

*" Your vision will become
clear only when you look
into your heart.*

*Who looks outside, dreams.
Who looks inside, awakens."*

... Carl Jung

Introduction

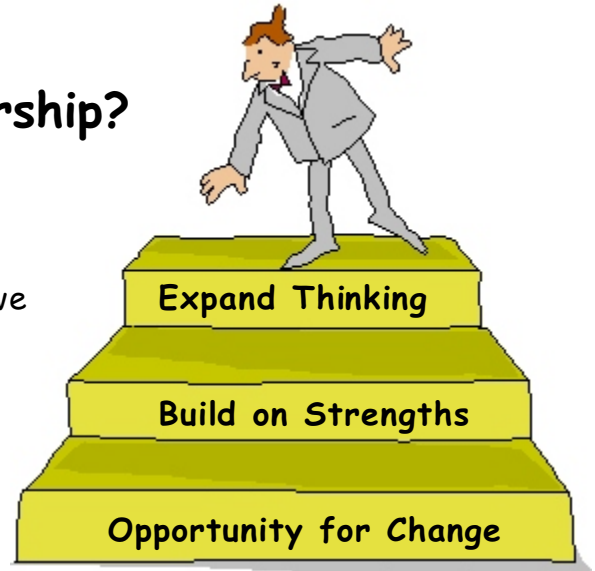
The manual you are holding in your hands right now is the result of a lot of hard work by many people. It began in 1999 when a group of consumers at Community Mental Health Services of Livingston County asked for workshops that would teach them leadership skills. Following this request, Mac Miller, Executive Director of Community Mental Health Services of Livingston County, designed a leadership model that was presented to the Consumer Action Panel of Livingston County. This group then made the model a reality by co-designing, with staff, the manual you now have.

The hope for this type of training grew out of three desires:

1. To ensure that consumers have the necessary skills to advocate for themselves in a variety of ways, and to a variety of groups, not simply to therapists or other support persons.
2. To ensure that when consumers are doing Person Centered Planning that they are truly partners in the planning process, and, in fact, leading that planning process.
3. And, lastly, that consumers have the skills necessary to pursue hopes and dreams of a future that is based on their strengths, not their symptoms.

We hope you enjoy your journey as you learn about leadership!

What Is Personal Leadership?



Sometimes simply hearing the words ensures that we "check out " by discounting ourselves. What, we think: us, leaders? Don't you have to get on TV or in the paper for that? But I ask you: think of those folks who are in the media's eye. They are quite often celebrities who we don't want to model ourselves after, right? So for many of us, we first have to re-work our notion of what exactly a "leader" is. Leadership is not fame. In fact, fame may be a barrier to leadership! The quotation above is intended to help us expand our thinking: leaders are those people who are able to look inside themselves and build on their strengths so that they can create a new and different way of living with one another, solving problems and seeing opportunities for change in our lives and in the mental health system.

Now that we're clear on what personal leadership is, broadly speaking, let's get a bit more specific about it. Then we can identify why we are interested in becoming leaders or in expressing our leadership skills. There are general characteristics of people who are interested in developing themselves (that is, increasing their leadership skills).

These characteristics are that they're people who:

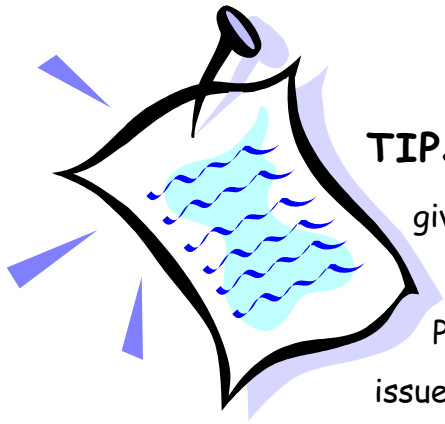
- Are aware of their communication style and build on their strengths
- Know how to communicate effectively with others
- Use conflict resolution strategies when conflict occurs
- Are continual learners
- Build on their resources of courage
- Build on their own integrity

You'll notice that the items listed above are skills, not personality traits. This chapter will help you identify your strengths and teach you techniques that will enable you to build concrete skills as you advocate for yourself, whether that advocacy is taking place when you are talking about your medication with your psychiatrist or whether you're advocating for yourself at a Person Centered Planning Meeting. In the space below, please think about some of the "leaders" you've known in your life:

Leaders I've known:	How they've made a difference to me:	What I've learned from them:
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

In the next table, please think about skills or traits that you have that you believe have been helpful to others. This will serve as a reference point to you in the future:

Leadership skills that I have:	How my skill have been helpful to others:	What I've taught others by using my skills:
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____



TIPS: Some examples of leadership skills that you may have are:
giving your input at your Community Mental Health's Center's
Annual Public Hearing (or Town Meeting); facilitating your own
Person Centered Planning Committee; talking with people about
issues that are important to you (whether or not they are mental

health related). When you do any of those activities, you help others by sharing your expertise and building a stronger community. We all know that the voice of many people can get action quicker than the voice of one person! It's back to the old saying: the "squeaky wheel" gets the grease!! You are teaching others, when you take any of the actions listed here in the "tips" section, that:

1. Your voice counts
2. Your ideas are important
3. Simply trying something new is an act of leadership itself.

Which leads us to the final point: a lot has been written about leadership, from authors in the business world to inspirational messages given by clergy. Many people understand leadership as a process: it isn't presto, chango, leader! It's pressure, change, and leadership qualities emerge over time. Given that perspective, remember that advocacy and leadership are aspects of your life that you will use over the long haul, not just in one meeting next week or next month. So, let's begin!

The inventory below is given to help you assess your leadership qualities. Please take a moment to complete it now:

Leadership Strengths Quiz		
1. I like to handle conflicts by talking right away with the person.	YES	NO
2. I find myself often leaving a room wishing I would have said more to the people there.	YES	NO
3. I enjoy listening to other people.	YES	NO
4. I enjoy hearing from other people about their lives.	YES	NO
5. I enjoy talking to people.	YES	NO
6. I enjoy sharing stories from my life with other people.	YES	NO
7. I will tell a person who is providing me a service (cashier, restaurant server, etc) if I am dissatisfied.	YES	NO
8. I will tell my mental health worker (supports coordinator, therapist) if I am dissatisfied.	YES	NO
9. I look forward to events like a party or other group social gatherings.	YES	NO
10. I prefer to talk with friends one to one.	YES	NO
11. I like to work on one project at a time.	YES	NO
12. I like to work on several different projects at the same time.	YES	NO
13. It's really easy for me to come up with ideas for things to do.	YES	NO
14. I prefer others to make suggestions that I can then consider.	YES	NO
15. I enjoy working on a team.	YES	NO
16. I enjoy thinking about the future and coming up with ideas to solve problems.	YES	NO
17. I like to solve problems in the here and now, I'm not too interested in the future.	YES	NO
18. I tend to wait and see how things end up.	YES	NO
19. I like to imagine how things could be and persuade others.	YES	NO
20. I like to listen to all points of view and then come up with ideas of my own.	YES	NO

KEY

Count the "yes" and "no" answers that you marked. If you have:

Mostly "yes" answers:

Your leadership style is outgoing, and involves others. You are probably a person that enjoys initiating team activities and working in groups. You are action-oriented, preferring to resolve problems quickly as opposed to letting them rest. Your overall orientation, however isn't "problem-solving", it is "creating". You are creative and feel most satisfied working on new projects or efforts. Your strengths are: 1) Your ability to involve others; 2) Your expressiveness; 3) Your energy and enthusiasm.

Mostly "no" answers:

Your leadership style is reflective and planful. You enjoy thinking about the future, but you also believe that today's problems are here to be solved! You're a person who enjoys solving practical tasks. You're the kind of person who would enjoy working on a newsletter, for example, or on a "vote drive". Your strengths are your ability to focus on the "here and now" and get the job done in a way that is effective and efficient. People appreciate that leadership style because "stuff happens" when you're involved!!

Balance of "yes" and "no" answers:

If you have a lot of "yes" and "no" answers, this means that your leadership style is balanced, that you can use either style—a more outgoing, visionary approach, or a more practical, concrete style. You're one of the lucky ones! Most of us have to learn how to build on our strengths and learn additional skills from "the other" style that we're not so comfortable with!

What do I do with the answers to this quiz?

Once you've identified your strengths and growth areas in leadership, it is time to make a commitment to yourself to try and build your strengths and decrease your need for growth. Leadership muscles grow through activity, like any other muscle. As a consumer with a mental illness or a developmental disability, you have two tasks in front of you: 1) recovery; 2) building supports within your community so that you are living your life in a way that is whole and honors your true self. These tasks require significant time and effort and are draining! Each of you has felt "drained" or disempowered. Use your newfound knowledge of leadership to make an investment in yourself!

What I learned about myself from the leadership quiz:	Strengths I will practice:	Date practiced:	What I accomplished:
Example: I like to start projects	Starting a project	12/05	I talked to other consumers about approaching the newspaper to run articles on services to people with mental illness

Leadership Role Play #1

Jenny is 40 years old and has been a consumer of Community Mental Health Services for the past year. She has been diagnosed as a person with depression. Jenny doesn't believe she has any leadership capabilities. She doesn't know how to identify her strengths. She attends a clubhouse where she is responsible for the newsletter. This means that she must get articles from members and staff. She is very quiet and shy, and accomplishes what she sets out to do on time. Jenny thinks that leaders are people you read about in People Magazine. Not her!

1. Does Jenny have any leadership skills? If so, what are they?

2. How does it help her to know she has leadership qualities?

3. What difference does leadership make in a person's recovery from mental illness?

4. What can Jenny do to recognize her strengths?

Leadership Role Play #2

Dave is a consumer of Community Mental Health Services. He attends Community Mental Health Board Meetings, as one of two consumers on the Mental Health Board. He is a new member, having just started serving on the board 3 months ago. The board meets once a month. Although people are nice to him, he doesn't feel like he's included. He often feels that he's just there to fill a "consumer requirement" for the Department of Community Health. Dave enjoys serving on boards, he is able to speak comfortably with people, but he is unsure of his leadership skills now. In his spare time, Dave does a lot of listening to his friends, most of whom have mental illness. He has been described as a "great listener". He has been receiving services for seven years, and has seen a lot of change at Community Mental Health, both in terms of staff and consumers.

1. What are Dave's leadership strengths?

2. What can Dave do to feel that his opinion counts?

3. How will his actions be leadership actions?

4. What is leadership for Dave in this situation?

Leadership Role Play #3

Teri has two adult daughters that she is very proud of. She sees them every chance she gets. She also works at a grocery store, in the deli department. She has worked there for five years. Teri is a consumer of services at Community Mental Health. She has attended leadership trainings but she has a really hard time figuring out what her strengths are. Teri is quite worried about how her apartment is changing with Section 8 rules. They have said that in the past they were going to have 7 apartments set aside for "Section 8" users. Now the apartment manager is saying they will only have 3. Teri is worried. Is this legal? Teri has been told before that she gets her points across really well. She has been told she is a good writer.

1. What are Teri's leadership strengths?

2. How can her strengths make a difference in her life?

3. How can she get others to support her?

How to communicate effectively with others

Most folks think they know how to communicate with others. They often think that's a skill that is just kind of "natural." But, when we think about it, who gets POSITIVE attention in the media? Good communicators! Examples of good communicators:



- Ronald Reagan. Democrats, Republicans and Independents are agreed: President Reagan was the "great communicator." He recuperated from major scandals (remember Iran-Contra!) with his skills.
- The late Princess Diana. People responded overwhelmingly to her ability to almost magically (or so it seemed) connect with them. She left people feeling that they were understood and heard.
- Johnny Carson, retired television talk show host. Millions of people watched the Carson show nightly. He helped ensure that his guests felt at ease and that they were able to feel comfortable talking about themselves.

So, what do these communicators have in common? They have the following skills:

1) **Empathy.** They can "walk in the other person's shoes."

2) **The ability to listen.** They listen to the other person's point of view AND make sure they understand it-before talking about their own point of view.

3) **They are assertive, not aggressive.** People who have good communication skills know the difference between assertiveness—speaking up for yourself-and aggression-speaking up for yourself AND putting the other person "down" while you're doing so.

Rate your Communication Skills!

1. I understand what people are saying to me the first time they say it, and don't need to clarify it.

Yes No

2. When people tell me a problem that they are having, I listen to them without giving suggestions or solutions until they ask or I have asked them.

Yes No

3. If I am disagreeing with someone, I will disagree with their ideas, not them as a person.

Yes No

4. When I am disagreeing with people, I try to find things we DO agree on first.

Yes No

5. When I am trying to make a point, I believe it's better to make a longer point so that people really hear what I am saying.

Yes No

6. When I disagree with someone, I tell them my concerns.

Yes No

7. I will mention my worries or concerns when I have them to people.

Yes No

8. I will mention my worries or concerns to my mental health worker.

Yes No

9. I will talk about my dreams at my Person Centered Planning Meeting.

Yes No

10. I try to ensure that I listen and give back to others.

Yes No

KEY

1. No. Usually, we don't understand what people tell us, specifically if it's a subject that is difficult to talk about, such as hurt feelings, disappointed expectations, etc. A good rule of thumb is to ensure you've heard it by asking: "Did I hear you right? You'd like us to do-----in the future."
2. Yes. Most people really appreciate being listened to. Listening means: understanding THEIR perspective, not offering your own.
3. Yes. Disagreeing with ideas will help you come up with solutions. Winning at someone else's expense won't.
4. Yes. Finding common ground will be helpful in communication. Agreeing on what your common values are, for example, will help you to work on those things you actually disagree about.
5. No. People listen better to short points that are clear. Longer points-more than 10 seconds of speaking-often get lost! If, however, your point includes a "story" from your own personal history, people do listen to stories and appreciate them, so go ahead and talk until your story is complete.
6. Yes! "Feeding back" what your concerns are makes sure that others KNOW them. People are not mind-readers and they appreciate the opportunity to listen.
7. Yes. Sharing who you are with people enables them to get to know you and it allows them to help you. None of us is truly ever "independent"! We are all "interdependent"; that is, connected to each other.
8. Yes. Your job is to advocate for your recovery! Telling your mental health worker is just part of that job.
9. Yes! Listen to others and you will find your recovery is easier. Recovery is best made when we have supports and when we are part of community-that means others listen and assist us and we them.
10. Yes! Your Person Centered Planning Meeting is YOUR meeting! This is the time for you to be talking about your hopes, fears, concerns and supports.

The First Pillar of Communication: Empathy

Practicing Empathy:

When we are in the midst of our own recovery, practicing empathy for others may seem especially difficult. Empathy, or deep understanding, is something that we yearn for others to give US. It is odd that if we are able to be gentle and understanding of glitches in the lives of people we know, we become more gentle with ourselves. That gentleness helps us grow! It allows us to try new ways of being and of doing! It also allows us to make mistakes and to begin again. Practicing empathy for others fundamentally changes us. Note here that I am using the word "practice": empathy isn't like a faucet to be turned off and on. It is a skill that has to be exercised.

In the spaces below, identify people who you'd like to practice your empathy skills on. These are usually people who "get on our nerves", whose side of a story is hard for us to see. Who would that be in your life?

Who would I like to be more empathetic towards: _____

What do they do that is challenging for me? _____

What can I learn from them? _____

Date I will practice empathy with them: _____

How do you become more empathic?? You show the following: kindness, sensitivity, and gentleness as you are listening to others. What do you get out of it? More kindness towards yourself, and an increased connection with others. That increased connection is extremely important for people who have mental illness or developmental disabilities. Often, we feel dis-connected as well as dis-empowered.

The Second Pillar of Communication: Listening

Listening "how-to's":

1. Provide the person with your full attention. If you don't have time to listen, say so. Use a phrase like this: "I need to finish something up but I'd like to talk with you. Can we do this tomorrow?"
2. Let the person that's talking finish what they're saying with no interruptions.
3. When the person has finished, feed-back what they have just said.
4. Watch your body language!!! Maintain steady eye contact, without staring, and keep an open body posture.



The Third Pillar of Communication: Assertiveness

What is assertiveness? It is the ability to speak up for your needs and concerns respectfully. This is one of the hardest of skills to learn simply because people tend to UNDER "speak-up" (PASSIVE) or OVER "speak-up" (AGGRESSION). Assertiveness is particularly hard for people who have felt that their perspective HASN'T been listened to by people who have power or funding dollars. If you make your point aggressively, it is easy for people who are listening to get distracted by your anger and lose your point. If you make your point passively, people may wonder what on earth your point was! It's a difficult balance.

Examples of Assertive Statements:	Examples of Aggressive Statements:	Examples of Passive Statements:
<p>When <u>asking</u>: "I'd really like more attention paid to me when I am doing well, instead of staff talking about my symptoms." Focusing on what you want (notice the phrase "I'd really like...")</p>	<p>When <u>asking</u>: "Your staff needs to learn better skills when they're working with people with mental illness" (notice the anger in this statement and the blaming)</p>	<p>When <u>asking</u>: "Maybe there aren't enough staff to do this, but...." (Notice the unwillingness to state the need directly).</p>
<p>When <u>disagreeing</u>: "I see it differently. Here's what I think...." (See the 'I' statement? This also looks like somebody that is genuinely open to different ideas, but still has his/her own!)</p>	<p>When <u>disagreeing</u>: "Your ideas never work for me." (Watch out for NEVER's and for criticizing the person)</p>	<p>When <u>disagreeing</u>: "I don't know, maybe, but really, what do you think about...?" (See this person's hesitation? The unwillingness to go "out on a limb" ?)</p>
<p>When <u>making a point</u>: "In my experience, I've seen this work..." (Notice the reference to "my" and "what works". It's optimistic & solution focused).</p>	<p>When <u>making a point</u>: "My idea will work. We should do this." (Notice the should and the insistence that there is only one right answer!)</p>	<p>When <u>making a point</u>: "I'm not sure, I had an idea once...." (Feel the hesitation again? The avoidance of taking responsibility of your ideas?)</p>
<p>When <u>feeling anger</u>: "I'm feeling pretty angry right now. Can we talk about this later?" (Notice how this person doesn't "erupt" and is responsible enough to ask about having a conversation at a later time!</p>	<p>When <u>feeling anger</u>: "You have really made me mad." Or, talking in a very heated and intense tone at a meeting! Notice the "you" in the sentence.</p>	<p>When <u>feeling anger</u>: "Are you mad at me?" (Notice the unwillingness to "own" anger).</p>

Tips to Increase Assertiveness.....

1. Use "I" statements....."I would like", etc.
2. Avoid using "shoulds, oughts". Use questions such as, "What aboutinstead?"
3. State what you would like to see. "Here's something I've thought about. It sounds good to me. Here it is:" Then, describe it to the group.
4. Watch your tone!!! Check it-if you sound angry, chances are you're moving from assertion to aggression.
5. One of the best ways to increase your assertiveness is to take yourself a bit more lightly and use humor. When you're speaking, don't make your issue the most important issue in the world. It's important, but people listen better when they're listening to something that's presented lightly as opposed to intense emotion.

Role Play #1

LaTanya is the mother of two children, ages 2 and 4. She has been labeled as a person with a developmental disability and as a person with schizophrenia. She receives services from a Supports Coordinator at Community Mental Health. At her Person Centered Planning Meeting, her Supports Coordinator ignores her, as does everyone else. They decide her goals for her and she is confused. Then she gets angry. She knows Person Centered Planning is the law and that she should be running this meeting. She also knows she should be talking about her goals and dreams.

Directions: Role-play that you're LaTanya, confronting your team about this. Practice assertiveness using the tips given above!

Role Play #2

Dave, 37, is a consumer of Community Mental Health Services. He has been given a label of major depression. He has been on a number of medications, none of which have worked very well. Recently, he was given a new medication by his psychiatrist. This medication caused side effects that he didn't like, and he wasn't sure it was working very well. When he told his doctor his concerns, he said, "Well, Dave, that's about all there is out there. You'll just have to get used to it." Dave likes his doctor but he didn't like that remark. He felt like the doctor didn't take his concerns seriously and just wanted to rush him out of the office.

QUESTIONS:

1. What are the kinds of statements Dave could make to his doctor that are assertive?

2. What are the kinds of statements Dave could make to his doctor that are aggressive?

3. What are the kinds of statements Dave could make that are passive?

A Special Note on Anger & Self-Advocacy

Earlier, the issue of the danger of sounding angry when advocating was covered: beware, avoid it, watch-out ! Undercutting yourself is something that you just don't want to do. The difficulty here is that most people who have been consumers of Mental Health Services have PLENTY of VERY GOOD REASONS TO BE MAD. So, we have to figure out how to channel that anger into conversation with people who don't feel the same level of intensity that we do. If you simply bully people with your point, what do you gain? Getting stuff off your chest. But you probably don't gain allies or understanding. And you most likely won't see change, people will simple be polite while they're figuring out how to wind-up their meeting with you. What is particularly helpful is being aware of your "hot" buttons and thinking about ways to practice alternative and different ways of coping instead of getting angry and being less effective than you can be.

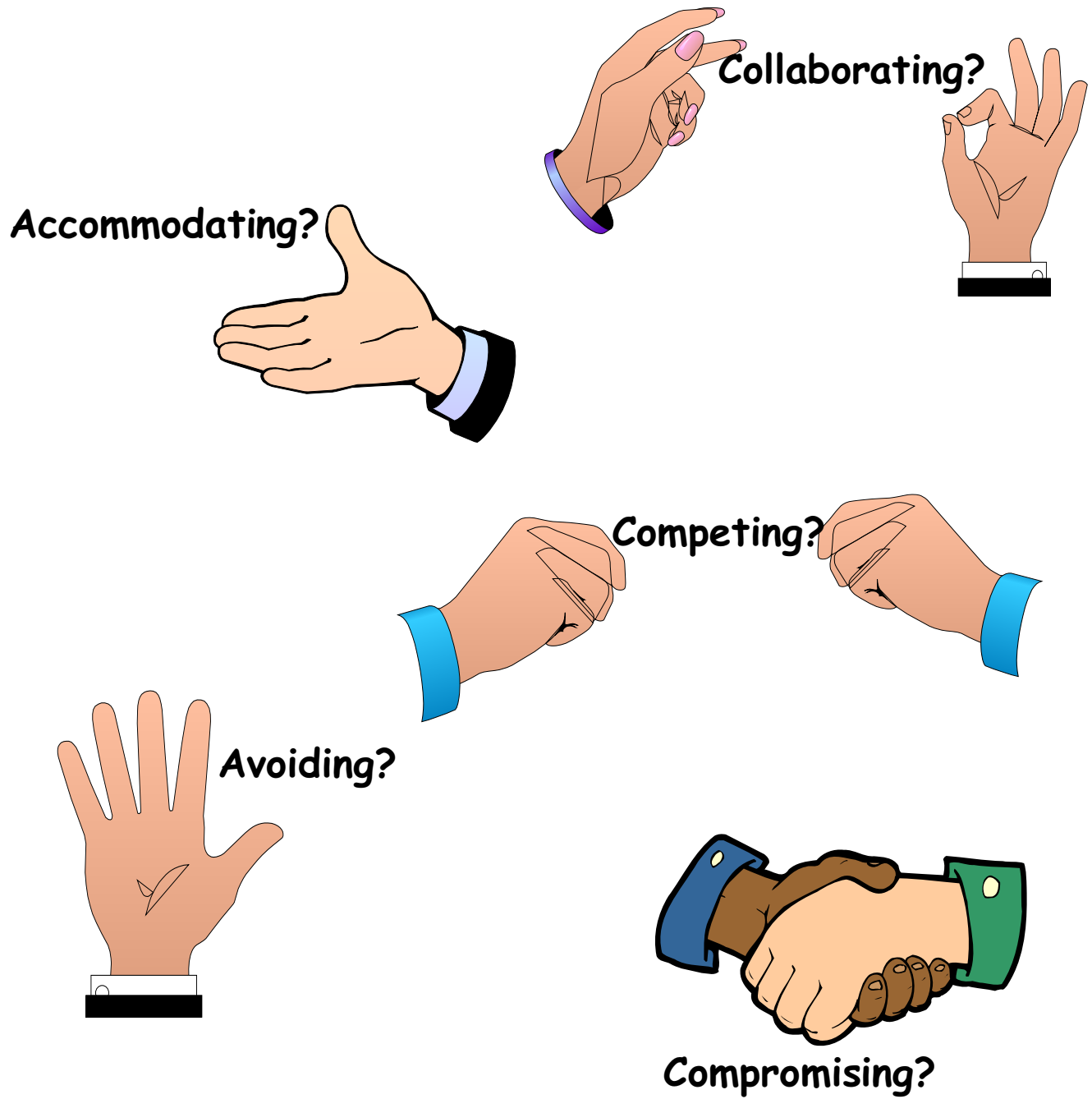
My "Hot Buttons"	Actions I take when I am angry that decrease my effectiveness:	One behavior I'd like to change:	I will practice this behavior by:
Example: I get mad when I feel "talked down to"	"I get very quiet and don't talk with the person"	"I would like to make my point with the person, even though I am feeling condescended to"	October 1

Using conflict resolution strategies when conflict occurs:

SO! You've practiced all your good leadership communication skills and you have a conflict. Congratulations! That means you're communicating, you're representing your perspective. Resolving conflicts, however, is obviously what you're interested in, not simply having them! For this portion of your training, please take a moment and think about what happens to you physiologically when you're having a conflictual experience. Some people start feeling a rush of adrenaline. Others get the typical sweaty palms. What messages does your body send to you? What do you do with those messages? Ignore them? Have the conflict anyway?

Examples of conflicts I've had recently:	My physical reaction:	What I did:
Disagreed with Supports Coordinator	Had a hard time speaking, sweaty palms	Didn't tell her what I thought

This may give you an idea of how you feel about conflicts. The trick is, however, to simply go ahead and feel anxious and attempt to resolve a conflict anyway. In order to do that, though, you need to learn a little bit about how you approach conflict. Which is why this curriculum asks that you take the instrument now called the "Thomas Kilman Conflict Mode Instrument." Once you've completed the instrument, look at your scores and see which "type" you usually are:



The instrument will explain to you just what each one of the areas means. If you notice that you score high in "accommodating", for example, you tend to, in a situation involving conflicts, meet the needs of others at the expense of your own needs. It is VERY important to learn what your "style" is so that you can learn to build on it and "try out" different styles! So, take the instrument!

My conflict resolution style:	What I like about my style:	What I'd like improved:	Another style I'd like to try:	For what situation?:	Date I want to accomplish this by:
example: "Compromising"	example: I'm "compromising" which means that I am concerned about being fair	example: I'd like to ensure that I don't "give" too easily or quickly	example: I'd like to try "collaborating"	example: It seems to me that when I talk with my Supports Coordinator, I sometimes just want to stop the conversation instead of thinking of creative solutions to what we're talking about	example: I want to build on my skills by: Christmas, 2001.



So you know your conflict resolution style, now what???

Now that you are aware of your style, it's very important to know solid skills. Before teaching you skills, however, please think about situations you've been in where you wished you would have known a little more about conflict resolution. For example, if you interact with a landlord, have there been times when you felt your privacy was not respected? With your employer, have you ever felt as though you were not treated with dignity or respect? With mental health workers, have you ever felt in a "one-down" position? Many of us (myself included) have been in that situation and wanted additional skills. Think of the last conflict you had, how you handled it, and what you wished you'd have known more about in the space below:

A conflict I've had:	What I liked about what I did:	What I would have liked to have done differently:	What skills would be helpful to me:
Example: I had a conflict with a family member recently over my medication	I let them know I appreciated their concern	I got angry and yelled at the end of our talk	How to control my anger

CONFLICT RESOLUTION MODEL: "P-A-U-S-E"

Technique:	Steps & Questions to Ask:
P roblem identification	Each person states an issue from his/her own point of view: What are we talking (or not talking) about?
A greement about the issue	Agreement & alignment between parties about what the "issue" is: What do you & the person you're having the conflict with have in common? For example: if it's your physician, you both have the common hope for good health for you.
U nderstand the other	<ol style="list-style-type: none"> 1. What is my style as I handle this conflict? Am I "accommodating, competing, collaborative, compromising or avoiding? 2. What is the other person's style? Recognize styles. 3. Appreciate their style
S ystem improvement	<ol style="list-style-type: none"> 1. What system needs improvement? 2. Is there any way we can work together to improve the system?
E mpowering options, closure	<ol style="list-style-type: none"> 1. What agreements will help us work better? 2. How can we generate a number so we can creatively choose among them? 3. When shall we revisit our agreement to see if it's working?

Role Play #1

Tina has four children, all of whom have special needs. She asked for 6 hours of respite for her children each day, but her Supports Coordinator told her she is only eligible for two hours per day. She is feeling frustrated and worried. Why won't Community Mental Health provide her with what she needs? She believes that Community Mental Health has these resources but that they just are not supporting her. She has talked to her Supports Coordinator and to her Supports Coordinator's supervisor. Now, she would like to have the same talk again, with both of them in the room, using the conflict resolution process.

Role Play #2

Veronica has a Person Centered Planning Meeting scheduled and when she goes to her meeting, only her Supports Coordinator shows up. Her mother apparently, who Veronica invited, called the Supports Coordinator at the last minute and canceled. Her other guest, her employer, also called her Supports Coordinator at the last minute and canceled. The Supports Coordinator tells Veronica that it's really important to "just go ahead with the meeting" and when Veronica says she would like to wait, the Supports Coordinator becomes more insistent. How can Veronica maintain her good relationship with her Supports Coordinator but still get her point across?

Role Play #3

Tim recently got out of the hospital after having been very depressed. He is working at an insurance company two days per week. Recently, he had a disagreement with his supervisor about a project. Tim had an idea about how to get paperwork done quicker, and his boss said, "Oh, you people always get ideas" and then laughed. Tim thought he was making fun of his mental illness but he's not sure. He hasn't spoken to his boss, other than what's necessary, for a couple of days. How can he resolve this conflict?

ASSUMPTIONS THAT DON'T WORK!

Listed below are assumptions that sometimes we have when we're having a conflict. Usually, these assumptions tend to make it harder to resolve the conflict rather than easier. I've listed some of them here, as I've collected them over the years. There are lots of good reasons why people can reach the conclusions below, (and sometimes these conclusions may be accurate), so the point here is not just to poke some gentle fun at our personal "glitches". But rather remind ourselves of how our assumptions impact our actions.

1. If I express my anger, I'll feel better and we'll get to a solution more quickly.
2. People know when their actions cause a problem, so I really don't need to discuss it with them.
3. People SHOULD: _____.
4. Talking about the problem will make it worse.
5. It really helps to talk to A LOT of people about my concern.

ASSUMPTIONS THAT WORK!

Listed below are assumptions that people often hold when they're resolving a conflict in a way that is successful to them and to the other person.

1. There is missing information that probably contributed to this issue.
2. This conflict is probably about a systems issue rather than a person.
3. We will have a productive working relationship in the future.
4. We can positively impact this.
5. We can generate a number of solutions and try them out.
6. We can experiment.
7. We can disclose our assumptions to one another.
8. People generally have positive intent.

Questions for Consideration:

1. Which assumptions do you use? What happens when you use an assumption that doesn't work?
2. Which of the assumptions that "work" do you like? How can you use that as part of your recovery?

Person Leadership & Continual Learning

Recovery is a process and a journey, not a destination that you magically arrive at. Keeping yourself "sharp" is the best way to ensure that the "glitches" or "speed-bumps" you run into actually have meaning. What this means is that you have to learn from your setbacks as well as your successes. Below are some of the ways to be a "continual learner":

- ✓ Keep an open mind
- ✓ Try something new: learn about music, for example
- ✓ Connect with people
- ✓ Help out - share your talents
- ✓ Do a spiritual practice such as prayer or meditation
- ✓ Listen to your instincts and follow them: what is it YOU want to learn about today?
- ✓ Make every day a day in which you learn ONE thing new
- ✓ When you have a success, ask yourself: what made this successful?
- ✓ When you have a setback, ask yourself: how can I improve next time?
- ✓ No blaming or shaming allowed!

You've now finished with the Personal Leadership Section of this manual!
Congratulations!