s get real value</th>
<th>Example of how it is demonstrated</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Respect</strong></td>
<td>Service users are the focus of our practice. We respect the diversity of values of service users. The values of each service user and of their community are the starting point for all of our work.</td>
</tr>
<tr>
<td><strong>Human rights</strong></td>
<td>We strive to uphold the human rights of service users and their families. Human rights include, but are not limited to, autonomy and self-determination, the right to be free from coercion, the right to be treated in a non-discriminatory way, the right to informed consent, and the right to receive care and support that responds to the physical, psychological, spiritual, intellectual and cultural needs of the service user.</td>
</tr>
</tbody>
</table>
**Service**  
We are committed to delivering an excellent service for all service users. This includes service user partnerships at all levels and phases of service delivery, including the choice of services available as well as the actual delivery of service.

**Recovery**  
We believe and hope that every service user can live a full and meaningful life in the presence or absence of their mental illness and/or addiction. We also understand that recovery is not only related to the mental illness and/or addiction itself, but also to all of the losses associated with it.

**Communities**  
We value communities - the many places in which we all live, move and have our being - as pivotal resources for the effective delivery of services and support for service user and their families/whānau.

**Relationships**  
We seek to foster positive and authentic relationships in all spheres of activity, including relationships with all people who work within mental health and addiction, wider communities, and service users and their families/whānau.
2.2 Now revisit your own values and the organisational values you identified in Section 1 of this module and consider them against the *Let’s get real* values above. For each of the values you identified in Section 1, indicate where it fits in relation to the *Let’s get real* values. An example has been completed for you below.

<table>
<thead>
<tr>
<th>Your or your organisation’s value</th>
<th>Let’s get real value</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Equality</strong></td>
<td></td>
</tr>
</tbody>
</table>
| Acknowledging and respecting the diversity of individuals and groups, and ensuring that are treated with equal importance. | Human rights  
Respect  
Relationships  |

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
2.3 The values of *Let’s get real*, although described individually, are interrelated and overlap. Please discuss the similarities and differences between your values, your organisation's values and those of *Let’s get real*.

2.4 The previous exercises highlighted that values in our work are varied and complex. It is important to recognise that values inform decision making for staff, service users and their families and whānau. Every service user brings with them their own set of unique values, preferences, desires and contexts. Working with service users requires acknowledgement of their values in your relationship, including decision making. Furthermore, ideologies, philosophies, models of service provision and evidence-based practices continually evolve, and as they do, so do values.

Think of an occasion in your life where your values or core beliefs have been challenged and subsequently altered. What happened and in what ways did your values alter?
2.5 An attitude is “a complex mental state involving beliefs, feelings, values and dispositions to act in certain ways, for example ‘he had the attitude that work was fun’ ” (http://wordnet.princeton.edu/). Values comprise the moral principles and beliefs of a person or group in which they have an emotional investment (either for or against something), for example ‘she has very conservative values’.

In the box below, formulate a statement that describes the attitudes you bring to your work in the mental health and addiction sector.

2.6 Let’s get real introduces a series of attitudes that greatly contribute to positive experiences for service users, their families and whānau, and those who work within the sector. The Let’s get real attitudes are described below.

- Compassionate and caring: sensitive, empathetic.
- Genuine: warm, friendly, fun, and have aroha and a sense of humour.
- Honest: have integrity.
- Non-judgemental: non-discriminatory.
- Open-minded: culturally aware, self-aware, innovative, creative, positive risk takers.
- Optimistic: positive, encouraging, enthusiastic.
- Patient: tolerant, flexible.
• Professional: accountable, reliable and responsible.
• Resilient.
• Supportive: validating, empowering, accepting.
• Understanding.

In what ways are the attitudes above reflected in the statement describing your own attitudes that you made in response to question 2.5?
2.7 An effective way of increasing our understanding of the impact that values and attitudes have on our behaviour and interactions with others is to apply them to actual situations. In the exercise below, read the different perspectives of the same story, and respond to the questions that follow.

Don
I have been using mental health services since I was about 23, when I lost the plot while studying law at university. I see my keyworker, Sue, who comes round home fairly often – she’s pretty cool, except when she gives me a hard time for not taking my prescribed drugs, but taking my own alternatives. I would like to eventually not need to take the meds.

There were a couple of times last year when I went into the local unit, which is pretty freaky really, although looking back I really needed to be there. The last time I was ultra-stressed ‘cause my girlfriend was pregnant and I didn’t know if it was mine. I was really hoping it wasn’t, because while it would be alright being a Dad there’s no way I could at the moment - what with everything else on my plate - going back to university to finish my degree, coping with my voices and trying to get my medications right so the side-effects aren’t so bad.

My girlfriend and I broke up and it turns out Cindy (the baby) was mine. I have seen her twice - she’s nearly a year old now and quite cute. In the back of my mind I kind of hope I’ll get the chance to get to know her better.

Sue
I have been allocated to work with Don for the past two years and really enjoying working with him. He has come so far in the time that I have known him. Don has gone back to uni, and while we were concerned it was going to be stressful for him, he has coped really well. We were talking in the multidisciplinary team meeting about discharging him back to his GP. I am quite anxious about that, as I don’t want things to go backwards for him, as I know, in the past, that stress can be a real big factor in him becoming unwell. I also have some ongoing concerns that he will stop taking his medication if he doesn’t have someone reminding him of the importance of them. I know his mum worries about this also. You see, when things are going well for Don and he no longer has his symptoms he thinks “yay” and stops taking his meds. Then a downward spiral starts again and I really don’t want that to happen for him again.

I know Don really wants to see his daughter more often, but I don’t know how we can help with that. The mother and her family are really adamant that he is not fit to be a father due to his schizophrenia.

Cilla
Don’s had some real difficulties in his life, so I am pleased to see things are improving for him. As his Mum, I’ve had to pick up the pieces after each of his episodes, as they cause so much mess. Like the debt he got into when he went flatting with some people who got him into drugs and just used him really.

He was always such a smart boy I am glad he is back at study and using his brain again. I think it’s good for him to be busy and have something to do you know? Otherwise he just sits around all day getting frustrated and anxious. He was really lucky with the supports that he got from the mental health and addiction services. I am concerned about the effects of the medication on him though, and I know that he doesn’t like the side-effects, but his worker told me that it was really important that he keeps taking them, so I suppose he has no choice. He thinks I nag him about them but I only do because I care.

I really want him to get himself together so that he can get some access to Cindy. I think he needs to take responsibility for that gorgeous wee girl - he brought her into the world so he should do something to make sure that she is properly looked after. I would dearly love to see more of her. It does bother me that my only grandchild hardly knows what I look like. She could have such a positive impact on us all – especially Don - if only we were able to be more involved. People should have contact with their family you know.
2.8 Identify the values and attitudes expressed in each person’s story.

Don

Sue

Cilla
2.9 What potential conflicts arise between the different values and attitudes of each of the people involved?
2.10 Thinking about your own values and attitudes, those of your organisation and those of *Let’s get real*, how would you intervene to address the conflicts that exist and to help Don achieve his ambitions?
References and recommended reading


Values and Attitudes

Learning Review Tool and Individual Professional Development Plan
**Learning Review Tool**

Using the Likert scales below, rate your work in relation to values and attitudes.

I am able to articulate my personal values in relation to the work that I do.

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very limited ability to do this</td>
<td></td>
<td></td>
<td></td>
<td>Absolutely</td>
</tr>
</tbody>
</table>

I am confident that I understand the shared values and attitudes that exist in the mental health and addiction sector.

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not at all confident</td>
<td></td>
<td></td>
<td></td>
<td>Very confident</td>
</tr>
</tbody>
</table>

I have a practical understanding of the various impacts that values and attitudes can have on the experience of service users, their families and whānau, and service staff.

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very little understanding</td>
<td></td>
<td></td>
<td></td>
<td>Comprehensive understanding</td>
</tr>
</tbody>
</table>

Choose your response to one of the above statements, and explain why you made this response.
What new knowledge or insights have I gained from working through this module?

What are three things I can put into practice or improve on as a result?

A

B

C
Individual Professional Development Plan

One thing that I can take personal responsibility for.

<table>
<thead>
<tr>
<th>Action</th>
<th>Timeframe</th>
<th>Resources</th>
<th>Challenges</th>
</tr>
</thead>
<tbody>
<tr>
<td>What will I do?</td>
<td>When will I do this?</td>
<td>What or who will I need?</td>
<td>What barriers or resistance will I face?</td>
</tr>
</tbody>
</table>
One thing that I can advocate for and work towards.

<table>
<thead>
<tr>
<th>Action</th>
<th>Timeframe</th>
<th>Resources</th>
<th>Challenges</th>
</tr>
</thead>
<tbody>
<tr>
<td>What will I do?</td>
<td>When will I do this?</td>
<td>What or who will I need?</td>
<td>What barriers or resistance will I face?</td>
</tr>
</tbody>
</table>

Please retain this Individual Professional Development Plan: Values and Attitudes to contribute to your summary action plan once you have completed all of the learning modules.