Peer support work: an international scoping review - summary report

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PEER SUPPORT WORK

AN INTERNATIONAL SCOPING REVIEW – SUMMARY REPORT - NOVEMBER 2023

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This scoping review of the international literature was commissioned by the Peer Support Five Year Strategy Working Group established by the Health Service Executive (HSE) Mental Health Engagement and Recovery (MHER) Office (to create a five-year strategic plan for mental health peer support in Ireland. The aims of this scoping review were to:

1. To undertake a comprehensive review of the literature on peer support work; and

2. Identify how such work may be best implemented in specified, specialist areas.

The research questions, in line with the above, are:

1. What are the key messages from the international literature on peer support work? and
2. How should peer support work be most effectively implemented in specific aspects of mental health services including Child and Adolescent Mental Health Services, forensic services and other specialist mental health services?

The scoping review was conducted between July and November 2023 with the main database searches completed in August 2023. The scoping review research team worked closely with the Peer Support Five Year Strategy Working Group on all stages of the review process and so the report is co-authored by the Research Team and the Working Group.

CONTEXT

There has already been considerable work completed on developing and implementing peer support work in Ireland and this work is part of the ongoing development of recovery oriented services.

In the *Strategic Plan 2023-2026* of the MHER Office (2023), one of its key objectives is "to support and enhance the role of peer and family peer support working in mental health services." (p. 7). It specified that "Peer and Family Peer Support refers to an intentional support where those who have lived experiences use their experiences in a mutual and reciprocal manner to support others in their own recovery journey." (p. 16).

This scoping review focuses specifically on the literature on <u>mental health peer support work</u> (where the peer support worker has their own experience of mental health problems and is supporting people with mental health problems) and <u>family peer support work</u> (where the family peer support worker has their own experience of caring for someone with mental health problems and is providing support to people who are caring for someone with mental health problems).

METHODOLOGY

A scoping review was identified as the most appropriate approach to reviewing the literature mainly because the aims of this review were relatively broad. The Peters et al. (2021) framework was used which involves the following steps: defining and aligning the objectives and questions; developing and aligning the inclusion criteria with the objectives and questions; describing the planned approach to evidence searching, selection, data extraction and presentation of the evidence; searching for the evidence; selecting the evidence; extracting the evidence; analysis of the evidence; presentation of the results; summarising the evidence in relation to the purpose of the review, making conclusions and noting any implications of the findings.

INTERVIEWS TO INFORM THE SCOPING REVIEW

In addition to the literature searches, a series of interviews was arranged with key people involved in the development, implementation and evaluation of peer support work in Ireland and internationally. This was to provide informed and international perspectives on the themes being identified in the literature. In order to facilitate open discussion it was agreed that the interviewees would not be directly quoted in this report but that their perspectives would be used to help inform the analysis.

FINDINGS

SEARCH RESULTS AND INCLUDED STUDIES

From the initial database results of 7406 possible studies, 663 were identified as meeting the inclusion criteria. The most relevant of these were then selected to be included in this report with existing reviews of the research evidence being prioritised. The findings were organised into a number of sections: definitions, values and the role; guidance and toolkits; development and implementation of peer support work; experiences of peer support workers; perceptions of others about peer support work; recruitment of peer support workers; training; supervision and support; research on effectiveness of peer support work in general; peer support work and specific interventions; and peer support work in specific services.

In summary, there are many sources of very useful sources of guidance about the definition, development and implementation of peer support work. In general, peer support work is identified as a distinct role in mental health services which requires specific training and involves the active use and sharing of lived experience to inform support. The distinctive characteristics include the centrality of mutuality and reciprocity in the relationships between peer support workers and service users, and between family peer support workers and carers. There are also helpful accounts of peer support workers' and other professionals' experiences.

These highlight the importance of ensuring that peer workers are provided with sufficient support and supervision by a peer worker but also that other professionals and organisations are also provided with training to help them better understand the roles of peer support workers and family peer support workers. The research literature included in this review is largely positive about the impact of peer support work and family peer support work but is based mainly on service evaluation studies, using qualitative data, and without control or comparison groups. It is therefore still unclear, if peer support work and family peer support work are experienced as helpful, what the contribution of the peer aspect of that support may be.

POSSIBLE IMPLICATIONS FOR DEVELOPMENTS IN IRELAND

There are a number of possible implications of the findings of this scoping review for the further development of peer support work and family peer support work in Ireland.

Definitions and roles

- There is a range of helpful definitions of peer support, peer support work and family peer support work in the literature including from the MHER Office (2023) although the language used may continue to develop and change.
- The developing role of peer support workers and family peer support workers also needs to be considered. Although lived experience is a central component of both roles, it is not the only requirement in becoming an effective peer support worker or a family peer support worker. The evidence reported here suggests that these roles require specific training, knowledge, skills and values. There are very helpful sources of guidance and toolkits available which summarise the roles. The HSE's (2021) toolkit to support peer support workers provides a clear outline of what is included in the role, but also what should not be included. Again, as the work of peer support workers and family peer support workers develops and evolves (and is further researched), it may be useful to revisit this guidance.

Training and Support

- How to encourage and enable people to become peer support workers and family peer support workers requires consideration. This may include: providing introductory courses; reasonable adjustments for all forms of disability; financial support for initial training, including initial training as part of the role; and identifying and addressing potential barriers to becoming a peer support worker or family peer support worker, including for specific, underrepresented groups.

- The recruitment process for roles also needs to be carefully considered. The literature suggests that there should be a focus on motivation, values and skills, so effective ways to assess these should be developed and utilised.

- In addition to initial training, there is a need for ongoing specific training for peer support workers and family peer support workers (including accredited qualifications at all levels) as well as access to all relevant general, multi-disciplinary and inter-agency training.

- A key message from the literature on the development and implementation of peer support work is the need for training for all professions to help them understand the role of peer support workers and family peer support workers. This training should be co-produced and it should be considered for whom this should be mandatory. Arguably training, at some level, is needed for all staff involved.

- Assessment of the readiness of multi-disciplinary teams and services to adopt peer support worker roles is recommended; this will include the training, support and supervision arrangements that are in place.

- Access to peer supervisors as well as line management supervision, is also highlighted as an important component of the effective implementation of peer support work and family peer support work and there may be possible attendant training needs for peer supervisors.

Career development

- The development and implementation literature also identified the importance of a clear career structure for these roles, including more senior roles in the direct provision of support as well as supervisory and leadership roles at all levels, including in senior management.

- The research literature also repeatedly identifies the need to protect peer support workers from isolation. The literature also reports ongoing issues of power imbalances, stigma and discrimination. Training, ongoing support, supervision and supportive networks may help to address these issues. It should also be considered whether further implementation should prioritise ensuring there are at least two peer support workers and/or family support workers in each setting.

- Although this scoping review focused on formal peer support and family peer support roles in the HSE, it will also be important to further consider how these roles are developed across sectors and also how formal support roles interact and facilitate informal peer support.

- The findings from the international literature can also help to inform and support the further development of these roles in specialist mental health services in Ireland. There are some additional, service specific considerations, as identified in this scoping review.

Effectiveness and cost-effectiveness
- There is a need for further rigorous, co-produced research on the effectiveness of peer support work and family peer support work. The research literature included in this review is largely positive about the impact of these roles, but the service evaluation studies are based mainly on qualitative data. These are important and useful findings but research designs which include comparison groups, and ideally randomisation, would more convincingly establish the effectiveness of peer support work and family peer support work, including exploration of specific aspects of these roles.
- There is a specific need for well-designed research on the cost-effectiveness of these roles, including in the Irish context.

Conclusion

Although it was not the focus of this review, in general, the potential benefits of involving people with experience of using services, are well established across all aspects of health and social care, and also across other areas of service provision. This includes the importance of involving people with relevant lived experience, in informing the planning, design, delivery and evaluation of services and in all levels of the organisation. The potential benefits of facilitating access to informal support from people with experience of similar issues, have also been explored in the wider literature. The role of formal peer support workers and family peer support workers in these related aspects of mental health services, is also important to consider.

There is also now an emerging consensus about the potential benefits of, and current need for, the further development of peer support work in mental health services. A further consideration, however, may be specifically how these roles might develop in the longer term. There appears to be limited development of formal peer support roles across most other aspects of health and social care, although this may happen in the future. A key rationale for the development of peer support work and family peer support work in mental health services includes: the ongoing need to address stigma and discrimination, including within mental health services; negative experiences of some service users; the continuing transition of mental health services to more recovery-oriented approaches; power imbalances in service

provision; and inequities in access to support. There is perhaps an interesting, but at present theoretical, debate about whether, if these issues with mental health services and wider society were effectively addressed, there would continue to be a need for specialist peer roles. This debate may be informed by research which can isolate the key components of peer support work and family peer support work roles to determine whether it is the unique aspects of these roles that is critical for their effectiveness. At present, a need for, and the potential benefits of, peer support work and family peer support work have been identified and the findings presented here should help to inform the further development of these roles.

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