Youth Helping Youth

Fostering Peer Support as Part of the Youth Mental Health Service Continuum

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Strengthening Family and Youth Voices Project

CANADIAN MENTAL HEALTH ASSOCIATION
ASSOCIATION CANADIENNE POUR LA SANTÉ MENTALE
BC DIVISION
Youth Helping Youth

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Introduction

This “how-to” guide comes from the experiences of peer support programs formed as part of the Strengthening Family and Youth Voices project. The project is sponsored by the Canadian Mental Health Association (CMHA), BC Division and funded by the Public Health Agency of Canada. CMHA is a national, non-profit, voluntary organization whose mission is to promote the mental health of all Canadians. CMHA BC Division carries out its mission through education, research, community development and advocacy. One of CMHA’s core objectives is to promote and create innovative programs that contribute to the recovery and community integration of people with a mental illness.

The project goals were:
- To promote the participation in decision-making of families and youth who use child and youth mental health services
- To increase peer support networks across five pilot sites

Additionally, the project steering committee wished the pilot sites to learn about the best ways of facilitating peer support, and to share that wisdom through documents such as this as well as through a forum that was held at Simon Fraser University on February 9, 2007.

The project took place from February 2005 to March 2007. It featured activities at the provincial level as well as community activities carried out by sponsoring agencies in five British Columbia communities:
- CMHA Kootenays Branch in Cranbrook
- The Child Development Centre in Kitimat
- The Maple Ridge Community Services Society in Maple Ridge
- CMHA Cowichan Valley Branch in Duncan
- CMHA North and West Vancouver Branch in North Vancouver.

All of the participating local agencies but CMHA North and West Vancouver Branch had existing contracts with the Ministry of Children and Family Development (MCFD) Youth Mental Health Services Program to provide outreach and support for youth with mental health concerns.

The experiences summarized in the pages that follow are from evaluation interviews with Voices youth and project site coordinator staff, and from the Voices forum presentations.

The purpose of the document is to help interested youth and service providers find a place for peer support in their service system. We make the business case for peer support, talk about how to organize a peer support group, and then identify key strategies that adult allies can adopt to work with youth and make it happen.
What the #@&! is Peer Support?

When the youth in the Voices project got together the day before the Voices forum, peer support seemed pretty straightforward: youth helping youth. It was hard to understand what all the fuss was about, and why some people still find the term confusing. The #@&! expresses their frustration.

Unfortunately, when people hear the word “self-help,” many only think of Dr. Phil or a section in the bookstore. Self-help is something quite different from pop psychology. The Self Help Resource Association in BC offers the following definition of self-help:

“Self-help and peer support are strategies to help individuals connect to other individuals with common concerns or shared experiences.”

Self-help—also known as peer support or mutual aid—is when a group of people who share a common problem, challenge or issue meet to share emotional support, information and practical ideas. Self-help and peer support groups are ongoing, directed by the participants, for the participants and are free of charge. Groups empower the individual while creating a sense of community. Participants are not alone with their problems. People help themselves while learning from and helping others.

The main difference between self-help and peer support groups is that a self-help group may be facilitated by someone who shares the concern and is more independent from the service system, while a paid person working in an agency usually facilitates a peer support group. According to these distinctions, the groups formed in the Voices project were peer support groups.

Peer support may be actualized through a variety of informal and formal strategies. Researchers describe three broad categories of peer delivered interventions: self-help or peer support groups, participation in peer run programs and the use of peers as providers of services and supports.

Many of the adult mental health programs in BC have peer support workers who are hired to provide one-on-one support to people with mental illness. Non-governmental agencies are also contracted to provide supportive education, such as the British Columbia Schizophrenia Society’s Strengthening Families Together program. While these educational groups are an important part of learning to live with a chronic health condition, the agenda is fundamentally different than a peer support program, where the discussion is determined by the people with the illness.

The best-known self-help program is AA (Alcoholics Anonymous) which has chapters meeting daily across North America. Founded in 1937, Recovery Inc focuses on the needs of people with mental illness across North America (recovery-inc.org). In Canada, peer support programs have grown in an ad hoc fashion. Although governments fund some, most exist on a shoestring and struggle for survival.

Peer support for youth with mental health challenges is a relatively recent phenomenon. Peer support groups are not routine in youth mental health services or in high schools across BC, although YouthNet—a national peer-to-peer education program that deals specifically with youth mental illness—runs in Delta and Whistler. Peer counselling, while distinct from group support, has existed in high schools for at least a decade. Within the past five years, peer support has also been added to some early psychosis programs in BC.
Why is Peer Support Important?

The evidence for peer support comes from the published literature, the children’s rights movement and from the youth in the Voices project.

Evidence from the published literature

After years of listening to people with mental illness speak about how self-help groups have helped them, professionals have also recognized the effectiveness of self-help groups. In a landmark report on mental health issued by the US Surgeon General, the evidence for peer support was summarized this way:

“As the number and variety of self-help groups has grown, so too has social science research on their benefit. In general, participation in self-help groups has been found to lessen feelings of isolation, increase practical knowledge, and sustain coping efforts. Similarly, for people with schizophrenia or other mental illnesses, participation in self-help groups increases knowledge and enhances coping. Various orientations include replacing self-defeating thoughts and actions with wellness-promoting activities, improved vocational involvement, social support and shared problem solving. Such orientations are thought to contribute greatly to increased coping, empowerment, and realistic hope for the future.”

The 2006 report of the Standing Senate Committee on Social Affairs, Science and Technology, Out of the Shadows at Last: Transforming Mental Health, Mental Illness and Addiction Services in Canada, identifies the importance of shifting the orientation of the system from one that is centred around service providers to one centred around patients. Key to this is the adoption of a recovery value to mental health supports and services. The report identifies the value of peer support organizations in bringing hope and recovery to people living with a mental illness and their families. The report acknowledges that this is a new area of research and findings are still emerging. A recent evaluation report on peer support with families as part of the Community Mental Health Evaluation Initiative from the Centre on Addiction and Mental Health in Ontario identified that individuals receiving peer support at 18 months experienced fewer hospitalizations and fewer visits to the emergency rooms than a control group of non-members. The authors note that systems managers don’t give self-help/peer support the recognition it deserves as a vehicle towards achieving recovery centred mental health.

Administrators, clinicians, youth and families are beginning to understand that to achieve recovery, youth must be involved in their own health and services must be welcoming. Although the Voices projects found peer support first and then supported community engagement, the Vancouver Coastal Health Authority found peer support emerging from youth and family engagement. The health authority wished to revitalize its services and engaged a group of youth to help comment on key elements of the transformation. The system managers partnered with Kinex, a youth initiative of the Self Help Resource Association of BC, to complete a youth empowerment audit. Kinex brainstormed with youth ways to make mental health services more accessible and more effective for youth. Peer support groups were at the top of the list and are now being implemented. Additionally, the systems leaders are developing methods to reach out to youth and engage in dialogue about youth mental health issues. For example, the youth have developed a play called Mirror Mirror which is about youth depression and suicide which is currently touring various high schools throughout the health region.
Evidence from the children’s rights movement

Peer support is an important part of the continuum of care. For young people, having their voices included in decisions that affect them is supported in several government documents. In 1991, the Government of Canada ratified the *United Nations Convention on the Rights of the Child* (UNCRC). The UNCRC affirms children’s entitlement to fundamental human rights, including development, protection, participation and non-discrimination, and recognizes children’s need for special care and assistance in realizing these rights. The UNCRC states that:

- families and communities are the natural environment for the development and well-being of children
- parents have primary responsibility for the nurturing of children
- the role of governments and communities is to support children and their families.

In 1996, the Government of British Columbia incorporated many of the UNCRC principles in Section 70 of their new child welfare legislation, the *Child, Family and Community Services Act* (CF&CS Act). The UN Convention is an international treaty that has been signed by Canada and proclaims a duty on governments to inform children, youth and all citizens about the rights of children and to ensure that these rights are understood and respected by all members of society. Section 70 of the CF&CS Act (1996) stipulates that children and youth in care must be informed of their rights and entitlements in a manner that reflects their developmental level, and assisted in addressing and resolving problems that arise when their rights are violated. It becomes the responsibility of the “state as parent” to fulfill this role.

The Office of Children and Youth in BC has been exploring a strategy to operationalize ways to inform youth of their rights. The Office began this work with the Rights 2 Success program to inform youth in care of their rights.⁹

Although not consciously driven by this legislation, two of the Voices groups explored the concept of rights and entitlements in light of this legislation. As so many had experienced discrimination at the start of their illness, it was significant for them to get support to overcome this shaming and get on with their lives. It is likely that for many of the province’s most vulnerable youth, peer support is a first step towards being able to participate in a community workshop such as Rights 2 Success.

Research indicates that when children and youth are involved in their plans of care and decision making that affects them, they are more motivated to achieve successful outcomes for themselves and their families.¹⁰ They are more committed to the decisions and more likely to engage in services that are being offered.

Resiliency research identifies “participation” as a protective factor that contributes to a young person’s sense of competency, agency and belonging, which makes them less prone to depression and hopelessness.¹¹, ¹², ¹³, ¹⁴, ¹⁵

Within the field of children’s rights, officials would argue that the UNCRC exists as a fundamental call to improve the health outcomes of youth by taking a more rights based approach and encouraging and facilitating participation in care.¹⁶ The American reform of their youth mental health system situates youth empowerment and positive youth development at the centre of their systems of care projects. See for example, the discussions on the Youth Group Development’s Youth Motivating Others through Voices of Experience (Youth MOVE) project website (www.tapartnership.org/youth/YouthMOVE.asp). The BC Child and Youth Mental Health Plan
identifies building community capacity as a target for 25% of the regional mental health budget but doesn’t explicitly link building peer support as the vehicle to achieve this in quite the same way that is done in the American systems of care projects.

**Testimonials from the Voices project**

The observations about peer support and youth engagement from the literature and from the children’s rights movement were also reported by the youth in the Voices project. When asked what they learned in their groups, youth identified a number of health-promoting aspects:

**How to function as a group and lessen the feelings of isolation**

In their project evaluations, every Voices group described experiences of learning to function as a member of a group. This was particularly important for youth who had for many years been wound up in sometimes chaotic and individual worlds. At least one person in each group said “I am not the only one with a mental illness.” It was often the conversation opener.

“We formed a group. That is significant because many times, the group doesn’t stick.”

“I learned about trust and commitment.”

**How to be aware of mental illness signs and symptoms and how to cope**

In every Voices group, participants shared how they learned more about mental health, mental illness and how to cope. Adult allies reported in several of the evaluation interviews that they saw young people discuss their diagnoses openly for the first time and learned how to cope with particularly challenging symptoms.

Two of the Voices groups held public events for their peers on mental health and stress. They were adamant that coping with stress was something everyone should know, and that peers teaching peers was better than adults telling youth what to do. This was followed by a group discussion of safe coping activities such as listening to music, surfing the Net, playing music, or drawing. Here are some things the youth said about this:

“You don’t want to be sad. You have a particular mask. [I learned] everyone has a mask. It takes a real person to be able to take off the mask.”

“[I learned] how to not bottle it up. Others are going through the same thing.”

“I learned constructive ways to channel my emotions: anything that will make you happy and not hurt you or others.”

“I learned to do healthy things to relieve stress.”

“Somewhere to talk about illness and how we cope.”

“I have learned a lot about meds. I have another source of information from which to weigh my options. I learned that emotions could have chemical effects.”
How to communicate better with others
At least one youth in each Voices group talked about how important it was to learn to talk with others. The group leaders validated this and shared how they had to work to teach listening and respect for others in what was often a chaotic conversation. Anger management support was mentioned by at least two participants in two different groups. One group had quite a discussion about rights and it clearly had an impact on them. Here are some other direct quotes from participants:

“I learned how to listen better.”

“We learned how to open up and contribute to the group. Everyone was encouraged to make positive and inclusive communication.”

“I learned how to deal with my anger.”

“I learned to express my feelings…Hey, I am feeling this! Don’t make me feel bad.”

“I learned how to help others.”

“I have learned to help people close to me. What I should do to avoid being hurt.”

How to feel more confident and get on with life
Learning to cope with the experience of shame and discrimination was another subject that was consistently raised by someone or several people in each Voices group. One group even made a film on this issue. The youth described their processes of recovery from the negative effects of discrimination due to their mental illness, and the negative impact of falling behind in school due to struggles finding the right treatment:

“Please this group pushed me in my confidence. I am going to chef’s training. I am manic-depressive; everyone knew I had this illness. People judged me and shot my confidence down. I didn’t go to grade 8. It shot my confidence.”

“During grades 5, 6 & 7, I used to fight a lot. Since then, I haven’t unleashed the beast. Medication gave me a steering wheel.”

“When I came here, I had the lowest self-esteem. Now I have self-confidence in being at school with other kids.”

“You can’t treat someone different just because they have a mental illness.”

“We learned about the fact that we have rights. I didn’t know what that meant or that I had rights [in getting service].”
How to access resources? Which ones are youth friendly?
Several individuals in Voices groups joined because they wanted to learn something about mental health. In at least two groups, individuals sought out treatment as a result of talking with other youth about feeling run by their emotions. It helped that in most cases, the adult allies facilitating the groups were also involved in providing one-on-one support.

One group even made a film and interviewed youth service providers on what services they make available. They later established a website and posted information about youth health resources along with a moderated chat room on mental health issues. They felt that:

“It is more comfortable to go to teens for help.”

How to problem-solve

“We problem-solve issues at school such as a suicide in our friend or the way the principals handled two kids smoking drugs in the bathroom.”

“I think by hearing each other out, by listening to our problems, we find ways to cope with our problems. It is hard to see where to go by yourself.”

“I had problems with anger. I have been to several anger management groups but they didn't help. This group helped me.”

“I learned to deal with emotional issues through talking it through with my friends.”

4 How to grow Peer Support

Step 1 Begin with someone who thinks peer support is a good idea and wants to facilitate
Facilitate comes from the Latin root “to make easy.” Begin with a person working in an agency that delivers a youth outreach service, and has a collaborative relationship with the local Child and Youth Mental Health Office. Partner up with the school district’s student services person, as they are likely to be in touch with youth looking for support. Find a youth outreach worker who already has a practice with at-risk youth, as they are likely to know willing participants as well.

The Voices project facilitators frequently partnered up with colleagues within their agency or outside the agency for the group facilitation. The team approach was useful—if needed, one person could provide individualized support while the other person carried on with the group. It also put less pressure on the facilitator if they were ill or couldn’t attend the group due to competing priorities.
Step 2 Find a youth mentor
Youth mentors were part of most of the peer support groups in the Voices projects. They were young people who provided youth leadership during early stages of the group. In one community, there was a young woman who was actively ‘bugging’ the Executive Director to start a support group for youth. Once she stepped forward, she connected with other youth at her school and the group was formed. In another community, a young woman who had been a client of the youth outreach team was approached. She had experienced bullying related to her diagnosis and had recovered sufficiently to recognize when it was happening to others. Reaching out to other vulnerable youth, she brought them to the kitchen table, as it were. In still another group, an individual who was a graduate of a girls’ depression self-help group and as a survivor was studying to be a community social service worker, participated in the group as a youth mentor.

Step 3 Find a commonality for the group
The Voices peer support groups were developed to provide support to youth with mental health challenges. The commonality across the groups was that all had some interest in mental health issues, though the focus for each group varied. For example, the focus of one group was overcoming test anxiety. The focus of another group was supporting youth in the mental health system who attended a particular school.

In most cases there will be youth in the Ministry or youth worker’s active caseload who are willing to move on to a group setting. Not everyone has to be a client of the mental health system; there will be youth who are troubled but not in the system at the present time, who are invited to participate by knowing friends.

The ideal group size was seen to be four to six youth between 14 and 16 years. The defining feature of a peer support group is their shared experience, so it doesn’t work to be too hard and fast about age or grade level. Trust the youth to sort this out themselves.

If someone is younger than 14, they will need parental consent for the youth to participate. The Voices project didn’t find this to be a problem as the parents noted the Voices group was often the highlight of their child’s week. In situations involving older youth, it sometimes was important that group membership was kept confidential from other family members.

Step 4 Decide where to meet
Agree on a safe, neutral place to meet outside of government offices. Budget for snacks and a way to give the young people a ride home, if community conditions make this seem important.

Part of finding a place is to make it fun. Make it a place not associated with difficulties or challenges but a place to share conversation and laughter. Several of the Voices project facilitators also noted that having a place where there are also quiet or welcoming private spaces can provide support if a ‘meltdown’ happens.

Step 5 Decide when to meet
The Voices youth liked to meet weekly. It seemed to work best to meet consistently on the same day of the week. Some groups took time off in the summer. Others continued to meet over the summer, holding beach picnics or other summer-related activities.

Given the rhythm of the school year, the best time to start a group is September, January or May. Having said that, never say never and be open to change. The very successful group in Duncan came together in November—at a time when critical mass had been developed—and it worked.
**Step 6** Facilitate the early dialogue

Getting a support group going is challenging work in the early stages. The facilitator has three main responsibilities to the group: to make sure everyone has a chance to speak, to maintain a safe and respectful environment where people can express their ideas without fear of censure, and to keep the group momentum moving.

Over time, in some Voices groups the youth took on facilitation of the group. This would be the ultimate goal.

**Step 7** Carry out some marketing

After the peer support group has had some preliminary meetings, the youth may want to develop a youth-friendly brochure that promotes the group. The youth who did this distributed their brochure widely to the school system and the mental health system. It seemed to serve two purposes: to draw new members and to celebrate the group’s existence. Marketing efforts may not be important to bring in new people as much as to generate a sense of pride in the existing group.

Youth may want to give their group a name. The youth in Cranbrook developed the name, “Teens 4 Teens,” the Duncan youth called their group “CV-YES,” and the North Shore group called themselves the “West Vancouver Peer Support Group.” Having a group name was a source of pride to all the groups. Also, getting to the step of having a name usually means the group wishes to declare itself as a community support, which often leads to a discussion of mission statement, or purpose as to why the group exists.

**Step 8** To lead, one must follow

Provide leadership that facilitates youth creating the kind of group they want. Develop an atmosphere of trust and mutual respect. Don’t try to program the group—let the youth lead.

Hanging out without an agenda is fine. If things progress and opportunities arrive, help the group pick a project to work on. It could be a one-time volunteer opportunity at a community dinner, or a more complex project such as making a movie or managing a website.

**Step 9** Develop ground rules

The primary ground rule of a self-help group is confidentiality. Members of the Voices groups understood all too well the importance of privacy and confidentiality. They easily understood the mantra: “what goes on in the group, stays in the group.”

One group developed a series of ground rules as they went along to help problem-solve group issues. For example, one day one individual was being extremely negative to every invitation to converse. As the group decided they wanted to be a positive place for growth and self-development, they developed a rule that said, “no negativisms,” and appointed a group member to note out loud when someone was being negative.

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**Need more tips?**

The Self Help Resource Association of BC has a number of short, practical guides available on their website [www.selfhelpresource.bc.ca](http://www.selfhelpresource.bc.ca) in their information and resources section for peer support groups including:

- Managing A Crisis in a Self-Help Group
- Self-Help in Rural Communities: Similarities and Differences
- Self-Help and Professionals: A Practical Alliance
- Six Steps to Start a Successful Self-Help/Peer Support Group
Step 10 Have fun
This step is probably the point to begin with. This was a central quality to all of the Voices groups and their fun was infectious. The groups took a strengths-based approach to the young people, many of who had only deficit-based interactions with the system. There was learning going on and active problem-solving but above all, it was focused on people's strengths and having fun. One group played a game of Twister as part of their weekly meeting.

5 Reaching Out to the Community

At a certain point, peer support groups grow to a point of wanting to reach out to the community. This happens in different ways. For example:

- In Cranbrook, the Voices group who were meeting in a local coffee shop decided to acknowledge the owner of the shop for providing a youth-friendly business. A few months later, they decided to volunteer at the CMHA Christmas dinner. Still later, the group decided to produce a film about youth-friendly services in their community. They also spontaneously put up a website listing local and internet resources as well as providing a chat room on various subjects. Within days, they had a peer-mediated online community.

- In West Vancouver, the youth in a discussion on youth depression decided to carry out a survey to find out what youth would like to do and present this survey results to the Mayor of their municipality. It wasn't planned at the outset but one thing led to another and individual support grew to community action. Motivated by the incentive of CAPP credit hours for high school graduation, youth also worked on presentations regarding anxiety and depression to their peers.

- In Duncan, after having learned a bit about depression and the relationship of mental health to stress, they decided this would be good information for their peers to have. They elected to offer a workshop for about 25 of their peers. Everyone in the group presented some aspect of the subject matter with which they were comfortable.

Fostering Youth Engagement

Youth engagement is the meaningful participation and sustained involvement of a young person in an activity, which has a focus outside of himself or herself. Some youth will take a leadership role in these activities, helping to organize other youth in their efforts. Other youth will be satisfied to be participants in the activity or organization. The key issue is to be conscious of the kind of youth participation that any project is fostering.

An expert on youth participation, Roger Hart described such involvement in an eight-step ladder, described on the next page in reverse order.\textsuperscript{17} The bottom three rungs describe youth involvement that is not true participation whereas the top five rungs describe true participation.

Youth-initiated, shared decisions with adults is when projects or programs are initiated by youth and decision-making is shared among youth and adults. These projects empower youth while at the same time enabling them to access and learn from the life experience and expertise of adults.
Techniques for Facilitating Participation

Adults participate in community change in very specific ways that often require understanding of very specific codes of behaviour. Youth learn and participate differently than adults.

There are numerous organizations dedicated to increasing youth participation and teaching adults enhanced methods of participation. The Voices project experimented with this at the Voices forum. On the day before the forum, youth from all of the project sites met to formulate a shared message to present the next day. They experimented with free writing and theatre and improv techniques to use to present their message the next day. On the day of the forum, the youth presented a poem written collectively by the group on the value of self-help and demonstrated with body sculptures how they felt as someone with a mental health challenge, how the system treated them and how they wished to be seen.

Individuals telling their story with incredible comfort and ease to an audience of over 100 individuals followed this presentation at the forum.
Be an Adult Ally

Adult allies are fundamental to growing peer support. The Voices project facilitators and the Self Help Resource Association of BC suggest some specific skills to being an adult ally. These include developing a unique perspective, being a good facilitator, working to achieve inclusion and focusing on the strengths of youth.

A Unique Perspective

Being an adult ally requires a unique perspective. Where most professionals are trained to be the source of information, adult allies in youth work see youth as the source of knowledge and let youth lead the way.

Adult allies can be associated with host agencies, school districts, or volunteers from the community. They are interested in creating a safe space for youth to talk about matters, which are important to youth. They are also experienced in nurturing recovery and all the phases it entails. One adult ally in the Voices project commented:

“We are funded by MCFD to do psycho-educational groups with youth and teach them about mental illness, which is fine, but this provides an opportunity for kids to heal and grow with a sense of their own power. I saw distinct phases in the evolution of self-help in the group. First is the blaming and finger-pointing phase. Kids really need to blame someone for something that has happened to them outside of their control. The first voice that joined our group was almost always anger. And it was best to listen to it and move on. The second phase was telling your story and actually being heard. The third phase was creating change. Some of our kids are now thinking about how things could be better for other kids in the same shoes.”

Good Facilitation Skills

Good facilitators do a lot to make a group work from behind the scenes. They think about creating a welcoming atmosphere by offering snacks and food. They are knowledgeable in the stages of group development and know how to work with conflict within a group so that conflict strengthens the process rather than creating divisiveness. Good facilitators have and extend good listening skills so that people feel safe in stepping forward, and peers see a role model of good listening.

‘Cool’ adults are really important to youth! Be yourself and be upfront—model honesty, integrity, open communication, and boundary-respecting. Allow youth to set up ground rules if they deem this necessary at any time. As one youth and family worker said: “I don’t carry the kids. They carry themselves, and I support them.” Assist youth in taking action (youth-instigated projects), rather than trying to steer the boat.

Youth are trying out new ideas, so it’s important to be non-judgmental. Avoid reacting to what may be a disturbing conversation or controversial subject matter, as long as everyone is safe. If you really get the “NO” feeling, put it out to the youth—see if anyone else feels the same way. Ground rules (set up by the group) may apply here.

Be ready to respond to concerns of youth in the group if necessary. Many Voices project peer support facilitators found it helpful to work as a team, which allowed one adult ally to address a concern with one youth participant, while the other carried on with the group activities. This was effective, as the flow was not interrupted. Go with the flow!
Building Group Inclusion
One of the most important tasks of a facilitator is to work to maintain trust and a sense of cohesiveness in the group. This was particularly challenging for some youth in the Voices groups as they had often been marginalized, bullied and isolated with their disability. In effect, they had a longer way to go to find trust.

Youth in the evaluation focus groups spontaneously talked about how they learned to listen to others through group participation. Others talked about how the group helped them feel less angry about life. Still others talked about learning to make an “I” statement with comfort for the first time. As one youth reported: “this group really grew my confidence.”

Another big part of the groups’ success was learning to access support within the group as well as within the community. Many of the youth used their group to speak openly about their mental illness for the first time and get support for taking their medications. Some youth in the process of the group learned to ask for help and were diagnosed and received their first treatment out of support from the group to seek help.

Strengths-Based Thinking
Strengths-based thinking is anchored in the work of the Search Institute and the idea of developmental assets as the foundation of healthy youth development. Voices facilitators would have had many reasons to worry about the deficits of some of the participating youth, but with a focus on strengths, individuals were allowed to blossom and shine.

Creating Incentives
Arrange for youth to receive credit for participation where applicable, such as Career and Personal Planning (CAPP) hours needed to graduate. Facilitate other perks within the community. For example, in West Vancouver, a martial arts teacher offers free classes to youth who attend a local peer support group. Be creative!

Practice Self-Care
It is important for adult allies to be in good shape. Practice ‘self-care,’ which could be anything from exercise to cooking—whatever makes you feel well. Adult allies need to make sure they are well supported.
Conclusions

According to Webster’s Dictionary, innovation is something new. Peter Drucker, the business guru adds something more to this definition by naming innovation as a change that creates improved performance.

Peer Support for youth with mental health challenges is a new idea for many in British Columbia. In a service system where wait lists are long even in the midst of substantial reform it is easy to see peer support as just something else to add, “when we have time.”

The youth involved in the Voices Project make the case that peer support is far from an optional part of the youth mental health system. It is a change that will create improved performance. Comments from several of the service providers involved in the Voices project testify to the value of peer support:

- “We [at the Ministry of Children and Family Development (MCFD)] can’t duplicate what is here. It is informal, fun and the learning comes from peers. In mental health, the treatment model that we use is only good if you have a follow-up support group. Older kids in our community with mental health issues previously had migrated to church-based youth groups but this was difficult for them as participation in this sense comes with an agenda.”

- “We (MCFD) can do the assessment, diagnosis and treatment but then we need to reintegrate youth into the community and help kids problem-solve normal teenage issues such as ‘How to ask a girl out on a date?’ The group helped the kids disconnect from the therapist as the sole source of support and learn to look for support and friendship from peers. We can’t do that from where we sit.”

- “Our (MCFD) kids are more vulnerable than the youth who might go to a community youth centre. Most always they have been made fun of or labeled and their self-esteem is battered. Some have experienced abuse. It is good to have a place for them to go to just be kids.”

This document has reported on the experiences of the Voices project in developing peer support for youth in British Columbia living with mental health challenges. It has described projects taking place in a service system in the midst of reform but it also aims to encourage others to become adult allies for peer support. As discussed above, peer support, while representing the relatively simple concept of youth helping youth, is also a powerful strategy for facilitating recovery and getting on with life.
References


4 See for example the program description of the Fraser Health Early Psychosis Program at www.earlypsychosisintervention.ca/epi/


18 See for example training workshops provided through the Kinex Youth Exchange program of the Self Help Resource Association of BC (www.selfhelpresource.bc.ca)
