A one-year longitudinal qualitative study of peer support services in a non-Western context: The perspectives of peer support workers, service users, and co-workers

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ABSTRACT

This study explored the changing views of key stakeholders (peer support workers, their co-workers, and service users) about peer support services in a non-Western community, using a longitudinal qualitative approach. Five trainee peer support workers (PSWs), 15 service users, and 14 co-workers were interviewed over a 12-month period, under the auspices of the Peer Support Workers Project (also known as the Mindset project) in Hong Kong. A total of 77 interviews were transcribed and thematic analyses were conducted across the participant groups at three different time points (training, work placements, and employment). During the initial implementation of the services, uncertainty about the role of the PSWs were reported. However, trusting and beneficial relationships with service users were gradually built, showing growing resilience and confidence over time. The participants realized that PSWs' experiences of mental illnesses were a unique asset that could help service users to alleviate their own somatic symptoms and improve their connections with others. Our findings highlight that the perceptions of peer support services changed from confusion to viewing PSWs as an asset, to an awareness of the importance of family support, and to the belief that implementing such a program will benefit both service users and PSWs.

1. Introduction

Peer support workers (PSWs) are individuals recovering from mental illnesses who identify themselves positively as such and have a strong desire to use their lived experiences to help others with similar conditions (Firmin et al., 2015; Moran and Russo-Netzer, 2016). In sharing and engaging with their peers, they rely on the knowledge gained through their personal lived experiences of mental illnesses. Such expertise cannot be replaced by professional training. Over the past two decades, peer support has been considered a critical means of empowering service users to promote their recovery process (Castelein et al., 2015; Gumber and Stein, 2013). Research on the effectiveness of peer-delivered services comes mostly from Western countries, including Canada, the US, the UK, Australia, and New Zealand (Coniglio et al., 2012; Gillard et al., 2013; Landers and Zhou, 2011; Pfeiffer et al., 2011;

Walker and Bryant, 2013). Although inconclusive, there are indications that peer support services are effective in raising service users' levels of hope, empowerment, and quality of life, and connecting people with wider health services (for details, see the following three recent reviews: Cabassa et al., 2017; Chinman et al., 2014; Lloyd-Evans et al., 2014). The PSWs themselves also gain a sense of hope and acquire skills that are useful for their own situations (Ahmed et al., 2015; Castelein et al., 2015). In a seminal paper, Davidson et al. (2012) added that the uniqueness of peer support services lays in the fact that they instill hope through positive self-disclosure and the role-modeling of self-management. They also allow PSWs and service users to form relationships characterized by trust, acceptance, understanding, and empathy, paired with "conditional regard". Furthermore, the authors posed important research questions that the present study seeks to address (adapted from Davidson et al. (2012), p. 124). Do interventions

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provided by peers differ in any significant way from similar interventions provided by non-peers? What are the essential ingredients of effective peer support? What outcomes can such support produce over time?

Researchers have used qualitative methods to identify the impacts of peer support services in different models of service delivery, focusing on the new role allotted to PSWs and from their perspectives (Corrigan et al., 2005; Jacobson et al., 2012; Moran et al., 2013; Van Erp et al., 2010). While the majority of these studies have focused only on the experiences of PSWs or service users, a few studies have explored the interactions between different stakeholders who contribute to peer support programs in the mental health context. Among these few studies, one by Gillard et al. (2013) reported their analysis of the data they gathered from interviews at three mental health self-care sites in England and from different stakeholder groups involved in peer support services: service users, non-peer staff members, and managers. The primary study was a mixed-method project designed to gather data on the expectations and experiences of these stakeholders in regard to supporting self-care in the mental health context (Gillard et al., 2012). The interviews were conducted with 121 service users and 30 staff members, including PSWs, at two time points within a nine-month period; the aim of these interviews was to explore the interviewees' experiences of supporting self-care. The analysis indicated that peer support services are highly valued by mental health teams and service users; however, at the same time, providing these services presented a challenge to existing mental health workforce practices. Gillard and his colleagues further explored the implementation issues related to PSWs in 10 mental health services and developed a change model to demonstrate the special mechanism of how PSWs work to elicit positive changes in service users (Gillard et al., 2014, 2015). However, to date, no study has focused on the changes in the experiences of PSWs, co-workers and service users throughout the process of implementing the peer support services, from pre-service training to work placement and paid employment. Furthermore, peer support services are a relatively new phenomenon in mental health services in many non-Western locations, such as Hong Kong, Taiwan, and Singapore. It is uncertain how peer-based health intervention is viewed in Chinese culture and how PSWs are perceived in the existing mental health system. The present paper aims to identify the changes in the perceptions (concerning peer support services and their key ingredients) of PSWs among themselves, their co-workers (supervisors, mentors of the PSWs, and non-peer professional staff members), and service users at different community-based mental healthcare centers in Hong Kong over a 12-month period.

2. Methods

The strength of this research approach lies in its longitudinal design, which makes "change" a fundamental focus of the analysis. The longitudinal nature of this study refers to the same five PSW trainees who were interviewed repeatedly; 26 times in total over 12 months (Fig. 1). Similarly, some same-service users and co-worker participants were interviewed again at different times, to identify changes in their views about peer services. The rationale for choosing this approach was to develop a holistic understanding of the ways in which different factors combine to influence the development of the perceptions and behaviors of the individuals concerned (Thomson et al., 2003). Compared to single "snapshot" data collection methods, the use of serial qualitative interviews allows researchers to better explore participants' evolving, complex experiences throughout a research period (Calman et al., 2013; Murray et al., 2009). The study was conducted under the auspices of the Peer Support Workers Project (hereafter "the Mindset project") and was jointly implemented by four non-governmental organizations. The project has three components: (1) a pre-service training program on the provision of peer support services and interpersonal skills, delivered in 16 three-hour sessions (T_1); (2)

52 h of work placement (T_2); and (3) paid employment (T_3) (Fig. 1).

2.1. Participants

The participants in this research study were PSWs, service users, and co-workers of the PSWs (Table 1). They all met the four basic selection criteria: (1) 18 years old or older; (2) provided or received peer services from one of the four partnered non-governmental organizations; (3) willing to give written consent to participate in the study; and (4) were interested in reflecting on their experiences of providing or receiving peer services or working with PSWs.

First, the five PSW trainees – four women (80%) and one man – were purposefully invited by the researchers (ST and IL) to participate in the study, as they broadly represented the 20 trainees in the program in terms of their genders, ages, and the four partnered organizations. There were four women (80%) among the five PSW participants (the class had 14 women [70%] and 6 men). The five PSW participants had a mean age of 43 years (the mean age of the class was about 44 years). All participants completed the training course and were employed either part-time (n = 3) or full-time (n = 2) in the non-governmental organizations. Besides the five participants, one PSW trainee refused our invitation to participate in the study. The reason for this refusal was that he did not intend to work as a PSW; he had enrolled in the course for his own personal development.

Throughout the work placement and employment period of the present study, all of the PSW participants had fairly common roles that involved talking with service users individually (in person or using phone contacts), participating in or (co-)leading recovery-oriented activities (e.g., wellness management, life skills and hobbies groups), sharing their recovery journeys at mental health services or in the community (e.g., in schools or by receiving media interviews), accompanying service users to psychiatric appointments and supporting professionals in regard to conducting home visits to outreach clients with suspected mental health issues or chronic illnesses.

Second, service users of peer support services were recruited from Hong Kong's Integrated Community Center for Mental Wellness and halfway houses. PSWs and case workers were asked to identify eligible service users who met the above inclusion criteria, particularly potential participants who had received group or individual peer support services at one of the four non-governmental organizations; we did not stipulate the duration of the individual contact, but they often lasted for more than 15 min. A total of 15 service users – 12 women and three men – participated in the study during the PSWs' placement and employment period. Their mean age was 47.3 years.

Third, 14 co-workers (supervisors, mentors of the PSWs, and non-peer professional staff) – 12 women and two men – who worked with the five PSWs on daily basis were invited to participate in this study. These supervisors and mentors were from the same peer support workers' agency; in some cases, the same person was both a PSW's supervisor and mentor (Table 1).

2.2. Procedure

Approval for the study was obtained from the Joint Chinese University of Hong Kong New Territories East Cluster Clinical Research Ethics Committee (CRE-2012.509). Fig. 1 outlines the data collection process and the number of interviews completed in T_1, T_2, and T_3 over the entire 12-month period of the study. All of the participants were interviewed once and some individuals were interviewed twice or more at various time points (for details, see Fig. 1). Fictitious names are used for the five PSWs who were the core participants in the present study.

The interviews were semi-structured, with open-ended questions, and lasted about 40 min on average. The respective interview guidelines for the three groups of participants were developed by ST and SL and were approved by the project research committee. Two members of