# **ERIC Evaluation**Summary of Findings

## **Background**

Emotional Regulation and Impulse Control (ERIC) is an evidence-based approach licensed by Deakin University. It is a series of brief interventions targeted specifically at a youth demographic. Emotional regulation can be considered a core challenge for people experiencing mental health challenges across many diagnoses. In response to this challenge, Mind Australia implemented a trial of ERIC in their youth mental health programs – YORS, YRRS and YPARCs - in March 2022.

The ERIC Evaluation engaged residents and Community Mental Health Practitioners from Bendigo YPARC, Apollo YRRS, Sandridge House and Townsville YRRS in focus group discussions and individual interviews. Residents and CMHPs generously contributed their ideas and experiences to support effective delivery of the ERIC program going forward. This is a summary of their feedback.

## Feedback on Training

Staff responses highlighted lack of access to training as a potential barrier to applying ERIC in youth programs. Staff turnover meant some CMHPs had not been trained in ERIC and teams were uncertain how to access training.

Staff generally agreed that the initial Deakin training in ERIC provided an overview of the tools but lacked guidance on application. In response to this, Mind implemented ERIC Hothouses and Communities of Practice to provide practical guidance on applying the ERIC tools. CMHPs who accessed Hothouses and Communities of Practice (COP) found these useful, with role plays being of particular value, however, Hothouses and COPs were not available to all staff due to 24 hour rolling rosters.

CMHPs demonstrated adaptability in bridging the gap between training and practice according to their individual workplace circumstances and learning styles. Teams and individuals engaged directly with the ERIC manual and implemented ERIC tools regardless of access to training, hothouses or communities of practice. CMHPs shared positive reflections on the accessibility of the ERIC manual.

## **Integration with Existing Tools**

The majority of CMHPs shared an interest in how ERIC could be integrated into existing My Better Life, Wellness and Safety Planning, and Outcomes Measurement processes. While this was a persistent question, teams generally did not have time to formulate an approach to integrating these tools due to more pressing service demands, indicating this may be a question for the attention of Practice Development.

## **Diversity and Inclusion**

Residents unanimously felt the worksheets were, or made efforts to be, inclusive. However, only one resident identified themselves as belonging to a minority LGBTQI+ group, and they noted while the graphics appeared to be deliberately ambiguous, they were not positively inclusive.

A number of residents highlighted that inclusion was important to them, whether or not they personally belonged to a minority group. They requested acknowledgement of First Nations groups and LGBTQI groups, reinforcing the need for visual affirmations that diversity is welcome in services, and for acknowledgements at the commencement of groups.

Staff agreed that the worksheets were inclusive – that the concepts were universal, and care had been taken to address relationship skills broadly in a way that did not alienate people who, for example, were not connected to family.

## Stage of Recovery

Staff and residents agreed that a young person's stage of Recovery, their current mental state, and stressors in their external environment on a particular day, will be determining factors in how the ERIC tools are received. Young people embarking on their Recovery journey learnt foundational skills from ERIC, such as breathing skills. Young people who had progressed further in their Recovery journey found ERIC useful for consolidating their knowledge.

## **Application**

Practice points that were raised by CMHPs included: Letting go of any insistence that a particular tool should work - and instead tracking which tools or which style of tools worked for an individual - can support a strengths-based approach. When CMHPs practice the ERIC tools in relation to their own experiences, this can facilitate understanding and new perspectives on how to present tools to residents. Residents also felt that when Mind staff participated in groups by doing the worksheets themselves it encouraged residents to share and participate.

CMHPs can offer easy-English versions of worksheets where young people have dyslexia or difficulties concentrating. Residents suggested always offering these as an option, as some residents may not be aware they can request an alternative, or may feel embarrassed or ashamed to speak up about learning difficulties.

Ease of access to ERIC materials was identified as either a key barrier or a facilitator to application of the tools in day-to-day practice. Needing to take time to sift through the ERIC manual, select a worksheet, and print it to bring to a resident, created a disruption to conversation that CMHPs often chose to avoid. Conversely, when a discussion point linked to an ERIC worksheet, having the worksheets pre-printed and organised for quick access facilitated applying ERIC in the moment.

Storing the worksheets in a central place, organised by theme, streamlined use. It was suggested that having a visual aid for staff that linked, for example assertiveness, to specific worksheets could further aid the use of ERIC tools.

Residents saw ERIC as providing valuable life skills. They emphasised that time, encouragement, and discussion were necessary to enacting the tools and synthesising learnings in a meaningful way, especially when they were experiencing difficulties with concentration, or had a diagnosed learning difficulty such as dyslexia. Residents emphasised how much processes of self-reflection and change demanded of them, often touching on triggers and feelings of shame. Encouragement and sufficient time for processing were necessary to the internalisation process.

The uptake and enthusiasm for ERIC was higher than anticipated given initial obstacles with training and individual licensing. The evaluation found that ERIC has been integrated into existing group structures across all Mind's youth programs, with variations in the frequency and context of ERIC based groups in response to the program duration and client cohort.