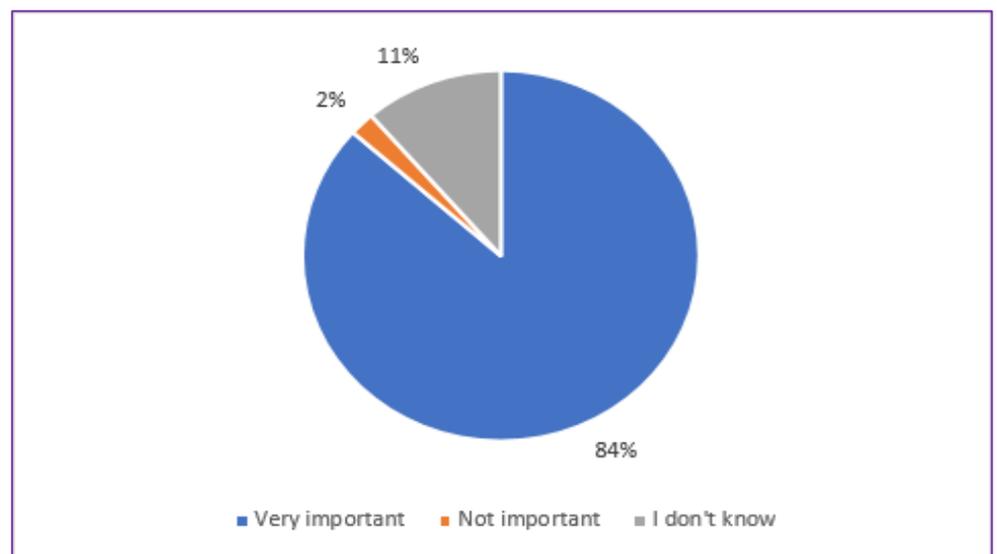


# 5. A Lived experience workforce

When asked how important a lived experience workforce is in the Victorian Mental Health system, eighty-four percent of respondents stated that it was very important as “it gives people hope”.

In answer to a question about the importance of people with a lived experience being part of staffing mental health services there was overwhelming support. In fact, there was a sense that this is essential if the system is going to be successful in healing people with mental distress. This is shown in the chart below.

Figure 9 – Importance of the new model for acute beds



There were two main aspects to implementation for the employment of a lived experience workforce: support for the workers and for the workforce to express empathy.

The key issues that emerged about the lived experience workforce are of some concern, however. There was a strong statement across the workshops and surveys that the peer workforce is not respected and valued and that this needs to change.

# 5. A Lived experience workforce

## 5.1 Valued and Respected

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There was expressed concern that while peer workers and consumer consultants are critical to positive service development, currently many of the agencies that employ peer workers do not value them or treat them with respect.

Several participants highlighted that it is important that the peer workers are respected and valued as much as psychiatrists and other treatment professionals. Further discussions identified that in some cases peer workers are sometimes employed in a 'tick the box' way to ensure that the hospital has done its duty.

# 5. A Lived experience workforce

## 5.2 Workplace safety

Perhaps of even greater concern were the claims that there are places where the safety of peer workers is not guaranteed and that this needs to change. Consumers in the workshops and surveys stressed the need for workplace safety and supports for the peer workforce. They also stressed that “...organisations need to be safe places” implying that that is not always the case for peer workers.

Workshop participants stated that peer workforce safety will be ensured if the following suggestions are implemented: whistleblower protection, training and an anonymous complaints system to encourage open reporting of workplace abuse.

*“[Lived experience workers] need to feel safe in their job... and given protection for them to be honest about their experiences, they need to be able to do that without their jobs being threatened.”*

*“Peer workers will have greater job security, with permanent contracts, flexible working hours, and regular supervision and opportunities to train/advise senior clinicians”*

This feedback suggests that mental health workplaces have not been safe spaces for peer workers. With more peer workers set to enter the workforce, as a result of this recommendation, it is imperative that peer workers are supported within their organisations.

# 5. A Lived experience workforce

## 5.2 Workplace safety

There was also a clear statement that lived experience staff need to be supported in their workplace with ongoing training, professional development opportunities and an awards scheme to legitimise the profession.

To further support the lived experience workforce, consumers highlighted the need for training for all mental health staff around the importance and role of peer workers in the system.

*"[There will be] detailed and ongoing training for ALL other staff on the need for Peer Workers and how they can best work with and support their role."*

While some survey respondents acknowledged that not everyone who has a lived experience will be suitable for the workforce, there will be ongoing mental health supports for lived experience staff. One consumer said:

*"It will be acknowledged they may still have some triggers or areas of concern and these should be worked through & given support for."*

This is a critical issue if people with lived experience of mental distress are going to have an increased role in the workforce. There will be times when a situation may trigger the peer worker and this needs to be acknowledged and planned for in the workplace.

# 5. A Lived experience workforce

## 5.3 Increased Professional Development

There was enthusiastic support for peer workers having access to more professional development opportunities, career progression, permanent positions, flexibility in work hours, proper supervision and understanding of roles.

Participants in the workshops stated that to feel supported, peer workers will be formally trained and have access to training at all stages of their career.

*"We need to use our expertise of our experiences to help other people"*

Accordingly, training will:

- Be trauma-informed, free and ongoing
- Be more accessible, i.e. provide an online option for the Cert IV for those who have other commitments
- Include short courses, TAFE, undergraduate and postgraduate options
- Include an outreach model to keep peer workers informed of opportunities as opposed to "stumbling" across it
- Include peer-to-peer models including Intentional Peer Support Training<sup>2</sup> and Emotional-CPR<sup>3</sup> which were highly valued in the feedback.

Other suggestions included:

*"...trained in Emotional CPR and intentional peer support, alternatives to suicide, hearing voices etc."*

In addition to specific training it was generally agreed that peer workers will also have regular supervision and mentoring *"...from line managers who also have a lived experience"*.

The peer workforce will have flexibility in working arrangements and *"...staff will be provided with adaptable learning materials, be able to learn at their own pace, and have their experiences valued and respected."*

<sup>2</sup> According to the Intentional Peer Support Website: Intentional Peer Support is a way of thinking about and inviting transformative relationships. Practitioners learn to use relationships to see things from new angles, develop greater awareness of personal and relational patterns, and support and challenge each other in trying new things.

<sup>3</sup> Emotional CPR (eCPR) is an educational program designed to teach people to assist others through an emotional crisis by connecting, empowering and revitalising

# 5. A Lived experience workforce

## 5.4 Throughout the mental health system

Participants stated that for it to work effectively there will be lived experience workers at every level of mental health treatment: hospitals, community treatment, planning and management levels, public health services, and all levels of decision making.

It was important to participants that the peer workforce be diverse in its mental health experiences and backgrounds to help consumers form trusting relationships and feel understood throughout the treatment process.

*“Connection is central to forming a trusting relationship with someone.”*

*“Peer workers will act as supervisors to clinical staff”* – this collaboration was described as an “essential component” of supervision. Lived experience workers will also provide coaching and support, i.e. consumer perspective supervision, buddy systems, mentorships for new, existing and prospective lived experience workers with introductions to the workforce via mentors.

In a follow-up survey, consumers were asked to think about the following question. **When the peer workforce is more influential than clinicians, how will you feel? With the following response.**

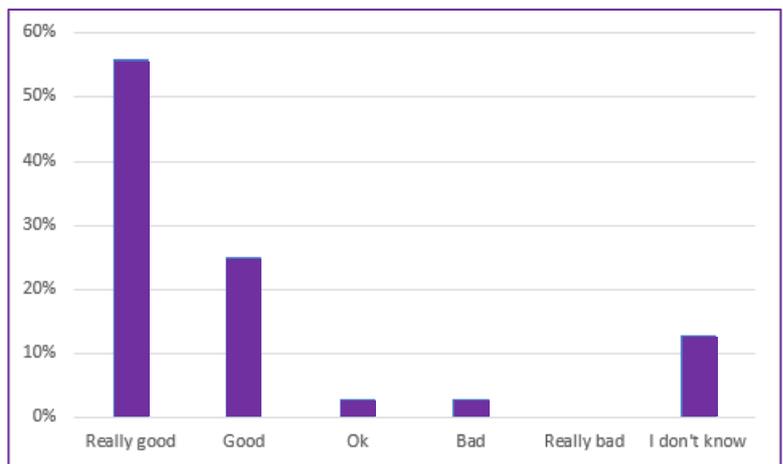


Figure 10 – Peer workforce influence results

With eighty- one percent of respondents to this question feeling “good” or “really good” about this action being taken, it is vital that the lived experience workforce is integrated throughout the mental health system and highly respected.

For example, one consumer suggested the need for *“an award that is clear, detailed and upheld by Fair Work Australia. A classification scheme that recognises years worked, level of education and further study/extra qualifications”*.

# 5. A Lived experience workforce

## 5.5 Importance to Consumers

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As previously noted, consumers were extremely positive about an increase in peer workers and an increase in all parts of the system for people with lived experience. In large part this was because the system would then express what was commonly described as Empathy.

Consumers stated that as a result of this initiative there will be more understanding in the diversity of experiences, treatment needs, and the diversity of people seeking treatment.

For consumers, the lived experience workforce will be a huge help for people with mental health issues to see that others have overcome the struggle and come out the other side.

To further understand how important the lived experience workforce is to consumers, VMIAC followed up participants with the question: When there are peer workers supporting you in all areas of your treatment, what will this mean to you?

Eighty-four percent of responses to this question expressed feelings of positivity and hope and other respondents highlighted that choice is still very important when accessing support. These responses are just some of the positive responses to this question:

*"I hope to feel less alone and it will mean everything to me to know that everyone who is supporting me actually wants to be there and all believe in positive outcomes as well as guiding the journey in healthy ways, given from their own experiences."*

*"It will mean I will feel more comfortable talking about my issues."*

*"That there is someone who can understand the similar experiences I may have had."*

*"Feel understood and valued."*