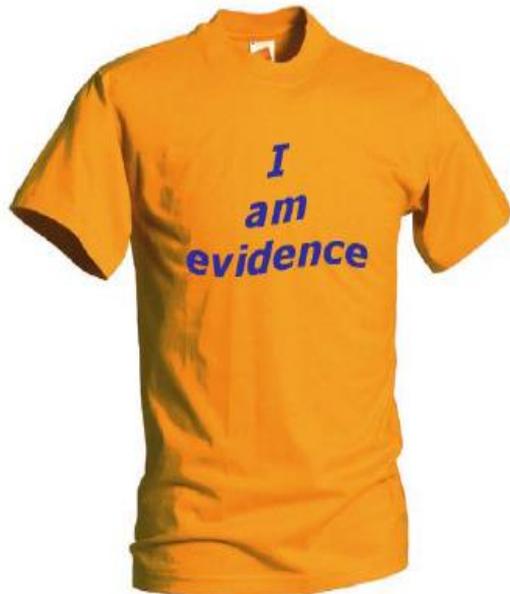


## Peer Support in Mental Health Services



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## Just imagine that you are .....

- Frightened
  - Alone
  - Unable to explain how you feel
  - People treat you differently
  - Unable to believe that you will get through this
  - You can't trust your self ...
- 
- And then you meet someone who has been through it and has survived, in fact they are living a meaningful, contributing life...



# So this is peer support?

- People explicitly drawing on their own lived experiences to support others
- People who have ‘been there’ and moved on in their lives – so they embody ‘recovery’ and convey messages of hope
- People who have found ways out of similar crises and so bring experience and confidence to support others
- People who know how important it is to have someone who believes in you and takes you seriously and gives you time and space to find your feet.





## In the words of peer support workers...

*“they know I’m not the expert, they know we’re just us, both trying to beat the same demons, and we’re trying to work things through together”*

*“... I said to her “I’ve got my own experience of mental illness, I’ve been on the ward myself and so on,” and with that she sort of jumped up and gave me this huge big bear hug”*

*“People who are going through it will look at you as if to say, “you do actually know where I’m coming from” - that breaks down so much!”*



## Today ...

- Bringing peer support into services
- What difference does it make?
- What are the core principles of peer support?
- How do we ensure that peers remain faithful to these principles in their practice?
- Common challenges and some solutions

## Intentional Peer Support

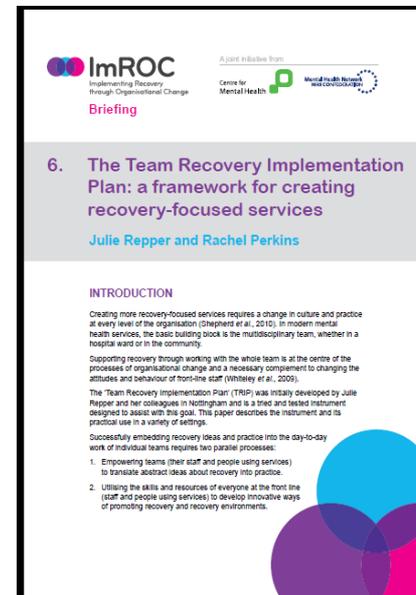
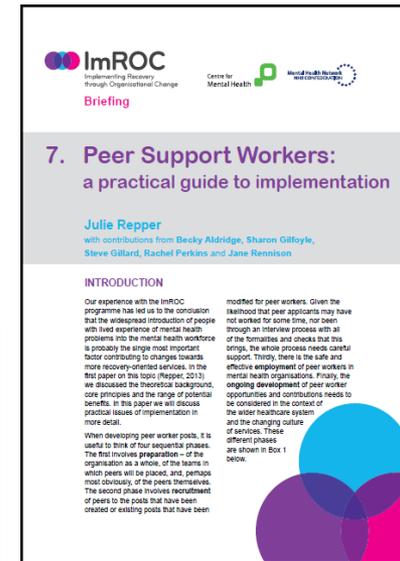
- the employment of people with lived experience of mental health conditions *in mental health services*
- their role includes explicitly *drawing on their own experiences* to support others going through similar things
- may work as volunteers, interns or paid employees, but job description should include
  - a) *that they have lived experience;*
  - b) *that they use their lived experience to support others*



# What difference does peer support make?

Reviews of evidence suggest that adding psws to teams

- a) does no harm
- b) improves lives of people supported
- c) influences culture
- d) cuts costs
- d) improves lives of peers



## Impact on the lives of people supported

- Improved empowerment – greater belief in, and ability to, overcome difficulties, feel more understood and accepted
- More hopeful - inspired by meeting people who have similar experiences and people who have overcome similar challenges
- Reduction in service use, longer community tenure, fewer crises
- Cost benefits (recoup cost of salary 3:1) (Trachtenberg et al; 2013)
- Benefits enhanced in ‘hard to reach’ groups



## Peer Support can change the lives of peer support workers

- Increased self-esteem, confidence empowerment.
- Benefits of being employed (financial, social, status, structure) combined with the supervision and safety of a job in which they are free to disclose their difficulties
- Progress personal recovery: Skills learnt on the job aid their own recovery

**SAFE** **EMPOWERED**  
**RESPECTED** **SUPPORTED**  
**LOVED** **FREE**



## Peer Support can change the system

- Communication: help providers and patients to understand each other better
- Enhance provision: complement work of other team members by added skills in community inclusion and development, coaching and problem solving
- Change staff attitudes: inspire belief in Recovery
- Break down barriers between 'us' and 'them'; challenge assumptions.

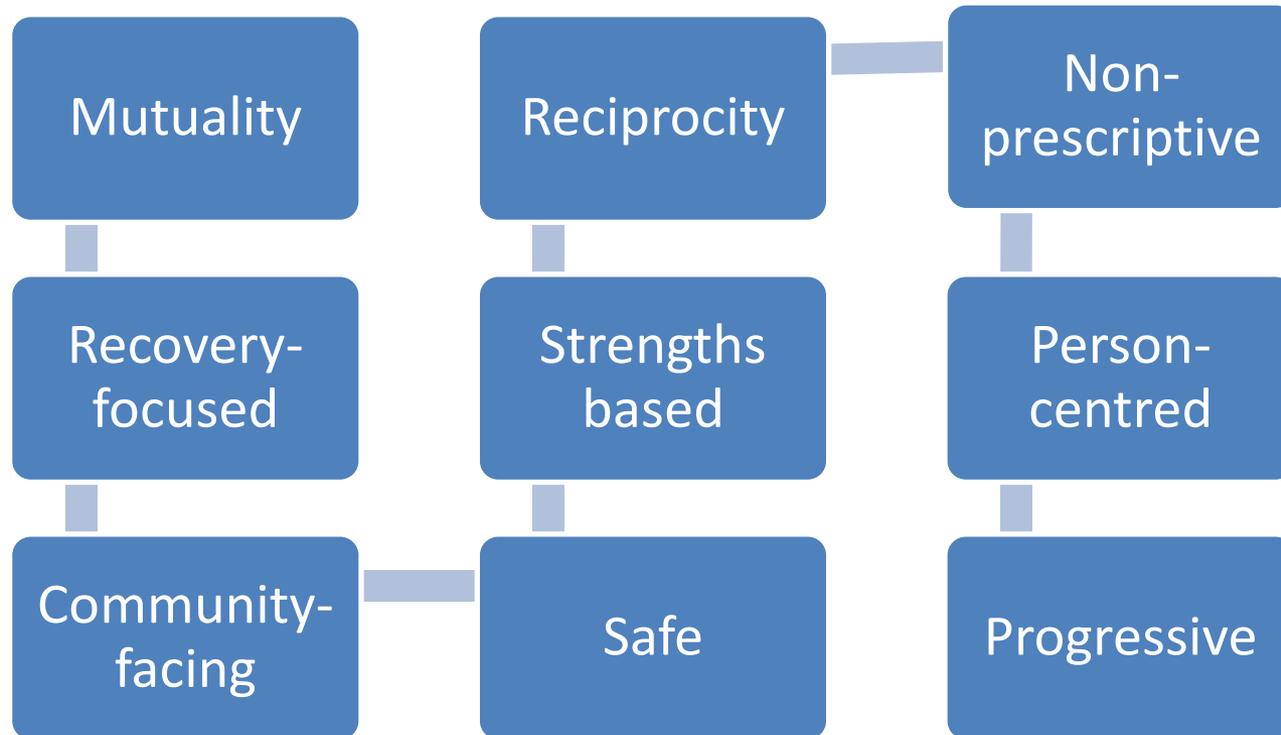




## But there are all kinds of challenges...

- Different roles, definitions, codes of conduct, job descriptions, organisations, training, supervision .
- Risk of becoming socialised into the ‘normal way of working’
- Ambiguity about relationships, boundaries, disclosure & management of personal information
- Different factions forming and stories are developing about various forms of peer support ...

## The defining characteristics of peer support



## Mutuality

- This refers to sharing experiences:
  - Demonstrating that they share similar experiences – fear, guilt, feeling overwhelmed...
  - Sharing coping strategies – things that have worked for them
- All done with care – a fundamental part of training:
  - For the benefit of the other person, not themselves
  - Nothing said ‘in secret’
  - Judge what to say, how to say it, how much to say, when and to whom



## Recovery Focused

- Every interaction needs to
  - Inspire *hope*
  - Enable person to take back *control* – develop understanding and/or self management skills
  - Facilitate access to *opportunities* to do the things they want to do – identify goals, take steps to achieve them, find the community resources and supports to help



## Community Facing



- Peer workers often know the local community well and need to constantly develop their knowledge of resources, activities and facilities that can support people to regain roles and relationships.
- Success is not judged by the quality of the relationship between peer and person so much as by the quality and contribution that the person can make to improving their roles and relationships within their communities.

## Reciprocity

- This refers to learning from each giving and taking in the supportive relationship
- Although the peer worker is generally further ahead in their recovery journey, they can
  - Acknowledge when they hear a good idea, coping strategy, place to feel included...
  - Learn new skills by 'doing with'- sewing, music, sport...
  - Show that they are not frightened by 'big emotions'
  - Work together to develop new solutions





## Strengths Based



- Rather than focusing on deficits, disabilities, needs and dysfunctions, peer support workers build on strengths, resilience, assets and skills.
- They build skills in identifying strengths which might not be acknowledged by the person, and then use these to build confidence, identify new goals and progress towards them.

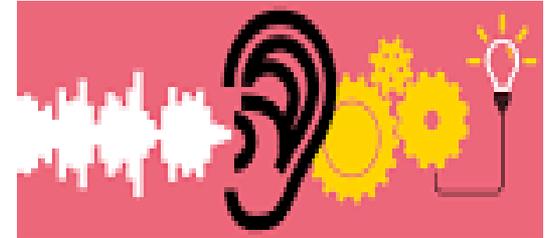


## Safe



- This refers to the safety of both the peer support worker and the person they are supporting.
- Emotional, social and psychological safety all need to be considered.
- A sound code of conduct is required, and this needs to be understood by peers.
- Since peers share their own experiences they often hear more than other staff about traumatic experiences and about high risk intentions. They need to be clear how to respond to this information.

# Non-Directive



- Peer workers are trained to use active listening as their primary tool.
- They may use a problem solving approach and they might express their own views and experiences but they are not there to give advice or tell people what to do.
- People can find their own solutions and understandings given time within a supportive and interested relationship.
- Being non-prescriptive is incredibly difficult and needs to be addressed regularly in supervision.



## Person-Centred

- Every individual is different and it is important for peer workers to avoid assuming that they can understand others solely with reference to their own experience.
- All support needs to be based on the individual situation and the individual's goals and supports available to them.

## Progressive



- It is tempting for peer workers to fall into a friendship rather than a professional role. However, friendships are very different and need to be enabled by peer support rather than provided by peer workers.
- It can be helpful to set a time limit for peer support so that both parties are aware of the need to move forward and work towards goals outside the service and beyond peer support.



## Critical questions in developing peer support

- Is peer support a role in itself, or is it provided by trained peers in any role they may occupy?
- Where will they be employed - what sort of services and what kind of roles?
- What training will they be offered – a nationally accredited training course or locally determined? Specific to their mrole or generic?
- What sort of career pathway?
- What sort of support and supervision will be provided?
- What will you do about other staff with lived experience – are they peers too?



## Challenges that we are facing ...

- How to create sufficient posts to form a 'critical mass'
- How to support peers to stay well when working shifts
- How to use the lived experience of professional staff
- How to ensure that peers use social media safely and appropriately
- What is the relationship between NGOs and public services in relation to peer support workers: Is there consistency in role, pay, training & support
- If peers replace other staff in the team, who completes the professional or practical jobs formerly completed by the non-peer staff.

## Finally ...



- It is well worth investing in Peer support
- They really do drive change Recovery focused change in services and improve the experience and outcomes of people using services

But

- They are not a cheap option
- They should be just one part of a strategy to improve services
- This does require care, thought and a large investment of time.



## Thank you

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