5. Peer Work Values and Principles

This information sheet provides an understanding of:

- Recovery orientation
- Strengths based practice
- Trauma informed care
- Mentally healthy workplaces
- Care aware workplaces

Recovery orientation

Peer work is likely to be most effective in settings that have a pre-existing commitment to the values and principles of recovery. This is also the safest environment in which to employ peer workers. An organisation's policies, vision, mission and values need to incorporate a full recovery vision. The board, senior leadership team and staff also need to understand peer worker roles and the importance of their contribution to recovery.

Becoming a recovery oriented service means including a focus on what is called personal recovery – "being able to create and live a meaningful and contributing life in a community of choice with or without the presence of mental health issues". Recovery oriented practice refers to the "application of sets of capabilities that support people to recognise and take responsibility for their own recovery and wellbeing and to define their goals, wishes and aspirations". (Commonwealth of Australia 2013, A national framework for recovery-oriented mental health services: Policy and theory, p.34).

There are numerous resources that can assist organisations to improve their recovery orientation. In 2013 the National Framework for Recovery Oriented Mental Health Services was released (link). *Living Well: A Strategic Plan for Mental Health in NSW 2014-2024* requires Local Health Districts and community managed mental health services to implement the framework.

Five practice domains are specified with specific capabilities described:

Domain 1: Promoting a culture and language of hope and optimism

Domain 2: Person first and holistic

Domain 3: Supporting personal recovery

Domain 4: Organisational commitment and workforce development

Domain 5: Action on social inclusion and the social determinants of health, mental health and wellbeing

Another resource is the Recovery Oriented Service Self-Assessment Toolkit developed by the Mental Health Coordinating Council and Being to be a recovery oriented service provision quality improvement resource for mental health services (link).

Changing traditional practice and ways of delivering service can be difficult and, for this reason, the development of a recovery-oriented service framework and an action plan or change management plan to make those changes is recommended.

Strengths-based practice

Many people experience despair and loss of self-confidence and self-belief upon receiving a diagnosis of mental illness and upon experiencing associated negative expectations and social stereotypes. Mental health practitioners and organisations can unwittingly reinforce this despair by a focus on deficits and what the person can't or isn't doing.

An openness and curiosity among practitioners to learn from people with lived experience about what helps and hinders personal recovery is a starting point for the development of strengths-based practice.

Capability 3B Focusing on Strengths and Personal Responsibility in the National Framework for Recovery Oriented Mental Health Services provides a guide to the values and attitude, knowledge and skills and behaviours that might characterise practice and leadership centred on a strengths-based approach (link).

Important principles in the framework are that recovery is possible, and can be achieved by recognising and using the resourcefulness, resilience and strengths of people with mental illness. A strengths-based service results in people feeling good about themselves and their capacity to take up the responsibility of their own wellbeing. The strength provided by naturally occurring supports and families and close relationships are built on.

Trauma informed

The experience of mental illness in itself is traumatising. Many people then experience mental health treatment as traumatising, particularly involuntary treatment. Additionally, many people with mental illness have experienced previous trauma throughout their lives. Trauma can result from a variety of circumstances and is experienced in individual ways.

The online professional development resource MHPOD provides the following explanation:

A basic but essential component of trauma informed care is that the interventions that are provided and the services from which they are delivered do not inflict any additional trauma on the person, or reactivate their past traumatic experiences. (Hodas, 2004, p6).

Trauma informed care is individualised to each person's needs. It aims to understand the trauma and the impact on the person's life, eliminating restrictive practices such as seclusion and restraint, and creating compassionate, non-coercive settings (link).

Before proceeding with introducing or expanding the peer workforce, internal soul searching is required about whether anything that the organisation does results in traumatising or re-traumatising. Users of services and their families and friends are the best advisers here. Practices that traumatise those receiving services are likely to also traumatise peer workers and non-peer workers alike.

A number of organisations including Adults Surviving Child Abuse deliver trauma-informed training, including training for practitioners to safeguard themselves and to recognise and respond to vicarious trauma.

Mentally healthy workplaces for all

A key question for organisations to consider at the planning stage is do human resource management policies and procedures support a mentally healthy workplace and best practice in employment for all, and comply with legal requirements?

There is an abundance of research into what threatens good mental health at work and many resources for employers to draw on to create mentally healthy workplaces. The HeadsUp initiative lists a number of risks to mental health in the workplace. These include challenging work hours, demanding deadlines and targets, heavy workloads, high emotional demands, high physical demands, high mental demands, low levels of control, lack of role clarity, low levels of recognition and reward,

poorly managed change, bullying and poorly managed relationships, and discrimination. Addressing these risks is good for peer workers and non-peer workers alike.

The HeadsUp resources guide an organisation in doing this (link). Mentally healthy workplaces are those that address these risks for everyone and undertake activities to create a supportive environment for employees with mental illness.

The Australian Human Rights Commission has also developed a useful resource - Workers with Mental Illness: a Practical Guide for Managers (link). Providing reasonable adjustments is one powerful step an employer is obligated to take to support peer workers. RichmondPRA go one step further by offering the Personal Situation Plan that an employee with lived experience or any other health issue, disability or need can complete.

Carer aware workplaces

The NSW Carers (Recognition Act) 2010 (link) obligates public sector agencies to develop

internal human resources policies of with due regard to the NSW Carers Charter. The Charter consists of 13 principles to recognise and support carers in their caring role.

The NSW Carers Strategy was launched by the Minister for Ageing and Disability Services at Parliament House on 7 August 2014. It includes a focus on employment and education. Reforms designed to increase the use of existing

workplace flexibility by carers and their employers are expected to lead to outcomes such as carers having choices and opportunities to participate in paid work.

The Commonwealth Government's Carer Gateway (link) advises that employers talk with their employees, while recognising their right to privacy, about what effect being a carer has on their life and work. Solutions like flexible arrangements can then be worked out together so the skills and experience of the carer are put to best use and the carer can remain in their role.   Employers should also be aware of what their legal obligations are, such as those under the Fair Work Act 2009 relating to carer's leave.

The Carers Australia website (link) has an abundance of resources providing advice to employers on how to become carer friendly workplaces. Employers can also sign up to the Carers Australia Work and Care Charter. A Work and Care Self-Assessment Tool is provided to help organisations start discussion about changes that might better support employees with caring responsibilities. It covers four areas: Awareness and Support; Flexible Working; Leave and Working Arrangements; and Recruitment and Retention.

↻ **Remember to Update your Plan!**

This resource in the Employer's guide to implementing a peer workforce is supported by the Mental Health Commission of New South Wales

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Employer's guide to implementing a peer workforce – Template

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