

The evaluation of a peer-led recovery group 2013

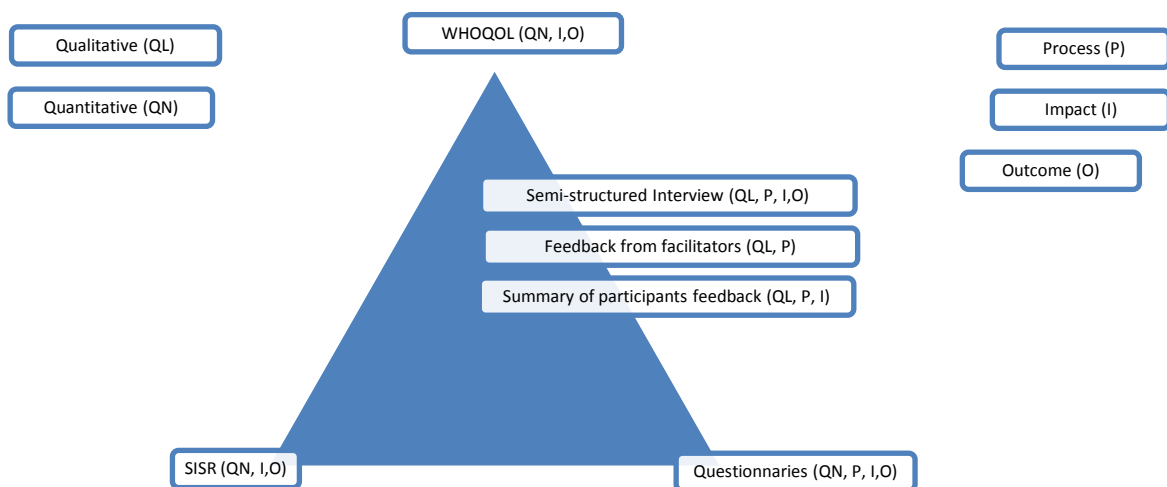
Abstract

Background: A peer-led recovery group (the group) was initiated to enhance the peer support framework in line with the ISCHS strategic plan 2011-2016. The effectiveness of peer run groups is internationally acknowledged as a new form of intervention to promote recovery. Furthermore, participants in Coffee club, a socializing group in ISCHS, highlighted the need for their own additional space to talk about their own issues in depth in a safe environment.

Aim of the group: The group aims to increase the ability of participants to enhance life satisfaction through sharing life journey and enhance their wellbeing beyond the limits imposed by mental ill health. To achieve the purpose of the group there are six key objectives. Participants are expected to (1) increase motivation and hope, (2) increase confidence and strengths, (3) reshape their identity, (4) increase social network, (5) have a good understanding of recovery principles and recovery approach and (6) utilize recourse effectively and efficiently.

Literature Review: Peer support is a new interpretive framework to understand and recover from mental ill health. Peer led groups as a type of peer support, provide space and time purely for peers. It creates a stigma free environment as well as providing a chance for participants to establish reciprocal relationship while sharing life experiences, such as a history of mental ill health and coping strategies. Peer facilitators as a key ingredient provides a role model of recovery and guide participants to share stories effectively. Through that process, participants examine their lens of understanding the world, reshape identity, enhance motivation and hope, regain confidence, develop skills and move forwards to live well with presence or absence of mental ill health.

Method: 'Triangulation of method' as a mixed research method was utilized. It allows seeing multiple aspects of participants' experience and enables a wider and deeper understanding of their experience. 8 participants and 2 facilitators participated in this evaluation. The following measure tools were used: (1) Quantitative research methods: (A) pre and post measure - WHOQOL and SISR -, and (B) Questionnaire & (2) Qualitative methods: (A) interviews with three participants and two facilitators, and (B) feedback of each session. The collected data was thematically analysed. The result of findings cannot be generalised due to small size of the data.





Key findings:

- Significant improvement of social and relationship aspect statistically
- Strong desire to build rapport among participants despite the fact that they easily interacted because of experiencing mental ill health issue
- Concept of resource is different to peers. They defined themselves as community resources.
- Increase of confidence and of hope and motivation, and taking action towards goals
- Reshaping identity positively and improvement of self-identified recovery stage
- The consequent challenges, including feeling heavy, occurred after sharing stories and listening to participants' stories
- Peer facilitators showing a life role model is a key ingredient to influence participants to move towards and take actions to reach goals
- Peer facilitators' challenges, including boundary issue and own vulnerability, and importance of supervision to deal with the challenges and for ongoing development
- Recovery focused topics were effective to explore their own issues and see other aspects of recovery resulting in having good understanding of recovery principle and recovery approach
- Three principles enhancing sharing are inclusiveness and responsiveness to participants' needs, creating a safe environment, and acknowledging participants as experts
- High satisfaction of the group and feeling listened to during the group

Key Recommendations:

- Building rapport among participants before sharing stories actively through a casual engagement
- Increasing awareness of possible developmental challenges when sharing stories
- A follow-up group to be established like Growth or AA. For example, Mental wellbeing Anonymous
- All session to be prepared in a structured way to minimize impact of absence of a facilitator

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