RESEARCH AIMS AND METHODS
This research aimed to investigate the perspectives of facilitators of Work It Out, a chronic disease self-management program by the Institute for Urban Indigenous Health (IUIH) to gain an understanding of:
- What they believed were the key ingredients that made a great education session.
- What common challenges arose, and how these were managed.
- How they use IUIH’s Cultural Integrity Framework, The Ways, in their practice.

For this research, we conducted 12 in-depth interviews with facilitators of the Work It Out program. These facilitators included: 4 exercise physiologists, 2 dieticians, 2 occupational therapists, 1 psychologist, 1 podiatrist and 1 tobacco action worker.

In-depth interviews were chosen because they allowed us to access the facilitators' interpretations of their experiences.

RESEARCH QUESTIONS
1. What do the health professional facilitators perceive as the key elements that make a successful Work It Out education session?
2. What common challenges arise during Work It Out education sessions, and how are these challenges managed by health professional facilitators?
3. How does IUIH’s Cultural Integrity Framework (The Ways) influence the practice of the facilitators of the Work It Out program?

ACKNOWLEDGEMENTS
We would like to thank the participation that has come from many people who have allowed this project to happen.

We thank everyone at the Institute for Urban Indigenous Health, especially the 12 Work It Out facilitators who gave their time and participation, without whom this project would have not been possible, and our industry partner, Joni.

Our academic advisors, Jon, Michael and Zannie, for their guidance and support. Finally, Lynda and Shannon, for their invaluable knowledge, supervision and expertise.

THE WAYS
IUIH’s Cultural Integrity Framework (The Ways) was found to influence the practice of ‘Work It Out’ facilitators in three main areas:

The Ways as a ‘Check-in’ tool:
The Ways was found to be most useful as a reflective ‘check-in’ tool for the predominantly non-Indigenous facilitator cohort to ensure that their work was culturally safe.

“I found that helpful as a new grad, when you don’t have as much clinical experience. ‘Why am I doing this?’ You can look back on The Ways and think ‘okay, well it’s a way of being or doing which does align with the core values of IUIH.”

The Ways in group reflection and team learning:
Facilitators also highlighted the importance of The Ways for reflection in Allied Health meetings and individual Work It Out meetings in which they ‘reflect on The Ways and how it relates to the topic we are talking about’.

The Ways in benefiting and understanding clients:
The Ways were also found to shape how facilitators can understand and further build ‘really good relationships’ with their clients, or ‘to make sure that we are not looking at clients as a number’. The framework was also important in assisting facilitators to build their knowledge of appropriate ‘awareness’ in how some clients display communication and understanding.

FINDINGS
The findings of this research showed significant overlap between our first two research questions, with many of the challenges that were commonly faced being the absence of what makes a ‘great’ session. These findings can be divided into three main themes.

PARTICIPATION AND ENGAGEMENT

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<th>A GREAT SESSION</th>
<th>CHALLENGES</th>
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<td>“A kick-arse session would be when all clients are having a bit of input”</td>
<td>“If you haven’t got an engaged audience, what are you there for?”</td>
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Most facilitators believed that for a session to be most effective, there had to be participation and engagement from the clients. While this was most often seen to be clients actively participating in discussions and sharing information, this did not always have to be the case. Engagement could also be passive, with clients taking in information and reflecting.

SHARING AND CONTRIBUTION

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<td>“A great session can be someone sharing some confronting stuff… it’s a really positive thing”</td>
<td>“There’s some groups where there’s 14 people, [and] there’s 2 people who do all the talking; there’s 12 people who are going to be disinterested, or not be as involved.”</td>
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Clients sharing personal and intimate stories was seen by many facilitators as making a great session. They believed that doing this helped build connections within the group. Clients sharing can also help other clients if several are going through similar circumstances.

GROUP SIZE AND DYNAMICS

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<td>“You go into a room full of depressed people, your mood’s probably going to come down; if you go into a room full of excited people, you’re going to feel better. [...] [The clients] feed off each other”</td>
<td>“The biggest challenge is managing group dynamics”</td>
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Clients would pick up on the mood of others in the room, both clients and facilitators, and this can affect how sessions run. Related to this is the size of groups. When a group was large, some of the activities were not as effective. To counter this, many facilitators broke large groups into smaller groups. To try to improve the feeling within a group, facilitators could draw upon regular clients to help them improve the mood.

FINISH