



MENTAL HEALTH COMMISSION OF CANADA

MAKING THE CASE FOR PEER SUPPORT

PROJECT INFORMATION

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**CONSULTATION QUESTIONNAIRE
FOR ELECTRONIC WRITTEN SUBMISSIONS**

2009

PLEASE READ THIS FIRST

Consultation questionnaire

We are inviting all people in Canada who use mental health peer support, deliver peer support, or have some relationship with a peer support initiative to fill in this questionnaire.

The information you provide will be summarized in the report to MHCC and comments will not be attributed to any individual or group.

Your answers can be as short or as long as you like. There's no limit to the space for typing under each question

You do not have to answer as a representative of any initiative; personal views are just as welcome.

You may not be in a position to answer all the questions. This is OK. Just move onto the next question.

The consultants and staff at the Mental Health Commission of Canada (MHCC) who read your comments are bound by confidentiality. We will do our best to ensure any comments of yours that we use in the report will not be traceable to you or your organization. After the report is completed the questionnaires and any recordings of focus groups or interviews will be placed in a locked environment at the MHCC offices in Calgary. The data (without any identifying information) may be made available to other researchers if they comply with security and confidentiality requirements.

Please email written responses to Mary O'Hagan mary@maryohagan.com no later than 31 October 2009.

Database questionnaire

For those of you who run peer support initiatives we also have a database questionnaire asking you for details about your initiative so we can develop a comprehensive peer support database. Download it from <http://www.mentalhealthcommission.ca/English/Pages/ServiceSystem.aspx>

Pass it on

Pass this file or the website link on to others you know who might be interested in taking part in the project.

More information on project

For more information about the project, and the consultation questionnaire, please read on.

ABOUT THE PROJECT

The Mental Health Commission of Canada (MHCC) is funding this project to inform provincial policy makers, funders and other stakeholders of the value of mental health peer support, and to give them guidance on how to strengthen peer support in their respective provinces. A group of international consultants with lived experience are gathering the information needed. The report will describe peer support activities across Canada and make recommendations on the integration of peer support into provincial and territorial mental health systems. The findings will also inform the MHCC Mental Health Strategy for Canada and other MHCC initiatives. A database of peer support initiatives across Canada will also be developed which may become part of the MHCC Knowledge Exchange Centre.

The investigation will consider the factors that influence the situation of peer support across Canada. Factors internal to peer support initiatives include values, benefits, governance, management, delivery and membership. External factors include legislation, policy, funding as well as mental health cultures and attitudes. The consultants are seeking contact with peer support initiatives throughout Canada.

What is peer support?

We are using a broad definition of peer support so we can discover the full diversity of peer support initiatives within Canada.

*We define **peer support** as any organised support provided by and for people with mental health problems. Peer support is sometimes known as self-help, mutual aid, co-counselling or mutual support.*

***Consumers/survivors** are people with lived experience of mental health problems*

*We **define peer support initiatives** as the programs, networks, agencies or services that provide peer support. They can be:*

- *Funded OR unfunded.*
- *Use volunteers OR paid staff OR both.*
- *Operate out of psychiatric consumer/survivor run organisations OR other agencies.*
- *Delivered by a group of peers OR by an individual peer in a team of professionals.*
- *A primary activity of the initiative OR a secondary benefit eg in a consumer/survivor business.*

***Please get in touch if you think your initiative fits this definition.
We want to hear your views!***

How we're finding the information

The information for this project will be gathered through:

- Focus groups, interviews and written submissions from across Canada.
- International and Canadian literature searches.
- Data collection on the characteristics of peer support initiatives in Canada.

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About the MHCC

The Mental Health Commission of Canada was established by the federal government in 2007 to focus national attention on mental health issues and to improve the health and social outcomes of people living with mental illness. It is based in Calgary, Alberta.

The MHCC has acknowledged the importance and effectiveness of peer support in a reformed mental health sector in its draft framework of a mental health strategy for Canada.

About the project committee

The Mental Health Peer Support Project Committee is supported in its work by the MHCC Service System Advisory Committee. The Project Committee (PC) developed the vision for this project, and is working collaboratively with the consulting group on the project. The PC is made up of people living with mental health problems or illnesses from across Canada, and their allies. The members include: Loise Forest (Co-Lead), Laurie Hall (Co-Lead), Carol Adair, Mary Bartram, Andy Cox, Joan Edwards-Karmazyn, Susan Lynn Hardie (MHCC Associate Research Officer), Joe Leger, Steve Lurie, Tanya Shute.

About the consultants

Mary O'Hagan initiated the survivor movement in New Zealand in the late 1980s, was a full time New Zealand Mental Health Commissioner from 2000-2007, and is now an international consultant.

Robyn Priest, an Australian living in New Zealand who has been involved in the user/survivor movement in both countries and has held management roles in mental health agencies.

Celine Cyr, a service provider with lived experience from Quebec who is involved in the user movement there and has trained users and professionals for the last 15 years.

Heather McKee is a survivor from Ontario, active in the movement there and across Canada, who works in knowledge transfer, research, policy and evaluation activities.

Timeline

Focus groups and interviews.

Late June/early July & all of September 2009

Deadline for written responses.

31 October 2009

Completion of draft report.

21 December 2009

Consultation on draft report.

11 January to 5 February 2010

Final report MHCC.

28 February 2010

For more information

Visit the website

<http://www.mentalhealthcommission.ca/English/Pages/ServiceSystem.aspx> for:

- *The consultation questionnaire*
- *The database questionnaire*
- *The schedule of the consultation visits*
- *Updates on the project*
- *Email inquiries and feedback form*

Or contact Robyn Priest

416 564 3964

robpriest13@gmail.com

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DEMOGRAPHIC INFORMATION FORM

We need this information to check that we are consulting with a wide enough cross-section of people in Canada. We will detach this sheet from your answers so we cannot identify you. Please do not put your name on this sheet.

Age group (please mark with an X)

19 or under	20-30	30-40	40-50	50-60	60-70	71 or over
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Gender (please mark with an X)

Male	Female	Transgendered
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Ethnicity (please with an X – you can mark more than one)

Aboriginal	Caucasian	Asian	Middle Eastern	African	Latin American	Other (please state)
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Province or territory (please mark the province you live in now with an X)

AB	BC	MB	NB	NL	NT	NS	NU	ON	PE	QC	SK	YT
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Role/s (please mark box with an X – you can mark more than one)

Peer support member/ 'client'		Provincial/territorial official	
Peer support paid staff		Planner/funder	
Peer support volunteer		Mental health service provider	
Peer support management		Academic/ researcher	
Peer support board		Consumer/survivor/user	
Other (please state)			

THE QUESTIONS

Definitions

1. In your own words, how do you define peer support?

2. What are the different types of peer support initiatives that you know of? (please mark box/es with an X)

Run by consumer/survivor run organisations	
Run by non consumer/survivor run organisations	
Provided by one or two peer workers in a mental health team	
Provided by a team of peers	
Provided by volunteers	
Provided by paid staff	
Unfunded	
Funded	
Other (please state):	

3. In your own words, what is your understanding of recovery in mental health?

Values

4. What are the values that underlie peer support?

5. How are peer support values similar to or different from mental health system values?

6. What makes it easy or difficult to peer support values into action in consumer/survivor run services?

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7. What makes it easy or difficult to put peer support values into action in organizations that are NOT consumer/survivor run? (for instance mental health services or family organizations)?

Delivery

8. What range of supports, services and resources do you know of, that are delivered in the name of peer support, mutual support, self-help, co-counselling or mutual aid? Please mark box/es with an X

Self-help groups	
One-to-one support eg co-counselling, harm reduction	
Support in housing	
Support in education	
Support in employment	
Support in crisis eg crisis house, emergency room	
Social and recreation	
Material support eg food, clothing, internet	
Traditional healing	
Artistic and cultural activities	
System navigation	
Case management	
Small business	
Systemic and individual advocacy	
Education and training for consumers/survivors	
Paper and online information development and distribution	

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Research and evaluation	
Others (please state)	

9. What other supports, services and opportunities could be offered by peer support initiatives; within consumer run orgs and in mainstream orgs with peer support initiatives?

10. Are you able to estimate the proportion of consumer/survivors in your area, province or territory that have access to peer support? Why do you think access is as low or high as it is?

Benefits

11. What have been the benefits of being involved in peer support for you, or others you know?

12. Have you, or other people you know, had negative experiences as a result of being involved in peer support?

13. How important has peer support been in your recovery, or the recovery of others you know, compared to the importance of formal or mainstream mental health services?

Members/ 'Clients'

14. What are the opportunities and barriers for members or 'clients' to participate in delivery and decision making in the different types of peer support initiatives you know of?

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Volunteers

15. Assuming that peer run initiatives can afford to hire paid staff, in what circumstances is it better to use volunteers instead of paid staff?
16. What are the opportunities and barriers to using volunteers for peer support? *(for instance, recruitment, retention, reimbursement for expenses, workplace accommodations, performance problems, workplace conflict, training)*

Staff

17. Assuming that peer run initiatives can afford to hire paid staff, in what circumstances is it better to use paid staff than to use volunteers?
18. What are the opportunities and barriers to using paid staff in peer run initiatives? *(for instance, recruitment, retention, pay, benefit abatement, workplace accommodations, performance problems, workplace conflict, training)*

Management

19. What successes or challenges do peer support initiatives run by consumer/survivor organizations have in their management?*(for instance planning, budget control, management of staff relationship with membership improving the service, relationships with funder/s)*
20. What successes or challenges do support initiatives in organizations that are NOT run by consumers/survivors have in getting support from management?

Governance

21. How do peer support initiatives run by consumer/survivor organizations perform in their governance roles? *(for instance strategic planning, financial control, risk management, employment of the CEO)*
22. How much influence do peer support initiatives have over the boards in organisations that are NOT run by consumers/survivors?

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Organizational structure and culture

23. What types of organizational structures work well for peer support and why?

24. What types of organizational structures do NOT work well for peer support and why?

25. Have the peer support initiatives that you know of, that are NOT run by consumer/survivor organisations, been able to change the attitudes of the people in the organizations they work for?

Marginalised and Minority Consumer/Survivors

26. What are the barriers and opportunities faced by the following groups when it comes to participating in and benefiting from peer support in your area, province or territory? *(for instance First Nations, Inuit, Metis, Francophone, ethnic minorities, gay, lesbian, bi and transgender, consumers/survivors in criminal justice system, young people, rural people)*

Stakeholders

27. How successful are the relationships peer run initiatives run by consumer/survivor organizations have with other people and organizations? *(for instance provincial and territorial governments, policy agencies, planning & funding agencies, mental health service providers Consumer /survivor movement , family organizations, MHCC.)*

28. How successful are the relationships peer support initiatives that are NOT run by consumer/survivor organizations have with other people and organizations? *(for instance provincial and territorial governments, policy agencies, planning & funding agencies, mental health service providers Consumer /survivor movement , family organizations, MHCC.)*

Planning and funding

29. How have the organisations that decide who gets the funding for mental health service delivery helped or hindered the development of peer support in your region or province? *(for instance the Regional Health Authorities in a lot of provinces or the Local Health Integration Networks in Ontario)*

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30. Is the current level of funding for peer support initiatives in your region, province or territory sustainable or not, and why?

Legislation and policy

31. How has the legislation in your territory or province helped or hindered the development of peer support? (*for instance health and mental health legislation*)

32. How have mental health policies, standards or guidelines in your province or territory helped or hindered the development of peer support?

Success

33. What are the most successful peer support initiatives you know of?

34. What enables them to do such a good job?

35. How could the opportunities for creative and innovative peer support developments be maximised?

Evaluation

36. What are the opportunities and barriers to consumer/survivor led evaluation of peer run initiatives in your area, province or territory?

Your recommendations

37. What would a strong and equitable peer support presence in the mental health system look like to you?

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38. If you have not already said so, how would you recommend the following stakeholders show commitment to the development of peer support?

- Provincial or territorial government
- Policy agencies
- Planning & funding agencies
- Mental health service providers
- Other service providers eg family doctors, social services
- Consumer /survivor movement
- Families
- Mental Health Commission of Canada

39. If you have not already said so, how would you recommend the following features of peer support initiatives be better defined, changed or developed:

- Sticking to the values
- Governance performance
- Staff work conditions
- Organisation structures
- Management performance
- Volunteers work conditions
- Evaluation & promotion of benefits
- Delivery – more options to more people
- Membership diversity & participation

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40. Do you have any other recommendations?

Key points

41. To summarise, what are the THREE key points you have made that you would most like to see reflected in the report?

Contacts and information

42. Are there any peer support initiatives we may not know about? If so, please give us their names and contact details.

43. Do you have or know of any paper or electronic information on peer support that we may not know about. If so, can you provide details of the information and where we can get it from?

TO FINISH...

Database questionnaire

A reminder for those of you who run peer support initiatives: We also have a database questionnaire asking you for details about your initiative. Download it from

<http://www.mentalhealthcommission.ca/English/Pages/ServiceSystem.aspx>

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Copies of the report

Please mark boxes with an X

Do you want a confidential copy of the draft report to comment on?	
Do you want a copy of the final report?	
If so, please provide us with your email address:	

Pass it on

Pass this file or the website link on to others you know who might be interested in taking part.

Send it

Please email this questionnaire to Mary O'Hagan mary@maryohagan.com no later than 31 October 2009.

**Thank you for your participation.
We really appreciate it.**