

Title: Peer led innovation: new systems for lived experience governance and leadership

Panel Discussion: The Mental Health Services (TheMHS) conference 2023

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Multiple reform processes have highlighted failures across the current mental health system and the need for a transformational approach that enables and centres lived experience leadership. The benefits of consumer leadership include improvements in innovation of services, accountability, and quality of care, improved knowledge of the health system, and improvements in public perceptions of mental health organisations (Happell and Scholz 2018). There is a pressing need to offer alternative care options, that are informed by peer led practices, alongside lived experience governance and leadership. Research findings suggest that peer roles reduce overall service costs, lead to better recovery orientation and support a greater focus on person-directed care, a stronger natural focus on recovery and can inspire hope and enable more equitable relationships between services and users (Byrne et al. 2018).

The final report on the Royal Commission into Victoria's Mental Health System detailed an increasing evidence base for consumer-led and delivered services that take on a variety of forms and functions (State of Victoria 2019) but also an inconsistency in the findings. For consumer led services to be truly 'peer' led and as such effective both in radically transforming approaches to care and providing new models for human rights informed approaches that centre self-determination, new understandings of lived experience leadership and governance are critical.

Mind currently delivers innovative peer-led services in several states in Australia.

This includes:

Mind's appointment as the lead provider, in partnership with Alfred Mental and Addiction Health, for the Stage 2 Co-design Project for Victoria's first consumer led residential service, The Healing Place. This project will seek to radically transform approaches to governance, leadership, workforce and environment by enabling consumer leadership and specialist peer delivery.

Current delivery of the LGBTIQ+ Aftercare suicide support program in Victoria, a queer and peer led model that centres queer community perspectives and practices through an innovative peer led model with demonstrated positive impact on mental health, thoughts of suicide, and genuine healing. An external evaluation demonstrated that Aftercare reduced thoughts of suicide and provide culturally safe care (Impact Co., 2022)

Continued development of the Connect SA model, an emergency department alternative that is informed by and delivered through the peer principles of holding space, purposeful disclosure, mutuality, power sharing, and the centring of healing and recovery. The project, which has been in partnership with the Lived Experience Leadership Advocacy Network (LELAN), undertook a co-designed evaluation process with outcomes showing: peer workers in mental health care and crisis settings support the reduction of emergency and hospital presentations; peer models actively contribute to better outcomes related to consumer and carer outcomes; and, clinical/non-clinical, government and non-government agencies can work together to address systemic barriers leading to improved help seeking, greater efficacy and uptake of mental health services (LELAN, 2022).

Through the learnings of these projects, we are developing a national philosophy of care and governance framework for peer led services which will inform the design, workforce development,

and implementation of future peer-led models. This work is being undertaken in partnership with our lived experience leadership partners, Dr Louise Byrne, and LELAN.

Through a 60 minute panel discussion, Mind will explore the key barriers and enablers of peer led service and governance innovation. This will include exploration on themes such as:

Challenging clinical mindsets and processes.

But what about the coroner's court? Addressing myths and perceptions of increased risk.

What actually is lived experience governance?

Reconceptualising safety – moving beyond risk.

What are the principles and practices that will shape lived experience workforce and leadership in peer led settings.

Enabling decision-making that is informed by self-determination and human rights.

Addressing intersectionality – how these approaches can be applied to address and respond to multiple and varying forms of discrimination and marginalisation.

The session will be chaired by Katie Larsen, Senior Manager Inclusion and Participation at Mind Australia, panellists will include:

Dr Louise Byrne, Executive Advisor, Lived Experience

Ellie Hodges, Executive Director, LELAN

Deb Carlon, The Healing Place Project Manager, Mind

Isabelle McGovern, LGBTIQ+ Strategy and Service Development Manager, Mind

Attendees will be informed on new and innovative models that can drive transformation, as well as increased awareness on navigating and addressing obstacles and barriers to this change.

Learning Objective

1. The possibilities of lived experience governance and leadership and how these can be enabled through peer led service models.
2. The presentation connects with reform opportunities in mental health relating to lived experience leadership in service design, oversight and delivery.