



The Charter of **PEER SUPPORT**

Developed by men and women and their family members who have lived through a range of mental health issues.

Any one of us could be affected by an unexpected life event or illness where peer support will be vital to our **recovery** and well being.

The Charter of Peer Support has been developed to ensure that peer support services are available to consumers and carers when and where we need it.

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For further information or to download this publication, please go to www.peersupportvic.org

Foreword

Dr Rhonda Galbally AO



This Charter of Peer Support is ground breaking. It is the first time that I have seen the value of peer support clearly articulated and documented in this way to advocate strongly for the inclusion of peer support in service provision by government and not-for-profit providers in the mental health field. The grass roots Peer Support model has been underutilised and undervalued in the past yet it has played an important role in the support of individuals who have been impacted by events, incidents or issues that have disrupted their lives and wellbeing.

This Charter reflects the significance that consumers and carers place on Peer Support, the empowering nature of this support and the inspiration they receive to move forward in their own recovery. It also reflects that the encouragement, personal strength, healing and confidence gained by being part of a peer support service reduces isolation and builds resilience.

This is a well informed document written by service users and carers. It is built on the experience of the authors who have participated in one of the seven specialist statewide peer support organisations, ARAFEMI, ADEC (Action on Disability within Ethnic Communities), Anxiety Recovery Centre Victoria, Eating Disorders Association of Victoria, GROW, PANDA and The Compassionate Friends. These peer support organisations collectively have over 220 year's experience of providing core, grass roots peer support services.

This Charter and the accompanying documents build a solid framework for service providers who wish to adopt the Charter of Peer Support and provide peer support activities. It maps out appropriate culture, management, development and resources needed to effectively run Peer Support Services. Importantly, it promotes the importance of providers undertaking a commitment to understand and respect the "lived experience journey" and the engagement of service user and carers in the delivery and management of services.

The Charter is an honest document that supports people to embrace their vulnerabilities and the reality of their circumstance; at the same time it embodies the ethos that "I" as an individual have great ability to accept and empower 'self' and move towards recovery and wellness through the sharing of collective wisdom. The Lived Stories form an essential part of the Charter and reaffirm the need for peer support. The stories are touching, honest and give a glimpse into the complexity and challenges of each individual's life. It is in the sharing of our wisdom and lived experience we continue to demonstrate that through adversity there is hope. That as we accept our vulnerabilities, our disabilities and our life circumstance we can discover and uncover our resilience and path forward.

There is an urgent need in our community to embrace, understand and cement the position of Peer Support in the continuum of care in the mental health system. The Charter asks our governments, both State and Federal, and provider organisations for commitment to the Peer Support Model as an intrinsic support to mental health and well being as it provides affordable and accessible assistance that is not available in any other way. It also advocates that these services be fully funded and resourced and I wholeheartedly agree. I commend this charter and encourage governments, services providers and the general community to embrace its important message.

IMPORTANT:

This Charter has been developed and written by and for Consumers and Carers with the assistance and resources provided by the seven statewide specialist Peer Support (MSSH) organisations listed on page 7 of this document.

This document reflects the importance that the writers place on Peer Support and the value that this service provides in the continuum of care of consumers and carers experiencing mental health issues at any time in their life.

The Opening Door

When I reveal my weaknesses
Please handle them with care;
Can you accept them with respect
And show me you're still there?

For I am lonely deep inside
Unsure of who I am;
Unable to face normal things,
Just doing what I can.

How can I expose my soul?
Tell what I feel inside?
It often creates ridicule,
That's why I've learnt to hide.

Remind me of the little things
That I am valued for,
And gently, please accompany me
Towards the opening door.

Marnie, 1994
Anxiety Recovery Centre

Definitions:

Mental Health Issues:

For uniformity throughout the document “mental health issues” has been used. We are using this term to cover the wide spectrum of mental health from chronic and clinically diagnosed illnesses, to traumatic and/or unexpected life events that impact on wellbeing.

Recovery

“Recovery is a process, a way of life, an attitude, and a way of approaching the day’s challenges. It is not a perfectly linear process. At times our course is erratic and we falter, slide back, regroup and start again ... The need is to meet the challenge of the disability and to re-establish a new and valued sense of integrity and purpose within and beyond the limits of the disability; the aspiration is to live, work, and love in a community in which one makes a significant contribution.” (Deegan, 1988, p. 15)

Charter Statements



Peer support should be accessible to all who need it.

Every person living with or experiencing a mental health issue has the right to access avenues to share their lived experience in a **confidential, safe** environment, where they are heard, respected, honoured and understood.

Peer support provides each person with:

- 1 Opportunities to benefit from collective wisdom, providing:**
 - access to accumulated knowledge, from multiple perspectives.
 - new insights, widening the basis of understanding of their mental health issue, and building meaning in their life.
 - an unmatched source of support and inspiration and empowerment, reducing the burden of living with a mental health issue.
 - self-respect, knowing that their collective wisdom is valued.
- 2 Opportunities to understand and destigmatise mental health issues, enabling them to:**
 - have the freedom to be themselves without fear of rejection, ridicule or humiliation.
 - gain an understanding that their lived experience is accepted and valued
- 3 A renewed sense of self-respect, understanding and belonging through being part of a circle of a caring community, providing:**
 - knowledge that they are NOT isolated.
 - strength gained from realising that they are an important part of both a group and the community.
 - opportunities to make authentic connections that increase well-being socially, mentally, physically and spiritually.
 - means to alleviate stress and improve well-being for carers.
- 4 Opportunities for people to re-discover and activate their own personal, hidden resources, enabling them to:**
 - share their life challenges with those who understand.
 - grow in confidence and be encouraged to share and explore their issues in increasing breadth and depth.
 - believe that they can and do have control over their own life, well-being and happiness
 - take on responsibility for their own journey towards recovery and health.
 - gain and share knowledge of skills, treatment pathways and tools that have proven useful.
 - be strengthened, and take that strength out into the community.

5 Opportunities to receive hope, inspiration and empowerment for recovery, providing:

- proof that recovery is possible, gained from hearing the recovery stories of others.
- encouragement from others.
- an understanding that recovery and health is a lifelong journey.

6 Opportunities to give help to others, as equal-to-equal, through:

- sharing their own story.
- encouraging listening, as well as being listened to.
- offering support to others from their lived experience.
- experiencing the personal strength and healing which comes from helping others and making a contribution to the greater good of the community.

7 A unique pathway to help which is:

- non-threatening.
- affordable to all (low cost approach).
- either complementary to existing clinical services or stand-alone.
- open to freedom of participation, when and where required, without waiting lists or limitations on number of visits.

The Charter of Peer Support calls upon those responsible for policy and practice to:

- Educate and inform the community with programs that:
 - Raise awareness of the importance and value of shared lived experience and peer support as part of the continuum of care for those experiencing mental health issues
 - Educate and train healthcare practitioners and government at all levels in the recognition of the benefits of peer support and its unique place in mental health services
- Provide people experiencing mental health issues with access to fully funded specialist peer support services.
- Fund research into the effectiveness and best practice models of peer support.

Charter of Peer Support



Core value

The core value underpinning the Charter of Peer Support:

Peer support is intrinsic to mental health and total wellbeing.

Why? Because it provides an unmatched, unlimited pathway to help, in a safe environment, where people's shared lived experiences are heard, respected, honoured and understood.

Purpose of this Charter:

Peer Support Organisations have been supporting Victorian families living with a wide range of mental health issues for many years. It is timely for the role of peer support services provided by these organisations to be properly recognised within the wider mental health sector.

This Charter will:

- help key stakeholders to understand and appreciate the value and power of peer support as a means of preventing the escalation of mental health issues and promoting emotional, physical and spiritual well being.
- highlight the validity and value of peer support as an integral method of service delivery for Consumers and Carers of mental health services.
- promote peer support services as a cost effective part of the mental health system.
- promote Consumer and Carer involvement, participation and empowerment.

What is Peer Support?

Peer support services follow the belief that individuals who have lived experience of life issues such as mental health, and/or a life-changing event, an addiction or problem behaviour, can better relate to other individuals trying to deal with similar issues, than those who have not had that experience.

By listening empathetically, sharing their experiences and offering suggestions based on that experience, people with a lived experience of a mental health issue are uniquely able to help others like themselves.

Sharing lived experiences provides multiple perspectives of the experience, thereby broadening understanding. The accumulated knowledge drawn from the lifelong learning journeys of many people becomes an invaluable source of insights and an unmatched source of support and inspiration for people dealing with chronic and recurring problems.

The peer support approach promotes a wellness model. Assisting a person to find and develop their own personal resources empowers the individual with the belief that they can and do have control over their life. For people with mental health issues, being ready and willing to take on responsibility for their own journey towards health and well-being is a fundamental part of recovery. For carers, knowing that they have resources and skills to be able to support a person on that recovery journey can alleviate stress and improve their own health and wellbeing, as well as that of the person they are supporting.

For people with chronic mental health issues, clinical health services and formal treatment services, while essential, can present many challenges, not the least of which includes cost, timeliness and accessibility. Peer support offers an additional approach which can be either complementary to clinical services or, in some cases (depending on the severity of the illness), stand-alone. Peer support provides a low-cost approach to the provision of support and assistance which allows for freedom of participation, when and where required, without waiting lists or limitations on number of visits.

Charter History



The Mutual Support Self Help Network (MSSH) provides a forum for the statewide specialist MSSH agencies to work together to advocate for the value of the agencies involved as well as the role of peer support within the wider mental health sector. The Charter is an outcome of this collaboration at a time when governments and the community are grappling with the demands of families living with mental health issues.

The Charter provides a voice for peer support to help inform planning for mental health services to ensure a greater inclusion of peer support services in policy, funding decisions and partnerships as important complementary services.

The Charter was developed by the following members of the MSSH agencies:



Evidence Base



A literature review undertaken by Canadian researchers (Leung et al 2002) revealed that although past research findings are limited due to the lack of rigor in their methodologies, significant gains have been described by participants of groups offering peer support in areas of:

- self-esteem
- better decision-making skills
- improved social functioning
- decreased psychiatric symptoms (i.e. decreased rates or lengths of hospitalization)
- lower rates of isolation, larger social networks, increased support seeking
- greater pursuit of educational goals and employment

(Davidson et al, 1999; Humphreys & Rappaport, 1994; Froland et al, 2000).

Despite the potential gains of peer support, only a minority of consumers with severe mental health issues, that is, up to one third of individuals, participate in activities offering mutual support. A significant contributor to this phenomenon includes a lack of funding for peer support services and the challenges this presents. Also it was found by Goldman and Lefley that the attitudes of mental health professionals toward mutual support services prevent the access of their clients to peer support services. Many are reluctant to refer their clients and even perceive them as potentially detrimental to their overall functioning (Goldman & Lefley, 1991). Davidson (1999) stated that partnerships struck between professional and peer support services are necessary for the peer support role to have a substantial effect on the majority of mental health consumers.

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Life experiences



Emma

My story starts in 2006, when after I had suffered my third severe dose of pneumonia. After being bed ridden for 4 weeks, and having finished antibiotics, I still could not breathe properly and was then told I had asthma brought on by the pneumonia. After I had got on top of the asthma, I still felt chest pain all of the time and I had convinced myself that “my boys don’t have any nice photos of me” and that I was dying, probably of lung cancer! Rational? No.

I had no sense of hope and I burst into tears at the doctor’s who diagnosed anxiety/depression and put me on some medication to help me until I returned to Melbourne where he advised I sought professional help.

The first week after I had started medication I found I was a) sleeping soundly and b) not thinking about dying all the time.

I met a lovely lady on my holidays who told me about GROW. It had helped her overcome her depression. The first thing I did on my return to Melbourne was to find out where my closest GROW group was. GROW gave me hope and the skills to learn to “go by what I know, not by how I feel”.. GROW offered me some much needed “adult” time, and I discovered that anxiety was not the reason I should keep going to Grow. My group encouraged me to seek professional help to find out why my son was so different (I had been told by his kindergarten that he probably had Aspergers). I discovered that my son had ADHD and my group has been able to help me work through coping with his very challenging behaviours. My relationships with other people have improved since I joined GROW as I learnt not to take comments too personally. Now I do not get bothered by my parents’ criticism of how we parent our sons. They in turn have realised that it wasn’t bad parenting that makes my son different to his brother.

I think GROW works for me because I am only given one task to do in a week, which I report back to the group on. Over time I have found there are numerous strategies that help me keep my temper, to stay reasonable more often and to not become an emotional reaction to my son.

Trevor

I lost my youngest daughter to suicide in 2005. Since that time I seem to have become enmeshed in a journey that seeks understanding and healing, not only for me but with and for others who have suffered loss. As a professional in the area (I am a psychologist) I have encountered some wonderful support and guidance, most of which has come from ‘fellow travellers’ who share and understand my lived experience. My own coping has much more to do with this type of support than any other form of help, including professional intervention. I believe it to be extremely important to recognise the value of peer support; the healing power inherent in peer support connections and the crucial protective role that ongoing peer support networks provide.

Rachel

I am the mother of 3 children, now 11, 9 and 7 years. I was diagnosed with Post Natal Depression (PND) when my first child was 6 months old, although I suspect I was suffering from it well before that.

I was the first of my friends to start a family, I was suffering a mental illness and I had never felt so isolated before.

I went on to have my second child, suffered from PND with her as well and was hospitalised for a short time. My third child was a breeze as I made a choice to take medication during pregnancy as I already had two small children to care for.

As well as experiencing a mental illness myself, I have been on the other side, caring for my husband who 6 years ago was diagnosed with Depression and Post Traumatic Stress Disorder (PTSD), which culminated last year in him being hit by a car as a result of drinking to self medicate.

The overwhelming conclusion that I can draw from my experience is the need for peer support. Peer support can come in many forms. For me, it was a support group at the hospital, and mothers' group. My husband, who has struggled with the idea of therapy, let alone a support group, I can see would benefit greatly from it as I did. It is an avenue to bond with others who have shared the same or similar experience. It simply made me feel that I was not alone.

Kerry

Living through my personal battle with anorexia and bulimia nervosa for 12 years (my entire adolescence and early adulthood) was a very lonely, isolated place. In the beginning I had anorexia. Medical practitioners were ordering me to eat, poking, prodding and threatening me into health. My parents cried, pleaded and yelled for me to "just eat" and stop making everybody else's lives so hard.

I felt like no one understood, no one was holding my hand while I went through this illness, and I was totally alone in my terrifying fight. This method of treatment became bulimia. I was now eating, which got everyone off my back, but my thoughts remained the same and the eating disorder raged on in secret. Had I known of peer support, I would have reached out. To feel heard, validated and guided by someone who really "got it", I strongly believe, would have decreased the length of my disorder, built on the self worth I desperately lacked, and given me the hope, strength and direction I needed to move forward. Peer Support is about people helping people, not about a diagnosis or a checklist that needs to be completed to confirm an illness or a state of mind. It is invaluable.

Life experiences



Nerida

I have been involved as both a volunteer and an employee in the not-for-profit sector for more than 8 years, including facilitating peer support groups for people with mental health problems and their family and friends. I am currently working towards the completion of a doctorate in clinical psychology and have had experience in both public and private mental health services.

It is in my personal life too that I have come to understand the nature of mental health problems and the needs of consumers. I experienced an eating disorder at age 14, and, growing up in regional Victoria, there was little awareness and support available. Nevertheless, I endured through these problems but later went on to experience anxiety and depression in early adulthood.

Having experienced the painful and profound loss of my dear friend, following his suicide at age 24, I know all too well the value of providing true support to people who need it, when they need it. My sister, who was diagnosed with Bipolar Disorder, makes a strong case for the role that her peer support group has played in her 'treatment', over and above the medication and psychological help she has received.

Regardless of whether a medical or non-medical model perspective is taken, I am highly convinced of the significant role of peer support groups and other mutual support services in providing a comprehensive and flexible service to our communities. It is through this connectedness and interrelatedness that such opportunities foster, and that recovery and healthy development can take place. We need real choices and timely support across various stages of illness and various stages of life. In my opinion, money would be better spent fully funding a broader range of mental health care options, giving more weight and credence to peer support models than is currently the case.

Julie

When I came to GROW I was mentally feeling rather low. I had a lump in my thyroid gland and, as previously I had suffered from a primary cancer it was a real blow. This was compounded by the fact some of my sons had only been back in Australia for a year. I had lost them to a Middle-Eastern country for 7.5 years. Their father was insisting he wanted to send them back to his country for a 'holiday' at the same time my surgery was booked.

In time I learnt I could trust my GROW group with the "Secrets of My Heart", and so share some of my story.

By heeding advice of like-minded friends I was able, with the help of the F.L.C., to have my boys' names listed at the airport so they could not be removed from the "Commonwealth of Australia" without the permission of their mother.

So I went into hospital secure in the knowledge they could not be abducted again.

There is so much more to my story but, for the sake of brevity, I will leave it there.

Suffice to say, GROW gave me the courage and the tools to act. I am forever grateful to the wonderful caring and sharing community that epitomises GROW.

Melissa

I only learned about Obsessive Compulsive Disorder (OCD) after my parents died. Until then, I was aware that I was someone who needed to put a lot more effort in to life than others to achieve average results, and average results were not enough to satisfy me.

My first OCD memory was as a young school girl around age seven. At the time my parents gave me two shillings a week pocket money which I saved diligently. I vividly remember one particular day as we passed the local haberdashery shop, being mesmerised by the window display. There was one suspender, several corset bones and a few other things I never would have used, but for me the random assortment in the display seemed like the ultimate sewing kit. Later that day I returned to the shop with my savings and bought the entire window display. Although unaware at the time, my hoarding habit was getting underway.

My OCD proved quite a burden throughout my school years significantly subsiding when I fell in love and married. Unfortunately, the responsibilities of being a wife and mother soon caught up with me and my idiosyncrasies began to return.

I coped with the challenges of daily life as best I could until one day when I noticed our teenager following the same bathing rituals to those I had been bothered by as a child and realised I was not alone. Desperate to save my child from the kind of life I was living I began my search for answers. My search however, was largely unsuccessful as few people had heard of OCD.

Shortly after, while reading the local newspaper, I found details of an OCD support group. With great concern as to how I was going to feel, one night I quietly crept in the door to that group. However, it soon became apparent that I was in the company of kind, caring people who would accept me if I cried and encourage me to laugh at the dilemmas OCD had sometimes put in my way.

Being part of a social support group and the ARCVic community has provided richness to my life I never thought possible. A family, outside my own, who nurture, challenge, care and laugh with me and understand my OCD. I've now been an ARCVic member for 18 years.

Jacinta

Ten years ago I had reached a stage in my life where I was happy; having had two beautiful daughters followed by my doting little boy, Justin. My life was complete. Suddenly all that changed. Justin, who was 3 years old, drowned in a backyard pool. That same day I drowned with him!

I drowned in my own horrific myriad of emotions; shock, disbelief, denial, self hatred, desperation, depression, isolation and even thoughts of suicide.

They call this GRIEF!!!! That person (pre tragedy) was never to be the same again. Instead, a changed person emerged. Through the guidance and support of peers who had experienced the death of their child before me, I received the lifeline I needed to say "YES" to life again. They showed me how other parents who had suffered the pain of grief were now living meaningful lives, so I could too. I could never have received this buoyancy any other way. The Compassionate Friends gave me strength, hope, inspiration and encouragement. Without this I would not be here today.

Implications

for Federal and State Government and funded Service Providers of Mental Health

Preamble

The Charter of Peer Support has been proudly developed in consultation with Victorian membership MSSH Agencies, including Staff, Board Members and more importantly the people whom we serve, people who have and are living with a mental health care issue. This document is intended for Federal and State Government funders of Mental Health Services in Victoria to seriously consider the benefits and value of the Peer Support Model as a valid and unique method of service delivery in the mental health sector.

This Charter will:

- ✓ help key stakeholders to understand and appreciate the value and power of peer support as a means of preventing the escalation of mental health issues and promoting emotional, physical and spiritual well-being.
- ✓ highlight the validity and value of peer support as an integral method of service delivery for consumers and carers of mental health services.
- ✓ promote peer support services as a cost effective part of the mental health system.
- ✓ Promote Consumer and Carer involvement, participation and empowerment.

What this means for Federal and State Government and funded Service Providers of Mental Health

Federal and State Governments Department of Health, our primary funding sources of Mental Health Services in Victoria need to consider and broaden their scope of mental health services and Service Providers.

For many living with a mental illness, clinical health services and formal treatment services, while essential, are not the only means of seeking help. The Peer Support Model is intrinsic to mental health and total well-being because it provides affordable and accessible assistance that is not available in any other way.

They will need to consider two elements: their own practice, and the practices of the mental health service providers which they select to deliver services.

1. Federal and State Government and funded Service Providers of Mental Health own practice

1.1 Develop a “sensitive support service culture” which works towards

- Promoting peer support as a valued service type in its own right and means of preventing the escalation of mental health issues and promoting help seeking behaviours and well-being
- Understanding the value of the “lived experience” individuals living and experiencing mental illness, helping others that have lived and are living through similar situations / events etc
- Providing other alternative service delivery models to seeking help other than a clinical or medical model
- Demonstrating the cost-effectiveness of peer support to the mental health system

2. Mental Health Service Provider organisations

Federal and State Government and funded Service Providers of Mental Health should encourage mental health provider organisations to consider the Peer Support Charter as an alternative and viable service delivery model for people living with a mental illness if they have not already done so.

2.1 Federal and State Government and funded Service Providers of Mental Health should aim to provide services which embrace and endorse the following principles.

- **Have a strong, positive value base:**
 - ✓ Understand and respect “ the lived experience” journey
 - ✓ Demonstrate commitment to the principles of the peer support model
 - ✓ Value the input and contributions of service users and carer involvement with their service culture
 - ✓ Understand the recovery process and the need for hope and inspiration
 - ✓ Foster social inclusion, mental health promotion and partnership
 - ✓ Include the principles of Peer Support in their policies and literature
- **Strong service user and carer involvement in the delivery and management of services**
 - ✓ Provide policy and procedures, inclusive work practices that supports service users and carers in the delivery of service planning, design and training
 - ✓ Positive and transparent attitude to mental health and promotion of peer support activities
 - ✓ Support proactive volunteering and representation of service users and carers within the service and service provider networks
 - ✓ Able to provide adequate training and ongoing support
- **Positive and empathic workforce base**
 - ✓ Committed to providing high quality healthy service, one of which does not discriminate or judge but rather one which is inclusive and sensitive to the needs of their service users
 - ✓ Provide training and ongoing support to enable staff / employees to respond adequately and to the needs of our services users and to ensure we deliver high quality programs
- **Provide a supportive policy and procedure framework**
 - ✓ Create a workplace environment which encourages, supports and welcomes a team comprised of professionals, staff, students, volunteers and service users and carer involvement
 - ✓ Provide high quality program and service outcomes that embrace the Peer Support model
 - ✓ Adopt key principles and standards that underpin quality peer support
 - ✓ Provide updated, correct information in various forms about the service including the rights and responsibilities of services users, volunteers, staff etc.
 - ✓ Ensure all staff abide by and demonstrate a sound understanding of best work practices

Implications

for Organisations

Preamble

The Charter of Peer Support has been proudly developed in consultation with Victorian membership MSSH Agencies, including Staff, Board Members and more importantly the people whom we serve, people who have and are living with a mental health care issue. This document is intended for Mental Health Services in Victoria to consider the benefits and value of the Peer Support Model as a valid and unique method of service delivery in the mental health sector.

This Charter will:

- ✓ help key stakeholders to understand and appreciate the value and power of peer support as a means of preventing the escalation of mental health issues and promoting emotional, physical and spiritual well-being.
- ✓ highlight the validity and value of peer support as an integral method of service delivery for consumers and carers of mental health services.
- ✓ promote peer support services as a cost effective part of the mental health system.
- ✓ Promote Consumer and Carer involvement, participation and empowerment.

For many living with a mental illness, clinical health services and formal treatment services, while essential, are not the only means of seeking help. The Peer Support Model is intrinsic to mental health and total well-being because it provides affordable and accessible assistance that is not available in any other way.

Providers of Mental Health Services who wish to adopt the Charter of Peer Support and provide peer support activities are asked to consider the following:

- **Organisational Culture**
- **Organisational Management**
- **Organisational Development**
- **Resources**

Organisational Culture

1. Develop a service culture which works towards and endorses

- 1) Promoting peer support as a valued service type in its own right and means of preventing the escalation of mental health issues and promoting help seeking behaviours and well-being
- 2) Understanding the value of the “lived experience” individuals living and experiencing mental illness, helping others that have lived and living through similar situations / events etc
- 3) Valuing the input and contributions of service users and carer involvement with their service culture
- 4) A positive and transparent attitude to mental health and promotion peer support activities
- 5) Supporting proactive volunteering and representation of service users and carers within the service and service provider networks

Organisational Management

- 1) Commitment to continuous improvement including an organisational policy and procedure framework that reflects the organisations' commitment to peer support activities and inclusive service culture.
- 2) Ensure mental health service users and carer involvement in policy development, service design, training, evaluation and recruitment

Resources

- 1) Identify appropriate costs to support the peer support activities (this includes volunteer training / volunteer reimbursements / appropriate support and supervision)
- 2) Ensure that all peer support activities are in a safe and healthy environment
- 3) Ensure all service users, carers, volunteers and staff are adequately supported and equipped to carry out their valued work
- 4) Provide ongoing training and support

Organisational development

(Service delivery and design / management / policy framework etc)

- 1) **Provide high quality programs and services that embrace the Peer Support model.** This includes adopting the key principles and standards set by the Victorian Centre of Excellence for Peer Support/Provide updated, correct information in various forms about the service including the rights and responsibilities of services users, volunteers, staff etc. / Ensure all staff abide by and demonstrate a sound understanding of best work practices
- 2) Provide policy and procedures, inclusive work practices that support service users and carers in the delivery of service, design and training
- 3) Positive and transparent attitude to mental health and promotion peer support activities
- 4) Able to provide adequate training and ongoing support
- 5) Committed to providing high quality healthy service, one which does not discriminate or judge
- 6) Providing training and ongoing support to enable staff / employees to respond adequately and to the needs of our services users and to ensure we deliver high quality programs.
- 7) Provide a supportive policy and procedure framework
- 8) Create a workplace environment which encourages, supports and welcomes a team comprised of professionals, staff, students, volunteers and service users and carer involvement

Endorsing the Charter of Peer Support

Peer support provides each person with:

- 1. Opportunities to benefit from collective wisdom, providing:**
 - access to accumulated knowledge, from multiple perspectives.
 - new insights, widening the basis of understanding of their mental health issue, and building meaning in their life.
 - an unmatched source of support and inspiration and empowerment, reducing the burden of living with a mental health issue.
 - self-respect, knowing that their collective wisdom is valued.
- 2. Opportunities to understand and destigmatise mental health issues, enabling them to:**
 - have the freedom to be themselves without fear of rejection, ridicule or humiliation.
 - gain an understanding that their lived experience is accepted and valued
- 3. A renewed sense of self-respect, understanding and belonging through being part of a circle of a caring community, providing:**
 - knowledge that they are NOT isolated.
 - strength gained from realising that they are an important part of both a group and the community.
 - opportunities to make authentic connections that increase well-being socially, mentally, physically and spiritually.
 - means to alleviate stress and improve well-being for carers.
- 4. Opportunities for people to re-discover and activate their own personal, hidden resources, enabling them to:**
 - share their life challenges with those who understand.
 - grow in confidence and be encouraged to share and explore their issues in increasing breadth and depth.
 - believe that they can and do have control over their own life, well-being and happiness
 - take on responsibility for their own journey towards recovery and health.
 - gain and share knowledge of skills, treatment pathways and tools that have proven useful.
 - be strengthened, and take that strength out into the community.
- 5. Opportunities to receive hope, inspiration and empowerment for recovery, providing:**
 - proof that recovery is possible, gained from hearing the recovery stories of others.
 - encouragement from others.
 - an understanding that recovery and health is a lifelong journey.
- 6. Opportunities to give help to others, as equal-to-equal, through:**
 - sharing their own story.
 - encouraging listening, as well as being listened to.
 - offering support to others from their lived experience.
 - experiencing the personal strength and healing which comes from helping others and making a contribution to the greater good of the community.
- 7. A unique pathway to help which is:**
 - non-threatening.
 - affordable to all (low cost approach).
 - either complementary to existing clinical services or stand-alone.
 - open to freedom of participation, when and where required, without waiting lists or limitations on number of visits.
 - We endorse the principles of the Charter and will work towards shaping our support and services to match its aims and values.

This Charter was developed with the resources and assistance of the following project partners:



It is also endorsed by:



A not for profit community organisation dedicated to well being and harm prevention in young people.



recovery empowerment development
PEER SUPPORT



International:



Please note that an endorsement of the Charter does not constitute an endorsement of the services by the project partners.

If your organisation would like to endorse this Charter and add your logo, please contact www.peersupportvic.org



For further information you can visit the Charter's website, www.peersupportvic.org or call 1300 237 199.



For further information, please go to the following websites:

- www.adec.org.au
- www.arcvic.org.au
- www.compassionatefriendsvictoria.org.au
- www.eatingdisorders.org.au
- www.grow.org.au
- www.mindaustralia.org.au
- www.panda.org.au