

MODULE 1: INTRODUCTION TO PEER EMPLOYMENT

**EMBEDDING SAFETY, INCLUSION &
EQUITY IN PEER SPECIALIST AND
EXPERIENTIAL WORKER ROLES**

UPDATED: SUMMER 2021

NOTHING ABOUT US WITHOUT US

ACKNOWLEDGEMENTS

Island Health acknowledges that this work has been completed on the unceded and traditional territories of the Kwakwaka'wakw and Coast Salish Peoples, including the territory of the Snuneymuxw First Nation. We recognize that many of us are uninvited guests to these lands. With gratitude.

Island Health's Peer Employment Learning Series is largely adapted from and influenced by the following resources:

- Interior Health's Peer Framework;
- Vancouver Coastal Health's Peer Framework for Health Focused Peer Positions in the Down Town East Side;
- BC Centre for Disease Control Engagement Principles and Best Practices;
- Centre for Excellence in Peer Support & Center for Innovation for Peer Support Supervising Peer Workers;
- Collective efforts from Provincial Health Services, Towards the Heart,
- BCCDC, Peer Payment Standards;
- UVic, A Public Health Guide to Developing Community Overdose Response Plan;
- BC Overdose Action Exchange Meeting June 9, 2016;
- Towards the Heart;
- and importantly, the Canadian Mental Health Association Power Assessment Framework: Mental Health and Substance use Peers.

Importantly we recognize the many people with lived and living experience, including family members and allies, who have been serving communities as mental health and substance use insider experts and specialists saving lives long before health institutions sought to value and embed peer work. Without their contributions, this series could not have been built. Thank you.

With special thanks for the creative minds and voices and the many collaborating hours dedicated to the development of this learning series: Lenae Silva and Jessy Knight Founders of Open Heart Collaborative, Tammy Dow, Stephanie McCune, Arlene Hogan, Karly Fennell, and Amelia Hamfelt. We would also like to thank the many people and voices who provided important feedback and guidance along the way including colleagues and insider knowledge holders at various advisory and consultation tables including Don Fraser, Danny O'Leary, John Adams, Alyse Paquette, Ash Horner, Kat Golik, Carlin Dunsmoor-Farley, Tracey Thompson, Jessica Huston, Jess McConnell, Tracey Nigro, Dana Leik, Norma Winsper. The work to create this has come to life through commitments, invitations and ways of being that centre inclusion, compassion, and equity.



ISLAND HEALTH AND PEER EMPLOYMENT LEARNING SERIES

The Island Health Peer Employment Learning Series has been developed to provide clarity on the context, role, scope, and opportunities for peer-based specialization in service design, delivery and evaluation. Each module will cover specific considerations for developing an equitable and inclusive peer workforce. The focus of each module is as follows:

Module One:

An introduction to Island Health's current and future state commitment to privileging voices and skills of people with lived and living experience in employed positions

Module Two:

Principles necessary for action on the safety, inclusion and equity of peer-based employment. This includes recommendations for addressing systemic barriers to the full participation of people with lived and living experience who are employed by Island Health within programs such as Mental Health Substance Use (MHSU), Public Health, and Acute Care.

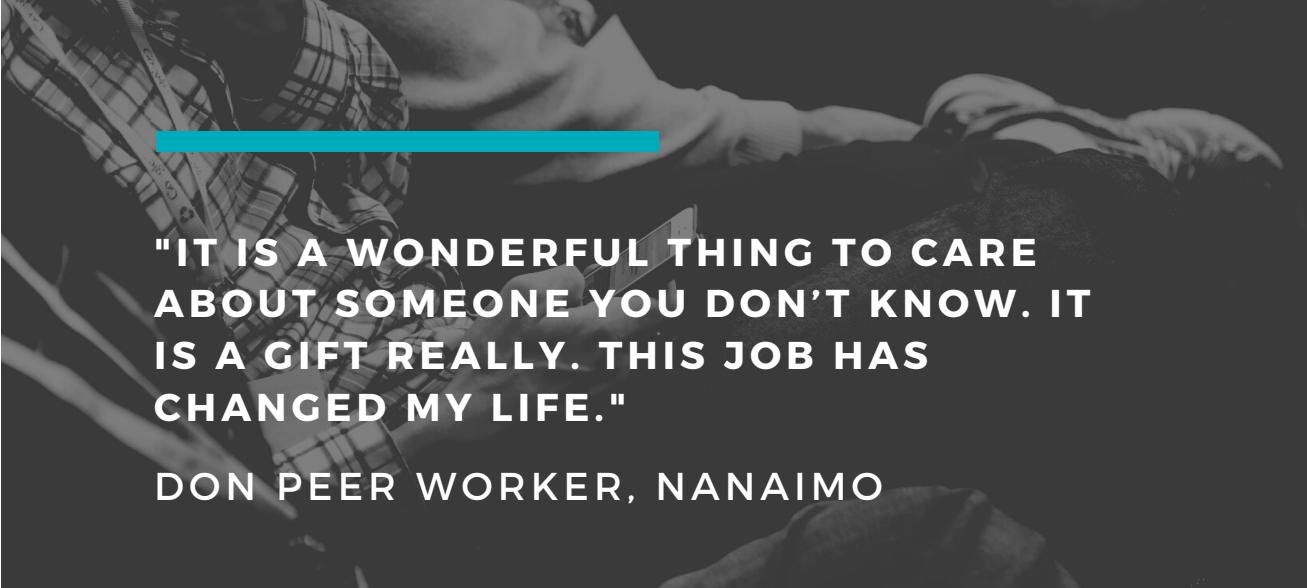
Module Three:

Practices specific to integrating personal expertise in professional roles. Including, reference and guidance on utilizing the Canadian Mental Health Association, Peer Power Indicators and Assessment Framework (2021) as a tool for leadership creating and supporting peer specialization and a continuum of peer positions.

Module Four: Recommendations and pathways for sustaining wellbeing.

It is recommended that all non-peer staff review the modules as a means to better understand the critical value of the role and ways in which people with lived and living experience can be shouldered up to use full range of skills and abilities. Specifically, this series is a key resource for Team Leads, Coordinators, and all Managers and Directors. Modules may be used to offer guidance and recommendations in the development of diverse peer specialist roles and in enhancing inclusion of people with living and lived experience on multi-disciplinary teams.

INTRODUCTION TO PEER SPECIALIZATION



"IT IS A WONDERFUL THING TO CARE ABOUT SOMEONE YOU DON'T KNOW. IT IS A GIFT REALLY. THIS JOB HAS CHANGED MY LIFE."

DON PEER WORKER, NANAIMO

People with lived and living experience hold critical insider knowledge often demonstrated through advocacy, mentorship and role modeling. Peer specialists are important multi-disciplinary team members, inspiring empowerment and compassion for those accessing services and those providing services. Centering peers in services foregrounds personal expertise that invites connection and sharing in ways that may not be similarly demonstrated in other health service roles. Peer specialists offer understanding and support bridging formal mental health and substance use systems of care and the real life needs of people experiencing mental health and substance use issues.

Insider experts, people with lived and living experience, peer specialists and experiential workers must be partners in the design, delivery and evaluation of health services. Within an organization this means involvement in policy making to operations. However, successful engagement of people with lived and living experience will only be achieved when systems embody and embed cultures that encourage, recognize, and value personal expertise and knowledge relevant to the client group served (for example, structural inequity, interpersonal trauma, racism, trauma, substance use, poverty, sex work, and/or physical or mental health challenges). This is also means action to disrupt stigma and resulting barriers to inclusion.

From the 2020, Peer-2-Peer Project focused on developing, implementing and evaluating peer-led support interventions, focus group data highlighted lack of recognition, inequity in workplace (lack of access to basic resources afforded to other professionals) and lack of respect from other professionals (including stigma and lack of awareness of important work and skill) as prominent experiences of peer workers.



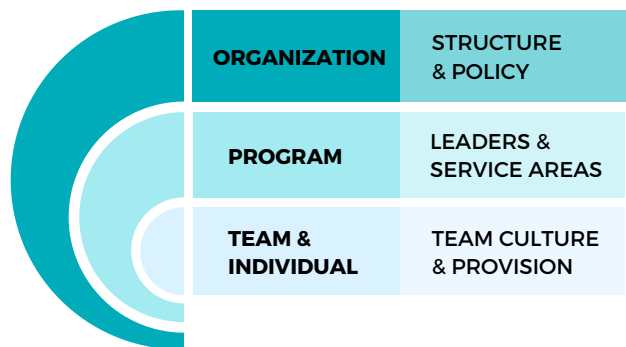
YouTube: Co/Lab Community of Practice: Stigma faced by Peer Workers in Overdose Response Settings

Employment of people with lived and living experience is a vital requirement for ensuring person-centered practices are developed, disseminated and anchored. However, peer employment has been largely an unrecognized and undervalued field of work. Many peer workers experience persisting inequities including, being under paid, precariously employed (via temporary contract work), under-valued and implicitly or explicitly expected to volunteer or work for time-limited and minimal honoraria payment. Therefore, systems must pay keen attention to understanding risks and harms associated with inconsistent, uncertain and inequitable structures.

This requires a commitment to disrupt structural barriers contributing to inequities including stigma, racism, discrimination, classism, and those related to the social determinants such as employment insecurity (i.e., precarious employment) that impacts meaningful

partnership with people with lived and living experience who provide insider expertise.

A systems lens is necessary for both zooming-in to consider peer engagement and employment in the context of direct service delivery and zooming-out to reflect opportunities, barriers, gaps, and context at a macro level of leadership, decision making and broader organizational policy and program development.



“PEOPLE WITH LIVED AND LIVING EXPERIENCE ARE FIRST RESPONDERS. WE’RE THE FIRST PEOPLE ON THE SCENE, WHO ARE THERE WHILE IT’S HAPPENING, WHO KEEP PEOPLE ALIVE UNTIL THE GOVERNMENT RESPONDERS GET THERE.”

MARNIE SCOW, PEER COORDINATOR

ISLAND HEALTH STRATEGIC DIRECTIONS AND PEER EMPLOYMENT

This Learning Series was developed in collaboration with a diverse and multi-disciplinary group. As a result of much consultation and dialogue, three key themes (or more specifically 'hopes') were articulated for current and future peer specialization within Island Health.

- Increased quality of life: access to equitable and consistent wages
- Increased quality of connection: access to means to stay connected to peer colleagues (Communities of Practice)
- Increased quality of inclusion: acceptance and valuing of the peer role as demonstrated by full utilization of skills, voice, and team involvement (inclusion at team meetings), standardized processes for onboarding and education, access to resources to do work (keys, business cards, technology, space)¹

2



REALITY

Reality: What many people experience on a daily basis.

Equality: The assumption is that everyone benefits from the same supports. This is equal treatment.

Equity: Everyone gets the supports they need. This is the concept of “affirmative action” thus producing equity.

Justice: All 3 can see the game without supports or accommodations because the cause(s) of the inequity was addressed.

Agency: Through equity and social justice each has access to health and education to build wealth and buy their own seat inside the stadium.

EQUALITY

EQUITY

JUSTICE

AGENCY

In order to promote and sustain quality of life, connection, and inclusion in peer-based roles, while ensuring recognition, equity, and respect, Island Health must include Peer Employment within the organizations annual and long-term strategic directions.

Island Health has articulated key Strategic Directions for 2020-2025 including the following key priorities:

- Partnerships and relationship
- Innovation; well-being
- Resiliency and joy
- A relentless pursuit of quality

1- Peer Employment Advisory Working Group June 3, 2021

2- Source: trainingfortherealworld.com

Strategic Priority 2: Improve the Experience, Health and Well-being of all People Working and Volunteering at Island Health

We promise to foster a positive workplace where people are supported to explore their greatest potential and participate fully as a member of the Island Health family, supported by leaders who bring out the best in themselves and others.

Strategic Priority 2.1: People will be Proud to work and volunteer as members of the Island health family.

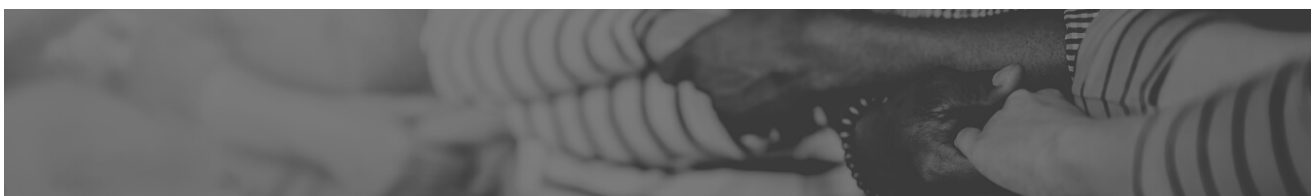
We will build a healthy work experience upon the foundation of a safe work environment. Highly-skilled people and teams will come each day with purpose and pride, and work collaboratively to achieve their full scope of practice. They will have voice, influence, accountability and ownership at the local and regional levels. Our work experiences will be defined by authentic relationships built upon kindness, transparency, trust, and mutual respect where people care for and about each other. Work-life balance will support people to participate as full citizens of their community.

These key priorities are central to advancing meaningful, safe and sustainable peer employment. Peer employment is a means to demonstrate Island Health's strategic emphasis on partnership, integration, innovation, resiliency, and pursuit of quality.

Further, peer employment within Island Health must be aligned to the organization commitments to harm reduction, cultural safety and humility, and trauma and violence informed care (TVIC). This includes intersecting guidance and learning as detailed in policy and procedures that centre and name responsibilities to advance Equity-Oriented care specifically Harm Reduction, Cultural Safety and Humility and TVIC.

CANADIAN MENTAL HEALTH ASSOCIATION: POWER ASSESSMENT FRAMEWORK

Organizational commitment to peer-based roles and employment opportunities is demonstrated through considered planning and resource allocation. The Canadian Mental Health Association Power Assessment Framework was developed in 2021 as a resource for assessing peer based roles and developing an increasingly meaningful and equitable experiential workforce. This tool can be reviewed in Appendix A and will be further expanded upon in Module Two.



SUMMARY AND KEY POINTS

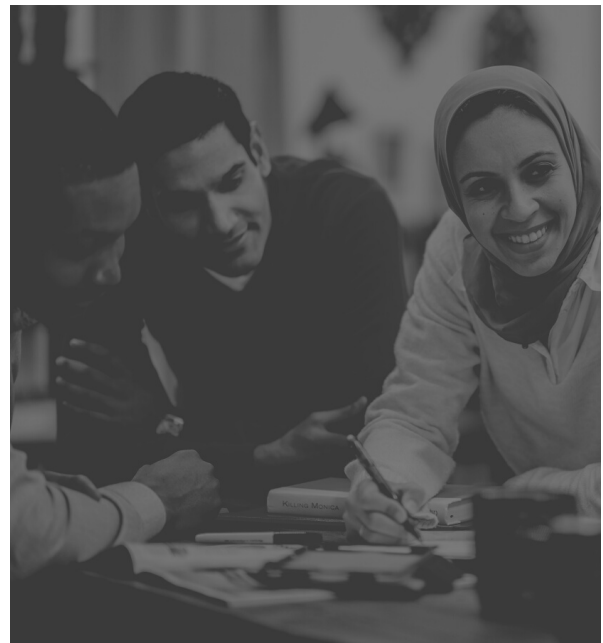
- Peer specialists are important multi-disciplinary team members and must be partners in the design, delivery and evaluation of health services.
- engagement of people with lived and living experience will only be achieved when systems embody and embed cultures that encourage, recognize, and value personal expertise and knowledge relevant to the client group served
- When employing people in experiential worker roles, it is important to implement practices and resources that support wellbeing, connection, and safety. This requires organizational commitments and actions that disrupt stigma and foreground cultural safety and humility, harm reduction, trauma and violence informed care
- Peer employment is a means to demonstrate Island Health's strategic emphasis on partnership, integration, innovation, resiliency, and pursuit of quality.
- Systems must pay keen attention to understanding risks and harms associated with inconsistent, uncertain and inequitable structures.
- The CMHA Power Assessment Framework is an important tool for addressing peer employee safety, equity and inclusion in health organizations.

REFLECTIVE PRACTICE CONSIDERATIONS

- How is Island Health currently employing people with lived and living experience?
- What opportunities exist or remain to be developed in order to support multiple voices and diverse ways of knowing and understanding in service design, delivery and evaluation?
- What barriers to employment exist and how might these be addressed?
- Click on the links below and note reactions and responses to the provided content. Consider how peer employment opportunities support peer insider expert and maintain practices of autonomy while acknowledge the unique specialization of the role within large and complex health service systems.



Vimeo: The Parable of the Blobs and Squares by James Mackie



ADDITIONAL LEARNING



**JESSY'S INTRODUCTION TO
PEER EMPLOYMENT**



**LENAE'S INTRODUCTION TO
PEER EMPLOYMENT**



**INTRODUCTION TO PEER
EMPLOYMENT LEARNING SERIES**



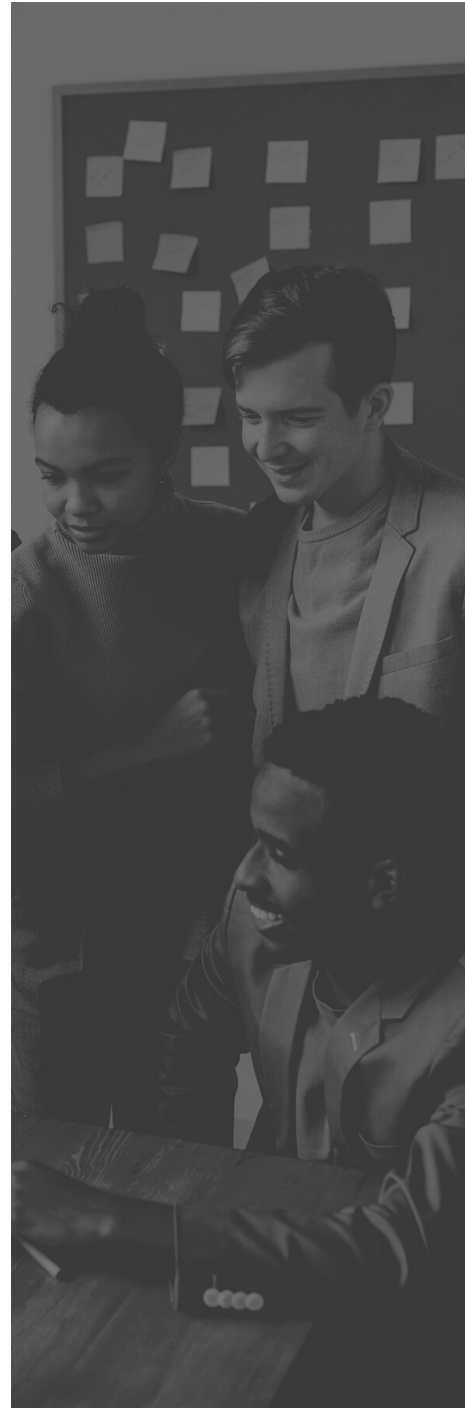
**ISLAND HEALTH RECOVERY
ORIENTED PRACTICE TOOLKIT**



**CANADIAN INSTITUTE OF
SUBSTANCE USE RESEARCH:**
Co/Lab Stigma Faced by Peer Workers



'PEER' WORK AS PRECARIOUS:
A Qualitative Study of Work
Conditions and Experiences of People
who Use Drugs Engaged in Harm
Reduction Work.
Greer, A., Bungay, V., Pauly, B., Buxton,
J. (2020).



APPENDIX A:



**CMHA POWER ASSESSMENT
FRAMEWORK**

**ISLAND HEALTH'S
PEER EMPLOYMENT LEARNING SERIES**



QUESTIONS ABOUT MODULE ONE?

E-MAIL US FOR FURTHER INFO:
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