

Evaluating Peer Support in Aotearoa New Zealand PROJECT UPDATE

October 2013

Introduction

The Toka Tū project seeks to answer two key questions:

- What are the resources and procedures that will support NGOs providing peer support to initiate and undertake ongoing evaluation?
- What are the outcomes being supported by peer support services?

This update outlines progress to date on our work to answer the above questions. For previous updates and further information about the project overall please visit the website <u>www.tokatu.org.nz</u>

This update provides information on Focus Groups held with peers using peer support services around the country and our further learning about using outcome measures in peer support settings.

Focus Groups

During May to July 2013, 13 focus groups were held with 106 peers from the Toka Tū participating organisations.

The purpose of the focus groups was to identify from people using peer support services the outcomes they value and how the peer support service supports these outcomes.

The facilitators from the project team thoroughly enjoyed the opportunity to meet with peers using these services and were humbled and privileged to meet such wonderful people openly sharing their hopes and dreams.

Further information about the focus groups can be found in the following pages.

Thanks to the New Zealand Lotteries Community Research Grant for supporting this project.

What do peers think?

During May to July, 13 focus groups were held throughout New Zealand. 106 peers/consumers participated and openly shared what they valued in their lives and for the future, and how the peer support services were supporting them.

Members of the Toka Tū Project team facilitated the focus groups. The questions asked within



the focus groups were considered carefully with the assistance and expertise of our expert advisors. A picture card activity helped break the ice, because even though each focus group was made up of participants from individual peer support services they had not necessarily met each other before.

The participating organisations did a wonderful job advertising and preparing for the focus groups. Participants were provided with written information about the group which was also discussed in order to gain informed consent before proceeding. Light refreshments were provided and participants were asked a series of questions that elicited rich discussion about what they valued and how the peer support service was supporting them. Each session was recorded and transcribed verbatim.

Participants stated they enjoyed the opportunity to meet other people in similar situations to their own and found the process of facilitated discussion helpful to their own thinking and learning.

A SURPRISE we were not expecting was the difficulty in recruiting to a focus group people who use the

Wellington Warmline peer support telephone service. Warmline is run by trained peer support workers called 'Warmliners'. Telephone support is provided in the evenings from 7pm–1 am six days a week. The service is all about confidentiality—this extends not only to the people who call the service but to the Warmliners as well. New Zealand is a small community and the service does not want people to avoid calling because they fear being recognised by the person answering the phone.

The focus groups were advertised through posters located in community mental health teams, day services and the in-patient unit. Notifications were also sent out through local consumer network e-mail groups. No one responded, which supported the concept of anonymity being essential to the callers. This is very useful information for planning face to face engagement with users of telephone support lines.

The results are currently being analysed by the project team and we anticipate reports for each participating organisation to be available in November. Early results indicate people highly value peer support.

Outcome Measures

As participating organisations implement the use of outcome measures we continue to learn about the resources and supports that are required.

Each participating organisation chose an outcome measure to trial within their setting. The following measures were chosen:

- Taku Reo, Taku Mauri Ora
- Human Givens (adapted)
- WHOQOL NZ Bref
- CDOI—specifically the Outcome Rating Scale and the Session Rating Scale.

For further information on the measures and the process of selection please visit

www.tokatu.org.nz

A useful reference...

This article explores the views of service users in selecting outcome measures.

Crawford, M., Robotham, D., Lavanya, T., Patterson, S., Weaver, T., Barber R., Wykes, T & Rose, D. (2011) *Selecting outcome measures in mental health: the views of service users*. Journal of Mental Health, 20(4): 336-346

Some of the key learning to date regarding the use of outcome measures has been:

- Measures can support the process of selfawareness; self-reflection and can create room for conversations between peer and peer worker.
- Measures can provide a means for the individual to identify and see change.
- Some people find aspects of the measures are clinical and feel it is a move away from peer support to more mainstream clinical services.
- Implementing the use of an outcome measure is time-consuming and requires sufficient resource.
- Leadership from throughout the organisation is important when implementing these measures. Changes in personnel can have a major impact.
- There is no perfect measure.

Service User in Academia Conference

In November two members of the Toka Tū leadership group; Treena Martin and Mike McAlevey along with Sarah O'Connor from the project team will be presenting at this conference in Melbourne, Australia.

The focus of their presentation will be the role members of the leadership group have had as co-researchers within this project. The presentation will available on the Toka Tū website following the conference. For further information on the conference check out:

http://qldvoice.org.au/calendar-of-events/2013-service-user-academia-symposium/