



Peer support practice review

Project research plan

Prepared for:

Australia New Zealand School of Government (ANZSOG) and
National Disability Insurance Agency (NDIA)

November 2017

Karen Fisher, Laura Davy, and Christiane Purcal

Research Team

Social Policy Research Centre

Karen Fisher

Rosemary Kayess

Christiane Purcal

Laura Davy

Ayah Wehbe

Centre for Children and Young People, Southern Cross University

Sally Robinson

For further information:

Karen Fisher +61 2 9385 7800, karen.fisher@unsw.edu.au

Social Policy Research Centre

UNSW Sydney NSW 2052 Australia

T +61 2 9385 7800

F +61 2 9385 7838

E sprc@unsw.edu.au

W www.sprc.unsw.edu.au

© UNSW Sydney 2017

The Social Policy Research Centre is based in the Faculty of Arts & Social Sciences at UNSW Sydney. This report is an output of the research project, Organisational capacity building to deliver sustainable models of peer-to-peer support, funded by the National Disability Insurance Agency (NDIA).

Suggested citation:

Fisher, K., Davy, L., Purcal, C. (2017). Peer support practice review. (Project research plan). Sydney: Social Policy Research Centre, UNSW Sydney.

Contents

Contents	i
Glossary	2
1 Introduction	3
1.1 Research context	3
1.2 Policy context and rationale	4
1.3 Project aims and summary.....	5
2 Project design and methods	7
2.1 Stage 1A: Review of current good practice in peer support delivery	7
2.2 Stage 1B: Research and literature review of international evidence and best practice in peer support programs	11
2.3 Stage 2: Development of good practice materials for capacity building	11
2.4 Stage 3: Delivery of pilot organisational capacity building training and resources	12
2.5 Stage 4: Evaluation of pilot organisational capacity building materials	12
2.6 Stage 5: Development of a set of good practice materials for ongoing capacity building.	13
3 Project management	14
3.1 Governance.....	14
3.2 Communication strategy	14
3.3 Project team.....	14
3.4 Project timeline.....	15
3.5 Risk strategy	15
References	18

Glossary

ANZSOG	Australia New Zealand School of Government
ATSI	Aboriginal and Torres Strait Islander
CALD	Culturally and linguistically diverse
CICD	Community Inclusion and Capacity Development
DPO	Disabled People's Organisation
DSO	Disability Support Organisation
ILC	Information, Linkages and Capacity Building
NDIA	National Disability Insurance Agency
NDIS	National Disability Insurance Scheme
SCU	Southern Cross University
SPRC	Social Policy Research Centre
UNSW	The University of New South Wales Sydney
WHO	World Health Organisation

1 Introduction

The Australia and New Zealand School of Government (ANZSOG) and the Social Policy Research Centre (SPRC) have been engaged by the National Disability Insurance Agency (NDIA) to research, develop, and pilot capacity building resources for the delivery of sustainable models of peer support.

This project, led by the ANZSOG research team, aims to build the organisational capacity of peer support providers to deliver peer support. The project will develop and evaluate a suite of resources and training materials designed for organisations providing peer support programs, and develop good practice guidelines on implementing peer support programs to inform investment in peer support programs and networks in the future. To inform the development of these guidelines and resources the project teams will review current good practice approaches to implementing peer support networks in the Australian disability sector and undertake an international research and literature review on best practice delivery of peer support programs.

The SPRC has three key roles in this project: 1) support ANZSOG in project design and provide advice on inclusion and accessibility issues; 2) review the materials, strategies and processes currently used by peer support providers to inform the project as a whole; and 3) observe and evaluate the capacity building training and resources developed by ANZSOG researchers to support the delivery of peer support programs.

This project research plan outlines the overall project and describes the SPRC role in detail.

1.1 Research context

Peer support brings together people with a similar concern or experience, enabling them to “explore solutions to overcome shared challenges” (WHO, 2017, 9). Previous research has shown that peer support groups are viewed by participants as safe places for sharing experiences and supporting each other (Purcal et al., 2014; Shilling et al., 2015). They provide opportunities to informally learn knowledge and skills needed to participate in the community (Power, Bartlett & Hall, 2016). They also provide vulnerable and marginalised groups in the community with opportunities to build new relationships and strengthen social support networks, reducing isolation and feelings of loneliness (WHO, 2017). People in the disability community often consider peer support groups and disability advocacy organisations their most reliable information sources (Purcal et al., 2014).

The National Disability Insurance Scheme (NDIS) represents a major change in the way disability care and support is provided in Australia. Many people with disability and their families have reported feeling uncertain and anxious about entering the scheme (Collings, Dew & Dowse, 2017). The positive research findings about the benefits of peer support indicate that informed and supportive peer networks are a key mechanism towards assisting people with disability and their families to prepare for the transition to the NDIS context. The purpose of peer support in this context is to support people’s capacity to engage in their preferred opportunities, make choices, and use NDIS and other mainstream support, such

as education, employment, child protection, domestic violence support, mental health and other health services.

1.2 Policy context and rationale

The Disability Support Organisation Capacity Building Project (the DSO Project) was initiated by the NDIA in December 2014, in recognition of the need to build the capacity of people with disability and their families to engage with the emerging NDIS and the shift to individualised support. Through the NDIS Sector Development Fund (SDF), the NDIA funded 18 organisations to develop up to 20 peer support networks each. The peer support networks aimed to build the capacity of people with disability and family members to:

- Effectively engage with the NDIS
- Effectively engage with mainstream programs, services and activities
- Exercise choice and control
- Engage with opportunities for independence, self-management and community inclusion.

The DSOs were generally community advocacy organisations rather than direct service providers, and included organisations of and for people with disability and organisations of and for carers and family members. The groups were diverse in terms of participant location and characteristics, and DSOs developed a range of different approaches to delivering peer support, including face to face and online approaches. DSOs reported a range of positive benefits for peer support participants, in areas such as social connection, information, NDIS engagement, and personal confidence and leadership.

The DSO Project was funded from 1 January 2015 – 31 December 2016. Since this initial funding period, DSO activities have continued, funded up to 30 June 2018 through Community Inclusion and Capacity Development (CICD) grants and the NDIA Sponsorships Program.

JFA Purple Orange, a South Australian-based research and advocacy organisation, was appointed by the NDIA as the national support agency for the DSO Project, a role that will also continue until at least 30 June 2018. JFA Purple Orange supported DSOs by creating a “community of practice” to share experiences and expertise and foster collaboration across the DSO Project. This support included the development of a dedicated website (<http://www.peerconnect.org.au>) and other peer support training resources.

In line with the positive research findings about the benefits of peer support and positive outcomes for peer support participants reported from the DSO Project, peer support will continue to be one of the key program areas funded through the Information, Linkages and Capacity Building (ILC) component of the NDIS. ILC will be available nationally from 2019-2020. As peer support delivery continues in the context of full NDIS and ILC roll-out, it is particularly important to reach sometimes marginalised and further disadvantaged people and communities such as Aboriginal and Torres Strait Islanders and people from a culturally and linguistically diverse background, people living in boarding houses and people with contact with the criminal justice system, and that further strategies and resources are developed to assist organisations to achieve this.

This organisational capacity building project, led by ANZSOG in collaboration with SPRC, builds on the important research and service development that have been undertaken in this area thus far. It will review current practice amongst organisations delivering peer support, develop a suite of capacity building resources, and formulate good practice guidelines to assist the new disability funding and service environment to meet increasing peer support needs. It is envisaged that the research and materials developed in this project will be of use both in terms of both contributing to the evidence base informing how ILC might invest in delivering peer support in the future, and in contributing to publicly available tools and resources for organisations that deliver peer support to people with disability and their families into the future.

1.3 Project aims and summary

In line with the research and policy context described above, the overall aims of this project are to:

1. Increase the organisational capacity of peer support providers to implement good-practice peer support programs
2. Develop a suite of capacity building resources including training, tools and other materials that will assist providers to implement peer support programs
3. Develop good practice guidelines on implementing peer support that address issues such as resourcing, recruitment, outreach to marginalised people and groups, capacity training, monitoring, and evaluating.

The project will be conducted between September 2017 and November 2018, and will comprise 5 key stages:

- Stage 1A: Review of current good practice in peer support delivery
- Stage 1B: Research and literature review of international evidence and best practice in peer support programs
- Stage 2: Development of good practice materials for capacity building
- Stage 3: Delivery of pilot organisational capacity building training and resources
- Stage 4: Evaluation of pilot organisational capacity building materials
- Stage 5: Development of a set of good practice materials for ongoing capacity building.

It is intended that the findings, capacity building resources and good practice guidelines developed in the project will be shared and distributed sector-wide, including to the peer support providers that participated in the data collection of Stage 1A. The dissemination strategy will include making the capacity building resources and good practice guidelines available online through the websites of the NDIA, SPRC, and ANZSOG.

The SPRC role in this project is concentrated in Stage 1A and Stage 4, however the SPRC will also provide advice in the other stages. The SPRC regularly includes specialist disability experts and representatives from Disabled People's Organisations (DPOs) in research

projects, contributing to governance, advice or as members of the research team. In this project, a representative from a peak national DPO that is not a Disability Support Organisation (DSO) advise on the project design and assist in decisions about research methodology. In addition, SPRC researcher Rosemary Kayess and Sally Robinson from Southern Cross University (SCU) will be engaged as advisors on inclusive practice.

2 Project design and methods

The following sections on project design and methods explain the SPRC role in this project in further detail, focusing on Stage 1A in particular.

2.1 Stage 1A: Review of current good practice in peer support delivery

In Stage 1A, the SPRC research team will review current peer support provision practice. Data from service information, interviews and consultations, and any other available sources will be analysed to 1) identify current good practice in peer support implementation, and 2) identify possible gaps and future organisational capacity building needs to inform the development, piloting and evaluation of capacity building materials and good practice guidelines in Stages 2 – 5 of the project. This stage of the project will result in a public report to inform good practice.

The research questions that will direct this stage of the research are:

1. What benefits do peer support providers and peer facilitators aim to achieve for participants, and how do they work towards achieving these benefits in their practice?
2. What strategies have been developed by peer support providers to engage marginalised or further disadvantaged people and communities in peer support, such as Aboriginal and Torres Strait Islanders and people from a culturally and linguistically diverse background, people in contact with the criminal justice system and people living in boarding houses?
3. What materials, strategies and processes have providers developed or used so far to facilitate peer support program delivery?
4. What further capacity building resources do providers suggest are needed to improve peer support provision and strengthen the ability of organisations to provide peer support?

The data collection methods adopted to answer these research questions will include:

- A program and document review of existing peer support programs (Questions 2 and 3)
- Semi-structured individual interviews with peer support managers and providers (Questions 1, 2, 3, and 4)
- Semi-structured individual interviews and group interviews with peer support leaders and facilitators (Questions 1, 2, 3, and 4).

Project design and management:

The approach, methodology and outputs for this stage of the project will be designed collaboratively with ANZSOG, NDIA, and other project advisors. A design workshop organised by NDIA will facilitate opportunities for engagement with key stakeholders in peer

support provision early on. The SPRC team will secure ethics approval through the UNSW Human Research Ethics Committee.

Mapping:

The SPRC team will undertake a program and document review of existing peer support networks. The review will include collating data transferred from NDIA on the characteristics of peer support providers, the characteristics of the peer support participants, the activities and objectives of the peer support networks and the resources developed and used by providers.

The purpose of this mapping exercise is to collate information from the NDIA about the existing organisational capacity building materials available for providers of peer support, raise questions for the interviews that will be conducted with peer support providers and facilitators, and inform the sampling framework for the interviews.

The review will prioritise identification of capacity building materials related to outreach, specifically to groups that might experience barriers to peer support, e.g. people and communities such as Aboriginal and Torres Strait Islanders and people from a culturally and linguistically diverse background, people living in boarding houses and people with contact with the criminal justice system and people living in regional, rural or remote locations.

Sampling strategy:

The SPRC researchers will develop a sampling strategy informed by the program and document review of current peer support providers and networks. The sampling will be decided in consultation with NDIA representatives, ANZSOG project members and project advisors.

Peer support providers from various locations with different target participant groups will be included in this sampling strategy, as they will have different ways of providing peer support. The project team will ensure that the participants represent a variety of experiences, characteristics and locations, as indicated by the program and document review of the location, numbers and characteristics of existing peer support programs, and innovative practices developing and using peer support resources.

The sampling strategy will ensure representation of salient group characteristics, including:

- Representation of Aboriginal and Torres Strait Islanders and people from a culturally and linguistically diverse people and communities
- Different age groups
- Different locations (remote, regional, and metropolitan areas)
- People in contact with in the criminal justice system
- People living in boarding houses.

Based on this sampling strategy, SPRC will then approach the organisations about their possible participation in this project.

Interviews:

Peer support project managers and peer support leaders will be recruited from organisations currently implementing peer support programs. Individual interviews will be conducted with approximately eight peer support program project managers/service providers, and individual interviews or group interviews will be conducted with up to 16 peer support leaders.

The interviews will focus on participants' role in and experiences of peer support provision. Interview schedules will include questions about the activities and characteristics of the peer networks, the strategies participants developed to engage with potential participants, the training provided to or received by peer support leaders and project managers, and possible resourcing and support gaps and suggestions for improvement. Individual interviews will be conducted face to face or by phone or skype, according to the needs and preferences of participants, and group interviews will take place face to face at a mutually agreed upon location.

Project information and consent forms will be made available in accessible formats to all potential participants. The researchers will emphasise that participating in the research is voluntary and that their choice to take part or not to take part will have no bearing on their relationship with the disability organisation, UNSW Sydney, ANZSOG or the NDIA.

All personal data from the interviews and focus groups with peer support leaders will be deidentified, and the researchers will respect the preferences of the peer support project managers regarding confidentiality and identification, as indicated in their signed consent forms.

Participants in the peer support groups will not be included in the interviews because the review focus is on resources to develop organisational capacity and earlier reviews of the program have already been conducted.

Timeframe:

The time frame for Stage 1A will be September 2017 to March 2018.

	Tasks	Responsible	Timeframe
<i>Project Design</i>	Apply for ethics approval	SPRC	August
	Develop project plan	SPRC	August-September
	Consult and finalise project plan	SPRC, ANZSOG, NDIA, advisors	September
<i>Mapping</i>	Provide data sources	NDIA	September
	Conduct program and document review	SPRC	October
	Present to NDIA (via phone)	SPRC	October
<i>Data collection</i>	Sampling decisions	SPRC, ANZSOG, NDIA, advisors	end October
	Facilitate access to sample	NDIA	November
	Conduct interviews with peer support Project Managers	SPRC	November
	Conduct group interviews with peer support leaders and facilitators	SPRC	November
<i>Data analysis and report writing</i>	Analyse interview and focus group data	SPRC	December-January
	Table draft report for discussion	SPRC, ANZSOG, NDIA, advisors	February
	Write final report	SPRC	February
	Present final report to NDIA	SPRC	February
	Approve public version of final report	NDIA	March

2.2 Stage 1B: Research and literature review of international evidence and best practice in peer support programs

In Stage 1B ANZSOG will undertake an international research and literature review to identify current evidence-based best practice in peer support. Together with findings from the practice review in Stage 1A, this literature review will inform the development of capacity building materials and teaching and learning resources in Stages 2 – 5 of the project.

The time frame for this stage of the project will be roughly the same as Stage 1A, perhaps completing a little earlier. SPRC will play an advisory role, summarised in the table below.

Task	Responsible	Timeframe
Consult and advise on literature sources	SPRC, ANZSOG	August/September 2017
Peer review draft literature	SPRC	November/December 2017

2.3 Stage 2: Development of good practice materials for capacity building

Stage 2 will involve the design, development and writing of teaching and learning materials, and the extension of these with accessible online materials customized for NDIA. The expected time frame for development of these materials would be:

- Class learning materials: March – May 2018
- Online materials: April – June 2018

ANZSOG will design and develop the capacity building resources, in consultation with the NDIA and SPRC. SPRC will play an advisory role in this stage, summarised in the table below.

Task	Responsible	Timeframe
Advise on inclusive design	SPRC	March-April
Advise on accessibility	SPRC	May-June

2.4 Stage 3: Delivery of pilot organisational capacity building training and resources

Stage 3 will involve the pilot delivery of the capacity building materials developed in Stage 2, in teaching and learning workshops to be held in seven different locations across Australia where organisations are currently providing peer support. The workshop materials will be demonstrated for NDIA representatives before the delivery of the seven workshops.

The expected time frame would be June through August 2018. ANZSOG will be piloting the capacity building resources, and SPRC staff will be documenting and evaluating these resources. The SPRC research team will advise on accessibility and inclusion, attend and document 2 workshops, and participate in reporting and reflection activities post workshop delivery, as summarised below.

Task	Responsible	When
Advise on inclusion and accessibility	SPRC	June
Attend 2 workshops for observation	SPRC	July
Participate in reflection about effectiveness	SPRC	August

2.5 Stage 4: Evaluation of pilot organisational capacity building materials

Stage 4 will comprise a range of evaluation activities to assess the impact of the capacity building resources developed and delivered in Stages 2 and 3 of the project. The SPRC will undertake the evaluation, in consultation with ANZSOG, the NDIA, and the DPO advisor and other project advisors. An external reviewer may also be contracted to assist with evaluation design and to conduct independent reviewing.

Evaluation design will be finalised as appropriate in later stages of the project, but is likely to include:

- An evaluation questionnaire to be completed by participants at time of delivery
- An impact focus group to be conducted with selected participants (by phone) one month after delivery
- A visit to two or three providers three months after delivery to conduct a detailed discussion about the impact of the capacity building workshops and materials and changes in practice that may have occurred after the workshops.

The time frame for this stage of the project will be late August through to early November, 2018.

Task	Responsible	When
Contribute to design	SPRC	August
Data collection of provider visits	SPRC	September
Data analysis of provider visits	SPRC	October
Contribute to final report	SPRC	November

2.6 Stage 5: Development of a set of good practice materials for ongoing capacity building.

Following on from Stages 3 and 4, ANZSOG will develop and produce customised materials for the NDIA, designed to sustain ongoing capacity building over the coming years. The time frame for this stage of the project is expected to be October 2018 to December 2018.

SPRC will play an advisory role in this stage, summarised in the table below.

Task	Responsible	When
Advise on inclusive design	SPRC	October
Advise on accessibility	SPRC	November

3 Project management

3.1 Governance

This project is funded by the NDIA and managed by the NDIA's Information, Linkages and Capacity Building (ILC) Branch. The project is led by ANZSOG, with SPRC playing a key role in Stage 1A, and a supporting role in the later stages.

The Julia Farr Association (JFA), the Self-Advocacy Resource Unit (SARU), and Carers Australia will act as advisors on this project.

SPRC will engage internal advisors and will also invite a peak national Disabled People's Organisation (DPO) that is not a current provider of peer support services to advise on project design, reporting, and other aspects of the project.

3.2 Communication strategy

The SPRC research team will participate in a mix of teleconference and face to face meetings with ANZSOG (every 3-4 weeks, or as needed) and NDIA (as needed) throughout the life span of the project. All projects outputs and deliverables will be presented in draft to the NDIA, ANZSOG, and SPRC's project advisors to receive comment, make amendments, and a final version agreed.

Other stakeholders include NDIS participants and their families, other disability advocacy groups and service providers, including potential recipients of funding, and other members of the wider community (including people with disability and family members who are not NDIS participants). A communications strategy will be developed by the project team to engage these stakeholders, and will include a plan for publicising and disseminating the project outputs, capacity building training and resources that will be made freely available to the sector.

3.3 Project team

The project team members at ANZSOG, SPRC, and SPRC partners are listed in the table below.

ANZSOG	
Project lead	George Argyrous
Literature review and evaluation	Greet Peersman
Project support, literature review and evaluation	Keryn Hassall
Project support, literature review and evaluation	Alice MacFarlan
Evaluation	Patricia Rogers
SPRC	
Chief Investigator, SPRC	Karen Fisher
Project manager, SPRC	Christiane Purcal
Research Officer	Laura Davy

Research Officer	Ayah Wehbe
Advisor	Rosemary Kayess
SCU	
Advisor	Sally Robinson

3.4 Project timeline

The project is expected to be completed by December 2018. The overall project timeline is summarised in the table below.

Stage	Activity	Timeframe
1A	Review of current good practice in peer support	October 2017 – March 2018
1B	Review of international evidence in peer support programs	September 2017 – January 2018
2	Development of organisational capacity building materials	March 2018 – June 2018
3	Delivery of organisational capacity building materials: seven teaching and learning workshops	June 2018 – August 2018
4	Evaluation of pilot organisational capacity building materials	August 2018 – October 2018
5	Development of good practice guidelines for ongoing capacity building	October 2018 – December 2018

3.5 Risk strategy

Risk will be monitored throughout the project. Anticipated risks and mitigating actions are noted in the table below.

Risk	Impact	Likelihood	Remedial Action
Insufficient engagement from sector / Recruitment difficulties	High	Medium	<p>A detailed project plan will be developed in consultation with stakeholders with project partners, advisors, and stakeholders from the sector.</p> <p>Telephone contact has been built into the methodology to minimise disruption to</p>

			<p>participants' schedules. Researchers can be flexible about the scheduling of interviews with service providers to minimise disruption to their busy schedules.</p> <p>Facilitating contact with peer support leaders through service provider organisations is a proven method for contact. Options for focus groups/group interviews have been built into methodology as an alternative to individual interviews if participants prefer, and participants will be reimbursed for time committed and travel expenses with gift vouchers.</p>
Project deliverables / outputs delayed	High	Medium	<p>SPRC has strong project and risk management protocols in place and a history of successfully completed similar projects. This project builds on existing collaborations with project partners and advisors.</p> <p>Progress of the data collection will be clearly communicated to project stakeholders throughout the span of the project.</p>
Research does not adhere to budget	High	Low	<p>SPRC will work to a fixed budget and manage this risk through careful planning and project management. The budget is based on previous experience with similar SPRC projects, all of which have reported on time and within budget.</p>
Research findings do not meet policy needs / No robust conclusions	High	Low	<p>The research team is highly experienced in producing accurate and accessible findings, and in producing accessible reports useful for policy and program development. The SPRC Chief Investigator will oversee the mapping, interview, and report writing processes to ensure quality and usefulness of data.</p> <p>The project stakeholders will communicate through regular teleconference meetings to ensure different stages of the project meet the needs of other stages of the project to</p>

			move forward. A draft report will be provided to ANZSOG and NDIA for comment, to allow review and feedback to be included.
--	--	--	--

References

Collings, S., Dew, A., & Dowse, L. (2017). "They need to be able to have walked in our shoes": What people with intellectual disability say about National Disability Insurance Scheme planning. *Journal of Intellectual & Developmental Disability*, 1-12.

Power, A., Bartlett, R., & Hall, E. (2016). Peer advocacy in a personalized landscape: The role of peer support in a context of individualized support and austerity. *Journal of Intellectual Disabilities*, 20(2), 183-193.

Purcal, C., Bevan, N., Cooper, S., Fisher, K. R., Meltzer, A., Wong, M., & Meyer, P. (2014). Self-directed disability support: building people's capacity through peer support and action research [Final report] (SPRC Report 7/2014). Sydney: Social Policy Research Centre, UNSW Australia.

Shilling, V., Bailey, S., Logan, S., Morris, C. (2015). Peer support for parents of disabled children part 1: perceived outcomes of a one-to-one service, a qualitative study. *Child: Care, Health and Development*, 41(4), 524–536.

World Health Organisation (WHO). (2017). Creating peer support groups in mental health and related areas - WHO Quality Rights training to act, unite and empower for mental health. Geneva: World Health Organization.