



Diabetes and Mental Health Peer Support Project

Standing Together

*Providing Diabetes Competency Training for
Mental Health Peer Support Workers*

Vascular 2013 Conference
Montreal, October 17, 2013



Canadian Mental
Health Association
Ontario
Mental health for all



Ontario Peer Development Initiative
Initiative ontarienne de développement favorisant l'aide entre pairs
Supporting Consumer/Survivor Initiatives Throughout Ontario
À l'appui de initiatives des usages survivants à travers l'Ontario

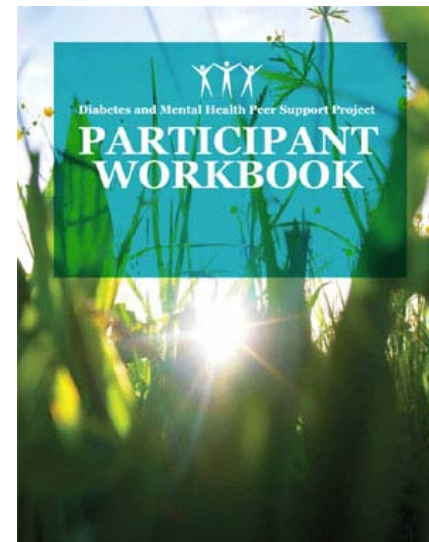
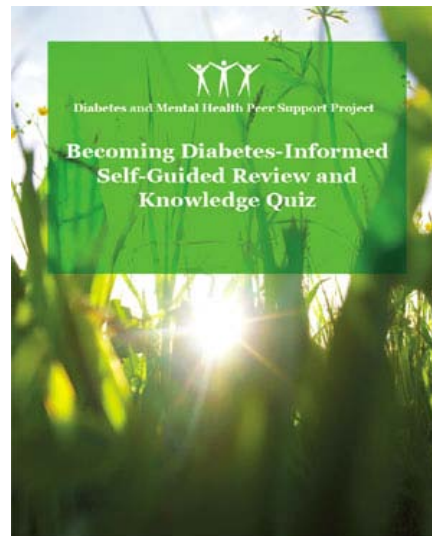
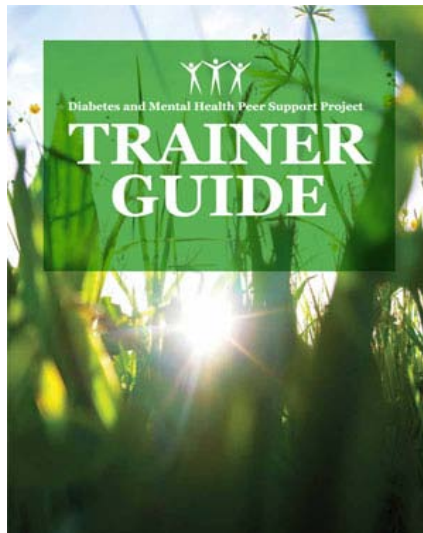
Key Messages

1. Diabetes is not only more **prevalent** in the population of people living with serious mental illnesses but also **under-diagnosed** and **under-treated**.
2. Cross-sector **collaboration is the key** to supporting the needs of clients living with both diabetes and mental health issues.
3. Mental health **peer supporters** can play a significant role in prevention and self-management support.
4. Peer support **training resources** are available.



Diabetes Training for MH Peer Supporters

The Diabetes and Mental Health Peer Support project (2010-2012) developed, piloted and evaluated **diabetes competency training** for mental health peer supporters in Ontario.



Stakeholder Engagement

Diabetes Project Advisory Committee

- 15 members representing a range of stakeholders with a shared interest in diabetes and mental health:
 - Ontario Ministry of Health and Long Term Care
 - Local Health Integration Networks
 - Family Health Teams
 - Community Health Centres
 - Community Mental Health Agencies
 - Hospital Diabetes Clinics
 - Researchers (Centre for Addiction and Mental Health, York U)
 - Canadian Diabetes Association



Partners / Project Team

- Canadian Mental Health Association, Ontario
- Ontario Peer Development Initiative
- Provincial Consumer/Survivor LHIN Leads Network
- Christine Grace and Community
- Lawson Health Research Institute

- *Funded by*



Celebrating over 55 Years of Philanthropy



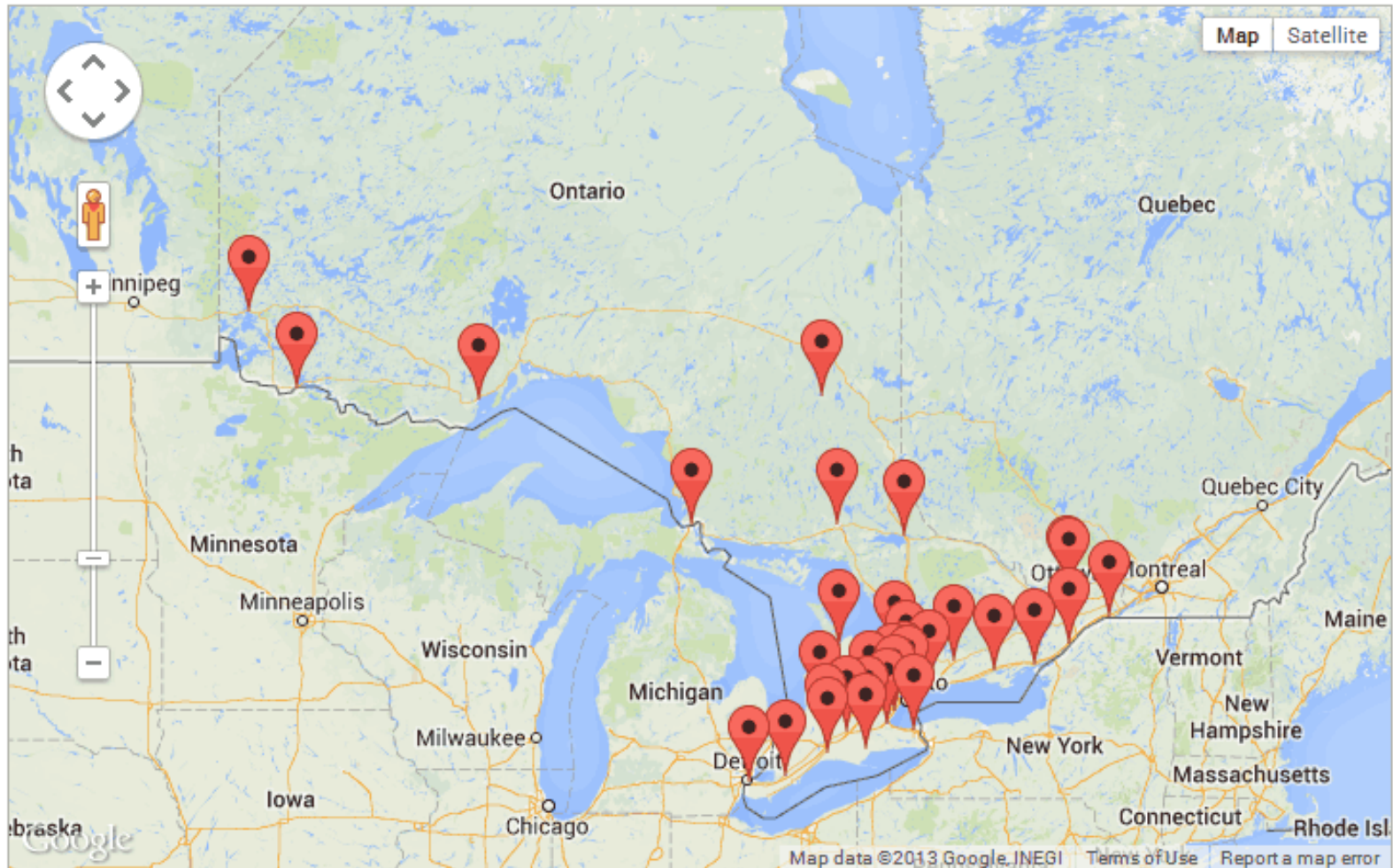
Diabetes and Mental Health Peer Support Project

About CMHA

- CMHA is a nationwide, charitable organization
- One of the oldest voluntary organizations in Canada (founded 1918)
- Provide direct service to more than 100,000 Canadians each year
- More than 10,000 volunteers and staff
- Offices in more than 135 communities across Canada



CMHA Locations in Ontario



About CMHA

“Mental health for all”

CMHA facilitates access to the resources people require to:

- maintain and **improve mental health**
- **build resilience**
- **support recovery** from mental illness



CMHA's Community Services

- early intervention in psychosis
- eating disorder clinics
- case management / Assertive Community Treatment teams
- supportive housing and homelessness outreach
- employment support
- court support and diversion
- crisis lines, information and referral
- **nurse practitioner-led clinics**
- **peer support and self-help groups**
- **healthy living programs**
- mental health promotion, public education, family support
- *and more...*



Policy and KT Role

CMHA Ontario Division's role:

- system planning and **policy research** with a focus on social determinants of health
- **knowledge translation** and exchange to support evidence-informed decision-making
- **capacity building** for mental health agencies and community partners



Diabetes Project Rationale

- Rates of diabetes in people with mental illness are **two to four times greater** than the general population
- Diabetes is **under-diagnosed** and **under-treated**
- Self-management **support** is key to diabetes management
- Peer support is an **evidence-based** method of supporting self-management for chronic diseases
- Mental health peer support is a **long-established best practice**



An Untapped Resource



Mental health peer support workers are in an ideal position to support their peers to:

- to **understand the risk** of developing diabetes
- to learn and practice **prevention strategies**
- to **self-manage** diabetes
- to **connect** with diabetes care providers



Diabetes Project Goals

Increase the skills of **mental health peer support workers** in providing support for the prevention and self-management of diabetes in the high-risk population of people living with a serious mental illness

Increase awareness in the **diabetes community** of the role mental health peer support workers can play in prevention and self-management support



Peer Support in the Mental Health Strategy

Mental Health Commission of Canada

- PRIORITY 3.4: **Recognize peer support** as an essential component of mental health services.
- PRIORITY 3.1.2: **Integrate recovery approaches into primary health care**, involving people living with mental health problems and illnesses and their families in planning, and facilitating self-management and peer support.

– *Changing Directions, Changing Lives:
The Mental Health Strategy for Canada (2012)*



Peer Support Definition

- Peer support is a **naturally occurring, mutually beneficial support process**, where people who share a common experience meet as equals, sharing skills, strengths and hope, learning from each other how to cope, thrive and flourish.
- **Formalized peer support** begins when persons with lived experience, who have received **specialized training**, assume **unique, designated roles** within the mental health system, to support an individual's expressed wishes.

— Ontario Peer Development Initiative (www.opdi.org)



Peer Support Values

Peer support values revolve around three themes:

- self-determination and equality
- mutuality and empathy
- recovery and hope

“Peer support is not about how ill we are but how well we are.”

— *Making the Case for Peer Support*
Report to the Mental Health Commission of Canada
Mental Health Peer Support Project Committee (2010)



Peer Support Is Effective

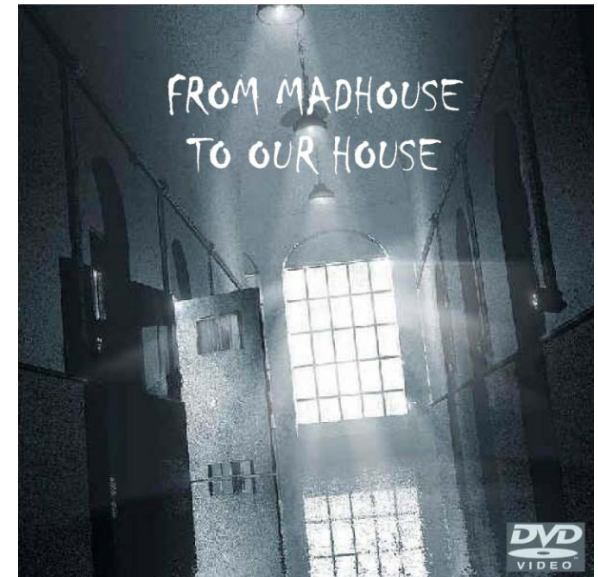
A robust and growing research evidence base shows peer support is associated with:

- Reductions in hospitalizations for mental health problems
- Reductions in symptom distress
- Improvements in social support
- Improvements in people's quality of life



A Growing Evidence Base

- A Longitudinal Study of Consumer/Survivor Initiatives in Ontario (1997-2004)
 - active involvement in a CSI can bring positive outcomes to individuals:
 - fewer hospitalizations
 - reduced symptom distress
 - more social support
 - improved quality of life (daily activities)
 - employment/education
 - CSIs have positive impact on the communities and systems in which they operate



<http://www.communitybasedresearch.ca/Page/View/CSI.html>



A Growing Evidence Base

- Therapeutic Relationships: From Hospital to Community
 - Dr Cheryl Forchuk et al., CHSRF (2002)
 - Transitional model involving 390 patients discharged from three psychiatric hospitals
 - peer support for one year from former clients of the mental healthcare system who promote friendship, provide understanding, teach community living skills, and encourage current clients in making a transition from psychiatric hospital to community
 - overlap of in-patient and community staff
 - Reduced readmission by **50%** in first month after discharge
 - Saved more than **\$12 million** through shorter hospital stays and reduced emergency room services

http://www.cfhi-fcass.ca/Migrated/PDF/ResearchReports/OGC/forchuk_final.pdf



Making the Connection

Physical health and mental health are fundamentally **linked**, yet health systems tend to address them **separately**.

Peer support programs can help **build bridges** between the diabetes and mental health sectors.



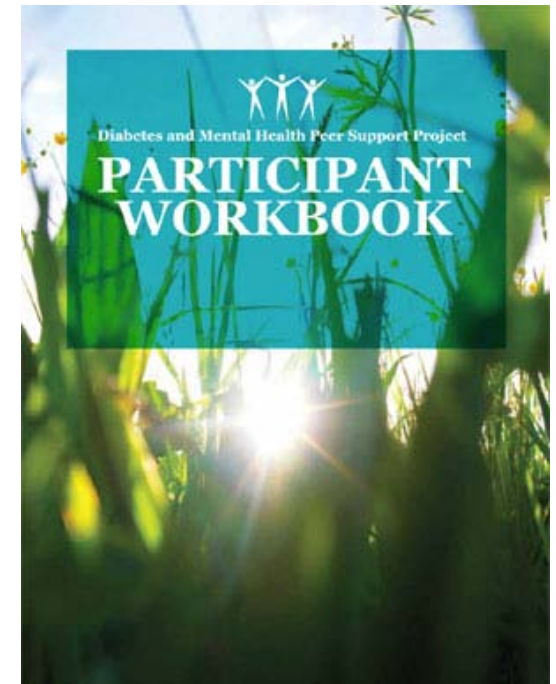
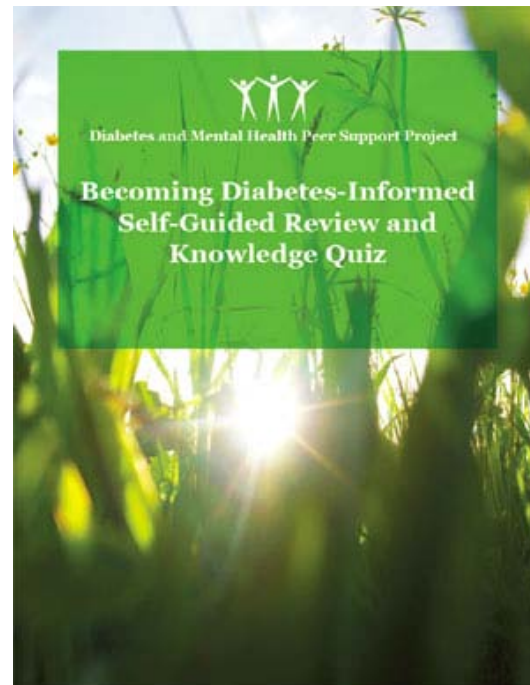
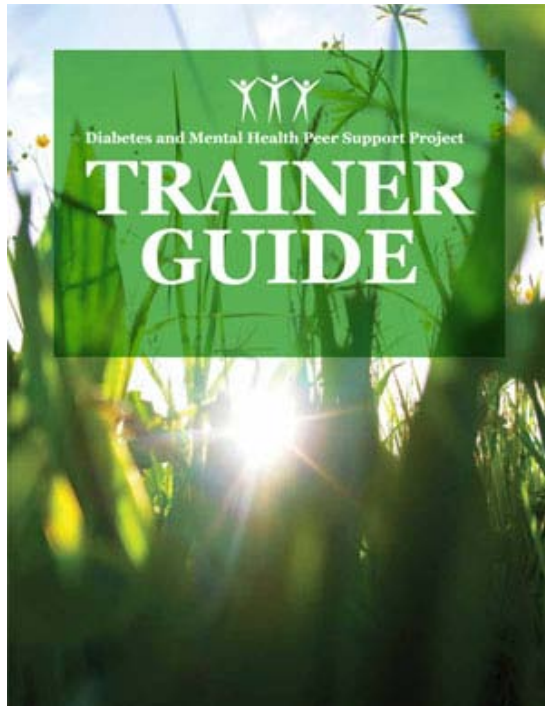
Video



<http://www.youtube.com/watch?v=y-ZTJQR-SHA>



Diabetes Competency Training

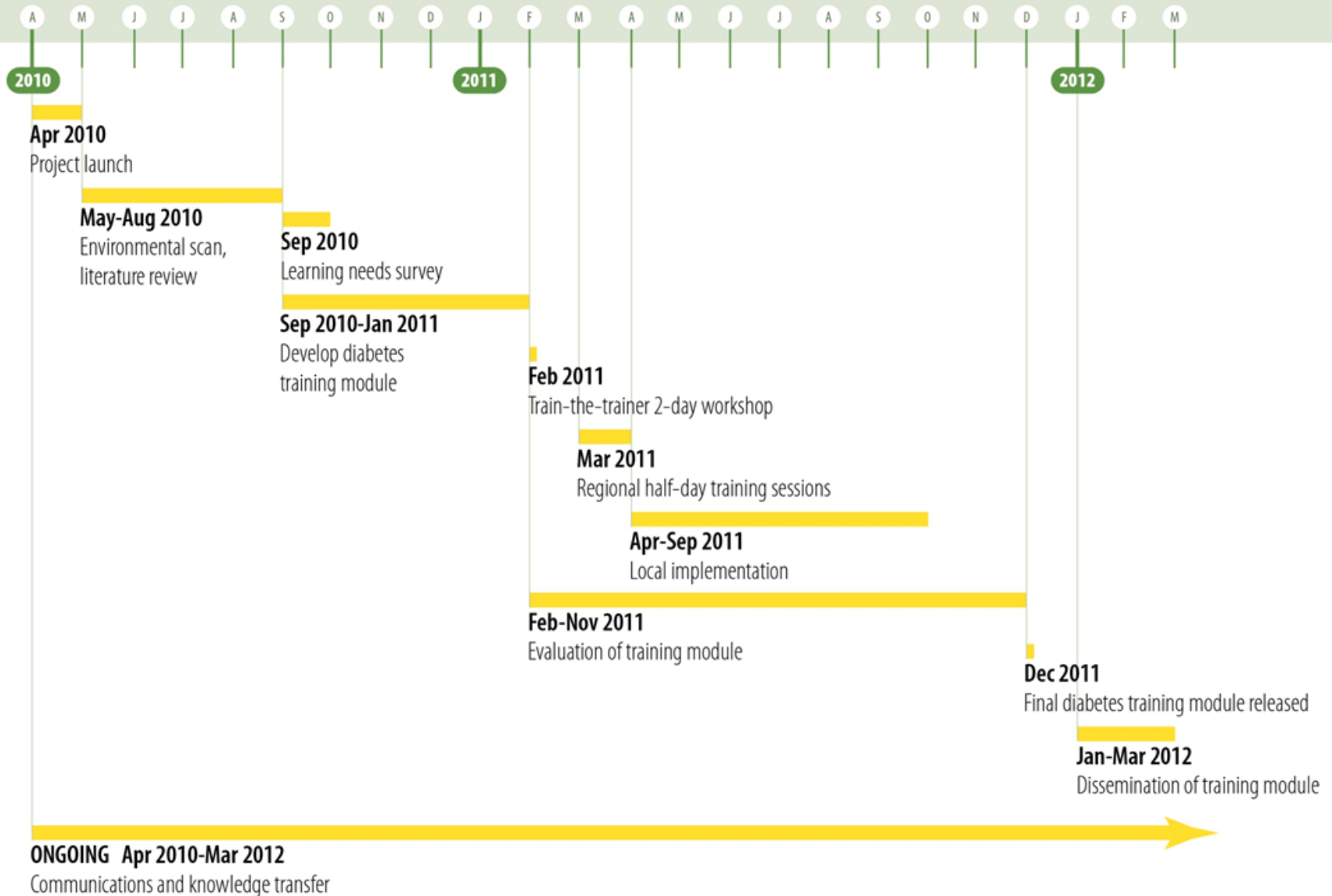


Diabetes Project Overview

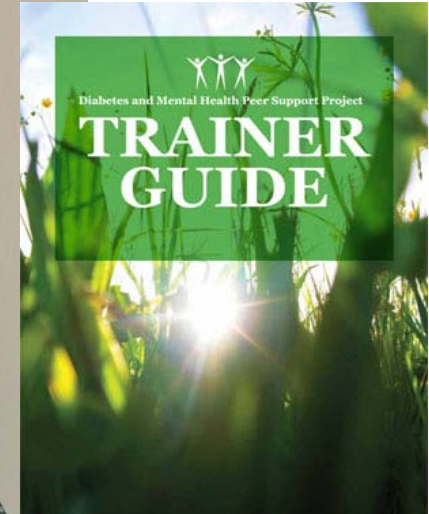
- **Step 1: Consult with stakeholders**
 - Advisory committee
 - Expert diabetes advice
 - Survey of peer supporters
 - Environmental scan and literature review
- **Step 2: Develop training**
 - Train-the-trainer model
- **Step 3: Pilot testing and evaluation**
- **Step 4: Knowledge transfer**
 - Disseminate final resources
 - Regional roundtables



Project Timeline *Diabetes Module*



Peer Support Trainers

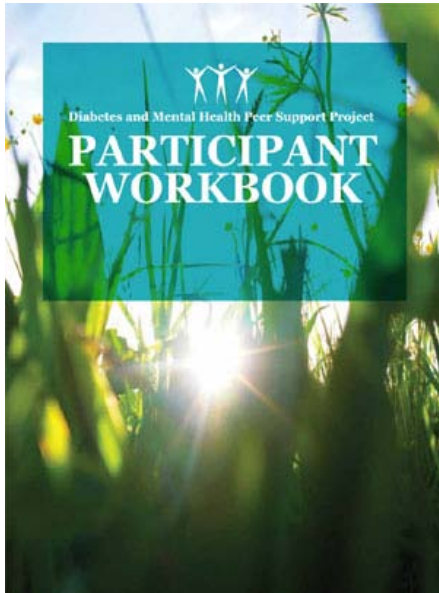


- Two-day train-the-trainer workshop in Toronto



Training Locations

- Trained 80 mental health peer support workers across the province



Peer Support Prerequisite

- Participants in the diabetes competency training are expected to have already completed a recognized and reputable course of training in the **foundations of mental health peer support**
- *e.g., OPDI Core Essentials, Intentional Peer Support, PREFER, WRAP, etc.*



OPDI Peer Support Core Essentials™

- Pre-existing peer support training program developed by Ontario Peer Development Initiative

OPDI Peer Support Core Essentials

- Training for people with lived experience of the mental health system who are currently or wish to become peer supporters.
- 50 hours training
- 50-hour internship

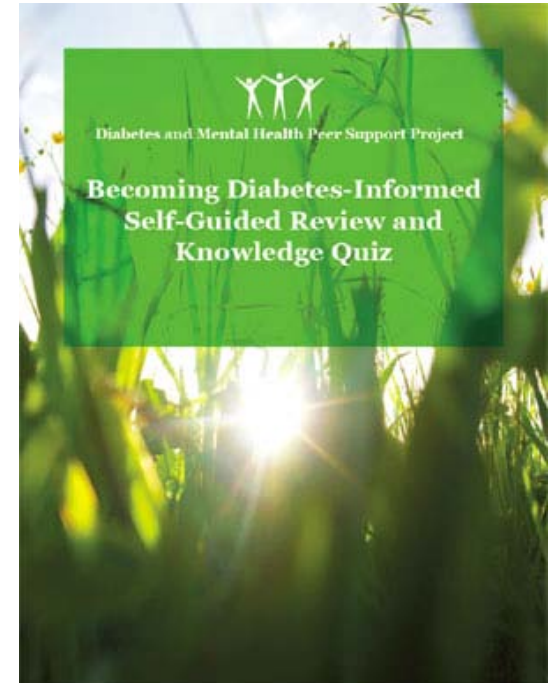


OPDI Peer Support
CORE ESSENTIALS™ PROGRAM



Self-Guided Review and Knowledge Quiz

- Intended to help participants gain basic knowledge of diabetes
- Used in conjunction with *Diabetes and You* toolkit and DVDs developed by Canadian Diabetes Association and Government of Ontario
- To be completed prior to 2-day training session



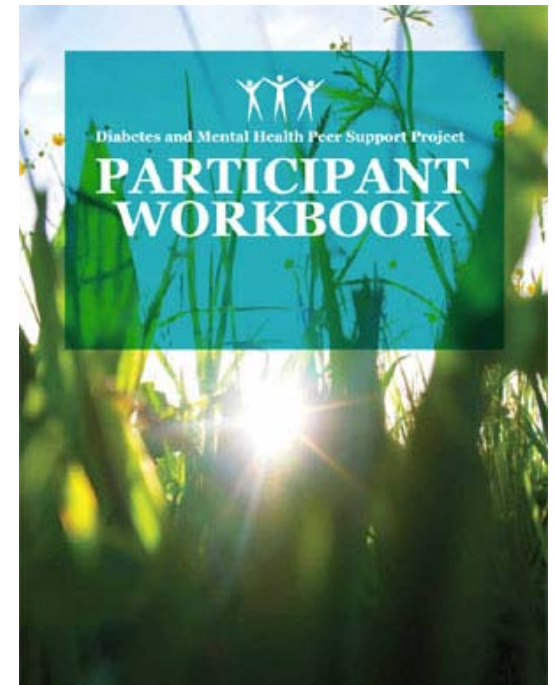
Curriculum Overview

■ Review: Peer Support

- Definition of Peer Support
- Benefits of Peer Support
- Role of the Peer Supporter
- Peer Supporter Core Competencies

■ Becoming Diabetes Informed

- Becoming Diabetes Informed
- Distinctions Between Being Diabetes-Informed and a Diabetes Expert
- Creating a Peer Supporter's Diabetes Resource List



Being Diabetes Informed

- Being informed means showing knowledge based on a solid understanding of the facts
- Being diabetes-informed means that a peer supporter:
 - has acquired a general and accurate understanding of diabetes
 - has learned the facts, figures, information and resources helpful for every peer to know about diabetes, and
 - distinguishes their role in supporting a peer around the prevention and self-management of diabetes from the roles of other health care providers and diabetes experts.



Curriculum Overview (continued)

- The Lived Experience
 - Grieving Diabetes
 - The Burden of Self Management
- Living with Diabetes
 - Self Care
 - Sharing Information
 - Encouraging Healthy Eating
 - Encouraging Physical Activity
 - Supporting Stress Management
 - Sharing Experiences
 - Support
 - Self Advocacy



Module Evaluation

- Training module was pilot tested by 7 peer trainers and 80 peer support workers
- Evaluation of training module conducted by Dr. Cheryl Forchuk and Amanda Kurtz, Lawson Health Research Institute
- Purpose: To assess how the diabetes and mental health training module increased the skills of mental health peer support workers
- Evaluation components:
 - Diabetes knowledge test (pre- and post-)
 - Peer support questionnaire
 - Focus groups
 - Online survey



Results: Diabetes Knowledge Test

Training most effective in increasing knowledge in the following areas:

Topic	Pre-Training Accuracy	Post-Training Accuracy
Diabetes symptoms	91.8%	100.0%
Common emotional reactions	87.3%	96.7%
Importance of meal planning	90.5%	100.0%
Best choice of food	88.1%	98.4%
Purpose of insulin	50.8%	75.4%
Normal fasting blood sugar	70.0%	72.6%
Definition of diabetes	70.0%	78.7%



Results: Peer Support Questionnaire

- Training module was **effective in increasing participants' confidence** in their ability to provide peer support to individuals with diabetes and mental health issues
 - Pre-training: 26.7% of participants believed they had the knowledge needed to provide peer support for individuals with diabetes. Post-training, this rose to 90.2%.
 - Pre-training: 67.2% of participants knew where to find a diabetes expert to educate peers. Post-training, almost 98.7% knew where to find a diabetes expert.



Results: Peer Support Questionnaire

- Results indicated that peer support workers believed their **role centered around:**
 - Helping individuals with self-advocacy
 - Helping individuals with the process of grieving
 - Introducing peers to diabetes educators



Summary of Evaluation

- General **knowledge of diabetes increased** for participants and allowed them to become more **confident in their peer support role** and to use their knowledge to develop programs and share information with peers



Case Studies

People for Equal Partnership in Mental Health, North Bay, Ontario



“People living with the ups and downs of diabetes and mental illness are powerful role models. What we say is coming from our hearts. We’ve been there.... When you see someone else surviving this then you can tell yourself, ok, I can do it too.” — Arif Majeed, Program Manager and Peer Support Worker, PEP

- Integrated diabetes prevention and management into day-to-day drop-in centre
- Healthy eating program includes recipes for diabetes diets
- Started new programs (smoking cessation program, community garden)
- Monthly diabetes support group, including guest speakers from local diabetes services and public health unit
- Telephone support for people living outside North Bay

<http://www.diabetesandmentalhealth.ca/about-the-project/case-studies/>



Case Studies

Mental Health Support Project (The Link), Smiths Falls, Ontario



“It comes as a surprise to people how much work it is to manage your health.... The key to our success is our approach: Rah! Rah! We’re all in this together. I can’t make changes by myself, but if we’re all doing it together, I can be better about making the changes I need.” — Halina Shannan, Coordinator and Peer Supporter, The Link

- Partnerships with
 - Rideau Valley Diabetes Services (monthly cooking group at nearby CHC; nurses visit weekly drop-in at The Link)
 - Lanark County Mental Health Services (refers people to The Link’s diabetes and exercise programs)
 - North Lanark CHC (The Link provides recovery education programs on-site)
 - Rideau Environmental Action League (gardening)

<http://www.diabetesandmentalhealth.ca/about-the-project/case-studies/>



Project Results

- ✓ Diabetes **training manual** developed, piloted, evaluated.
- ✓ **80 peer support workers trained** to help with prevention, early identification and self-management strategies.
- ✓ Greater **awareness of the value and role of mental health peer supporters** and their potential to reduce the impact of diabetes on high-risk populations.
- ✓ More opportunities for **local collaborations** among diabetes care providers and mental health peer support organizations.



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Questions?

