



FACT SHEET

FOR YOUNG PEOPLE, CLINICIANS, PEER WORKERS, AND SERVICE SUPPORT

YOUTH PEER SUPPORT AND YOUTH MENTAL HEALTH

This fact sheet provides a basic introduction to peer support in youth mental health. It is for young people, peer workers, clinicians and service leaders. It can be used to help new peer workers understand the role, and to help young people know what to expect from engaging with a peer support program during their recovery.

"Some of us brave the wildest storm and come back to walk alongside the ones who face it next."

PEER WORKER

WHAT IS PEER SUPPORT?

In youth mental health, peer support is a mutual relationship that involves someone with lived experience of mental health and other life challenges (peer workers) supporting and advocating for someone who is experiencing these challenges. These challenges can be because of mental health symptoms, or because of difficulties in work, school, relationships or any other part of life that interacts with a person's mental health. Peer workers listen and offer support in a respectful, non-critical and non-judgemental way. They support a young person through their recovery journey in a way that promotes individual strengths, empowerment, independence and hope.¹⁻⁴ Peer support can be face to face, over the phone or online.



Peer support in youth mental health: what it is, what it isn't and what it looks like in practice.

PEER SUPPORT IS:

- support;
- two-way conversation;
- draws upon relatable experiences (e.g. employment, educational, social, symptom challenges);
- focussed on individual strengths, hope and recovery (not treating symptoms);
- · builds life skills;
- an opportunity to engage and connect with a peer with similar experiences; and
- self-disclosure of either party is voluntary and case-specific.

PEER SUPPORT ISN'T:

- · therapy;
- case management;
- friendship or a relationship outside the boundaries of the peer support role;
- · assessment; or
- risk management.

HOW THIS CAN LOOK:

- · clear boundaries;
- complementary to therapy;
- confidential;
- can be informal or structured conversations;
- face to face, via phone or online;
- information;
- · modelling growth; and
- empowering and inspiring one another.

Sometimes it will be that we play Uno. Whether we discuss the school issues or mental health or whatever... it doesn't always happen. It may be mentioned once or twice, but usually it's just about forming that connection... Through our lived experiences, we realise that connecting is the most important thing to growth or to recovery."

PEER WORKER

HOW CAN PEER SUPPORT HELP?

Sometimes the experiences emerging from mental health and life challenges can make it difficult for young people to cope and do the things they would usually enjoy doing. During this time, young people might be learning to deal with new systems and processes in their mental health journey, and might have some anxiety about their future. They may be nervous about not knowing how long recovery will take, what it will look like or how to get there. Peer workers have lived and living experience across a variety of challenges, including mental health; so they can offer young people credible support and guidance, and are a living example of healing and positive growth.5 They can also seem more approachable to young people than some other healthcare professionals.2

There is not a lot of high-quality evidence for peer support in youth mental health yet, but the small amount available says that it might help improve:²

- · mental health;
- life skills;
- relationships and social skills;
- confidence and empowerment;
- hopefulness;
- school progress and grades;
- drug and alcohol use;
- · behaviour problems; and
- employment.

There are also reports from the community and experts that peer support may be especially helpful to young people from diverse cultural backgrounds and underrepresented communities, such as Aboriginal and Torres Strait Islander, culturally and linguistically diverse and LGBTI young people. Again, this may be due to the importance of sharing the recovery journey with someone who has been through and understands these unique experiences.

"We try and highlight a young person's strengths during our time with them. We want them to look through our lens and see what we see: their fullest potential."

TOP TIPS FOR YOUNG PEOPLE

Below is a list of top tips from our Orygen peer support team to help you decide how to get the most out of peer support:

SET BOUNDARIES TOGETHER.

It is important that peer workers and the young people they work with decide on their boundaries together: What is okay to discuss? What might make either or both parties feel uncomfortable? A peer worker is not a psychologist or doctor, so they might not be comfortable talking about everything. It's important

to be understanding and open to this. It's also important for both people to be aware that although peer support is a mutual relationship, it needs to stay a professional one. Just like other staff members of a youth mental health service, peer workers do not become friends or have relationships (e.g. connecting on social media, socialising in person) with young people who access the service.



PEER WORKERS ARE EXAMPLES OF GROWTH; THEY ARE NOT PERFECT.

It's important for peer workers and the young people they work with to remember that a peer worker is a lived example of positive growth through life challenges. This does not mean that they are perfect or that they don't still have their bad days. Equally, peer workers shouldn't feel the pressure to be 'recovered' when they may still experience ongoing mental health challenges.



PEER WORKERS ARE NOT CLINICIANS.

A peer worker's job is to support other young people using the lessons they have learned from their personal experiences and training. They walk alongside other young people through their journey. They can offer information, resources, advice and support, but they are not psychologists or doctors. A peer support connection is a very genuine connection of its own type – it is different from a clinical relationship in scope and responsibilities.



EXPECT A TWO-WAY CONVERSATION.

The mutual nature of peer support is what makes it so special and helpful for young people.

Young people accessing peer support should be prepared to talk to someone who has had and might share the same experiences as them.



PEER SUPPORT IS FLEXIBLE.

Some peer support is face to face. However, it can also be over the phone or online. It can be across many different times, locations and contexts,

depending on the peer support relationship. Depending on the role, there may be scope for a peer worker and the peer to collaboratively design a peer relationship that will work for them both.



FURTHER INFORMATION

· Orygen peer support team

RELATED RESOURCES

- Clinical practice point, "How to peer." Introduction to youth peer work in mental health services
- Evidence summary, What is the evidence for peer support in youth mental health?
- Fact sheet, Family peer support and youth mental health
- Fact sheet, Vocational peer support and youth mental health
- Implementation checklist, Youth peer support
- Implementation toolkit, Youth peer support
- · Toolkit, Youth peer work toolkit
- Training module, Youth mental health peer support 101
- Video, Thoughts of a family peer worker
- Video, Thoughts of a youth peer worker

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- 2. Grant KL, Simmons MB, Davey CG. Three Nontraditional Approaches to Improving the Capacity, Accessibility, and Quality of Mental Health Services: An Overview. Psychiatr Serv. 2018 May 1;69(5):508-516.
- 3. Gillard S. Peer support in mental health services: where is the research taking us, and do we want to go there? J Ment Health. 2019 Aug;28(4):341-344.
- 4. Chinman M, George P, Dougherty RH, Daniels AS, Ghose SS, Swift A, et al. Peer support services for individuals with serious mental illnesses: assessing the evidence. Psychiatr Serv. 2014 Apr 1;65(4):429-41.
- 5. Gopalan G, Lee SJ, Harris R, Acri MC, Munson MR. Utilization of peers in services for youth with emotional and behavioral challenges: A scoping review. J Adolesc. 2017 Feb:55:88-115.



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