GOOD PRACTICE GUIDELINES
for
Peer Led Family Support Groups

April 2010
Dear Reader,

I would like to take this opportunity to thank you for taking the time to read the good practice guidelines for peer led family support groups.

I have been involved in family support since 1995. I know and understand from both personal and professional experience the invaluable work of family support groups and networks. When I first began on my journey of family support there were less than five groups operating in the Dublin area. I am delighted to say there are now over 70 family support groups meeting on a weekly basis throughout the island of Ireland from Listowel to Moyross to Ballymena to Wexford town. However, there are still many family members trying to cope with this issue alone. That is the reason I am so delighted to see the publication of these guidelines. I hope that new groups will be formed in areas where none are in existence. I hope that already established groups will feel more supported and perhaps re-energised in the great work that they do. Finally, I hope that it will encourage the development of local and regional family support networks that will add to our collective voice as families living with drug use.

I am pleased to say that every year family support is gaining greater recognition from both the Government and the various agencies involved in the National Drugs Strategy. The first official recognition of family support at a Government level occurred in 2005 in the Mid-term review of the National Drugs Strategy ‘Building on Experience’. In 2007 research by Dr. Carmel Duggan, commissioned by the National Advisory Committee on Drugs, was published. ‘The Experiences of Families Seeking Support in Coping with Heroin Use’ clearly demonstrated the role of the family in the treatment and rehabilitation of heroin users. The report also identified that once families receive information, education and support our role changes from being one of carer to an agent of recovery. The new National Drugs Strategy (interim) 2009-2016 again acknowledges the role of the family as agents of recovery.

The national Family Support Network commissioned Eustace Patterson to research and develop these guidelines and I would like to thank them for their participatory research approach, their understanding of the issues facing families and ultimately for producing a set of guidelines of which families can be proud. I would also like to thank the Board of Management of the Family Support Network and in particular the work of the research advisory group who gave so much of their time to ensure the guidelines are reflective of all those in family support.

These guidelines could not have been published without the financial and professional support of our funders; the Office of the Minister for Drugs, the Family Support Agency and the Office of the Minister for Integration. I would also like to pay particular thanks to the Quinn Family Trust for their
philanthropic donation that contributed to the publication of these guidelines.

Most importantly I would like to thank the family support groups, networks and individual family members who participated in this research and shared with us their experiences of family support and top tips. Families have shared their personal experiences so that they can ensure that other family members in circumstances similar to their own receive the best support possible. Once again families have shown the huge personal contributions they are willing to make.

It is now everybody’s responsibility to use and implement these guidelines in order to ensure that no family member in need of support is left to cope alone.

Best Wishes,

Sadie Grace
Co-ordinator
Family Support Network
Acknowledgements

We would like to thank all those who gave so generously of their time to provide input and feedback to the development of these guidelines. In particular, we would like to thank the nine family support groups and networks whose members gave up weekly sessions to devote time to discussing the guidelines. We would also like to thank Phillip Keegan and Breda Fell for their input as well as Sadie Grace and Megan O’Leary and the members of the Steering Committee (please see Appendix B).
# Contents of Good Practice Guidelines

1. **Introduction**
   - 1.1 The Family Support Network
   - 1.2 What is peer led family support?
   - 1.3 What is good practice?
   - 1.4 How were these guidelines designed?
   - 1.5 What is the purpose of these guidelines?
   - 1.6 Who are these guidelines for?
   - 1.7 How to get the best use out of these guidelines?

2. **Starting a Peer Led Family Support Group**
   - 2.1 About groups
   - 2.2 Setting your intentions
   - 2.3 Doing your research
   - 2.4 Providing a safe place
   - 2.5 Promoting your group
   - 2.6 Drawing in members
   - 2.7 Code of ethics
   - 2.8 Meeting arrangements
   - 2.9 Checklist for your meetings
   - 2.10 Opening your meeting
   - 2.11 Closing your meeting
   - 2.12 Sharing responsibility
   - 2.13 Reflective exercises
   - 2.14 Top tips

3. **Providing Support in a Group**
   - 3.1 What is peer led family support?
   - 3.2 Features of the process of peer led family support
   - 3.3 Disclosure
   - 3.4 Managing change
   - 3.5 Group development
   - 3.6 Exiting a group
   - 3.7 Reflective exercises
   - 3.8 Top tips

4. **Facilitation**
   - 4.1 What is facilitation?
   - 4.2 What is the purpose of facilitation?
   - 4.3 The facilitation role in peer led family support
   - 4.4 Boundaries of the facilitation role
   - 4.5 Facilitation tool kit
   - 4.6 Managing the group meetings
   - 4.7 Supervision for facilitators
   - 4.8 Reflective exercises
   - 4.9 Top tips

5. **Seeking External Support**
   - 5.1 The purpose of self-care and development
   - 5.2 The value of self-care and development
   - 5.3 The issues and challenges for family support groups
<table>
<thead>
<tr>
<th>Page Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.4 Identifying information, self-development &amp; training needs 45</td>
</tr>
<tr>
<td>5.5 Sourcing training &amp; development 47</td>
</tr>
<tr>
<td>5.6 Funding training &amp; development 48</td>
</tr>
<tr>
<td>5.7 Evaluating training &amp; development 48</td>
</tr>
<tr>
<td>5.8 Respite as a source of support 49</td>
</tr>
<tr>
<td>5.9 Reflective exercises 49</td>
</tr>
<tr>
<td>5.10 Top tips 50</td>
</tr>
</tbody>
</table>

6. **Setting up a Family Support Network**

<table>
<thead>
<tr>
<th>Page Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.1 What is a family support network? 51</td>
</tr>
<tr>
<td>6.2 What is the purpose of a family support network? 51</td>
</tr>
<tr>
<td>6.3 Structure of a family support network 51</td>
</tr>
<tr>
<td>6.4 Setting up and managing a network 52</td>
</tr>
<tr>
<td>6.5 Connecting with the national Family Support Network 54</td>
</tr>
<tr>
<td>6.6 Reflective exercises 55</td>
</tr>
<tr>
<td>6.7 Top tips 55</td>
</tr>
</tbody>
</table>

**Appendix A: Governance**

<table>
<thead>
<tr>
<th>Page Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>A.1 Insight into national structures 57</td>
</tr>
<tr>
<td>A.2 Structure for your family support group 60</td>
</tr>
<tr>
<td>A.3 Setting up as a company limited by guarantee 60</td>
</tr>
<tr>
<td>A.4 Setting up as a charity 61</td>
</tr>
<tr>
<td>A.5 Annual general meetings 61</td>
</tr>
<tr>
<td>A.6 Roles of the chairperson, secretary and treasurer 61</td>
</tr>
<tr>
<td>A.7 Responsibility for finances and accountability for funds 62</td>
</tr>
<tr>
<td>A.8 Sources of funding and applications 62</td>
</tr>
<tr>
<td>A.9 Insurance 63</td>
</tr>
<tr>
<td>A.10 Data protection 63</td>
</tr>
<tr>
<td>A.11 Representation 63</td>
</tr>
<tr>
<td>A.12 Affiliation to a network 64</td>
</tr>
</tbody>
</table>

**Appendix B: Steering Group Members**

<table>
<thead>
<tr>
<th>Page Number</th>
</tr>
</thead>
</table>

**Appendix C: Source Documents**

<table>
<thead>
<tr>
<th>Page Number</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Page Number</th>
</tr>
</thead>
</table>
‘What lies behind us and what lies before us are tiny matters compared to what lies within us’, Ralph Waldo Emerson

Section One
Introduction

This section sets the scene for these good practice guidelines. It provides short descriptions of peer led family support, good practice and some insight into how these guidelines were developed. It also explains the rationale for these guidelines and the inspiration behind them.

1.1 The Family Support Network

The Family Support Network (FSN) was established in 2000 following the successful organisation of the first ceremony of commemoration for those who died as a result of drugs. Subsequent to the success of this event and the evident desire of families to continue with such events the FSN was formed.

1.1.1 Mission Statement

The FSN is an autonomous self-help organisation that respects the lived experiences of families affected by drugs in a welcoming non-judgemental atmosphere. The FSN endeavours to provide support to these families by developing personalised services that meet their real identified needs and by campaigning for policy change.

1.1.2 Philosophy

The FSN operates with a strong community development ethos. The FSN is a peer led organisation committed to promoting the empowerment, inclusion and participation of its members. Collectivism and voluntarism are key operating principles as is a focus on process.

1.1.3 Aim

The overall aim of the FSN is to improve the situation of families coping with drug use by developing, supporting and reinforcing the work of family support groups and local/regional family support networks, by working for positive change in policy and practice and by raising public awareness about the problem of drugs for families and communities.

Objectives

- To develop the FSN as an autonomous, professional, national organisation.
• To remember and commemorate those who have died as a result of drugs and to highlight the extent of the drugs problem and its effects on families and communities.
• To raise awareness of family support work and its role within the community and to highlight the importance and value of work done by family support groups.
• To provide information to families and communities on existing services and supports.
• To support the development of family support groups and networks throughout the country.
• To campaign for better services for drug users and their families and to support the involvement of the people most affected by the problem in the development and running of services and to ensure that adequate supports are put in place to enable this to happen.
• To offer support to each other as members of the FSN.

1.1.4 Affiliation
The opportunity to affiliate to the FSN is open to any of the following:

• Individuals coping with problem drug use
• Families coping with problem drug use
• Individuals wishing to endorse / support the FSN
• Family support groups
• Local family support networks
• Regional family support networks
• Family Support Workers
• Organisations providing family support
• Organisations providing services to drug users
• Other organisations wishing to endorse / support the FSN

1.1.5 Achievements to Date
Since its establishment, the FSN has achieved considerable success in a number of different areas, including support work, resource development, awareness raising and policy work.

Support Work
• Individual family members have been provided with support directly by the FSN.
• Family support groups in different parts of the country have been provided with developmental support and with ongoing support.
• Local/regional networks in different parts of the country have been provided with developmental support.
• Ongoing information and support has been provided to those involved in family support groups and / or in local/regional networks.

**Resource Development**
• The Resource Pack for families and family support groups was developed, launched and widely disseminated.
• Information packs have been distributed to all family support groups and family resource centres.
• Promotional materials on family support have been distributed to all family support groups and family resource centres.

**Awareness Raising**
• Conferences were organized and conference reports disseminated.
• A drama promoting awareness of family support for men was developed and performed in community venues in many parts of the country.
• A website has been developed with information relevant to family members living with drug use.

**Policy Work**
• The FSN succeeded in having a Drug Related Deaths Index established.
• The issue of relatives/ guardians looking after children is being pursued.
• The FSN’s submission to the Review of the National Drug Strategy succeeded in gaining recognition for the role of family support.
• The FSN played a key role in the research advisory group to the National Advisory Committee on Drugs publication *The Experiences of Families Seeking Support in Coping with Heroin Use*.
• The FSN conducted and published research on the issue of the intimidation of families as a result of drug related debt.
• The FSN is a member of the treatment and rehabilitation sub-committee of the National Advisory Committee on Drugs and has developed close links with the National Drug Rehabilitation Implementation Committee.

**Service of Commemoration and Hope**
• A very important and successful dimension of the work of the FSN is the Service of Commemoration and Hope. This service, which was instrumental in the original establishment of the FSN has been held every year since 2000. Each year, focusing on a different theme of relevance to families coping with drugs,
the commemoration has facilitated the participation of families and family support groups, has highlighted issues relating to drugs, has reinforced strategic relationships with key players and has raised the profile and credibility of the network.

**Strategic Links**
The FSN has a number of strategic links to individuals / organisations:

- It has developed a working relationship with UISCE\(^1\) and Pavee Point\(^2\).
- It has established cross-border links with family support groups in Northern Ireland.
- It has developed working relationships with a number of key policy makers and community organisations.
- It has developed a working relationship with An Gárdia Síochána.
- It has a close working relationship with Citywide.
- It has developed a supportive working relationship with funders; Office of the Minister for Drugs, Family Support Agency, Office of the Minister for Integration and the Quinn Family Trust.

**Maintaining Organic Structure and Inclusiveness**
- An important achievement of the FSN has been the extent to which it has succeeded in maintaining its organic structure and its inclusiveness. Evidence of this was provided by participants at the FSN's Annual Work Conference on October 25\(^{th}\) 2009 who described what the FSN means to them in the following words:

<table>
<thead>
<tr>
<th>Strength</th>
<th>Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotion</td>
<td>Reaching out</td>
</tr>
<tr>
<td>Empowerment</td>
<td>Learning</td>
</tr>
<tr>
<td>Coming together</td>
<td>Survival</td>
</tr>
<tr>
<td>Dedication</td>
<td>Sharing &amp; networking</td>
</tr>
<tr>
<td>Living again</td>
<td>Community development</td>
</tr>
</tbody>
</table>

**1.1.6 Areas of Work**
The broad areas of work of the FSN include:

- Identifying, responding to and driving issues relating to policy and practice.

---

\(^1\) UISCE is a drug users’ forum based in the North Inner City. It aims to represent the interests, issues and promote the human rights of drug users.

\(^2\) Pavee Point is a national representative body for members of the Traveller community.
- Developing and disseminating information relating to the impact of drugs on families and communities and the value of family support work in alleviating these.
- Developing, resourcing and supporting the establishment of family support groups throughout the country along with local and regional networks of family support groups.
- Developing and disseminating educational, training and other resources for families and workers involved in family support groups or local and regional networks.
- Providing information and advice to families.
- Undertaking strategic planning and organisational development of the FSN.
- Ensuring the strategic direction and positioning of the FSN in the future.
- Securing ongoing funding for the work of the FSN.

1.2 What is Peer Led Family Support?
Family support is where a number of people with a common concern or problem come together to share their experiences and to offer support to one another. This is a gentle and slow process of meeting, sharing experiences, growing together and supporting each other in a simple human way. Family support groups do this through listening, compassion, supporting and encouraging hope in times of deep distress. Family support groups place a high value on confidentiality amongst their members whereby all members promise to respect the private stories of their fellow members. Confidentiality is of the essence with regard to family support group meetings. This can be of particular importance to family members from a minority group, e.g. Travellers, migrants, asylum seekers, refugees and people living with a disability, as drug use may be particularly stigmatised in that group.

Family support can be offered on a one-to-one basis or in a group setting. The model of family support that the FSN advocates is peer led family support.

These guidelines are designed for peer led family support for families living with drug use. Thus, while the emphasis is on the peer led model, the importance and value of other forms of support is acknowledged and referenced where relevant. It is good practice to locate family support within a greater suite of supports to families, e.g. one-to-one support, counselling, family therapy, etc. The rationale for this is that a range of supports and a multidisciplinary approach have greater likelihood of achieving positive impact than one type of support offered in isolation.

1.3 What is Good Practice?
Good practice is a term that is used to describe a way of working or 'practicing' that is mindful of the best way to do things. In the context
of peer led family support it means working with groups in a way that is deemed the best way possible based on a shared understanding of what works well for groups in terms of meeting their needs and easing their distress.

Good practice is relatively flexible and can evolve as groups evaluate their work, share ideas and learning amongst each. Over time, systematic evaluation will build a body of evidence to further inform and strengthen guidelines for good practice.

The work of family support groups in Ireland has been growing and developing organically in the past ten years. There are now many groups operating across the country and in mid-2007 the FSN received official recognition as an autonomous national organisation to support this development. Groups have been working well and the signs are that family support is valued and beneficial to families.

The time is ripe to draw together the experiences and learning outcomes from the work of groups to date and to turn our attention to good practice. These guidelines serve to articulate what good practice means in the context of peer led support and to share a set of guidelines so that all groups have an opportunity to learn from and implement in the course of their work. This brings consistency to practice and opportunities to enhance the support offered to families.

1.4 How were these Guidelines Designed?
The FSN operates within a firm community development ethos and is committed to inclusion and participation of its members.

The process for developing these guidelines was participative and inclusive and involved the following steps:

- Consultation with the Steering Group convened to steer the process (see appendix B for list of Steering Group members).
- Briefing document circulated to all family support groups to inform them of the process and invite their participation.
- Desk research, review of the literature and familiarisation with the peer led model of family support (see Appendix C for list of source documents).
- Consultation with other relevant stakeholders. These included the family support network in the South East which has prior experience of developing guidelines for family support groups and training for facilitators, the family support network in the North East that recently developed guidelines for family support groups and the Greater Blanchardstown Response to Drugs which has also been involved in developing guidelines.
- Visits to three family support groups to explore family support from the perspective of groups in summer 2009.
Good Practice Guidelines for Peer Led Family Support Groups

- Development of a draft set of guidelines for consideration by a range of stakeholders in August 2009.
- Workshops with a sample of nine family support groups/family support networks to gauge responses to the draft guidelines and to elicit feedback from members during September 2009.
- Introduction to the good practice guidelines at the National Conference on 23rd October 2009 with an opportunity for feedback and discussion amongst conference delegates.
- Consultation with all family support groups attending the National Conference seeking their input in relation to training needs, the main issues emerging within their groups and suggested top tips for inclusion in the guidelines.
- Consideration of all feedback from members of family support groups/ networks.
- Finalisation of guidelines in November 2009.
- Dissemination of guidelines to all family support groups/ networks in 2010.
- Implementation of guidelines.
- Reflection, review and refinement over time.

These guidelines are based on the latest research, wisdom and experience of those working in the area of family support. They are an important resource to those involved in family support and related areas. They will evolve and be updated over time as the FSN grows, develops and matures.

1.5 What is the Purpose of these Guidelines?
The FSN believes the time is right to research and produce good practice guidelines for peer led family support groups providing support to families coping with a drug using member(s).

Guidelines are designed to inform and guide family support groups to achieve good practice in their work.

The objectives of these good practice guidelines are:

- To assist family support groups to develop good practice in all areas of the work of the group.
- To identify training and other resource needs required to support good practice.
- To ensure consistency in the practice of family support groups throughout the country.
- To provide a basis for affiliation to the FSN.

1.6 Who are these Guidelines for?
These guidelines are for all members of the FSN. The intention is that they will be available to all family support groups and networks around the country and used to guide the work of the groups.
Remember that the word guideline means a *guide*; to lead or show the way. Guidelines serve as a reference point to inform and encourage. They are not cast in stone and they are open to interpretation given individual and local needs or circumstances.

It is anticipated that groups starting up will use these guidelines to inform their development and the ways of working which they choose to adopt. This will ensure that they invest their energies wisely and draw on all resources available to them.

All groups, at whatever stage of their development are encouraged to devote some time to reading through the guidelines and discussing how the group wish to use them to support their work.

These guidelines are a resource to *guide* groups and support family support groups in achieving their aims in tune with good practice. It is intended that they will inform the collective conscience of the network of family support groups around the country and enhance the capacity and power of groups to support their members.

### 1.7 How to Get the Best Out of these Guidelines

It is important that all groups share these guidelines with members so that all have the opportunity to absorb the content. There are a number of specific ways that groups may wish to use these guidelines to support them in their work:

- Some groups may be starting up and at the information gathering, planning and decision making stage. As a result, these guidelines will provide structure to their planning and ideas as to how to get their group up and running.

- Some groups may wish to spend time browsing through these guidelines and discussing any response that the guidelines evoke amongst members.

- Some groups may choose to check their own systems, processes and procedures against these guidelines and review how they work.

- Some groups may encounter specific challenges (e.g. family bereavement, conflict within a group) along the way and may dip into the guidelines to inform them how best to respond to these challenges.

- Some groups may wish to talk with or visit other groups to learn from their ways of working.

The possibilities are endless as long as we remain open to growth and development. The next section looks at the steps involved in setting up a family support group in your area.
Section Two
Starting a Peer Led Family Support Group

This section looks at the early stages of starting up a peer led family support group. The emphasis is on being clear about your intentions for starting up a group, doing background research, a needs analysis for your group, understanding the nature of groups and the process of getting a group up and running in your community.

Bear in mind that family support groups are all different and the process of their set up and development is organic, gentle and slow. Your group may follow the steps outlined in these sections or it may take a different course. This is all in perfect order as there is no one absolute way to progress. These sections are to guide and inspire you as you go along your path.

The core questions relevant to this section are:

- What is prompting you to set up a peer led family support group in your community?
- What signs are telling you that there is a need for a peer led family support group in your community?
- What is the purpose of your group?
- What principles and values are important to your group (e.g. a code of ethics) and which will your group choose to abide by?
- Who are your members, e.g. mums, dads, sisters, brothers, grandparents?
- What are the needs of your members?
- What other services already exist in your community that you might link in with in some useful and collaborative ways?
- How are you going to attract and encourage members to join?
- Where will you meet?
- How will your group be funded?
- What structures or arrangements might you consider?
- How will you prepare members for joining your group?
- How will you know the needs of members?
- How will you introduce new members to the group?
- How will you help new members feel comfortable in the group?
2.1. About Groups
There is an immense body of knowledge available on group theory – how groups form and typical ways in which they develop and behave. This body of knowledge draws from the social sciences including psychology, sociology and anthropology.

The research shows that there are typical phases and cycles to any group’s development. Such can help you understand your own development as a group and how you might work through the different phases.

Research shows that groups usually go through four stages in their development as follows:

- **Forming**: this is when the group first comes together. Building trust is a very important step. Members are unsure of each other, perhaps anxious or fearful and do not know what to expect. The group has to work out what is going to happen, when it will happen, how often it will happen, who will be in the group and how the group will treat other members.
- **Storming**: this is where the group learns to deal with any conflicts that may arise. Members are likely to feel more comfortable with each other and will be more open and willing to test each other’s authority. Ideas will be exchanged more freely. The group learns to deal with differences and different points of view. Skills and knowledge begin to develop.
- **Norming**: this is where patterns of behaviour develop and the sense of belonging and working together improves. Members identify with each other and with the group. The group has learned how to carry out tasks, deal with issues, make decisions and resolve differences. Information is exchanged freely and skills and knowledge develop further.
- **Performing**: this is where the group is now able to focus on completing tasks and solving problems together. There is good communication and high morale. Things get done. The group is self-sufficient and does not depend on outside help to provide support to its members. Members trust each other, actively engage with each other and are committed to the success of the group.

**Tip**
It is worth revisiting some of these questions from time to time as your group matures and evolves. This will prompt discussion and serve to strengthen your group’s sense of purpose.
Research also shows that individual members of a group tend to take on different roles in tune with their style, personality and preferred way of behaving. In any group, for example, there are likely to be individuals who feel more comfortable in leading, some who like to plan and take on specific tasks, others who like to ease the atmosphere and others who have an intuitive sense of members’ moods or concerns. Everyone has a role to play and something to offer and it is a wise group that is conscious of, celebrates and plays to its members’ strengths. This has implications for training and self-development of members as each member is likely to have his/her own preferences around the path to self-development. Natural leaders will come forward and/or be encouraged by the facilitator(s) and other members will be drawn to other roles within their group. Each member has a role to play and it is wise for the group to encourage this through positive feedback and acknowledgement.

A study by Dr Carmel Duggan in 2007 identified seven different stages that family members go through as they try to cope when a member of their family engages with drug use. These seven steps will help groups to understand the different stages that members may be at depending on their situation.

This is important information to guide how members of family support groups work together. The seven stages that Carmel Duggan identified in families’ coping strategies are:

- **Unknowing**, i.e. being unaware that a family member is taking drugs.
- **Coping alone**, i.e. finding out about the drug use and trying to cope with it on your own.
- **Desperately seeking help**, i.e. turning to any source available.
- **Supported learning**, i.e. learning from the experience and knowledge of others.
- **Reclaiming the family**, i.e. putting all family members at the heart of the family, not just the drug user, and ensuring that the negative implications of the drug user’s choices are not experienced by the rest of the family.
- **Supporting recovery**, i.e. assisting the drug user to move on and to support their aims with regard to recovery.
- **Contributing**, i.e. giving back to the community the experience and expertise that you have gained through your own and your family’s journey.

The research suggests that a family goes through these stages as lost for a while, carer and then as agent of recovery. As you become familiar with these stages and your group’s development you may see

---

these phases and patterns of behaviour unfold in your group. The FSN website (www.fsn.ie) has more information and a DVD is also available.

2.2 Setting your Intentions
The first step in the formation of a peer led family support group is to set your intentions. This means being very clear about what you want to achieve and the reasons that you are setting up in the first instance as these will shape the development of your group over time. There may be different ways or factors that trigger a group first coming together. This can be formal or more informal and there is no one perfect way, all are valid in their own right. For example, a small group of parents might come together with a shared set of needs, or a host organisation (e.g. youth service or community drugs team) may decide to set up a group, a counsellor might see a natural opportunity and value for a group of family members to gather together with a view to supporting one another or a community drugs team may deem it worthwhile to set up a family support group. Irrespective of how formal or informal your early set up is it is useful to consider, discuss and write down your group’s response to the following:

• What do you believe is the rationale for forming a peer led family support group?
• What do you believe is the purpose of your peer led support group (e.g. to listen, share experiences, to provide information, support, campaign for change, etc.)?
• What ethos would you like to generate for your group?
• What difference do you wish your peer led support group to make to the lives of members and their families?
• Who will your group be for – all members of the family, fathers, mothers, siblings, grandparents?

Be mindful that the early stages in any group’s formation are organic and that the group’s ethos evolves over time. It is important at the formative stage to understand and accept that a certain amount of uncertainty is normal and natural. This is why it is important to be clear about your goals from the outset and to have a shared vision for the ethos that you would like to generate.
The example in Box One tells how a family support group developed specifically in response to the needs of a group of men. This example shows that groups develop in different ways in response to different needs.

**Box One**

*Example of a Family Support Group for Men*

A father whose son was on drugs went looking for help and support. He talked to other fathers, some of whom had attended family support groups with their partners. Through their discussion the men realised that there were fathers in the area who would prefer to meet together as a men-only group. The reasons were that they felt constrained in mixed meetings to air all of their views for fear of hurting their partner or revealing something their partner might not know. They also felt that they would deal with matters in an all male setting in a different way than if they were in a mixed group. An all male family support group was set up. It now has over twenty members.

**2.3 Doing your Research**

Information is a vital resource for your family support group and it is worth doing your research at the start up phase of your group.

By doing your research you will gain valuable information to guide your development as a group and to help you make decisions. Good research will also be important at other stages of your group’s development and particularly as you work to build up a body of useful information for your members.

Doing research means consciously investing time and energy gathering specific information that you know will help your group’s formation stage. Good research requires time, a telephone, some leg work, including visits to other family support groups and internet access if possible so that you can do web searches. The type of information that will be useful to you at this stage includes:

- Checking if there is a family support group already in the area and if there is, finding out whether it is open to new members.
- Some sense of the number of families in your area that might benefit from peer led support including family members from minority groups.
- Some sense of the specific needs of families, e.g. information, counselling, healing, relaxation, respite, etc.
- Some sense of existing services and supports and where gaps in service provision might lie.
- Possible suitable venues in which to hold meetings.
- Possible links, supports and/or collaborative opportunities with other services locally, e.g. Health Service Executive (HSE)
Good Practice Guidelines for Peer Led Family Support Groups

Family Support Workers, Public Health Nurses, Social Workers, Community Drugs Workers, Community Based Drugs Initiative Workers (CBDI), Regional Development Workers, Counsellors, Youth Services, Department of Education and Science etc.

- Possible sources of funding and support.
- The range and quality of other relevant services locally.

The best sources of information are the FSN, Local Drugs Task Forces, the Citizens Information Service, Community Organisations, etc. Making contact with the FSN and other family support groups is important as it can be a very useful source of information and guidance for groups.

2.4 Providing a Safe Place

The venue and preparation of a safe place for your group is very important as this will determine the level of comfort members feel and the atmosphere that you wish to invoke.

Be mindful of the power of rituals to evoke a space that is special, safe and secure for your group. Preparation is important to ensure that the space is welcoming and safe. In many ways it is a place where all commitments to confidentiality and trust are honoured.

The following are steps that you might take to generate an atmosphere conducive to your group meetings:

- Check the temperature of the room, e.g. open a window in advance of the meeting to let in fresh air or turn on the heat so that the room is warm enough.
- Light a special candle.
- Consider asking members if there are any other symbols or rituals that they wish to use to evoke a sense of serenity and ease within the room, e.g. relaxation music.
- Seek out comfortable seating and arrange it in a circle to ensure that all members can see and hear one and other.
- Consider social time and refreshments at the beginning or at the end so that this is separate from the main body of the meeting.

When selecting a venue be mindful of any costs you may have to pay, e.g. for room hire, insurance cover, refreshments, etc. Agree amongst the members who will be responsible for booking, opening and closing the meeting space.

2.5 Promoting your Group

You will need to devote some time and thought to how you are going to raise awareness of your group within your community. This is important as the way in which you choose to promote your group will determine how you attract members. This is a delicate process and
something of a balancing act between letting your community know about your group and the support it offers whilst also conveying a sense of the ethos of confidentiality. The following are some ways which you might gently use to promote the work you do:

- Brief key stakeholders in your community about your group, its mission, purpose and ask them to be aware of you and to gently spread the word as they go about their business.
- Brief local community workers and services, e.g. HSE, General Practitioners (GPs), Gardaí, Probation Service, Social Workers, Public Health Nurses, Family Resource Centres, Drugs Workers, Addiction Counsellors, migrant led organisations, Traveller organisations, youth organisations, schools, pharmacies etc. This is particularly useful as outreach is a proven method of encouraging people to seek support.
- Consider producing posters and leaflets to explain your service and pin these up at select vantage points, e.g. HSE, G.P. surgeries, Public Health Nurse clinics, Family Resource Centres, churches, hospitals, pharmacies and schools etc.
- Advertisements in local press, community newsletters and/or radio.
- When promoting your group be mindful of safety aspects and do not give out a specific address but do provide a contact number. You may consider giving an address if the group is linked to an organisation.

In time, the type of promotion that you choose for your group may further develop to include raising awareness of the capacity of your group to contribute within the community. For example, your group may well become a resource for the community, a source of information, knowledge and representation on particular community structures, e.g. Local Drugs Task Force, Family Resource Centre and responding to the media.

2.6 Drawing in Members
There is no set pattern to the way in which members are attracted to seek out the support of a family support group. It would seem that the time must be right for a particular family or parent to make that first decision to approach their family support group. This may be prompted by a particular crisis with a family member involved with drugs or a series of events that have led them to a place where they feel unable to cope. Discussion with members of existing groups would suggest that they saw an advertisement or heard about the group from a friend or were referred to their group at a time when they were most vulnerable and in need of support.

Through a range of processes including referral, family members making contact with the group or some initial members drawing together, a first meeting will be arranged. The first meetings will be
formative in that it is through peer led group discussion and facilitation that the group will set its own rhythm, ethos, mission, values, process and logistical arrangements.

It is wise to meet new members in advance, at least twice, to understand their needs and expectations. This is almost like a ‘getting to know you’ before full invitation to the group. This is important as you are preparing the new member to join the group and also honouring the existing group members. This process of drawing in new members may be done by the facilitator or a member(s) of the group who feel comfortable to explain the process and to introduce the new member. They will need to provide a contact number. Some groups have organised a mobile phone for the group and this is held by one member, or the facilitator or it can be rotated around different members of the group.

New members will need to know the following:

- Who to contact if they wish to join the group.
- Meeting times, duration and venue.
- Values and principles, particularly around confidentiality.
- Guidelines around punctuality and confirming attendance.
- Brief description of the process of meetings and the facilitation role.
- Brief insight into what peer led family support means and how it might benefit them.
- Respond to any questions that new members pose.

The early stages of a group’s formation tend to set the scene for future patterns, (e.g. all-female, all-male, mixed group, grandparents, members from minority groups, etc.) so it is important to think through your goals in relation to the make-up of your group.

2.7 Code of Ethics

In the first meetings of your group, during its formative stage, it is important to set principles and values that will shape the ethos of your group as it develops and matures. Principles are like an honour code or code of ethics by which you all agree to abide. Values are attributes on which you will agree to place a high value within your group, e.g. confidentiality, trust and respect.

There are exercises that will guide you through the process and good facilitation is vital at this stage.

Good practice suggests that the values that your group may wish to uphold include:

- Confidentiality.
- Honesty.
Good Practice Guidelines for Peer Led Family Support Groups

- Respect.
- Safety.
- Inclusion.

The principles that your group might wish to abide by could include:

- Commitment to confidentiality.
- Commitment to equality and anti-racism.
- Commitment to honouring each member's path and accepting without judgement.
- Commitment to active listening.
- Commitment to openness and sharing experiences.
- Commitment to supporting one another.
- Commitment to self-care and to the care of each other.
- Commitment to practicing hope.
- Commitment to being constructive and supporting members in seeking solutions.
- Commitment to including people from all sectors of society.

Through facilitated exercises, discussion and reflection your group will agree a set of principles and values that will be shared by all members. It may take a number of meetings to work through this important process and it is likely to result in a short written document that can be referred to at the beginning of each meeting and at other appropriate times.

This process may then be revisited during the lifecycle of your group, e.g. when there is a significant increase or turnover in membership. In many ways this process and the statement of your group is like a group contract that members understand, accept and agree together. This is an important process of group sharing and developing together.

The following will guide you in the process of having your group sessions where you all come together and share your views and wishes for your group:

- Welcome and warmth.
- Clear and open communication.
- Read out your statement of values and principles.
- Seek acceptance, understanding and agreement from each member [i.e. group contract or commitment].
- Agree time, frequency and venue for future meetings.
- Articulate any guidelines around punctuality, apologies if cannot attend, texting, etc.
- Finally, celebrate this important step in self-care.
The story in Box Two below gives insight into the benefits of belonging to a family support group based on the experiences of a member.

**Box Two**

**The Benefits of Belonging to a Family Support Group**

I found out about the local family support group and went along. I felt I couldn’t cope any more on my own. I was amazed to learn that there were other families in the community experiencing just what we were. We were able to share our experiences. Doing that, you begin to let go of it.

And the best bit about it... because you’re sharing common experiences... because you know that these people understand what you are going through... you can begin to laugh... you begin to see a funny side. When you sit back and share the images, you have to laugh. Here we are worried sick, running around trying to find cures, excusing their robbing, blaming ourselves, living in constant tension, creeping around them, nursing grief and all the while they’re having a great time, getting high!

Through the support group I learnt that there is a process to addiction and this process takes its toll on the whole family. Once we understood the process we could deal with the situation in a more positive way. We learned not to issue orders but to offer choices and to state clearly that there were consequences to these choices. The information gave us an understanding of where our son was in his addiction and this meant we could support him when he moved from one stage to the next.

Talking about our experiences in the family support group gave me a lot of support and a lot of confidence. We don’t all deal with it in the same way but we can share our thoughts. At one stage I was angry. I wanted to put him out of the house – just like that. But talking with the group helped me consider my options and what I could live with and what I couldn’t. As the ad says, “It’s good to talk”.

2.8 Meeting Arrangements

The optimum number for a family support group is between seven and ten. The maximum that seems to work comfortably and effectively is twelve and the minimum is five. These numbers are not cast in stone - they are a guide for you. It is worth keeping an eye on your numbers and if they grow beyond ten you may wish to consider forming a second group in your area or having a second weekly meeting.

Groups tend to meet once a week at a set time, usually in the evening for two hours. Two hours is an optimum duration for a meeting as it allows time to warm up and warm down as well as time to get into the detail of the meeting. Ideally everyone is given the opportunity to tell their story. However, if someone is in particular pain or crisis they
should be given as much time as they need within the agreed time frame of the meeting.

It is important to convey the sense that membership is voluntary and that attendance is also voluntary.

2.9 Checklist for your Meetings
Family support group meetings are a natural and gentle process. They tend to be informal and are shaped by the needs of family members as they present on the day/night.

The following is a checklist to bear in mind as you gather for your meetings:

- Signing in, individual welcomes and greetings, refreshments and their timing.
- Opening script (groups commitment to values and principles).
- Brief reflection of the meeting proceedings.
- Managing time.
- Inviting input from all.
- Reflective practice.
- Inviting contemplation, a poem, a reading or thought from members if they wish to share.
- Note taking.
- Any announcement or arrangements around events, speakers or activities in the future.
- Ending on a hopeful or supportive note.
- Arrangements for next meeting.

2.10 Opening your Meeting
Open your meeting with your script to bring members’ attention to your group’s values and principles with a particular emphasis on confidentiality and what that means for your group.

- Consider using a reflection, quote or thought for the day, relaxation exercise or a practice to bring members attention into the room. Members may wish to bring along their own reflections, poems, etc. to share.
- Concentrate on generating an atmosphere of warmth, welcome and sharing.
- Tune into each other and the space.
- Be conscious that you are creating a safe place for your members to be at ease and attend to their own healing.

2.11 Closing your Meeting
It is important that you end the meeting on a hopeful and supportive note. You might consider asking each member to recount a positive incident that happened to them in the last week. You might agree to
exchange mobile numbers. If someone is feeling particularly low a member of the group should agree to stay in touch with them until the next meeting. Build in some time at the end of a meeting for everyone to mingle and chat in accordance with their preferences.

2.12 Sharing Responsibility
A truly peer led support group will self-manage effectively – each individual is equal, each can lead or be led, there is active decision-making and problem solving and the group works together cohesively. This self-management process takes time to develop and nurture.

For a group of people to work together effectively, it is important that the work load is shared amongst the members. Not everyone will be able to help out initially, but as members become more comfortable with the group and the process in the group, responsibility for running the group should be shared and the group agrees who will carry out various tasks. Different roles can be played by different members of a group, for example the person who calls the meetings, the person who opens and closes the venue, the person who welcomes new members, the person who organises refreshments, the person who develops promotional material, the person who contacts external agencies for support or sources of information, etc.

External support such as external facilitators, support workers, trainers and community workers, should be there to help your group to take ownership and responsibility for developing itself and for building skills within the group so that over time it becomes self-sufficient and self-sustaining.
Box Three gives insight into how one group formed and developed.

**Box Three**

**The Slow & Gentle Process of Building a Family Support Group**

Two friends set up a family support group over 15 years ago. They were joined by two others in a similar situation and met in each other's houses every week for about six years. During this time they talked, listened and supported each other. They came to realise that in order to help themselves, their children and their families, they needed to be strong and meeting together and learning and supporting each other helped them to achieve this strength. They realised that others must be in similar circumstances to them and would benefit from the support offered within the group. They approached the Local Drugs Task Force and got access to a comfortable room for meetings. They agreed and wrote out their principles or code of ethics. They let acquaintances know about the group, where it met and how often it met. Initially, the group was 'led' by one individual in that they called and organised the meetings but over time all the members of the group were helped to become leaders and most trained to be facilitators. The group now has over 20 members. It meets every week for around two hours. It is open to new members. At the start of each meeting a member of the group will volunteer to facilitate the group for that session.

**2.13 Reflective Exercise**

This section contains some reflective questions to help you examine your practice.

- Is there already a family support group in your area?
- If there is a family support group in your area already, is it open to new members?
- If there is no group in your area (or if there is but it is not open to new members), do you have a friend in a similar situation that could help you to get the group started?
- How many people in your area do you think might need help?
- Do you have up-to-date information about the number of minority groups in your area?
- Is there a Local Drugs Task Force, drug and alcohol forum or community drugs project that you can link into and make people aware of your new group?
- Have you made community organisations working with minority groups aware of your new group?
- How will people know your group exists and that they can join?
- How will you promote your group, e.g. will you use leaflets or posters or rely on word of mouth or a combination of approaches?
Is your promotional material accessible, e.g. does it have pictures to explain the text or is it available in different languages?

Do the promotional materials show different minorities attending your group?

Can you leave leaflets in the local Gárda station, pharmacy, supermarket, community hall, G.P. surgery, school etc?

Is there a venue that offers a safe space that you can use to hold your meetings?
  ♦ Will it cost you anything?
  ♦ Does it have comfortable furniture?
  ♦ Is it warm?
  ♦ Is it accessible, e.g. is there wheelchair accessibility?
  ♦ Can you use it when you need it?
  ♦ Who will book it, open it and close it?
  ♦ Do you need to get insurance cover to use the space?

What will be your Code of Ethics or guiding principles (see Top Tips)?

How will you decide on these principles?

Will you write them down?

What happens when a person wants to join your group?
  ♦ Who will they contact?
  ♦ Who will tell them about the group and its principles and when it meets?
  ♦ Who will answer their questions?
  ♦ Who will make them welcome on their first day?

Will you use a personal phone number for people to contact or a group mobile number?

Will one person hold this phone or will it be rotated around the group?

How large do you want your group to be?

What is a manageable size?

2.14 Top Tips
The following tips are drawn from the examples provided by the family support groups consulted during the development of these guidelines.

Tip 1
Your principles or code of ethics might include the following:
  ♦ who the group is for,
  ♦ that confidentiality applies,
  ♦ that it is inclusive,
  ♦ that it is non-judgmental,
  ♦ that listening is as important as talking,
  ♦ that you will respect each other,
  ♦ that you will care for each other,
  ♦ that commitment is required,
  ♦ that you will resist giving advice.
Tip 2
Seek guidance and get as much information as possible from other established family support groups and the Family Support Network.

Tip 3
Have information days and provide leaflets and posters to increase awareness of your group. Emphasise who the group is for, what its ethos is and what the benefits of joining are.

Tip 4
If you advertise your group, for safety reasons give a contact number only in any promotional material and not an address unless the group is linked into a local organisation.

Tip 5
Have a supportive first point of contact at the end of the advertised phone line.

Tip 6
Set the seating arrangements in your meeting room in a circle so that everyone can see and hear each other. Make sure the room is warm and the seating is comfortable. Have tea, coffee and water available.

Tip 7
Light a candle at the start of each meeting as a symbol of hope and to tell everyone that what is said from then on is confidential and remains within the group. Get a member of the group to read out your principles to start the meeting and to remind everyone what the group is for. Spell out the importance of confidentiality every week at every session.

Tip 8
Most groups meet once a week for around two hours. Ideally, everyone is given the opportunity to tell their story. However, if someone is in particular pain or crisis, they are given as much time as they need within the agreed time frame of the meeting.

Tip 9
Always end the meeting on a hopeful and supportive note, e.g. ask everyone in the room to highlight one good thing that has happened to them in the last few weeks. Make sure you leave time after the group session ends for people to mingle and chat.

Tip 10
Members should bear in mind the following:
- Do talk about your own situation.
- Do share your own experience.
- Do discuss what you are getting from the group.
Good Practice Guidelines for Peer Led Family Support Groups

♦ Do give general information about the group and network on behalf of the group.
♦ Honour the confidentiality of the other members of your group.
♦ Be aware of serious situations with regard to confidentiality and legal issues.
♦ Remember another person’s story is their own and must be treated with respect.
♦ Agree to talk only about those present at a group meeting and not to bring up the issues of others who are not present.
♦ Do offer words of wisdom or examples from your own experience but do not give advice as each person must find what works best in their situation.

The next section looks at how you can support each other in a family support group.
Good Practice Guidelines for Peer Led Family Support Groups

‘What keeps us alive, what allows us to endure? I think it is the hope of loving or being loved.’ – Meister Eckhart

Section Three
Providing Support in a Group

This section looks at the process of peer led family support. This includes how members support each other and the specific features of good practice peer led support.

This process is continuous, natural and organic and will ebb and flow over time. Members will move through the seven stages (i.e. unknowing, coping alone, desperately seeking support, supported learning, reclaiming the family, supporting recovery and contributing), members will leave and new members will join and your group will evolve in response to changing needs and times.

The core questions relevant to this section are:

- What is peer led family support?
- What are the differentiating features of peer led support?
- What is good practice peer led support?

3.1 What is Peer Led Family Support?
According to the Oxford dictionary the ranges of meanings for the word peer include ‘an equal in standing or rank, one’s equal, one matched with another, a companion’. Peer led family support is a form of support for families who have a common issue, such as drug use in the family. Groups of individuals come together to help each other, to share their experience with other members of the group, both by talking about their own situation and by listening to the stories of others. In this way people gain strength, comfort, support and a sense of belonging from each other.

All these words serve to give some sense of the meaning of the term peer. Feedback from groups indicates that members value the sense of being among people who understand their plight and will accept them without judgement. This is important to the ethos of the family support group. It is worth reflecting on the word ‘peer’ and discussing your understanding of what it means within your group.

Peer led means that members of the group lead the process. This means that the group is there for its members and responds to the ongoing needs of members. The emphasis is on tuning into the needs of members, involving all members and responding to their needs in a compassionate and solution focused way. It means encouraging
ownership and involvement within the group and empowering members to take responsibility.

Peer led family support is about self-care, personal development and growth. It is about listening, expressing emotions, practising hope, friendship, seeking solutions, being resourceful and being reflective.

### 3.2 Features of the Process of Peer Led Family Support

There are a number of features of the peer led family support process worth highlighting. These are outlined below.

#### 3.2.1 Confidentiality

Confidentiality is of the essence with regard to family support group meetings. This can be of particular importance to family members from minority groups. It is crucial for members to be assured of the safety and integrity of their group.

Confidentiality means that all members honour the information that is shared in their group by keeping it within themselves. This is not about secrecy; it is about being an honourable human being and committing to the process of peer led family support.

Members must be mindful of the following:

- Do talk about your own situation.
- Do share your own experience.
- Do discuss what you got from the group.
- Do give general information about the group and network on behalf of the group.
- Honour the confidentiality of the other members of your group by keeping membership details to yourself.
- Remember another person’s story is their own and must be treated with respect.
- Agree to talk only about those present at a group meeting and not to discuss the issues of those members who are not present.
- Do offer words of wisdom or examples from your own experience but resist giving explicit advice.

If you decide to gather information from your members be clear what the purpose of gathering the information is, what the information will be used for and that no one individual will be named or identifiable in any reports in which you might use the information. If you decide to gather information it is important to ask members about their ethnic identity. If you want to carry out research within your group, invite your members to take part on a voluntary basis.

Information about members should be stored in a secure place (e.g. locked cabinet or a password protected computer file). The names, addresses, telephone numbers and email addresses of members
should never be revealed to a third party without the specific consent of the members or the individual member where relevant.

3.2.2 Building Trust and Respect
Trust and respect are central to good practice peer led support. The process of building trust and respect is a bit like love; it is not possible to describe these concepts effectively in words or indeed to teach. Trust is something that grows over time between people when certain conditions are right. The conditions for building trust are time, patience, a sense of safety, good communication, honesty and sharing of stories in ways that are respectful and non-judgemental. Trust is something that just builds up between people over time. Respect is similar. Maybe like love ‘people might not know where it comes from but they can feel it when love is being sent in their direction’.

We know intuitively when we trust somebody and often times this is only obvious to us when trust is tested. For example, when a member discloses something the group will respond in their way and in tune with their values and principles. The way a group chooses to respond to its members as they unfold their stories shows the level of trust and respect present. Over time through good facilitation, self-care and personal development, members of a group will grow as individuals and as a group together.

Confidentiality is absolutely crucial to building up trust and respect within a group.

3.2.3 Being Non-judgemental
According to Gary Zukav\(^5\) judgement is accompanied by a negative reaction. Sometimes we do not like what we see or hear and we resist what we experience. We would like a person or a situation to be different. When this happens we lose energy. In a family support group judgement brings in negative energy. When this happens it is obvious within a group and affects the group process and undermines members’ sense of trust and peace. It is important to be conscious of your group’s energy and to try to look with compassion on all situations and stories that enter your group. Members should feel free to share their story and to feel that they will be listened to without interruption and without others passing judgement.

3.2.4 Sharing Stories and Experiences
During peer led family support meetings members may share their stories and experiences. The atmosphere of the meetings is conducive to this sharing through facilitation, active listening and compassion.

\(^5\) ‘Soul to Soul – Communications from the Heart’, Gary Zukav
3.2.5 Listening
All family support groups practice listening. Listening in this sense means truly active listening to members’ accounts of the challenges that they face. Time is devoted at each meeting to each member and each has an opportunity to share what is on their mind or in their heart at a particular time. Often times the information shared is emotionally raw and distressful and the group responds by listening with empathy.

3.2.6 Emotional Support
Expressing emotions is encouraged at family support groups and this is good. Members feel safe and comfortable to share even their rawest of emotions and the group wraps them in compassion. The range of emotions include shame, guilt, despair, anger, rage, sorrow, grief, regret, alienation, isolation, loneliness, resentment, self-pity, inferiority and fear. All of these emotions are negative in energy and draining to the member and indeed the group. The power of the group is to support members through these emotions, be there for them and look at ways to support them through their pain. Many times just being present and acknowledging emotional pain is of most value at a given point in time.

There are also positive emotions expressed at times of support, good news, and celebration. These include relief, joy, gratitude, trust, appreciation, love and hope.

3.2.7 Practicing Hope
All family support groups practice hope. This means that they know that there is always hope and they work to support each other and be hopeful in all that they do. It takes a conscious effort to practice hope, particularly in the darkest moments. The balance will shift within the group and members will be able to support each other at different times.

3.2.8 Seeking Solutions
Being supportive to members in seeking solutions is important in peer led family support. This means listening to concerns, issues or challenges that members face, acknowledging these and through facilitation, exploring ways to move through the situation.

Being solution focused is a choice a group makes about how they agree to approach the constant challenges that will be brought to their meetings. It is an attitude or a way of working that can be practiced through effective facilitation. It is important that in being solution focused, members offer words of wisdom and guidance but do not give advice or dictate to each other what should be done in a particular situation.
3.2.9 Being Resourceful
The nature of family support is such that it is necessary to be resourceful. Members with the support of their facilitator may seek to draw in external resources from time to time in tune with needs. Examples include guest speakers, e.g. recovering drug users, health specialists, therapists, etc.

3.2.10 Reflection – ‘Taking a Moment’
Reflective practice can be a useful tool for family support groups. This is a process whereby groups set aside some time to reflect on how their group is faring in terms of process and progress. There are tools to guide this process.

The purpose is to pause and devote time to evaluating how the group process is working and if there are any ways that the group might refine the way it operates or ideas that might benefit members. This process encourages members to have their say, to own the process and to shape the way their group operates.

Reflective practice is a form of evaluation and it is worth adopting this as a way of evaluating after events, e.g. a guest speaker visits the group. Members might be invited to share how they felt about what the speaker said, how it had helped them, what they had learnt, what they would wish for more or less of, etc.

3.2.11 Identifying the Needs of Members
Listening and responding to the needs of members is central to good practice family support. The emphasis of peer led family support is on self-care and the goal is that members will, in time, feel comfortable to express their support needs to their group and to seek help.

The ultimate goal is that members will become self-empowered. Being self-empowered means we are able to be and do with confidence and calmness. When we are self-empowered we are comfortable in our own skin, safe and secure in our own ability to cope with situations and to face up to challenges with courage and a belief that all will be well within oneself.

The needs of members will vary and are likely to include any or all of the following:

- A place to relax and receive respite from distress or worries in their lives.
- Someone to listen.
- Someone to give comfort.
- Someone to advocate.
- Information.
- Referral.
- Respite.
• Access to services.
• Counselling.
• Rest and restoration of the heart and mind.

3.2.12 Referral
There will be times when individual members will benefit from additional supports. This might be achieved through referral to other sources of professional help, guidance or support. Examples include counselling, therapy, mediation or an organisation that has proven helpful and supportive to others.

Referral should always be to an approved or reputable service or practitioner. Over time groups should build up a file on all the possible sources of support that they have availed of or may wish to.

3.2.13 Ongoing Support Outside of Meetings
Aftercare refers to care and support provided after a meeting or in the time intervening between meetings. This might take the form of a one to one session with a counsellor or support worker and/or some specific therapeutic intervention in tune with a member’s needs. Some groups will operate within a host organisation and/or have easy access to immediate aftercare. For example, there may be a drugs worker or counsellor that members can seek out in between meetings or at times of specific need or trauma. Members of a group might share telephone numbers or organise a ‘buddy’ system so that members have each other to call on for support outside of group meetings.

3.3 Disclosure
There will be times in your group when a member or members share experiences that are particularly raw and distressing. The power of the family support group is to listen and support members as they cope with their individual life challenges. In an effective group, confidentiality, compassion and trust will come to the fore in such situations.

It is important to know there may be times when a member shares something that evokes a sense of responsibility within the group, i.e. an obligation to report to the authorities or draw on external advice. Examples include murder, child abuse, rape, suicide, self-harm or threats of the same. Groups should discuss and prepare in advance for how they are going to manage such disclosures if they arise within the group. The FSN can provide you with advice. There are also training courses available to help groups to deal with these issues.

3.4 Managing Change
It is natural that your group will evolve and develop over time. There are times when there will be changes within a group that will be positive and energising and these are good and worthy of celebration.
There will be other times when your group encounters a particular challenge or a period of distress. These challenges can be very difficult to work through but they are part and parcel of family support and groups will grow as they face and work through these challenges together.

There are usually signals of distress within a group and these will alert you to something that needs attention. Examples include:

- A trauma or family crisis, a death, violence, abuse or a loss.
- Changes in behaviour of members, e.g. someone quiet and reserved becoming more animated or the opposite.
- Changes in patterns of attendance.
- A sudden drop in attendance.
- Resistance.
- Upset or conflict and interpersonal difficulties.

The next section looks at facilitation and this will provide some guidance and tools for managing group change.

### 3.5 Group Development

It is also natural as a group matures (i.e. is up and running for a number of years) that some members may seek to develop or strengthen their roles or the role of the group in society. This usually occurs when a significant number of the group have attended training or built up their skills and start looking to formalise in different ways. Examples include seeking representation on a Local / Regional Drugs Task Force, advocating on behalf of members or families, going out and serving or contributing within their community. This may prompt some turbulence within the group as it is a change from old ways of working and some members may need time to adjust to changes in roles and arrangements. The group must be mindful of and sensitive to the emotions and apprehensions that can accompany change and to support each other as best they can.

It is useful for family support groups, when they feel ready, to visit other groups, get together, network and share learning.

### 3.6 Exiting a Group

It is important that groups think about and plan for members exiting their group. There may be a number of different reasons that prompt a member to exit a group and it is wise to have thought through a response to this. When a member exits a group it is important to know what the reasons are.

For example, a member might leave a group for positive reasons. It is good to be optimistic and to hope that members may someday feel that they have reached the ‘contributing’ stage and are ready to move
on and effectively ‘exit’ their group. This is a cause for significant celebration within the group for that member. Even though there will be a touch of loss attached to this process, it is an important and symbolic goal for groups to aspire to. It is also possible that members remain attached to groups and come and go as their life unfolds over time. This is fine too. When members leave it is important to convey to them that they are welcome to return at any time. Relapse can occur of the person at home who was using drugs. This can trigger the need for family support once more and members should feel that the group continues to be open and welcoming to them if they return. It is also acceptable for a member to attend occasionally.

There may also be examples of members leaving for other reasons that warrant reflection, consideration and sometimes action on the part of the group and indeed the member.

Irrespective of the reasons why a member might leave a group it is important to ‘seal the group back up’ after the person has gone. To do this the group must allow some space and time to reflect on the process of change, what it means for them as a group and if it evokes any response or inspires any particular conversations within the group. There will naturally be a period of time needed to adjust to any shift in dynamic within the group.

Box Four describes an example of exiting from a group.

**Box Four**

**Exiting and Returning to a Family Support Group**

I attended a family support group for about nine months. It was good for me and it helped me cope with my son who was using drugs and causing a lot of upset in our home. I used to go to the meetings and they gave me information that helped. The situation seemed to get better, our son said he had stopped using and things seemed settled. I stopped going to the family support meetings. I think I just drifted away. I missed a few meetings and then just felt I could not go back. That was fine for a while until disaster struck... one night the Gárdaí came knocking at the door. They had found our son on the street with his friends, all high as kites.... I couldn’t believe it at first, he had relapsed. There were the symptoms again. Strange sleeping patterns, out late, staying on his own in his room for days. I really couldn’t believe it. The nightmare was back.....I eventually decided to go back to the family support group...there was nowhere else I could turn. They welcomed me back and were as kind, compassionate and supportive as they had been before.....there was no judgement, just support....I know they are always there for me.
3.7 Reflective Exercise
This section contains some reflective questions to help you examine your practice.

- Who is your group for?
- Is it open to all or only for certain family members such as fathers or siblings?
- What stage of development is your group at – starting, early stages of development, group is developed and works well together?
- How does your group’s development stage affect how you support each other?
- How supportive are you of each other?
- How do you nurture each other?
- Have you an agreed plan of how to manage when someone makes a serious disclosure, e.g. harm to others, suicide, murder, child abuse or damage to buildings occupied or unoccupied?
- Is your group aware of any policy guidelines concerning disclosure as outlined by the Family Support Network?
- Have you agreed how you will support each other, if necessary, outside of group meetings?
- Who will facilitate your group – the person who started it, an external person, rotation around the members of the group, a smaller number of members who have trained to be facilitators?
- What roles do members play?
  - Who calls the meetings?
  - Who opens and closes the place where you meet?
  - Who gets the meetings started?
  - Who makes contact with external agencies or sources of support?
  - Who seeks out information (e.g. about different drugs, about training, about external help)?
  - Who greets new members and makes them welcome?
  - Who sets the ‘agenda’ – the leader, the members, the facilitator, the support worker?
  - Who organises refreshments and how will these be paid for?
  - Who is the initial contact person for new members?
- Have members left the group in recent times and if so do you know the reasons for this, i.e. are they positive reasons or otherwise?
- If not, how might your group reflect and learn from their leaving?
- Have you asked people who are resistant to join the group why this is so?
3.8 **Top Tips**
The following tips are drawn from the examples provided by the family support groups consulted during the development of these guidelines.

*Tip 1*
Develop a ‘buddy’ system where members can pair off to support each other outside of the times the group meets. Share telephone numbers and email addresses. If someone is particularly upset after a meeting, agree with them that a member they get on with will check up on them the next day.

*Tip 2*
When someone new joins, invite a member who has been with the group for some time and who is strong in themselves to tell their story so that the new member can see they are not alone. Encourage (gently and without pressure) the new member to speak. If they do not want to speak, let them know that it’s okay to listen. If possible provide the option of one-to-one facilitation.

*Tip 3*
When you have newcomers joining an already established group, consider having a separate group for newcomers until they feel comfortable with the process and able to join the meetings of the established group.

*Tip 4*
Emphasise that the group is for the people themselves, not the drug user.

*Tip 5*
Keep a simple record of activities, training or information that the group has found useful for future reference.

*Tip 6*
If the group seems to be stuck in a rut, consider ways to reinvigorate e.g. invite in speakers to do information sessions, watch a relevant DVD to get some discussion going, explore if a group outing can be organised or even review the goals of the group to see if they are still relevant.

*Tip 7*
Access training to keep the group focused, e.g. facilitation skills, drug awareness, suicide awareness and prevention, stress management, crisis intervention, anti-racism etc.

The next section looks at the role of the facilitator and the facilitation process.
Good Practice Guidelines for Peer Led Family Support Groups

‘All members must know that they are dealing with human hearts and hidden hurts’ - Anonymous member of family support group

Section Four
Facilitation

Effective facilitation is central to good practice peer led family support. This section looks specifically at good practice facilitation for peer led family support groups. The role of the facilitator is outlined and core competencies are discussed.

The questions relevant to this section are as follows:

• What is facilitation?
• What are the core skills and attributes of an effective facilitator?
• What is the purpose of facilitation in the context of peer led family support?
• What are the boundaries of facilitation?
• What is in the facilitators’ tool kit?

4.1 What is Facilitation?
Facilitation refers to the process of facilitating the group to achieve its aims. This is achieved through personal attributes, a set of skills and certain tools and techniques. Effective facilitation is determined by the skill set of the facilitator and his/her personality and motivation.

A good facilitator will be self-aware, self-assured, self-developed and will invest time in their own continuous professional development e.g. through reading, practicing, reflecting and attending training to build up his/her skill set.

Good practice indicates that family support groups benefit from the presence of a skilled facilitator(s).

The attributes of a good facilitator are:

• Commitment to the values and principles of peer led family support.
• Self-awareness and self-confidence.
• Organisational skills, e.g. planning and preparation.
• Time management.
• Active listening.
• Competence:
  • to open up a group at the beginning of a meeting and seal up a group sensitively and safely at the end,
Good Practice Guidelines for Peer Led Family Support Groups

- to read the energy of a group,
- to draw in members gently and sensitively and to ensure that all have the opportunity to participate,
- to manage the energy of the group,
- to manage the challenges as they arise within the group, particularly traumatic or conflict situations.

- Emphasising the value of self-care and personal development and encouraging members to develop in tune with their goals and preferences.
- Building the confidence of the group and challenging the group to grow.
- Achieving a balance in the time and attention given to members.
- Knowing when to draw out a member and knowing when to let a member just be.
- Knowing what techniques to apply in tune with different scenarios.
- Being aware of specific barriers that may affect the participation of members from minority groups.
- Drawing on a set of tools or skills to ease the process of the group, e.g. humour, relaxation, creativity, poetry, reflection.
- Generating a solution focused atmosphere.
- Generating and practicing hope.
- Knowing when to refer a member to supplementary or professional support.

The above skills are learnt and honed through experience and through professional accredited training. The skills and wisdom of facilitation are constantly refined through practice and experience over time.

4.2 What is the Purpose of Facilitation?
The purpose of facilitation is to gently and wisely guide a group to achieve its purpose and to ensure that the group abide by their values and principles. It is about honouring the members and easing the group process in response to the needs of members.

4.3 The Facilitation Role in Peer Led Family Support
In the context of peer led family support the role of the facilitator may vary from group to group. For example, some groups have a lead facilitator. This may be the person who started the group or a member who has trained to be a facilitator. In some groups the role of facilitator is shared by having a number of members who have trained as facilitators who co-facilitate or rotate the role amongst themselves. In other groups the role of facilitation is shared amongst all their members. There is no one absolute proven way. The key things to bear in mind are:
• Ensuring that whoever facilitates is familiar with and honours the seven stages of engaging that families can go through in developing their coping strategies.

• Ensuring your facilitation model is sustainable, i.e. the workload is not heaped on one individual who may well tire or not always be available.

• Ensuring that facilitators are comfortable in their role, have participated in appropriate training [accredited] and have the necessary skills and tools.

• Ensuring that at least two members are trained to facilitate so that the role can be shared and there is always an alternative to stand in.

• Ensuring that all members that are at the ‘contributing’ stage are offered the opportunity to participate in facilitator training.

4.4 Boundaries of the Facilitation Role

All roles have boundaries. It is important to be conscious of these boundaries as they have an impact on the quality and effectiveness of the facilitation.

The boundaries of facilitation to watch out for are:

• When the process of facilitation crosses over into counselling.
• When the process of facilitation crosses over into direction.
• When the process of facilitation crosses over into taking control.
• When the process of facilitation crosses over into friendship.

4.5 Facilitation Tool Kit

The facilitation tool kit is built up over time and through experience. It contains a set of skills, exercises, templates, books/manuals, contacts, referral opportunities and ideas that will facilitate the group process and includes:

• Warm up exercises.
• Listening exercises.
• Solution focused problem solving exercises.
• Relaxation.
• Reflective practice templates.
• Self-care exercises.
• Crisis/trauma supports.
• Creativity.
• Meditation.
• Silence.
• Contacts and reputable referral options.
• Resources, e.g. books, reflections, poetry, music, quotes, creativity, etc.
The FSN plans to develop training for facilitators and this will incorporate an appropriate set of tools and techniques.

4.6 Managing the Group Meetings
The role of the facilitator(s) is to manage the group process. This includes:

- Arriving at least fifteen minutes ahead of members to prepare the room.
- Welcoming members as they arrive, e.g. with a personal greeting.
- Opening the meeting.
- Ensuring attention is drawn to the group’s values and principles, in particular confidentiality.
- Outlining any particular agenda items or prior commitments.
- Introducing any guests.
- Inviting participation.
- Facilitating the discussion.
- Allowing space to discuss any challenges or difficulties that members bring up.
- Allowing space for responding to stories, challenges, emotions as they arise, including emotional support, information, sharing experiences in support of a member in particular need.
- Facilitating the identification of any additional support needs of members, e.g. referral to counselling, one to one support, etc.
- Inspiring reflection and creating a space for silence and peace.
- Agreeing any next steps or processes to ‘wrap around’ any member who is particularly in need of support.
- Drawing the meeting to a close with warmth and hope.
- Administrative details, if relevant, e.g. timing of next meeting, announcing any guest coming, respite, etc.

From time to time the group will encounter challenges and it is important to see these as opportunities to learn and grow. They offer an opportunity to pause, reflect, take stock and seek out a way forward for the greater good.

If there is conflict within the group, the facilitator first seeks permission from the group to look more closely at the issue. This will involve gathering all the facts and discussing the underlying issues and emotions, bringing these out into the open, and agreeing a course of action.

In instances where one member never shares their experience or is reluctant to talk, other members of the group may feel anxious or uncomfortable. If and when such instances occur the facilitator needs to explore the underlying causes. The facilitator may need to ask
members if they feel excluded or discriminated against, if they feel that trust has been broken, if they feel there are cliques in the group operating their own agenda or if they are shy. The member may feel that their story isn’t ‘big’ enough or serious enough to discuss having heard the stories of others or they may feel frightened by the stories of others.

If someone is being disruptive, the group needs to manage this. The facilitator should be aware of who is interrupting, who is listening, who is responding, who speaks very little, when does the disruptive behaviour happen? Rather than trying to discourage the domineering person, the facilitator should encourage others to participate. The facilitator may need to get the group to break up into smaller groups or pairs to give everyone a chance to express themselves.

Good practice facilitation involves the following:

- Giving your attention to members as they share their story and encouraging participation.
- Being aware of your own body language and reactions when listening or responding to speakers.
- Being mindful of the process.
- Offering all who wish to speak an opportunity to do so and not allowing one person to dominate.
- Being neutral – being alert to attending to all members and all points of view, even those that you disagree with.
- Encouraging calmness and serenity within the group.
- Understanding and accepting your own limitations and being yourself.
- Trusting the resources and experience of the group – seeking their involvement, asking for information or support from the other members of the group.
- Inviting feedback – remembering that silence does not automatically mean agreement – if in doubt, check it out.
- Working through conflict – it is a natural part of group development. Managing the process with a simple, direct, open session and recognising that it may take time and more than one session to resolve.
- Having a sense of humour.
- Making sure people leave a meeting with a sense of support and knowing that there are people watching out for them.
- Recognising that some people may not be ready for a group but they still need support and being prepared to give this to them on a one-to-one basis until they are ready for a group session. One-to-one meetings may be important when working with minority groups as initially groups can be an intimidating prospect.
• Knowing when to refer a member of a group for professional help.

4.7 Supervision for Facilitators

Good practice indicates that it is worth considering supervision for facilitators. Supervision is a term used to describe an additional source of support and guidance for facilitators. This is a model adopted from the counselling profession based on the principle that the carer or helper needs support and coaching too. The theory is that supervision offers a safe, separate and confidential space for facilitators to receive support and to talk through their experience and any challenges that they face. This is with a view to building on their skills and techniques through reflection and support.

There are different models of supervision depending on the preference of the facilitator and resources available. Examples include peer supervision which would involve a group of facilitators coming together to share and support each other. This could be facilitators who work together or joining up with other facilitators from other family support groups. Another option is to seek out external supervision on a one to one basis from a professional (e.g. counsellor or facilitator), someone who is separate and independent of the family support group or situation.

The ideal arrangement is to meet periodically (at least once every three months) and devote time to reflection and review.
Box Five gives a working example of how conflict arising from a breach of confidentiality was managed through effective facilitation.

**Box Five**  
**Managing a Breach of Confidentiality within a Family Support Group**

A member of a family support group (Julie\(^6\)) happened to overhear two people (one of whom was also a member of the group) in a supermarket discussing the family support group that she was a member of. Whilst the conversation that she overhead was positive, Julie was upset because a member’s name was mentioned and certain details of a family’s circumstances were discussed. Julie chose not to attend the next meeting of the group as she was upset and unsure of how she might react. She was upset that the confidentiality that she had trusted in had been breached and she did not know what to do. The facilitator of the group noted that Julie did not attend the meeting and sensed something was up so she rang Julie. Gently, with persuasion from the facilitator Julie explained the reason for not attending and how upset she was about the breach of confidentiality. The facilitator persuaded Julie to attend the next meeting and agreed to devote a part of the meeting to discussing confidentiality with the group and what it means in practice. This was a sensitive meeting as emotions were raw and people were naturally upset. Through careful facilitation, open discussion, explanation and a gracious apology on the part of the woman who had broken the confidentiality promise, followed by forgiveness, some stability was restored. The group took a while to heal from this incident and learnt an important lesson about what confidentiality actually means. It means that all information shared and discussed at meetings and details of membership remain totally confidential, even in the case of positive information. All members must understand the importance of this promise of confidentiality and remain true to it.

### 4.8 Reflective Exercises

This section contains some reflective questions to help you examine your practice.

- Who will facilitate your group?
- If the group wishes to facilitate itself, who amongst you will train to be facilitators?
- Have you sourced facilitation training?
- Have you sourced funding for the training?
- If you decide to use an external facilitator, are they trained in facilitation techniques?
- How long do you plan to have your meetings for?
- Will everyone get a turn to speak?

\(--\)

\(^6\) This is not her real name.
If someone is very quiet, how will you ensure that they do not feel excluded or that other members do not feel uncomfortable?
If someone is disruptive, how will you address this?
What local sources of expertise or professional help can you draw on to assist members?
Who will provide support and supervision to the facilitator?

4.9 Top Tips
The following tips are drawn from the examples provided by the family support groups visited during the development of these guidelines.

Tip 1
At the first meeting, or when a new member joins, invite everyone to introduce themselves. It is good to evoke an atmosphere that is relaxed and welcoming and it is good to encourage members to share their expectations or wishes for the meeting.

Tip 2
A member who never shares their experience or who is reluctant to talk can evoke a sense of discomfort and/or tension within the group and it is worth exploring the underlying causes. Over time this situation might ease as people relax. However, if it persists it is important to ask them how they are feeling. It might be that they feel excluded or discriminated or they feel that trust has been broken or they feel there are cliques in the group operating their own agenda or they may be shy. They may feel that their story is not important enough or serious enough to discuss having heard the stories of others or they may feel frightened by the stories of others.

Tip 3
If a member’s behaviour is disruptive, the group needs to examine the scenario and seek constructive ways to address this. Explore the way the group process is unfolding, seek out behaviour patterns and possible ways to change these patterns if they are not for the greater good of the group. For example, establish who is interrupting, who is listening, who is responding, who rarely speaks or speaks very little, when does the disruptive behaviour happen and what are the triggers for this? Rather than trying to discourage domineering behaviour, encourage more active and constructive participation. It may be necessary to break up into smaller groups or pairs to give everyone opportunities for self-expression.

Tip 4
Be prepared to follow-up on issues after the group session has ended.

The next section looks at seeking external support for groups and their members.
Section Five
Seeking External Support

This section looks at how a group might seek external support such as information, training, development and respite. The research indicates that family support groups source information, training and development in different ways and from different providers. There are many different routes and options. There is no one specific self-development or training path for family support groups.

The core questions relevant to this section are as follows:

- What is the purpose of self-care and development?
- What is the value of self-care and development?
- What are the information, training and development needs of your family support group?
- What is useful to consider when sourcing information, training and development for your members?
- How to fund training and development?
- How to evaluate information, training and development?

5.1 The Purpose of Self-Care and Development
Self-care, self-development and group development are all part of the process of family support. This means that members are constantly listening to one another and tuning into each other’s needs. The purpose of self-care and development is to help members to develop the skills that they need to cope with their life challenges. This is achieved through sharing experiences, information and drawing on external supports, training and development.

5.2 The Value of Self-Care and Development
The value of self-care, self-development and training is that it builds up the resolve and confidence of individual members of family support groups. It offers respite and an opportunity to learn and grow thus enhancing coping skills and resilience. It also builds up the collective skills and power of the group over time. The added value is time out to reflect, learn and engage socially with other members.
5.3 The Issues and Challenges for Family Support Groups

Based on a survey of family support groups conducted as part of the development of these guidelines the types of concerns and issues discussed within family support groups around the country include:

**Access Issues:**
- Access to addiction counsellors.
- Access to complementary therapies, e.g. massage, acupuncture, reflexology, etc.
- Access to detoxification facilities locally for family members.
- Access to psychotherapy and/or family therapy.
- Access to respite.
- Access to advocacy services.
- Access to quality detoxification facilities locally for family members.

**Family Issues:**
- Boundaries in the home.
- Domestic violence.
- Drug related debt.
- Engaging other family members in the support process (e.g. grandparents, husbands, siblings).
- Family bereavement.
- Family law.
- Family mediation.
- Guardianship of children.
- Support for siblings.

**Personal Issues:**
- Local authority housing.
- Managing stress.
- Physical and sexual abuse.
- Social welfare.
- Suicide and self-harm.

**Legal and Crime Issues:**
- Anti-social behaviour.
- Dealing with the Gardaí/PSNI/HSE.
- Dealing with intimidation.

---

Good Practice Guidelines for Peer Led Family Support Groups

- Dealing with the media (e.g. local newspapers).
- Dealing with solicitors and the legal profession.
- Theft.

**Family Support Group Issues:**
- Attracting new membership.
- Attracting members from our new communities, Travellers, etc.
- Funding for your group.

It is important that information provision and training respond to the above topics and needs.

**5.4 Identifying Information, Self-Development and Training Needs**

Research has shown that many families lack information, awareness and understanding of drug use. Based on the survey of family support groups conducted as part of the development of these guidelines, drug awareness was the most frequently cited need of members. Other important training, information and development needs were stress management and coping skills, suicide awareness and prevention and facilitation training.

Lack of awareness and information can prevent families from understanding the need for or seeking support. It is likely that one of the first needs that your members present with is for information.

Each member will have specific information needs at different times within the group. The process of family support encourages members to tell their stories and express their needs. Access to good quality up-to-date and locally relevant information can be an enormous relief and support to family members.

A certain amount of information will be generated within the group or will be at the disposal of the facilitator or a project worker associated with the group. In instances where a group operates under a host organisation then there is likely to be access to certain information relevant to the host organisation.

There will also be times when a piece of information has to be researched or sourced outside of the group. This may provide an opportunity to invite in a guest speaker to share information with the group. Other times it will mean that someone has to do some research so as to gather the necessary information.

Self-care and personal development are central to family support. There is a range of possible training and self-development needs that
Good Practice Guidelines for Peer Led Family Support Groups

members may identify. The following are some examples of frequently mentioned development needs:

**Access:**
- Accessing complementary therapies.
- Accessing services such as counselling and detoxification facilities.

**Awareness:**
- Alcohol awareness.
- Drug awareness including poly drug use, new drugs and the ‘street’ names of drugs.
- Social welfare benefits and entitlements.

**Personal Development and Health:**
- Coping skills.
- First Aid.
- Good mental health.
- Health information and education specifically linked to drug use, e.g. Hepatitis C.
- Personal development, self-esteem, assertiveness, coaching, life skills.
- Stress management.
- Suicide awareness & prevention.
- Wheel of Change.

**Family Support Group Skills:**
- Diversity training and dealing with cultural/ethnic diversity.
- Dealing with Gárdai/PSNI.
- Communication and media skills.
- Facilitation training
- Evaluation skills.
- Training in complementary therapies, e.g. massage, acupuncture, reflexology, etc.
- Training in roles such as chairperson, secretary and treasurer
- How to set up, promote and run a family support group or local/regional network
Points to bear in mind when identifying information or training needs are:

- Encourage members to identify what training and/or information needs they have.
- With the members, prioritise this list of needs so that the most urgent need is addressed first (this may or may not be the most common need).
- Seek feedback from members who take part in training.
- Seek feedback about guest speakers.
- Keep a note of what the group found useful or otherwise for future reference.
- Ensure that information is accurate and up-to-date.
- Be open to learning from other groups and sharing with other groups.
- Have a list of local counsellors and other professional supports to whom members can be referred.
- Have a list of useful local sources of information or websites to share with existing and new members.

Sources of information include the FSN, Citizens Information Centres, MABS, Community Drugs Projects or Local and Regional Drugs Task Forces, Family Resource Centres, Pavee Point, Local Employment Services and the HSE.

5.5 Sourcing Training and Development
There are a number of points to bear in mind when sourcing training and development for your group:

- Check the credentials of any speakers, therapists or trainers that you invite to your group. It is worth seeking a reference and checking whether the style and type of training will suit the ethos of your group and the needs of your members.
- It is worth meeting with any potential speakers or trainers to brief them on your group and its particular needs.
- Be mindful of accreditation/certification for any training that your members embark on.
- Remember that members will select or volunteer for training in tune with their own preference and style. This is a voluntary process but it is worth bearing in mind that some members may need some encouragement to make the choice.
5.6 Funding Training and Development

Family support groups may benefit from funding from different sources and this varies from area to area. Examples of sources of funding include:

- Dormant Accounts/Pobal.
- Local and Regional Drugs Task Forces.
- Family Support Agency.
- HSE.
- Fundraising.
- Local businesses.
- Saving small amounts week by week.

It is useful to know the different possible sources of funding and to understand the application process.

If your group decides to fundraise locally you will need to apply to the Gárdaí for permission to do so.

5.7 Evaluating Training and Development

It is always wise to evaluate any training, information session or development event that you or your members participate in. The reason for this is to build up a repertoire of what works for your family support group members.

Evaluation means taking time to reflect after an event. The evaluation questions that you might consider reflecting on after a particular information session or training event are:

- What went well?
- What did members like/enjoy about the training or information session?
- What would members wish for more of?
- What would members wish for less of?
- How did the information or training affect the group?
- Was there positive change concerning development for members as a result?
- What was the value of the information or training to the members of your group?

It is worth making a note of your group’s response to the above questions as these will tell you whether a particular learning event has been useful or not. It will also give a good sense of the needs of members, what they enjoy and what helps them most in terms of training, support and respite. This, in turn, will help you decide in future whether it is worth investing in the same or different events in tune with the needs of members.
5.8 Respite as a Source of Support
Members of the group, either individually or collectively, can benefit from respite outside of the home environment. Respite can take many forms, e.g. having a group weekend away, going to a conference, doing workshops in self-care, engaging in holistic therapies.

Respite involves constructive activities and/or an opportunity for some time away from the home environment and the family member who is using drugs. A period of respite should enable the person to come back rested and better able to cope.

Box Six gives insight into the value of respite for family support members

Box Six – The Value of Respite
As someone who is relatively new to family support, I would like, on behalf of my wife and I, to thank each and every one of you for a weekend that will stay in our memories for a very long time to come. We met people that made us laugh, and we met people that made us cry, but we all felt that we were not alone, and that feeling that we are all in this nightmare together makes it a little bit easier to deal with. Appreciation of a respite weekend away by an anonymous member of a family support group

5.9 Reflective Exercise
This section contains some reflective questions to help you examine your practice.

➢ What are the most common topics that come up for discussion in your group?
➢ Has your group developed a list of useful local sources of information or websites to share with existing and new members?
➢ Do you keep up-to-date with new drugs and ‘street’ names for drugs?
➢ Has your group discussed training needs?
➢ If so, have you prioritised these needs?
➢ Has your group sourced suitable courses?
➢ Will the courses provide accreditation?
➢ Do you know anyone who has attended the courses that could give you feedback about their relevance and quality?
➢ How much will the courses cost?
➢ Has your group sourced funding for training?
5.10 Top Tips
The following tips are drawn from the examples provided by the family support groups visited during the development of these guidelines.

Tip 1
Sources of information include the national Family Support Network (telephone: 01-8365168 and www.fsn.ie ), your local Citizens Information Service, Money Advice & Budgeting Service (MABS), Community Drugs Projects or Task Forces, Family Resource Centres, Pavee Point and your Local Employment Service.

Tip 2
Most training courses incur a cost. Your Local Drugs Task Force or community drugs project may have funding available to it to support you to access relevant training. Other sources of funding include Pobal (www.pobal.ie) and Dormant Accounts, the HSE, and the Family Support Agency. You may need to fundraise. If your group decides to fundraise locally you will need to apply to the Gárdaí for permission to do so. It is wise when fundraising to emphasise that it is for a local cause.

Tip 3
If one of your group members has attended training in a personal or professional capacity, invite them to share their experience of the course with the other group members.

The next section looks at setting up a local or regional support network for family support groups.
Section Six
Setting up a Family Support Network

This section explores setting up a family support network and what the benefits of a network are. A network is a forum for local groups to come together to discuss issues of common concern and to collectively look for solutions. Networks can be organised on a local, regional or national basis.

The core questions relevant to this section are:

- What is a family support network?
- How is a network structured?
- What is good practice in a network?

6.1 What is a Family Support Network?
Family support networks are representative bodies that enable family support groups in an area or region to promote and support the work done by family support groups and to share information and good practice. Often they provide a link to the wider community and can be represented on Local or Regional Drugs Task Forces.

6.2 What is the Purpose of a Family Support Network?
The benefits of being part of a network include networking and the sharing of information and ideas with similar groups. The network provides a forum for solving problems together – family support groups do not have to be isolated. Networks can also have more say in the development of policies for families or drug users by being represented on steering groups, task forces, committees, etc. They can help family support groups to access support and to exchange ideas on a wider scale.

6.3 Structure of a Family Support Network
A network can be set up as a company (see Appendix A for how to set up as a company) or it can be unincorporated. Good practice in either case is that it elects a chairperson, treasurer and secretary. The chairperson may also be the facilitator of the network.

Like any family support group, a network must decide what its principles or rules will be, joining criteria and what it hopes to achieve. It must decide the best systems and processes for family support groups to join the network. Key questions are:

- Will family support groups pay a membership fee to join a family support network?
• Will family support groups be nominated by an existing member of the network in order to join the network?
• Will family support groups have to be from a certain area or region to join a family support network?
• Will issues affecting minority groups be discussed and brought to network meetings?
• Who will be the contact person that family support groups can call if they wish to enquire about joining a family support network?

The principles of the network should mirror those of family support groups, e.g. confidentiality, respect, non-judgemental, honesty, inclusion, being responsive and solution focused.

6.4 Setting up and Managing a Network
Setting up and managing a network is similar to the process of setting up a family support group. The important steps are as follows:

• Identifying that there is a need for a local or regional network.
• Setting out your intentions. Who is the network for, how do groups join the network, how often will it meet, what does it hope to achieve?
• Setting up a steering group of like-minded family members to drive the establishment of a network.
• Informing and inviting all the members of local family support groups to a meeting to discuss the idea of setting up a network.
• Organising an external facilitator to facilitate this first meeting and to help local groups decide what they want the network to do.
• Agreeing the aims and objectives of the network.
• Agreeing on what basis family support groups can be affiliated to the network.

The steps that are involved in running a network are as follows:

• Inviting family support groups to join the network. You will need to decide whether or not there will be a membership fee and if so how much this will cost family support groups. You will also need to decide how many representatives each member group can send to network meetings – is it one or two or more representatives? Bear in mind that your network meetings need to be of a manageable size and two representatives from each member group is often sufficient.
• Agreeing where network meetings will take place and how often they will take place.
Good Practice Guidelines for Peer Led Family Support Groups

- Requesting that members bring information and issues to the network and to bring back information and issues from the network.
- Deciding if the network is to have an external facilitator to manage its meetings.
- If the network is to be run entirely by the members, from the representatives of the network, elect a chairperson, secretary and treasurer.
- The chairperson agrees a written agenda for each network meeting.
- Identifying what the main needs of family support groups are that the network should be trying to address with their groups and prioritising these needs.
- Drawing up a draft work plan, informed by the needs identified above, to guide the work of the network for each year and agreeing this plan with the members. The work plan should include actions in relation to issues, training, funding, events and networking that members want to focus on.
- Holding an annual general meeting to which all members are invited. The purpose of the meeting is to report on the network's finances and activities and to elect the chairperson, secretary and treasurer. It also provides a forum for members to raise issues and to put forward ideas to the network.

Rotating the venue for network meetings around the local family support groups that are part of the network is a good way for people to get to know each other and to share the work of organising and running the network. Networks typically meet monthly or bi-monthly.

As your network develops and its members become more confident and experienced, you may need to consider registering it as a company limited by guarantee with charitable status. While this will bring extra paperwork, it will make it easier to apply for State funding. It will also help you to structure your network and it will help you organise your finances in a way that does not put each member's personal assets at risk. Appendix A on the topic of Governance provides guidance on how to do this.
Box Seven provides an example of a family support network in action.

**Box Seven – A Family Support Network in Action**

There are examples of family support networks that have been set up, some with support from the Local/Regional Drugs Task Force. One local family support network began when all the local family support groups in the area attended a facilitated weekend. The invitation was to every member of each of the five groups in the area. The purpose of the weekend was to discuss the need for a local network and how it might be brought into existence. Another goal was to nominate a member to represent family support groups on the Local Drugs Task Force.

The facilitated weekend enabled groups to learn about each other, to explore common expectations and issues and to look at the feasibility of setting up a network. There was unanimous agreement that there was a need for a local network.

It was agreed that the network would operate by setting up a steering group. Two representatives from each family support group were nominated onto the steering group. The steering group is facilitated by the Local Drugs Task Force and supported by a support worker. It meets every month for two to three hours. It elected a chairperson, secretary and treasurer at its first meeting. It developed a work plan in consultation with the members. The steering group is responsible for accounting for any money drawn down on behalf of the network from central funds. It has an annual general meeting to report on its activities to the members of the network. During this meeting, the steering group for the next year is elected.

**6.5 Connecting with the National Family Support Network**

The FSN is there to provide you with support and guidance in setting up a family support network in your area. The overall aim of the FSN is to improve the situation of families coping with drug use by developing, supporting and reinforcing the work of family support groups and local/ regional family support networks, by working for positive change in policy and practice and by raising public awareness about the problem of drugs for families and communities. Please contact the FSN at 16 Talbot Street, Dublin 1 or on telephone number 01-8365168 or visit their website at www.fsn.ie.
6.6 Reflective Exercises
This section contains some reflective questions to help you examine your practice.

- How have you determined the need for a local or regional network?
- Is there a network already in existence that you could link into?
- What do you need the network to do?
- How can it support local family support groups?
- Who will it link into?
- Who will take responsibility for organising the first meeting to discuss setting up a network?
- How will the network operate?
- Is it open to all local family support groups?
- Who will facilitate it?
- What will be its membership terms?
- Will there be a membership fee?
- How often will it meet?
- Where will it meet?
- Who will be the chairperson, secretary and treasurer?
- How will you decide on the selection of people for these posts?
- How many representatives will each family support group nominate to attend network meetings?
- Are issues affecting minority groups discussed and brought to network meetings?
- Have you agreed the aims and objectives of the network?
- Have you agreed a ‘work plan’, e.g. the work plan should include actions in relation to issues, training, funding, events and networking that members want to focus on?
- When will you hold your Annual General Meeting (AGM)?
- Who will be invited to your AGM?
- Is there provision for an Extraordinary General Meeting (EGM)?

6.7 Top Tips
The following tips are drawn from the examples provided by the family support groups visited during the development of these guidelines.

Tip 1
Rotating the venue for network meetings around the local family support groups that are part of the network is a good way for members to get to know each other and to share the work of organising and running the network. Networks typically meet monthly or bi-monthly.

Tip 2
As your network develops and its members become more confident and experienced, you may need to consider registering it as a company limited by guarantee with charitable status. While this will
bring extra paperwork, it will make it easier to apply for State funding, it will help you to structure your network and it will help you organise your finances in a way that does not put each member’s personal assets at risk.

Tip 3
Support in setting up a network can be provided by the national Family Support Network. Telephone: 01-8365168 or www.fsn.ie

Appendix A provides guidelines on good practice governance for your family support group or network.
Appendix A – Governance

This section is a guide to help you to understand national structures and to develop good practice in managing your group or network. It covers the following topics:

- National structures.
- Structure for your family support group.
- Setting up as a company limited by guarantee.
- Setting up as a charity.
- Annual general meetings.
- Roles of the chairperson, secretary and treasurer.
- Responsibility for finances and accountability for funds.
- Sources of funding and applications.
- Insurance.
- Data protection.
- Representation on bodies such as the Local or Regional Drugs Task Force.
- Affiliation to a network.

A.1 Insight into National Structures

As a member and/or facilitator of a family support group it can help to have an understanding of the structures involved in the co-ordination and delivery of drug services in Ireland. This understanding can be useful if you are looking for financial or political support for your group.

Institutional Structures

The drugs issue, due to its complex nature, is a cross-cutting area of public policy and service delivery. A wide range of statutory, community and voluntary sector organisations is involved in the delivery of drug services at national, regional and local levels. The institutional arrangements that support cross-agency working are an important element in responding to the drugs issue.

National Drugs Strategy

Ireland’s first National Drugs Strategy was put in place in 2001. The second National Drugs Strategy was launched in 2009 and will last until 2016. During this time alcohol is to be incorporated into the strategy to make it a National Substance Misuse Strategy.

The Strategy covers the areas/pillars of Supply Reduction, Prevention, Treatment, Rehabilitation and Research. Under each of these areas/pillars a number of actions are decided upon and different organisations are assigned responsibility for implementing these actions. Figure one shows the different structures responsible for implementing the National Drugs Strategy.
**Government;** The Government is ultimately accountable for all expenditure incurred by Government Departments.

**Cabinet Committee on Social Inclusion, Children and Integration;** This committee is chaired by the Taoiseach and is attended by relevant Ministers. The committee gives direction to the development of policies to combat poverty and social exclusion and ensures that their implementation is regularly monitored and promoted at the highest level.

**Minister / Office of the Minister for Drugs (OMD);** The Minister of the Department of Community, Rural and Gaeltacht Affairs is given responsibility by the Government for the National Drugs Strategy and is supported in this by personnel from the Office of the Minister for Drugs. The Office of the Minister for Drugs supports and drives the ongoing implementation of the National Drugs Strategy while respecting the various lead roles and statutory responsibilities of the Departments/Agencies involved. The Office is staffed by personnel from the Department of Community, Rural and Gaeltacht Affairs and supported by representatives from Statutory Agencies and the Community and Voluntary Sectors on a part-time basis. The OMD has key responsibilities in the following areas:

- National co-ordination.
Oversight Forum on Drugs: The Oversight Forum on Drugs meets four times a year and is made up of senior representatives from Statutory Agencies and a representative from both the Community and Voluntary sectors. The main role of the Forum is as a high-level group that monitors the implementation of the National Drugs Strategy. If progress is blocked or issues arise that prevents the Strategy from being implemented the Forum can agree ways of overcoming this.

National Advisory Committee on Drugs (NACD): The NACD conducts research on the drugs issue that informs the National Drugs Strategy. The main function of the NACD is to advise the Government in relation to the prevalence, prevention, treatment and consequences of drug use in Ireland.

Statutory Agencies: There are many different Government Departments and State Agencies that have a role to play to ensure the implementation of the National Drugs Strategy. In order to respond to the drugs issue a holistic approach is needed and therefore it is important that representatives from the Department of Justice, Equality and Law Reform, Department of Community, Rural and Gaeltacht Affairs, Department of Health and Children, Department of Education and Science, Department of Environment, Heritage and Local Government, Department of the Taoiseach, the HSE, An Gárdai Síochána and FÁS are involved in the implementation of the National Drugs Strategy. Representatives from these groups work in the Office of the Minister for Drugs and also sit on the Oversight Forum on Drugs. Also representatives from these statutory agencies will often sit on Drug Task Forces.

Drug Task Forces: There are 14 Local Drug Task Forces and 10 Regional Drug Task Forces. Task Forces comprise of a partnership between the statutory, voluntary and community sectors. Task Forces focus on monitoring and evaluating projects in their locality, preparing action plans, identifying emerging issues or needs and possible responses to these and ensuring the implementation of a local/regional drug strategy. Please see A.11 for more information with regard to representation on Drug Task Forces.

Bi-annual Meetings: The National Drugs Strategy also provides for the Minister to meet with specific groups, agencies, or individuals holding key posts twice a year. The purpose of these meetings is to keep a focus on drug related issues and the broad implementation of
the National Drugs Strategy. The Family Support Network is one of these groups, identified in the National Drugs Strategy, to meet with the Minister twice a year.

A.2. Structure for your Family Support Group
There are a number of options for the structure of your group or network. It can be a loose gathering of people with no incorporation or legal obligations. Often this is how groups are when they first start. As they grow and develop, however, they may feel the need to become more structured, particularly if they want to access grants or sources of funding from statutory bodies. Local drugs projects or agencies can act as channels of funding for family support groups. The next section looks at setting up as a company limited by guarantee, followed by how to set up as a charity.

A.3 Setting up as a Company Limited by Guarantee
A company is a legal form of organisation that is separate from the people who start or run it. By setting up a company the people who run it are protected from being sued for the payment of unpaid debts incurred by the company. There are a number of different types of company. The most relevant to family support groups or networks are a company limited by guarantee with no share capital and a company limited by guarantee with share capital.

A company limited by guarantee with no share capital means that the members do not have shares in the company. However, the company must still have members and a minimum of seven is required and it must have at least two directors. This form suits many charitable organisations as it provides a separate legal entity with the benefits of limited liability status but without the need to raise funds from members. The members’ liability is limited to the amount they have undertaken to contribute to the assets of the company in the event it is wound up.

A company limited by guarantee with share capital can have up to 99 members. Members buy shares in the company and in this way the company can raise funds. Again, the company must have at least two directors. The members’ liability is limited to the amount (if any) of any unpaid shares that they hold and the amount they have undertaken to contribute to the assets of the company in the event it is wound up.

To set up a company you will need to do the following:

- Select a company name and check its suitability and that no one else is using this name already.
- Agree what the registered address of the company will be.
- Name the company secretary and at least two directors.
Good Practice Guidelines for Peer Led Family Support Groups

- Name the members and the number of shares they hold (if any).
- Develop a Memorandum of Association and the Articles of Association of the company.
- Complete the relevant companies’ registration forms.

An accountant or solicitor is the best person to organise all of the above. There are also on-line services that can help. For further information go to the Companies Registration Office website www.cro.ie.

A.4 Setting up as a Charity
Charitable status means that your company or group is exempt from certain taxes. Individuals who donate to you may be able to reclaim tax on their donation. You must apply to the Revenue Commissioners to get charitable status and you should seek legal advice in doing so. You do not have to be incorporated to get charitable status but you must meet certain conditions. These include having a ‘governing instrument’, being set up as a Trust or as a company limited by guarantee or as an Incorporated Entity under the Charities Act.

For further information about frequently asked questions go to www.revenue.ie/doc/faq_chy.doc and www.revenue.ie/services/foi/s16_2001/charity.htm

A.5 Annual General Meetings
Companies are required by law to hold an Annual General Meeting (AGM) of the members. At this meeting the chairperson, secretary and treasurer are usually elected by the members. The Annual Report and Accounts of the company is presented to the members for discussion and agreement and the chairperson usually gives a short review of the year’s activities. Even if your group or network is not incorporated, it is a good idea to hold an AGM to review what the group/network did during the year, to review who the group/network is for or if this needs to change and to look at how the group/network has functioned during the year and decide if any changes are needed to how it operates or to its rules or principles.

A.6 Roles of Chairperson, Secretary and Treasurer
Whether or not you set up as a company or decide to remain unincorporated it is good practice to elect a chairperson, secretary and treasurer for your group/network each year. The chairperson is responsible for calling meetings, steering and guiding the group/network and the running of meetings. The chairperson should be able to take on board all points of view, manage time keeping, enable people to participate and express their views, and guide a meeting through an agenda or agreed set of topics. The secretary is responsible for taking the minutes/notes of meetings, keeping a record of decisions made by the group/network and handling of any
correspondence. The treasurer is responsible for managing the finances and sources of funds for the group/network.

A.7 Responsibility for Finances and Accountability for Funding

Even an unincorporated group/network might need some money (a ‘kitty’) to provide for light refreshments or even to pay for room hire. Members need to agree how much they will contribute to this kitty, e.g. €5 each week. If a group needs a kitty, then one person should become responsible for holding the kitty and for paying money out of it.

A company will need to have its own bank/credit union account. Any money that is raised from members or any external funding should be lodged and dispensed from this account. Two people should sign cheques. Companies will have to produce an Annual Report and set of Audited Accounts. An accountant should be appointed by the members of the company to do this. A record of money coming in and money spent will need to be kept along with receipts (where possible) in order to assist the auditors to complete the accounts each year. Even if the group/network is not incorporated, the treasurer should keep a simple record of what has been raised and what has been spent.

A.8 Sources of Funding and Applications

There are a number of ways of fundraising for your family support group or network and all require some investment of time and energy. These include fundraising from the members of the group/network. Another is by applying to a statutory body such as the Local or Regional Drugs Task Force or the HSE for a grant. Carrying out local fundraising events or street collections is another way. You might seek private donations from individuals or philanthropic organisations.

If you seek grant aid or funding from statutory bodies there will be an application process which you will have to go through. There will be specific terms and conditions about what you can use the money for and what type of reporting you will have to make back to the funders.

If your group/network needs to raise funds through local collections you will need to get a licence to do so from the local Gárdaí. Make sure that you let people who donate know what you are raising the money for.

If you get money from private donations you should keep the individual informed about what, for and how the money has been used. Many philanthropic organisations have similar application and reporting requirements as statutory bodies.
A.9 Insurance
If you have the use of a building, check that the insurance policy covering the building will also cover your group/network members using the building. If you meet in someone’s home, the home owner should check with their insurance company that their home insurance will cover gatherings of the group/network in the event someone has an accident or a fall. If additional insurance cover is required for public liability, external funding should be sourced. Public liability insurance is not expensive.

A.10 Data Protection
Confidentiality is a core principle of family support. In the event of your group employing the services of an external person to conduct an evaluation of the work of your group, it is important to check the ethical practice of the evaluator. It is also important to ask how sensitive information will be gathered and stored. If you decide to gather information from your members, be clear what the purpose of gathering the information is, what the information will be used for and that no one individual will be named or identifiable in any reports that you might use the information in. If you want to carry out research, invite your members to take part on a voluntary basis. Information about members should be stored in a secure place (e.g. locked cabinet or a password protected computer file). The names, addresses, telephone numbers and email addresses of members should never be revealed to a third party without their specific consent.

A.11 Representation on Bodies
The Local or Regional Drugs Task Force may look for representatives from local groups to attend and contribute to the task force meetings in order to have the views of families represented. If your group/network is invited to send a representative, the group/network should call a meeting of its members to agree who will represent the group/network. Ideally, this should be done by way of election whereby people volunteer to put forward their names to be nominated, others then propose and second the nominations and then the group votes on each of the nominations. The person with the highest number of votes is elected to represent the group.

Local or Regional Drugs Task Forces often deal with issues that are affecting a local area or region, they discuss issues of concern to particular agencies represented on the task force, they often have a specific plan of work and activities for each year and they discuss policy issues. Family representatives may at first find this intimidating or daunting but by listening and not being afraid to ask questions you will learn. Remember you are there to ensure the voice of families is heard. Do not be afraid to ask for support in this role if you feel you need it. The Family Support Network can be a good starting point if looking for support in this role.
A.12 Affiliation to a Network
The benefits of family support groups joining a network are that they can share information and gain knowledge from other members. A network can also give families and groups a stronger voice in relation to strategies being developed for an area or region. A network can sometimes be better equipped to access funding and training and may be able to share resources with other organisations or amongst its member groups.
Appendix B – Steering Group Members

The process of developing these guidelines was supported by a Steering Group comprised of the following members:

Robbie Byrne          Community Response
Marie Connor          The SNUG Counselling Service
Marian Davitt         Circle of Friends Family Support Group
Sadie Grace           Family Support Network
Megan O’Leary         Family Support Network
Appendix C – Source Documents

Father’s of Addicts Family Support Group, 2005, ‘Men at Work’, DVD.
www.adfam.org.uk