Building Personal and System Capacity for a Recovery Workforce: Peer Recovery Education For Employment & Resilience (PREFER) – A Recovery Education Program

The Centre for Building a Culture of Recovery (www.cultureofrecovery.org) and the Krasman Centre (www.krasmancentre.com) have demonstrated their commitment to enhancing personal and system capacity for recovery including strong public statements regarding the essential importance of peer support as a distinct component or alternative to existing services and supports. To realize this commitment, The Centre for Building a Culture of Recovery, led by the Krasman Centre, have delivered or assured delivery of recovery education programs to support the development of a competent peer workforce. The Krasman Centre has engaged with additional key partners at Houselink (www.houselink.on.ca) and the Gerstein Centre (www.gersteincentre.org) to prepare the Peer Recovery Education for Employment & Resilience (PREFER) Program to support these aims. Funding to proceed with the program has been approved by the Ontario Trillium Foundation.

The Peer Recovery Education for Employment & Resilience (PREFER) project is an innovative strategy to develop a strong recovery-supporting workforce. Over the next 4 years the PREFER will prepare at least 50 peer recovery educators who will then facilitate a series of wellness recovery education programs with their peers and advance their personal employment and skills development. Potential participants will be recruited from targeted and general sources in the Greater Toronto Area, York Region, and South Simcoe. Diverse populations will be specifically targeted for application. The objectives for the program are to:

- Support a personal foundation of recovery for program participants
- Nurture a critical perspective regarding personal and systemic factors that support recovery
- Develop skills and capacities to deliver wellness and recovery programs in the workplace, for employment
- Create recovery supporting workplaces
- Initiate a support network for people in recovery

Given the nature of this project, a clear definition of recovery is essential. Recovery is not a medical or clinical model of care; it is a perspective that values personal responsibility, choice, education, wellness and hope. The definition of recovery used in this project is informed by current literature and research undertaken both by people with lived experience as well as
allies (Copeland 1997; Deegan, 1988; Mead and Copeland, 2000; Onken, et al, 2002; Everett, 2000; Jacobson, 2004; Farkas et al, 2005; Anthony, 2000; Anthony, 2004; Ragins. www.mhavillage.org). The terms of this specific definition were constructed collectively by people in recovery.

Recovery is the hard work a person does him or herself with the kindness and compassion of the people they choose to support them – in an environment that acknowledges and believes in their potential for wellness (www.cultureofrecovery.org).

This definition absolutely places the power and responsibility to decide about all aspects of negotiating, accepting or declining service and support, as well as lifestyle and relationships choices, in the hands of the person him or herself and it in no way attempts to instruct or prescribe the nature of treatment and support, or the behaviour of providers. Empowerment, for the purposes of this project, is intended to be the personal realization of power and is grounded in self-determination.

The educative nature of this project is critical in terms of building capacity for people to support their recovery, including improving opportunities for employment. Employment capacity involves both preparing people in recovery for the workforce as well as strengthening the abilities of employers to support a peer workforce.

The PREFER Program comprises a comprehensive curriculum of the following recognized wellness, recovery and peer support education programs:

- **Wellness Recovery Action Planning (WRAP)** is a self-help group program designed to shift focus from illness to self-help, self-determination, wellness & prevention, recovery education and support with the intention of gaining more control in one’s life.

- **Like Minds, Peer Support Education** is a peer delivered program to improve knowledge and understanding about peer support and comfortably assuming the role of peer supported in both peer and conventional environments.

- **WRAP Facilitator Certification** is a group program where participants learn how to effectively facilitate WRAP groups. It certifies participants as program facilitators; this component of the program requires considerable practice in the field.
• **Pathways to Recovery Facilitator Training** is a group training program to learn effective facilitation for Pathways to Recovery self-help groups (based on 12 week groups). The program includes an introduction to the Strengths-Based Approach and the impact of discrimination on mental health

• **Gaining Autonomy with my Medication (GAM)** – learning about the self-management of medication

• **Basic Short-Term Crisis Intervention** and **Suicide Prevention** are two trainings to assure competence providing service and support to people in crisis or distress in recovery-supporting ways

• **Anti-Oppression Training** is training on the nature of discrimination and oppression of all types with opportunity for self-reflection and capacity building to provide anti-oppressive support when working with other people. The training includes special focuses on discrimination related to ability/disability and mental health labels and experiences and on the power imbalance in a worker-supporter relationship.

The program recognizes that additional and supplementary workshops or programs can also build skills and knowledge around wellness, recovery and peer support and where possible, these programs will be integrated into the curriculum; at the very least, information regarding additional programs and resources will be available to all participants of the program. Web-based resource lists, including updates regarding education, workshops and conferences will be easily available.

Participation in the program requires regular attendance at monthly peer network meetings, facilitated by the Program Coordinator, that support learning and promote leadership and advocacy. Participants must also agree to engage in personal tracking that will contribute to the evaluation of program effectiveness and impact. An annual “Recovery Workforce Summit” will provides conference-style education for the broader Recovery community – program participants as well as all people in recovery, service providers, employers or potential employers are welcome to attend.

The PREFER Program is not an employer and participation in the program does not guarantee employment. Participants are provided education and opportunities that prepare them to compete in the workforce. Support with employment preparation skills that is aware and
responsive to the particularities of employment processes in peer work is provided. People applying to the program are asked to make the following commitments.

1. I am prepared to work from a position of personal lived experience with mental health problems or substance abuse.
2. I am committed to my personal recovery and can honour and work from a position of choice.
3. I am interested in employment and education related to work.
4. I feel comfortable in diverse groups and I am open to learning new ways of being.
5. I have access to a computer and internet. I can participate in the programs using English language.
6. I agree to complete tracking exercises required to monitor my own personal change and support evaluation of the program.
7. I will make a commitment to attend programs reliably and on time so I can complete all components of the program in 1–2 years.

The expected outcomes from this project rely on the people trained as Peer Recovery Educators to complete all components of the program and to facilitate WRAP, Pathways to Recovery, and other Recovery Education and Peer Support Groups. It is our hope that these skills will lead to employment at a level that is preferred by the participants – for instance, one participant may choose to move from non-employment to volunteer activities, another may choose to move from volunteer commitments to part time employment and yet another may move to full time employment. A cumulative effect is anticipated for people who serve as educators and for people who attend multiple programs. Specifically, changes to service use and service reliance are expected as well as improved emotional and social health. Finally, the comprehensive evaluation is intended to provide evidence of the impact of recovery and recovery-supporting strategies that will compel funding support to sustain programs.

References and Resources:
Power of the Mental Health System. Waterloo. Wilfred Laurier University Press.


