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The Co-Development and Implementation of a Mental Health World Café

Pamela Recto, PhD, RN^a , Janna Lesser, PhD, RN, FAAN^a , Janet Paleo^b, Anna H. Gray, MEd^b, Jose Zapata Jr. MSS, CHW^a , Annette Zavala Idar, BBM, CHW^a , Martha Castilla, CHW^a, and Andrea Moreno-Vasquez, MPH, CHW^a 

^aSchool of Nursing, UT Health San Antonio, San Antonio, Texas; ^bProsumers International, San Antonio, Texas

Edited by

Jacquelyn H. Flaskerud, RN, PhD, FAAN

School of Nursing, University of California, Los Angeles, California, USA

Our belief is that health profession students can best learn about the principles of person-centered mental health care from the experiences of people living with serious mental illness. Person-centered care, also referred to as patient-centered care, is an approach that emphasizes and respects the values, beliefs, and hopes of individuals (Epstein et al., 2010). Mead and Bower (2000) identified five dimensions of patient-centeredness to include viewing health holistically, sharing power and responsibility and engaging the person as an active participant in their care, knowing the patient as a person beyond their health condition, building a therapeutic alliance where the quality of relationship is regarded as having value, and understanding how the personal qualities of a provider may influence care. Previously published literature has shown the positive influence of teaching recovery and person-centered care by people living with serious mental illness to health profession students (Byrne et al., 2013; Horgan et al., 2021). Byrne et al. (2013) found that teaching mental health recovery from the lived experience perspective helped nursing students gain a better understanding of what it means to live with mental illness, and the importance of providing holistic, person-centered care. Additionally, they learned that people living with serious mental illness are able to live fruitful, productive lives and that recovery from mental illness was possible. Being taught by a person with lived experiences during their education and training teaches students to see individuals as a person beyond their illness, and the importance of collaborating with them about their own care (Byrne et al., 2013; Horgan et al., 2021).

Interprofessional education (IPE) has also been used in health profession programs to enhance the learning opportunities of students (Terry et al., 2015). IPE refers to occasions when students from two or more professions in health and social care learn together during all or part of their professional training, with the goal of cultivating collaborative practice and providing person-centered care (Center for the Advancement of Interprofessional Education, 2021). IPE

emphasizes increased mutual respect and trust, improved understanding of professional roles and responsibilities, and effective communication among health care team members (Homeyer et al., 2018).

After reading an article about an IPE project using a World Café format by Terry et al. (2015), we became interested in tailoring their IPE project, due to the COVID-19 pandemic, into a virtual World Café for health profession students that were enrolled in our South Texas Area Health Education Center (ST-AHEC) Scholars Program. The World Café is a global movement that supports conversations that matter in community settings around the world (World Café, n.d.). It is a simple and interactive approach that helps people engage in constructive dialogue, build personal relationships, foster collaborative learning, and discover possibilities for action (Tan & Brown, 2005). This approach mimics a café setting in that it enables people to think together creatively as part of a connected conversation in a relaxed and welcoming environment (Tan & Brown, 2005). In their IPE activity, Terry et al. (2015) conducted an interactive in-person learning format styled as a World Café on mental health. Their IPE project brought together social work and mental health nursing students and enabled them to engage with service users, have round table conversations to learn each other's roles, and reflect on their future interprofessional practice.

With this in mind, our ST-AHEC Program office team set out to co-develop with the leaders of the Prosumers International, a peer run, peer governed, peer provided service organization, and five interdisciplinary health profession students from our ST-AHEC Scholars Program a virtual Mental Health World Café. The ST-AHEC Scholars Program is an IPE initiative for health professions students across South Texas who are interested in gaining knowledge and experience working with rural and underserved populations alongside other disciplines. The ST-AHEC Scholars represent a variety of health professions such as nursing, community health workers, physical therapy, occupational therapy, respiratory therapy, public health, medicine, pharmacy, and dentistry. Students from the ST-AHEC Scholars Program were recruited to serve as student leaders for this IPE project. The student leaders who volunteered for the project were from nursing, pharmacy, psychology, and public health. Additionally, we collaborated with our

community partners, the Prosumers, who are individuals that are proactive in their recovery and give back to their community with the goal of helping individuals achieve their own wants, needs, and goals (Prosumers International, n.d.). After its development, we invited other ST-AHEC Scholar students from across South Texas to participate in the virtual Mental Health World Café. The purpose of this paper is to share with you the development and implementation of a virtual Mental Health World Café by the members of our workgroup.

Co-development of the Mental Health World Café

In order to co-develop the Mental Health World Café, we created a workgroup mentioned above, which consisted of the three Prosumers (Janet Paleo, Anna H. Gray, and Laura Arias), the ST-AHEC Program office team, and the five ST-AHEC scholar students mentioned above. The student leaders who volunteered for the project were from schools of nursing, pharmacy, psychology, and public health. The long-standing and deep partnership established between the Prosumers and Janna Lesser at the U.T. Health San Antonio has played a critical role for many years in educating our undergraduate nursing students (Jones et al., 2008; Lesser & Paleo, 2016). Therefore, the involvement of the Prosumer leaders in this IPE project was crucial in developing the Mental Health World Café event.

The World Café format is conducted in small groups and is set up to have rounds of conversation (at least three rounds) for approximately 20 minutes. Each round begins with a question that builds upon the previous question. During each round of small group conversations, participants can engage in questions or discussions about issues that matter in their life or community. As participants move through each round, ideas, questions, and themes begin to emerge and link together. After each round of conversation, the hosts may have large group discussions where participants can come together to share their discoveries and insights. It is in these town hall meeting-style conversations where collective knowledge grows and possibilities for action emerge (Tan & Brown, 2005).

As we developed the activities and the agenda, we applied the basic principles of conducting a World Café, which include setting a context, creating a hospitable place, exploring questions that matter, encouraging everyone's contribution, connecting diverse perspectives, listening for insights, and harvesting and sharing collective discoveries (Tan & Brown, 2005). There was a total of 11 meetings to plan the Mental Health World Café. The workgroup met twice a month for two-hours through Zoom. During the initial meetings, the ST-AHEC program office team described the elements of IPE and the World Café format. Additionally, we described the three overall aims of the project which were to enable the students to: 1) gain a better understanding of the importance of person-centered care, 2) obtain valuable insight about the lived experiences of people with serious mental illness, and 3) have greater knowledge and awareness about the importance of interprofessional

collaboration. The two leaders of the Prosumers (Janet and Anna) shared their invaluable experiences of living with serious mental illness, including how their circumstances led to the development of the Prosumer International, and the importance of person-centered care. This meeting was powerful in that the members of our workgroup were able to hear Janet's and Anna's experiences with adversity during their childhood and adulthood, as well as their often-traumatic experiences receiving mental health services, their perceptions of person-centered care, and their remarkable journey to recovery.

In addition to telling her own story, Anna H. Gray, a mental health professional, recounted one of her experiences as a crisis worker and patient advocate in the emergency room at a local hospital where she often observed individuals living with mental illness being deprived of quality medical care. She told the story of a young man who was brought to the ER by his wife, incoherent. He had earlier complained of a severe headache. The ER doctor asked Anna to conduct a psychiatric assessment because it was believed that his behaviors were manifestations of psychiatric-related symptoms. After speaking to the person and conducting her assessment, Anna told the physician that she did not believe his behavior to be evidence of a psychiatric condition. The laboratory tests ordered by the provider did not indicate any abnormalities, and upon speaking to the provider once more, Anna suggested that a neurologist consultation be done to rule out other conditions. A neurologist conducted an assessment but was not able to determine the cause of the person's discomfort and also remarked that the symptoms were psychiatric-related. Finally, after Anna insisted that she would not admit the young man to the psychiatric unit, a spinal tap revealed that the cause of the severe headache and disorientation were due to bacterial and viral meningitis. He was then admitted to a medical unit for treatment.

Recounting stories like these along with the personal experiences of the Prosumers brought depth and meaning to the development process beyond just planning a Mental Health World Café event. It brought opportunities for the workgroup, particularly the students, to reflect upon what was said, to ask questions, and share their thoughts during our meetings. One topic that was discussed was how often physical symptoms of a medical problem are disregarded once it has been revealed that the person seeking care has a psychiatric disorder and has sought mental health services. In some cases, healthcare providers might insist that the physical symptoms are related to the person's psychiatric disorder before making a thorough assessment to rule out other potential causes. Throughout this discussion, Janet and Anna emphasized the importance of listening carefully and intently, and not hastily characterizing the person solely because of a diagnostic label.

To prepare the content for the event, our workgroup conducted a brainstorming activity to discuss what topics should be incorporated into the Mental Health World Café. We began with a question to incite our brainstorming session by asking the workgroup, "Thinking on the World Café event, what important information should we share with

the students that will be attending and participating in the Mental Health World Café?" We used Google Jamboard (Google, n.d), which let our workgroup collaborate in real-time by allowing us to write and draw our ideas or add post-it notes on a digital interactive whiteboard. Everyone was encouraged to write down their ideas and thoughts. After each note was posted on the Jamboard, the workgroup reviewed each of them and asked the team member to elaborate on the content whenever questions arose about their note. We then clustered the notes together and labeled each group into categories that represented the ideas. These categories served as the core topic areas for the Mental Health World Café and are as follows: Lived Experiences, Awareness Building, Provider Characteristics, IPE and Person-Centered Care, and Social Action. Our workgroup created objectives using these core topic areas, which guided the development of the Mental Health World Café event.

An important element of the World Café are the small group questions. The World Café questions must be well-crafted and powerful to generate collaborative engagement among the participants as they move into each round of their breakout sessions (Tan & Brown, 2005). To develop the World Café questions, we followed the same steps mentioned above using the Jamboard. Once the notes were categorized based upon core topic areas, we developed World Café questions for Awareness Building, Provider Characteristics, and IPE & Person Centered-Care for each round during the small group breakout sessions, and questions for Social Action during the large group session. Throughout the development and selection process, our workgroup had in-depth discussions about the questions written on the Jamboard. One of them pertained to power differentials within the interprofessional healthcare treatment team. One of the workgroup members mentioned that power imbalances may impact the group such that when one team member dominates the decision-making process, the other healthcare team members may feel intimidated or afraid to express the issues that are of concern to them. Additionally, hierarchal systems embedded within healthcare institutions may not readily allow healthcare team members to voice their input. Consequently, this perpetuates the cycle where healthcare professionals work in silos and do not communicate with one another. This concern was reiterated by one of the students whom we later interviewed. He remarked, "They might just pass all the responsibility to, 'Oh, it's the doctor... so I might as well just ignore this thing that I'm seein' and just leave the doctor to decide for himself'" (Master of Public Health, Student).

As our workgroup considered the core topic area of Lived Experiences, we asked the Prosumers if they could begin the World Café activities by sharing their stories as they did during our initial workgroup meeting. The Prosumers agreed, and a case study was written by Janet and presented prior to the Prosumers sharing their lived experiences. The case study, which Janet later revealed was her personal story, describes a 50-year-old woman who was visiting her provider for generalized fatigue. The woman

had received a number of different psychiatric diagnoses over the years, including borderline personality disorder and schizophrenia. In addition to the woman's psychological events, she has had a history of multiple hospitalizations due to physical illness and surgeries. Along with the case study, Janet and our workgroup developed questions which were answered by the students anonymously as a poll. The purpose of the poll was to elicit the thoughts of the students about caring and providing treatment for the woman in the case study. By starting with the lived experiences of the Prosumers, we believe it set the context for the topics that were discussed in the World Café activities, specifically, in the small group breakout sessions and large group session at the end of the World Café. Setting the context at the beginning of the World Café is important because it enables the participants to understand the purpose of the meeting and what the group wants to achieve (Tan & Brown, 2005).

After the objectives and the World Café questions were finalized, the workgroup prepared an agenda detailing the sequence and flow of the activities in the Mental Health World Café event. We also conducted a mock session to allow the workgroup to rehearse their parts in the World Café and to practice using the Zoom videoconference platform to assign participants into their small group breakout sessions. As mentioned above, the World Café questions for Social Action were asked during the large group session. This part of the Mental Health World Café was facilitated and led by the student leaders. To help them prepare, we conducted a rehearsal of the Social Action World Café questions with the workgroup members acting as the participants of the event answering the questions.

Reflecting on the Mental Health World Café event

Fourteen ST-AHEC scholar students attended the Mental Health World Café event. The World Café event was held in March of 2022 and lasted 4.5 hours. In their reflective journals regarding this learning opportunity, the majority of the students echoed one another saying how the Mental Health World café was a powerful, unique experience. The stories shared by Janet, Anna, and Laura deeply moved the students and provided space for self-reflection as they considered their career paths as healthcare professionals. Starting the World Café with their personal stories facilitated a smooth transition into answering the World Café questions during the conversation rounds in the small group breakout sessions, and provided an environment where the students were able to share their thoughts and experiences. The following quotes are some insights students gained from the Mental Health World Café as they relate it to their career goals and their personal viewpoints:

This event was incredibly impactful. Listening to the three stories at the beginning of the event was compelling. It helped establish a safe space where we could talk about mental health-related issues, reflect, and encourage each other to be better. Personally, this experience re-energized my dream in medicine and as a future psychiatrist. (Doctor of Medicine, Student)

The Mental Health Café was an incredible experience. Hearing the individual stories from the Prosumers group was both impactful and insightful. As a future osteopathic physician, my goal is to treat the patient with a holistic approach. Mind, body, and spirit are interconnected. Paying attention to mental health is crucial to understanding the patient as a whole. Speaking with other health profession students allowed me to see what my role is and ways I can improve communication amongst my colleagues. (Doctor of Osteopathic Medicine, Student)

These reflections are indicative of the gratitude felt by the students in attending the Mental Health World Café. Reflecting back on this entire experience, it has been a tremendous honor to work and collaborate with each of the members of our workgroup. It was also enlightening to hear individuals from different professional backgrounds share their personal experiences, thoughts, insights, and opinions about mental health person-centered care and interprofessional collaboration. The stories of Janet, Anna, and Laura brought inspiration to both the workgroup and the ST-AHEC scholar students. Despite the adversities they have faced, they lead rich and full lives and have become role models to many people, empowering and showing them that recovery is possible. One of the memorable remarks during the Mental Health World Café was from a student who after hearing the case study had determined how he would treat the woman. After hearing the stories of the Prosumers and learning that the case study was Janet's personal story, the student realized how much he overlooked what was needed to help her. The student came to understand that relying only on the information in the case study did not give him the full breadth of the significant circumstances and adversities that Janet experienced during her life that may have impacted her well-being.

Final thoughts

Our hope through this event was to impress upon future healthcare professionals that we can make a difference in people's lives by listening, respecting, and working together. Our shared goal and vision for this project, which was to enable students to better understand mental health person-centered care and interprofessional collaboration, as well as gaining a better understanding of the lived experiences of the Prosumers, yielded results that made this experience truly rewarding. Throughout the development phase, everyone's suggestions were welcomed and it was a delight to see the student leaders engage with the workgroup and to hear their recommendations as we planned the activities for the World Café. One of the student leaders, who was later interviewed, appreciated the fact that they were given a voice and the opportunity to share their input and was thankful for the opportunity to take part in co-developing the Mental Health World Café. When asked how he might take the knowledge he gained from being in our workgroup and interacting with the Prosumers, he expressed:

Through this whole experience, I think moving forward, I've learned that I need to do a better job of connecting with

patients, finding out their history, not really going in with any preconceived notions about whether they're non-compliant or things that they've experienced in the past. I think I need to talk to them, get to hear their side, understand them, get to know them personally before moving forward. I think trust is a big thing. Understanding their goals, their expectations, as far as what they feel like success is, I think that's probably my biggest takeaway. Being more patient, listening, and connecting. (Doctor of Nursing Practice, Student)

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ORCID

Pamela Recto  <http://orcid.org/0000-0002-2591-8876>

Janna Lesser  <http://orcid.org/0000-0001-6592-7868>

Jose Zapata  <http://orcid.org/0000-0001-5288-9436>

Annette Zavala Idar  <http://orcid.org/0000-0002-8553-6765>

Andrea Moreno-Vasquez  <http://orcid.org/0000-0002-7565-5496>

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