



PEER TO PEER: A ROUTE TO RECOVERY OF PEOPLE WITH MENTAL ILLNESS THROUGH PEER SUPPORT TRAINING AND EMPLOYMENT

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PEER SUPPORT IN INDIVIDUALS WITH PSYCHICAL DISORDERS: PEER2PEER PROJECT INTRODUCTION

The European Project PEER2PEER has enabled the transmission of the Scottish experience in peer support methodology applied with people with mental health issues, to several European partner organizations, among which there are two Spanish organizations: INTRAS Foundation as project's coordinator and Andalusian School of Public Health as partner, in cooperation with the Andalusian Federation of Users "En primera persona". (To be adapted by partners to their realities).

The Project has allowed partners to deepen understand the role of a peer support worker in mental health, based on the Scottish Recovery Network experience and by adapting teaching tools to the characteristics of partners' regional contexts in Spain, Austria and Romania, where two pilot training courses were conducted, among a total of 135 students, 18 of which are currently working as Peer Support workers, as volunteers or paid employees. Besides, PEER2PEER project has transferred and disseminated the important role of peer support in the recovery process of people with mental health issues, being now an extending approach in partners' countries.

This article strives to contribute to clarify the role of peer support, introduce the Didactic materials developed within the project and offer a briefing on the results of the pilot courses organized, all of them in the framework of the project.

WHAT IS THE PEER SUPPORT?

The peer support between individuals with mental illness is considered to be a recent phenomenon, usually associated with users' movements in the '70. However, the idea that a person in recovery from mental health issues can be especially appropriate to help others suffering from mental illness isn't that new. Beyond the recent studies on its effectiveness, it seems likely that people who have been there could have gathered a set of practical tools and knowledge useful to other people with mental health issues (Davison 2012).

The idea that people with previous experience as users of mental health services could be, at the same time, providers of services to other users in early stage of recovery is gaining acceptance within mental health systems. From the recovery approach, the only available services truly oriented towards recovery are those provided by users themselves (Solomon, Draine, 2001).

Peer support is a system of giving and receiving help based on basic principles of respect, shared responsibility and mutual agreement on what is convenient and useful. On





the contrary, it isn't based on the psychiatric models or diagnostic criteria. It is about understanding the other empathetically, through a joint emotional and psychological experience. When people find a connection with others, which feel similar to them, a special attachment is created, enabling a kind of relation which isn't limited in a way that traditional patient –expert relationship usually is (Mead 2001).

Regarding the repercussions of the Mutual Support model, we can say that it promotes a wellbeing model focused on people's strengths and recovery: the positive aspects of the person and his ability to operate effectively, beyond the disease model, which places particular emphasis on the symptoms and on the difficulties of the individual (Repper y Carter 2011).

From an organizational perspective, the mutual support supposes a change in the culture of the organizations, in the way in which the services are understood, given that it can offer a culture of health and capacity as opposite to the culture of sickness and disability (Curtis 1999). Peer support workers are individuals who have experienced mental health issues, who are being trained and hired to work in a formal role, supporting the recovery of other people (Gordon 2015).

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Given the partners' understanding of recovery approach as a way to understand the work in Mental Health, the project has as its main goal to go one step further in the implementation of this approach, which is essential to avoid that recovery approach, remains as a mere declaration of intentions or a speech adapted to the new times.

Six European organizations were engaged in the development of the project: Scottish Recovery Network (United Kingdom), Andalusian School of Public Health (Spain) in collaboration with the Andalusian Federation of Users in the First Person, Pro Mente Oberosterreich (Austria), Liga Romana pentru Sanatate Mintala (Romania), Scottish Qualifications Authority (United Kingdom), y Foundation INTRAS (Spain) as project's coordinator, supported by the Association of users Juana I de Castilla and Foundation Mundo Bipolar.

The Project is grounded on the experience of Scottish partners in peer support model which plays a key role in mental health services towards recovery. Furthermore, Peer support supposes a source of employment and promotes the independence of individuals with mental health problems.

Peer2Peer course is based on two innovations, the PDA (Professional Development Award) (http://www.sqa.org.uk/sqa/47021.html), and psychodrama and video-therapy. Psychodrama is a technique based on experimenting different situations, aimed at enhancing the welfare of the users and, at the same time, serving as a training resource. Recognizing the potential of this innovative approach, the Peer2Peer project was designed to transfer those experiences to Austria, Spain (Castilla y León and Andalusia) and Romania.

The objectives of the project are, in the first place to establish an innovative model of professional training trough the adaptation and integration of psychodrama sessions into





the peer support model and, in the second place, facilitate the access to employment of people with mental health issues by training and recognise them as peer support workers.

In order to ensure the achievement of these objectives, a series of actions were planned; firstly, the development of a teaching pack (training curriculum, theory, exercises and techniques) for the implementation of a training program based on peer support model on mental health issues; secondly, the development of two pilot courses for 180 students with some experience in the recovery from mental health issues, from Austria, Spain and Romania; thirdly, to transfer this innovative training course (available on (www.p2p.intras.es), through the organization of conferences and practical demonstrations addressed at professionals from the mental health field.

Peer2peer project is financed by the European Commission in the framework of the Lifelong Learning Program, within the Leonardo da Vinci Transfer of Innovation action. Peer2peer has lasted for two and half years, between 2013 and 2015.

TRAINING COURSE FOR PEER SUPPORT WORKERS

Peer2Peer course (http://p2p.intras.es) was designed to prepare individuals with mental health issues, to become peer support workers, in order to accompany other individuals with mental health problems in their recovery process. At the end of the course the students are provided with knowledge, skills and the experience necessary, but also they contributed themselves to the creation of a professional path.

The peer support workers are people who have experience mental health issues, but who are specifically prepared to help other individuals that find themselves earlier in their recovery process. Thus, the course is addressed to people with personal experience, who can show evidence of good communication skills. This requirement could be assessed in an initial interview.

The Peer2Peer course was designed to achieve 5 learning outputs, which describe what students will be able to do as a consequence of completing the course:

- 1. Understand the recovery process in mental health
- 2. Explain peer support and its role in recovery
- 3. Develop relations based on the peer support values
- 4. Apply theories and concepts as a peer support worker
- 5. Establish a secure and effective peer support relationship.

These learning objectives are achieved through 9 training sessions, apart from one introductory session and two evaluation sessions (intermediate and final).

Session 1: Introductory session.

Session 2: What is recovery?





Session 3: Personal recovery.

Session 4: What is peer support?

Session 5: The peer relationship.

Session 6: Review and evaluation.

Session 7: Use of language and communication.

Session 8: Using your experiences effectively.

Session 9: Surviving and thriving

Session 10: Positive risk taking and boundaries.

Session 11: Self-management and self-care.

Session 12: Review and evaluation.

The nine sessions covering knowledge, practice and values in recovery and peer support are in two sections; one of four sessions and one of five sessions with a review and evaluation session at the end of each. The first section focuses on knowledge and understanding of recovery and peer support and the second focuses on knowledge and skills required in the peer support role.

Each of the sessions has been designed to last three to four hours with a total course time of around 48 hours. However, we recognise that the amount of time required to cover the content will depend on the size, composition and nature of the student group. The two review and evaluation sessions provide an opportunity for students to reflect on their learning and also to receive advice and guidance on any written assessment required.

During 2014 and 2015 two pilot courses were conducted with the purpose of evaluating the first and the second version of the teaching material and validating the general design of the course.

The first course was organized and implemented by six organizations from five countries:

- En Primera Persona, Andalusian Federation of Users, Spain
- Foundation Intras, Spain
- Liga Romana pentru Sanatate Mintala, Romania
- Mental Health Center Prof. N. Shipkovenski Ltd, Bulgaria
- Pro mente Upper Austria, Austria
- StichtingGek op Werk, Holland.

All the courses lasted 48 hours from July to November 2014. A total number of 80 people took part of this first pilot experience, all of them with some experience of mental health issues. A questionnaire was systematically handed to the facilitators of the sessions and another to the students themselves. Once analyzed the results of both questionnaires, the didactic material was modified and a new pilot experience was conducted.





The second pilot learning course was implemented by four organizations in 3 European countries:

- En Primera Persona (In First Person), Andalusian Federation of Users, Spain
- Foundation Intras, Spain
- Liga Romana pentru Sanatate Mintala, Romania
- Pro mente Upper Austria, Austria

This time the pilot course lasted from February to May and had 56 participants. Its results allowed the development of the final version of the didactic materials which, by now, is available in English, German, Romanian and Spanish on the project's website: http://p2p.intras.es/index.php/trainingmaterials

PILOT COURSES' RESULTS:

A total number of 135 trainees and 40 facilitators took part in the mutual support learning experience. Three months after the second course was finished, at least 18 of the students trained as peer support workers were working for the organizations involved in the project.

The learning results were evaluated after each session through detailed questionnaires. The questionnaires were designed in order to assess:

- The satisfaction of both students and facilitators of the training course
- Learning results according to the objectives of each session
- The students' perception regarding their own skills to apply concepts and tools learned in each session in a peer relationship.

The questionnaires' results proved that the satisfaction with the training course was very high among students. The average score was 4, 07 out of 5. The students assessed as extremely positive the approach and the training course. For students this kind of experiences suppose a change in the way that mental health is commonly understood, an innovative employment opportunity and finally, a positive and realistic point of view of the mental illness. This approach recognizes the benefits of the support given by people with experience in mental health issues, and the knowledge they gained. The students appreciated and highlighted the fact that the peer worker fully understands the situation, the feelings and the symptoms, because he/she has been through them before.

The learning results were assessed through the preparation of a learning portfolio which the students were asked to fill in once the session was completed and/or through the evaluation sessions. All the students were able to produce their own portfolio of evidence. They delivered it at the end of the course and, thereby, demonstrated their knowledge and skills to learn and process the information required.

Regarding the skills to apply the concepts and tools learned through the sessions in a peer relationship, the average score given by students was 3, 47 points out of 5. From the students' answers we can assume the acquisition of theoretical knowledge about how to





develop and maintain relationships based on peer support values, but the great majority of the students requested a practical period supervised by a tutor, in order to apply the theoretical knowledge and gain confidence in the role of peer support worker.

Concerning the qualitative results of the questionnaire filled in by the facilitators of the sessions, we can highlight the effect that this experience had in their own understanding and attitude towards recovery, as well as its impact in the cultural change of their organizations. Based on this experience, the organizations that participated in the project, started to question the approach and effective allocation of resources in centers and facilities, in order to include peer support workers in their professional teams.

CONCLUSION

This cultural change has huge repercussions for the professionals, as it supposes a backward step to recognize the knowledge, experience and potential of people with mental health issues to support and foster recovery as peer support workers.

As provider services based on the recovery approach it is necessary to consider the implication of people with some experience in the recovery from mental health issues as part of the professional team.

Peer2Peer project has developed didactic and teaching materials based on the experience of Scottish Recovery Network, and has adapted these materials to the individual needs of each country. The final version of the teaching pack has been assessed by both students and facilitators as a useful and valuable methodology and approach to foster peer support and to train people with mental health issues to become peer workers.

BIBLIOGRAPHIC REFERENCES

Davison L, Bellamy C., Kimberly G., and Miller R.: *Peer support among persons with severe mental illnesses: a review of evidence and experience.* World Psychiatry 2012; 11: 123-128

Sherman PS, Porter R.: *Mental health consumers as case management aides*. Hosp. Common Psychiatry 1991; 42: 494-8

Gordon J, Bradstreet S.: So if we like the idea of peer workers, why aren't we seeing more? Word J Psychiatr june 22; 5(2): 160-166

Repper J, Carter T.: A review of the literature on peer support in mental health services. Journal of Mental Health. August 2011; 20(4): 392-411

Mead S, Hilton D, Curtis L.: *Peer support: a Theoretical Perspective. Psychiatric Rehabilitation Journal;* (2001) 25(2), 134-14; Solomon P., Draine J.: *The state of knowledge of the effectiveness of consumer provided services.* Psychiatric Rehabilitation Journal, (2001) 20-27.