



**Consumer, peer support and lived  
experience workforce development**

# Who is Te Pou?

- Established April 1 2006

## **Our Purpose:**

- To improve the wellbeing of people in Aotearoa through ensuring the mental health, addiction and disability workforce have what they need to be effective

# Who am I?

- 40+ years of experiencing mental health challenges, service use and living my best life (which sometimes isn't that best 😊)
- 20+ years of working in mental health in lived experienced roles
- Started paid work as a consumer advisor 1998, many roles since
- Workforce development work in 2006, 80% all our work, 20% peer development

# Why this workforce is pivotal

- MH & addiction needs and services affect US the most
- We provide different solutions and choices alongside clinical responses

**We are living proof of what's possible**

# Competencies prequel

Our workforce developed haphazardly



# Developing the competencies- why?



# The process

- Three organisations came together
- Developed plan and assigned responsibilities
- Te Pou managed the project

# Competency development

- Mary O'Hagan contracted as project lead
- National reference group formed (met 3x)
- Comprehensive consultation included
  1. Email
  2. Face to face
  3. Survey monkey
  4. Phone contacts
  5. Forums

# Sector readiness

- Service user, consumer and peer support workforce - A guide for managers and employers
- Service user, consumer and peer support workforce - A guide for planners and funders

# The competencies.

*“These competencies are the sandstone I will sharpen my practice on”*

Elton Hakopa, Addiction peer support worker

# Peer Values

- **Mutuality:** The authentic two-way relationships between people through 'the kinship of common experience'.
- **Experiential knowledge:** The learning, knowledge and wisdom that comes from personal lived experience of mental distress or addiction and recovery.

# Peer values

- **Self-determination:** The right for people to make free choices about their life and to be free from coercion on the basis of their mental distress or addiction.
- **Participation:** The right for people to participate in and lead mental health and/or addiction services including in the development or running of services as well as in their own treatment and recovery.

# Peer values

- **Equity:** The right of people who experience mental distress and/or addiction to have fair and equal opportunities to other citizens and to be free of discrimination.
- **Recovery and hope:** The belief that there is always hope and that resiliency and meaningful recovery is possible for everyone.

# The 7 Core Competencies

1. Lived experience and peer values
2. Recovery, resilience and self care
3. Professional development and boundaries
4. Communication
5. Family, whanau, culture and community diversity
6. Working within systems
7. Human rights approach and social justice

# Peer Support Competencies

1. Mutual relationships
2. Purposeful approach
3. Peer support practices

# Consumer Advisor Competencies

1. Strategic viewpoint
2. Participation and leadership
3. Service improvement

# Challenges and tensions

- Understood and agreed concepts and language across mental health and addiction
- Plethora of feedback often oppositional
- Defining demonstrable competencies for a values driven workforce
- Managing sector expectations
- Balancing professionalisation while retaining special nature of the workforce

# Triumphs

- The creation of a framework that gives the peer workforce a way of demonstrating their value
- Bringing together disparate groups with enormous variation, all worried about losing their identity
- The strengthening interrelationship between addiction and mental health peers

# Bringing together mental health and addiction



# How they are being used

Currently being used in several different ways

- Job descriptions
- Leverage for things like what is and isn't expectations for peer roles
- Self assessment of skills
- Incorporated into education and training
- Performance appraisal and workforce development needs

# The refresh

- 7 years old now, things change, sector is a little different and language has changed
- The new consumer, peer support and lived experience workforce development strategy 2020-2025
- Trying to create living documents that have evaluate and update functions

# Changes so far

- Need to ensure they have solid cultural expectations woven throughout that align with and support work Māori lived experience tangata are doing for themselves. (Te Rau Ora and Te Kete Pounamu)
- Less levels- essential, enhanced and leadership (dropped managers and leaders)
- Simpler language and streamlined
- Increased potential use for other lived experience workforces to use eg whanau and family

# Feedback so far



# The strategy- why does this matter?

## **Consumer, peer support and lived experience mental health and addiction workforce development strategy: 2020–2025**

- **Publication date: 30 July 2020**

This strategy helps to take us towards a future where wellbeing is realisable for all people, and where lived experience voices, skills and leadership are at the heart of service and systems design and service delivery.

# The strategy- history

- 2005 Service user workforce development strategy (MHC, Mary O'Hagan)
- 2017 National peer workforce development forum
- 2018 Peer leaders forum
- 2019 National peer workforce development forum
- 2019 Peer strategy scoping group formed
- 2020 Consumer, peer support and lived experience workforce development strategy completed

# The Strategy- for the workforce

- By us, for us, is in our ‘voice’
- Is aspirational
- Outlines what is required for our workforce to thrive
- Leads the way for a pragmatic and practical action plan that will outline roles, responsibilities, expectations and partnerships
- Potential for any lived experience to adapt and use

<https://www.tepou.co.nz/resources/Consumer-peer-support-and-lived-experience-strategy-2020-2025/963>

# The strategy- for the sector

- Clarifies expectations and vision
- Outlines our commitment to working in partnership
- Describes where we want to be within sectors

# Our Vision

- **A large, well-resourced, diverse, and self-determined consumer, peer support and lived experience workforce that works across health and other sectors.**
- **Our workforce and work are effective and valued by people who access services and well supported by our co-workers and employers.**
- **We are leaders that direct organisations, management and government to ensure all New Zealanders experiencing mental health and addiction challenges have access to services that realise lives of wellbeing and meaning, that they and their whanau, value.**

# Goal One

## Leadership and partnership infrastructure

- Acknowledging we need allies and partners to succeed, balanced with maintaining our self-determination and autonomy

# Goal Two

## Grow our workforce

- Including our workforce numbers, leaders, services, new roles across health and social sectors, diversity, voice, influence, equity in sectors and communities, and options for people who access us.

# Goal Three

## Develop skills and employment environments

- Ensuring that we have what we need to succeed in our roles and environments that support that.

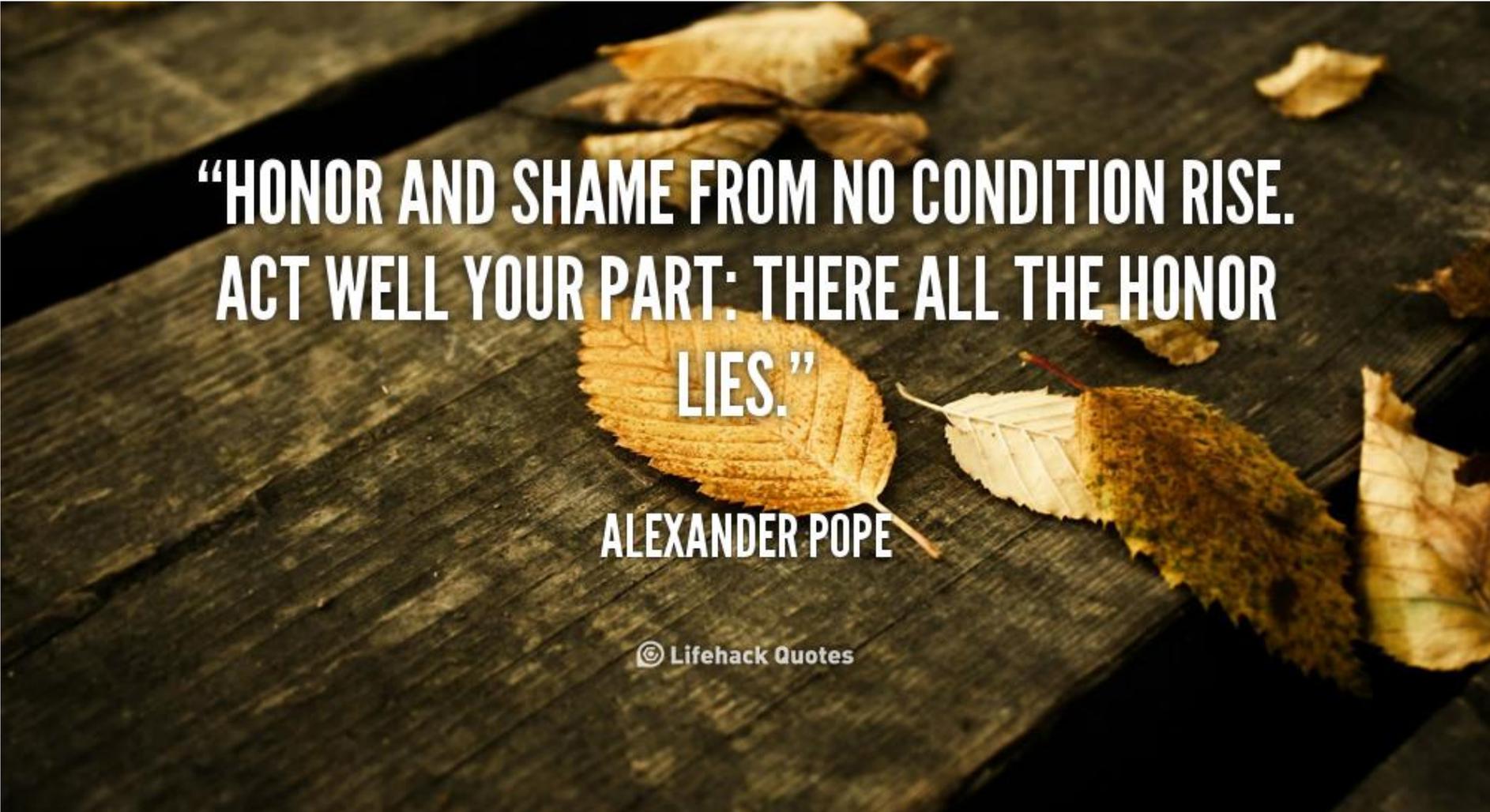
# The future for peer work

The best way to predict  
the future is to create it.

Peter Ducker



# A workforce of courage and generosity



**“HONOR AND SHAME FROM NO CONDITION RISE.  
ACT WELL YOUR PART: THERE ALL THE HONOR  
LIES.”**

**ALEXANDER POPE**

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