





Guidance for Peer mentoring



Housing First

Guidance for Peer Mentoring

About

This briefing provides information to support Housing First services to develop and implement successful peer mentoring programmes. It has been developed by the Housing First England project and VOICES who have successfully embedded peer mentoring across service provision.

Involving people with lived experience in Housing First

Involving people with their own lived experiences is invaluable in the provision of Housing First. Not only can they provide a useful insight to the policies and procedures adopted by the service, but they can also relate to those accessing the service in a unique way. Their experiences and awareness of needs enable them to empathise and support people from a position of personal knowledge and shows that recovery is possible and does happen. People with lived experience can provide supportive relationships in which the balance of power is equal. This is particularly important when offering a service to people with multiple and complex needs.

A review of studies¹ found that there are numerous psychosocial benefits to peer mentoring. People experienced less emotional distress and crises and saw a reduction in their substance misuse. People have also reported feeling better about themselves with increased self-esteem, hopefulness and inner strength. They report having more awareness of their rights, feel more empowered and have greater social skills and networks.

Across organisations, there are a number of roles that can be offered to people with lived experience of homelessness and other disadvantages. Housing First services most frequently involve people with lived experience to provide additional support to residents. Unpaid peer mentoring is the most common way; however, some services also offer paid employment to people with lived experience.

Individuals should be involved for their abilities and skills, not just for their personal life experiences. Those providing Housing First should also consider how people can participate in non-tokenistic roles at all levels of service design and delivery. This may include offering expert consultancy at early stages of service design, delivering training to staff and partner organisations, and undertaking general activities to assist the smooth running of the service.

The role of peer mentors

Peer mentors can give valuable support in a number of different areas:

- Provide motivation, support and act as a role model
- Support people to attend appointments
- Visit people in prison and hospital
- Provide advocacy and empower people to 'have their say'
- Support customers to identify their aspirations and goals.

More experienced peer mentors may also support people to get bank accounts, offer support about accessing or overcoming issues with benefits and supporting house searches. They may also support people to access training and learning opportunities and with developing life skills.

¹as cited in http://www.ct.gov/dmhas/lib/dmhas/trauma/EngagingWomen.pdf

At **VOICES** we've thought a lot about how we refer to our volunteers. Many people start peer mentoring to develop new skills and gain experience to move into employment. The role title given to volunteers should be considered in relation to our local labour market and future possibilities for paid employment. For example, 'Peer Specialist' or 'Assistant Service Coordinator' may be more suitable than 'Peer Mentor'. Look at the job titles within our local area and try to match the volunteer role to current vacancies. The title of a peer mentor may not be fully understood so a more defined title can support volunteers in understanding the type of job roles they might apply for and enable the peer to better understand their own role.

Resource management for peer mentoring

Involving people with lived experience as peer mentors must be done well and meaningfully, which can make it resource intensive. Some projects or organisations may have a dedicated post/specified person who will manage the involvement of peers.

There will also need to be financial capacity to resource this including paying expenses and covering the costs of activities undertaken by the mentor and mentee. Consider how you will pay any expenses such as through prepaid cards, travel passes or cash. While you may prefer to reimburse the volunteer, their financial situation should be considered as to whether they can pay up front.

Other resources that you will need to make available are laptops, mobile phones and workspace for the volunteers. It may be beneficial to integrate them into the team.

Recruitment and training

Recruiting peer mentors

Recruiting the right people into peer mentoring positions is important for both the mentor and mentee. Not everyone that wants to be a peer mentor may be ready to undertake this role and some who are suitable may drop out. It can be useful to establish the ideal number and demographic for the pool of peer mentors so that promotion of the opportunities can be promoted widely across your own, and partner agencies, networks. Consider what activities you will expect the peer mentor to undertake and ensure that this is clearly stated during recruitment. You may wish to co-produce a role description with residents.

It will also be important to detail what you are offering them in return for their time. Alongside reimbursement for expenses, will they be provided with an accredited qualification, other training and/or skills development, and support with career development?

Risk assessing peer mentors

It is likely that those who wish to volunteer are people who have accessed your service, or other local services. It is important to support them to transition during this time however, by carrying out a traditional style risk

assessment, we are implying that they still pose a significant risk. You should take an asset-based approach and treat them in the same manner as you would treat a volunteer from outside the organisation. This shows the volunteer that their recovery is valid and valued and seen as an asset to the organisation rather than their experiences being deemed as just risks.

As part of the volunteer application process you should attempt to gain as much information as possible about the person through informal discussion. A DBS application covers all legal aspects of recruiting volunteers and while assessing other risks may be required this should be done informally. Some questions you could ask are:

- How would you feel if you were placed is a situation where a person was under the influence of substances?
- Is there anyone who could potentially be referred to our service that you wouldn't feel comfortable working with?
- What kind of situations would you feel uncomfortable supporting a customer?

Training peer mentors

Ideally peer mentors should have access to much of the same information and training as paid employees. You may wish to develop a set induction process and training package to cover the key learning areas (e.g. safeguarding, safety assessment/management, boundaries) and deliver other information informally through supervision. As volunteers, peer mentors should be given the opportunity to express their own learning aspirations to allow you to plan for training opportunities. This may also lead to co-produced training and development activities.

Try to make training as interactive as possible using a variety of activities, from basic pen/paper exercises to the use of video or audio files. Accessing health literacy information and resources can allow you to develop real life scenarios and situations as part of your training. Allow colleagues to be part of the training - by introducing the team early on, any feelings of anxiety about meeting staff members can be reduced.

In Stoke, work has been undertaken with a local university to develop an accredited peer mentoring programme. Accredited courses are available through many different routes so it's good to make contact with colleges and community training organisations in the first instance. Many organisations request that volunteers complete a Level 2 accredited peer mentoring course, however we've learnt that these many need to be adapted to ensure they cover specifics around working in the area of multiple and complex needs. It's also beneficial to ensure reflective processes are integrated throughout the course and ensure that the tutor has a good understanding of multiple and complex needs and can respond effectively to issues raised by peer mentors.

Not all volunteers want to complete an accredited course initially, due to factors such as a lack of formal education or negative experiences of formal education. It's therefore important that you have a thorough induction process to educate volunteers about the service and how they can provide support. We've learnt that DBS applications can sometimes take up to 12 weeks to come through and there is potential here to lose volunteers. Staggering the induction and training throughout this time can keep people engaged and involved. For example, the induction could be one day a week for a few weeks and could incorporate workshops around other local service specialisms.

Due to the experiences of peers there are specific things to consider during the recruitment phase, and the most important might be their own recovery. Consider the length of time a person has been in recovery and how they have managed this. Does your organisation have a set period of time for recovery or could this be determined on an individual basis to prevent further marginalisation? People engaged in recovery programs with other services may be a good match if proven to be stable yet may have been in recovery for a shorter period of time.

Documents for peer mentors

It is recommended that you develop specific documents for your peer mentors including, but not limited to:

- A code of conduct and guidelines of how to manage customer contact; what the role includes and doesn't include
- Peer expectations and boundaries ensure that these are well established and reviewed regularly. You may like to co-produce these
- Confidentiality statement this doesn't have pages of information but is concise with the necessary information.

You could develop a code of conduct alongside your peers. This can allow them to develop more understanding of boundaries and expectations but is also demonstrable peer involvement and coproduction. Keep code of conducts to the point and as 'jargon' free as possible. You could call it 'Customer contact guidelines' or 'Our Agreement' to reduce anxiety and authoritative messaging. Do not be afraid to be as specific as possible – think of potential issues that could occur such as financial boundaries and physical contact where this is appropriate.

Supporting peer mentors

Peer mentors should have access to support, supervision and training for their development and be able to address anything that could impact their wellbeing.

They should have regular (often monthly) supervision and should be offered an opportunity to debrief at the end of each peer mentoring session. Providing support in Housing First services can be challenging for all involved who may regularly be exposed to the pain and trauma of others. The risk of being triggered by these situations is increased in those with similar life experiences who may be reminded of their own adversity and trauma. Many Housing First services provide staff with reflective practice sessions and/or clinical supervision. It is worth considering whether this could be extended to those in peer mentoring roles.

Ensuring that follow up contact can be made where possible after a peer/customer meeting is good practice. It allows a quick debrief for the peer and ensures that any potential trauma or identified risks could be highlighted from the outset. In addition, always ensure that there is availability for the peer to contact a member of staff throughout their meetings with customers. Although this is often not required it places the peer at ease knowing that a colleague can be contacted if needed. This also prevents feeling of isolation occurring through the peer mentor role.

Managing peer mentors' time and absences

It is important to keep a record of the time that your peer mentors are volunteering. Not only will this ensure that they keep to the hours you've agreed (some may feel the need, or want, to do considerably more) but also to look for patterns in absence so that adequate support can be offered. Ask the peers to complete a record of their hours each week so that this can be managed effectively.

It can also be useful to record the interventions that your peer mentors are most involved with to see what areas of support is most appropriate and effective for the peer mentoring relationship. In addition, ensuring that absences of the mentee are recorded will help to monitor a person's ability to maintain the peer role, review their suitability to it, or consider whether it's not a good match.

Peer mentoring challenges - examples from VOICES

Changing volunteer roles

When starting to volunteer, Gina disclosed a health condition. Over time she often cancelled her volunteer shifts which were recorded each time by the supervisor. After several weeks, at her regular one to one meeting the supervisor initiated a discussion about her absences. They established that, due to her condition, it was not appropriate for Gina to be working directly with customers. They agreed to adapt the role to ensure that she could contribute her lived experience in a different way. Gina focussed her work around property searches; her excellent communication skills and knowledge of the areas were beneficial when speaking to landlords and letting agents directly.

Peer mentor needing support

Mateus was often late for his volunteer sessions and seemed very withdrawn in the office. During supervision he explained that his GP had changed his medication, and this was impacting him however he had been too anxious to ask for a break from volunteering. From the discussion it was clear that this, rather than his willingness and motivation, was the reason for his lateness. It was agreed that he would take two weeks off and we arranged a solution focused therapy session for him. Following his leave and the therapy session, Mateus returned to his volunteer role fully refreshed could be more open with his supervisor regarding his own needs going forward.

Peer mentor behavioural challenges

Tony has been in recovery for three years and is keen to support others experiencing homelessness and addiction. However, over several weeks it became apparent, after he was seen by a colleague, that Tony was spending time with clients without informing his supervisor. It was raised in his one to one meeting, but Tony felt that there was no problem as it was his own time. We observed that Tony had started to display 'rescuer traits' and was possibly at risk. The service reviewed the code of conduct with all peer mentors, including Tony. Despite saying he understood it, he continued to meet with clients outside of his volunteering hours. He also became overly critical of services and began to challenge them; causing conflict between the peer and other service providers resulting in several complaints (although he was not honest about these interactions). For these reasons it was felt that Tony was not currently suitable to work as a peer mentor and needed to develop his skills further, so he is no longer a peer mentor.

The mentor and mentee relationship

The personal safety of peer mentors

You will need to conduct a risk management plan regarding the safety of individuals involved in peer mentoring. Things to consider could include: will peers work with people in their own homes or will you encourage them to meet in public places to reduce potential risks e.g. other associates in the property, needle stick injuries? Will they be lone working, if so what will your 'checking in' system be? If they are working with someone who is presenting under the influence of drugs or alcohol, how will you expect them to deal with this?

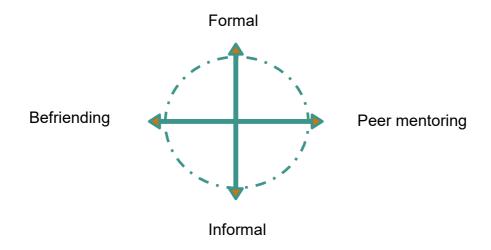
About the mentor-mentee relationship

Peer mentoring is most effective when a good rapport can be developed between the mentor and mentee. When matching people, take more time to consider their interests and hopes rather than the type of lived experience they have. Allow the mentee and mentor to establish their role, purpose and individual responsibilities in the relationship.

VOICES initially started their peer mentor programme with planned matches. However, it was identified that this was not always successful. They became more flexible with the way they work, and peers started to work alongside service coordinators. This allowed peers to meet with customers, which in turn, organically developed a more effective matching process. This also was more beneficial to the peer as a customer was more invested in this than if this was a forced match.

Language can be really important during the matching. You may decide that a client would be better suited to someone in a befriending role than a mentoring role as some may wonder what they need 'mentoring' on. This can be established informally early on when discussing the options of support.

The diagram below demonstrates how peer mentoring and befriending can be both formal and informal. This can develop through the relationship. Initially it may be quite informal befriending approach, progressing to more formal mentoring in the future. However, this should still be viewed in a real-world context with an understanding that one area of progress is no more desirable than the other if positive outcomes are being achieved.



Arranging visits

It is important to ensure that the peer mentor and mentee are comfortable with each other. One way of managing this is for the peer mentor to accompany a Housing First worker on two to three visits to enable a relationship to begin developing between all three, and for the worker to evaluate whether the mentor-mentee match is appropriate. This would also include feedback from all parties and could demonstrate further examples of co-production.

Where a Housing First resident needs to be dual-worked, you could consider a peer mentoring supporting this and always visit the individual jointly with the worker. If you have several peer mentor volunteers, you might like to do a matching exercise or give people choice as to who they'd like to work with.

Visits and appointments

Preparing the peer mentor for their visit or appointment will be important. As mentioned above, you will need to consider safety if the peer is meeting with the person at their home, and financial capacity if they're travelling or attending an activity with their mentee.

You should also offer advice and guidance to the peer mentor regarding what to do if their mentee is presenting under the influence of alcohol or other substances and prepare them to support people to appointments with other services.

Documenting work and progress

Asking peer mentors to document their work and learning is useful for reflection in supervisions not just to monitor the relationships but also as a tool for learning and development. It can be used to highlight their strengths and identify gaps in knowledge and experience. Undertaking this also prepares people for working in the sector.

It can be useful to ask what they may have learnt or developed as part of their record keeping. This can encourage thinking in a reflective manner, encourage volunteers to consider their own learning/development needs and support you to plan and complete effective supervision and development meetings with volunteers. As part of this, you will also need to consider what records and information the peers will have access to.

Ending the peer mentoring relationship

A peer mentor relationship may end for a variety of reasons. A positive ending to a relationship can be facilitated when both parties are in agreement that the aims have been achieved and can recognise the positive changes made by the mentee. Capturing this in case studies can be beneficial in demonstrating the benefits of peer mentoring to other clients and services.

There are also occasions when a peer mentoring relationship may end in less positive circumstances. Either the mentor or mentee may become unable, or resistant to engaging in the relationship for a variety of reasons. These may include:

- Moments of crisis, poor mental/physical health, substance misuse
- Past histories, experiences, acquaintances
- A clash in religious, cultural and personal beliefs
- A person's willingness to engage in recovery and a peer relationship
- The customer not engaging with the peer and failing to attend for meetings.

Whilst some of these can be identified and managed in the early stages of the relationship, it will be good practice for the mentor and mentee to discuss how they might handle potential challenges.

Case study: the benefits of peer support

The peer mentor:

Mark has been in recovery from a ten-year alcohol addiction for three and a half years. His drinking became particularly bad when he worked as a builder in the UK. He moved abroad to open a bar and, after the breakdown of his marriage, his addiction became unmanageable leading to homelessness, rough sleeping and avoiding authorities due to him being in the country illegally. The wake-up call came when Mark's partner became pregnant. He made connections and got support for himself and his partner. He moved back to the UK and found himself in a Christian rehabilitation centre and, on completion, moved to a hostel. After six months he was offered his own property; his first home in almost six years.

The customer:

Anthony had a history of moving around from rough sleeping to local hostels and then eventually into supported housing with his own flat. He states that he began to drink to numb the pain of losing eight close family members in a year. He frequently spent all of his money within a few days of being paid and then suffered badly from alcohol withdrawal. Urgent meetings were often called due to fears for his health and, ultimately, his life. When referred to the service there were several agencies involved to support him with alcohol misuse, mental health and housing. However, the services weren't working in a way that was effective for Anthony and while they were supporting him when he presented to them, it was evident that a more collaborative approach was needed.

Building the relationship:

Initially, Anthony was reluctant to meet with a peer mentor. He wasn't convinced that it would work, and he was continuing to drink, although not engaging with addiction services, and didn't engage with people in his supported accommodation where he was unhappy. As the peer mentor coordinator, I met with Anthony a couple of times to discuss this with him, talk about how peer support could be useful and to explore what might be available in the community around his interests. He talked about fixing bikes, previous construction work that he had done and how practical he is.

After providing Anthony with some background on Mark he decided he would meet him. Anthony was still a little sceptical about how this would help him until Mark started to talk about his lived experience. Anthony talked openly about his addiction, his mental health and how hard he finds it not being able to get the right kind of support from someone who understands or has been through this. For the first few weeks Anthony would cancel his meetings with Mark as was reluctant to leave his flat and continued to drink. However, he still talked with Mark about how he could reduce this and find new things to do to occupy his time.

What happened next?

Anthony and Mark started to meet regularly with Anthony's service coordinator whilst Mark's Coordinator focused on researching what they could get involved in. Because of Anthony's interests and skills, a visit to a community interest bicycle repair company was arranged for them. Anthony enjoyed this and even met up with some old friends. Anthony and Mark started to meet up in the local town to do some bargain hunting in the local charity shops. At this point Anthony started to leave his flat and sit within the communal areas of the supported housing. He and Mark started to hold their peer mentor meetings there where they talked about managing without alcohol, the difficulties of financing addiction and steps to prevent him from buying or being tempted to by alcohol.

Anthony's service coordinator also supported him to secure an allotment and now Anthony and Mark meet regularly to work on this together where they have both been busy for the last few weeks.

Not only has Anthony's attitude towards drinking changed since working with Mark for the last two months, he now has someone he can talk to who understands from their own experiences how difficult this can be.

"Mark had a better insight into life without alcohol than those from his recovery service" Service Coordinator: VOICES

Since Anthony and Mark started working together as mentor and mentee, Anthony's confidence and self-awareness has increased. He is visibly less isolated and has started to engage with fellow residents at his supported housing; having meals with them, attending day trips and socialising more often. He goes to his allotment, spends his time more meaningfully now and recognises that he is able to live without alcohol. For Mark, he has had the chance to share his life experiences and to value how beneficial this is towards supporting someone on their own journey to recovery.



What we do

Homeless Link is the national membership charity for frontline homelessness agencies and the wider housing with health, care and support sector. We work to improve services through evidence and learning, and to promote policy change that will ensure everyone has a place to call home and the support they need to keep it.

Let's end homelessness together

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