The Project

Habitat Services conducted a community-based research project with funding from the Wellesley Institute and support from Ontario Council of Alternative Businesses (OCAB) and Parkdale Activity and Recreation Centre (PARC), in order to uncover recommendations about peer support work in congregate living settings. Within the continuum of supportive housing for individuals with serious mental health issues, boarding home tenants are particularly disadvantaged by income, lack of privacy, few opportunities to exercise autonomy, and social exclusion. Providing peer support — informal support from individuals with personal experience navigating the mental health system, is one strategy to address health disparities and improve the quality of life of boarding home tenants in a way that promotes empowerment and provides hope for recovery.

Material collected by community researchers during peer worker interviews demonstrated that the people currently working in the field of peer support have an acute understanding of what is most and least useful to their clients, what is most challenging for their employers and colleagues, and the things that most need to change in order for peer work to flourish and be properly recognized in the field.

“It’s imperative as agency employees and community members that we insist peer work be comprised of meaningful employment opportunities with flexibility and sustainability, and that diverse roles at all levels of agency work be accessible to people who are most invested in the communities served.” (Breaking Ground Report)

Implementation

Report recommendations will be considered for implementation at Edmond Place, PARC’s housing project which will be an innovative addition to the Habitat housing portfolio when it opens in January, 2011. Edmond Place, with its community-based approach to program development, fundraising and neighbourhood networking, represents an alternative to the traditional boarding home. Beyond possible implementation at Edmond Place, researchers also sought ways to promote peer support in more typical boarding homes currently in the Habitat housing portfolio.

“Edmond Place represents and alternative to the traditional boarding home.”

Breaking Ground calls for an essential and radical change in philosophy, agency missions and daily practice for social service organizations, particularly for those engaged with psychiatric survivors and/or communities living in poverty. Agencies who currently offer peer work opportunities and those who are considering peer programming in the future all stand to gain from the report recommendations as well as from insights provided by peer workers and community researchers.

What is a peer worker?

“People with similar experiences helping each other in practical ways with life problems.” (focus group participant)

“Helping . . . those in your community who have a similar life to yours.” (focus group participant)

“As a consumer/survivor I have known stigma, hospital stays, being devalued as a person and having [my] housing threatened. I know how to work above that to find solutions.” (peer interview)

Benefits to peer work?

• Breaks down stigma, stereotypes, and discrimination — one person reported that as the number of employed consumer/survivors rise in their agency and the environment becomes safer, more staff “come out.”
• Promotes recovery and a safe space — some respondents referred to the positive impact of “role modeling.” One commented that clients are “developing their own voices and becoming more confident” as a result of peer support. Peer workers readily develop trust and bring different approaches that service users can relate to.

• Results in more appropriate, responsive, person-centered services — one person said the peer worker reminds agency staff to consult with clients directly, a common oversight.

• Better educated staff — Respondents commented on how much their agencies learn from peers. For example: “He’s been training us and makes us realize why we’re doing the work that we’re doing.” Two respondents said that peer support workers have been educating their teams on medications and side effects. Part of the CAMH peer support job is to educate full-time staff on the social determinants of health and the impact of poverty.

• A more complete picture and a more diverse agency — “When we are facing a complex decision on a difficult issue we get ALL different perspectives, including those of people with lived experience. . . . There is a value to having people on staff who are reflective of the people that use your service.”

• Strengthens the consumer/survivor community — Staff with lived experience help “build a network of relationships that are supportive to others, (they are) hooked into a natural network of self-help, helping to build a supportive network; (they are) on the border, but helping, just under the radar.” When consumer/survivors earn a livable wage, “More people in the community are not living in dire poverty and they can find their voice.” An example was given of a staff hired from the agency membership who has recently joined a high level advisory body.

Recommendations

Community researchers noted that in order to maximize the effectiveness of peer work, major systemic changes must take place.

• Implement anti-stigma and anti-discrimination work. Most important is a radical attitudinal shift in social service agencies/organizations, at all levels of employment, and in the training programs that educate people to work in service of the public, including those who work in mental health.

• Fully integrate recovery oriented approaches. Move toward a client-centred, recovery-based philosophy and daily practice which prioritizes listening to clients.

• Build healthy and supportive work environments.

• Agencies and organizations must make concerted efforts to employ compassionate, connected people from the communities they serve in order to ensure relevant programming and services are delivered respectfully to empowered communities.

• Value the unique role of peer work and contribution to staff with lived experience. Do not co-opt the “lived experience” of the peer.

• Support and invest in communities. Make it your mission to foster and sustain autonomous, supportive relationships amongst service users, thereby encouraging leadership roles, capacity building and community development where it is most needed.

Who is Habitat?

Habitat Services began in 1987 as a non-profit community mental health agency, and is currently funded by the Toronto Central Local Health Integration Network (LHIN). Habitat administers a housing subsidy program funded by the Ministry of Health and Long Term Care and the City of Toronto. Habitat enters into service contracts with selected private and non-profit boarding home and rooming house owners in the City of Toronto. The contracts describe the physical and personal care standards that must be maintained within each home. In exchange, Habitat Services pays the owner a specified per diem and monitors the provision of services to tenants. Currently, Habitat Services has contractual agreements with 41 for-profit boarding homes, 4 non-profit boarding homes, and 3 shared apartments for a total of 870 tenants.

Furthermore, Habitat and COTA Health provide on-site housing support services to tenants individually and to the community of tenants living in each home, to promote their housing stability and to support their recovery.