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An investigation of the use of peer led support services for people experiencing mental health difficulties.

Peer support workers (PSWs) are people with lived experiences of mental health distress who provide mental health interventions or services to people with mental health difficulties (Davidson et al., 2006). In order to gain a better understanding of peer support from an Irish perspective, this qualitative study investigates the use of peer led support services for people experiencing mental health difficulties and examines how peer support roles can be further utilised and incorporated into professional mental health services in Ireland. International research has shown that peer support benefits individuals with mental health challenges. In Ireland very little research has been done on this form of care. Gaining insight into this form of care, the researcher explores the perspectives of fourteen mental health service users (including 2 voluntary PSWs) and nine mental health professionals (including 2 paid PSWs). The data was collected through semi-structured interviews and a focus group and was analysed using a modified grounded theory methodology. The findings were compared and discussed in the light of current international research.

The study identified that people receiving peer support felt a higher level of genuine empathy, acceptance and mutual respect compared to traditional mental health services. Results also indicate that the peer worker role provided service users with hope, inspiration and a feeling of empowerment in their recovery journey. Furthermore, the study suggests that paid peer support workers who are members of mental health multi-disciplinary teams complement organisations by challenging the medicalised language of teams to become more recovery focused. Similarly, findings indicate PSWs have the potential to provide an important link between service users and professional staff by bringing a different perspective to multi-disciplinary teams and helping mental health professionals see things through the eyes of the service user. However, the findings also illustrate the various challenges of the PSW role. Challenges such as the engrained medicalised culture of mental health organisations who are unwilling or slow

to change to recovery focused care. Power imbalance issues as PSWs feel a lesser part of the team due to their lack of “professional knowledge” as their lived experience is undermined. Questions regarding PSWs mental health vulnerabilities, role definition and boundary issues with service users. Additionally, the data proceeds by identifying how the role of the PSW can be further utilised. The findings suggest that time, further training and organisational readiness is imperative to accept and further utilise the role of the PSW. The data also suggests that the PSW role should be as standard as seeing a doctor and PSWs should be used as role models and educators to help traditional mental health professionals humanise their interactions with service users and erase that power imbalance.

What is important about this research is the detailed and reflexive accounts of participants on the benefits of peer support. These valuable narratives can have future implications for mental health recovery oriented services which can translate peer support into national policy.