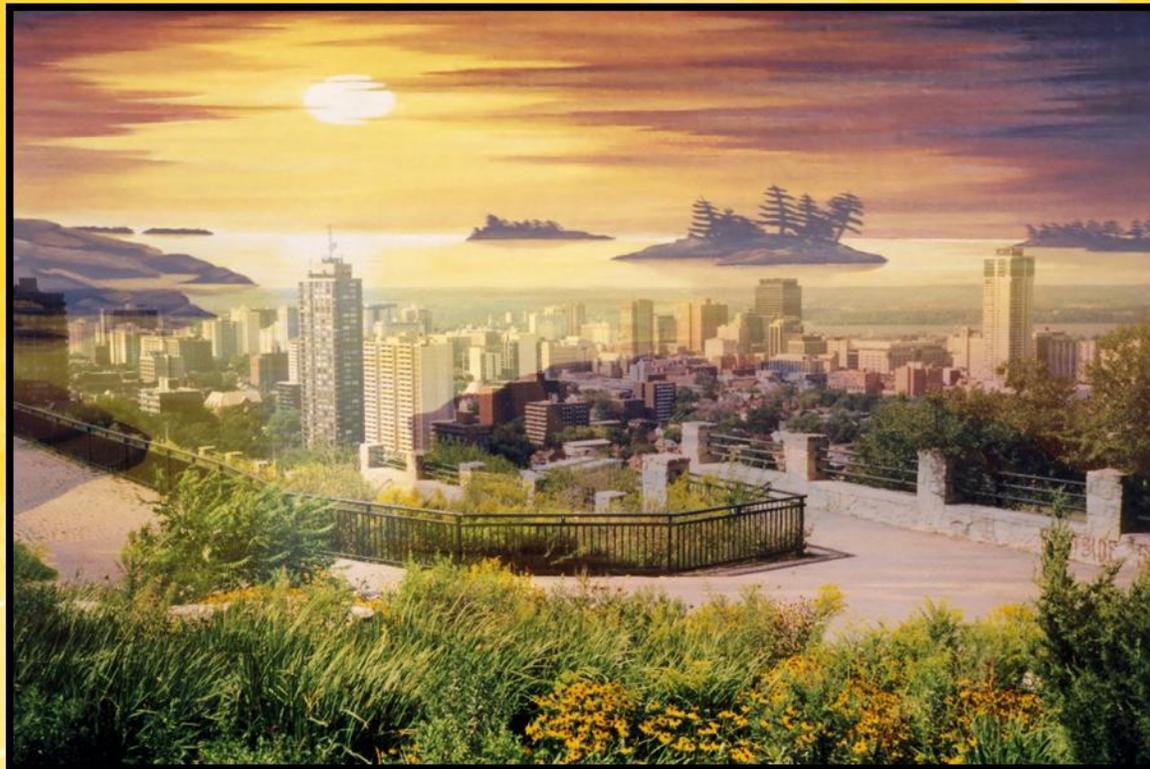


JOURNEYS



A PEER SUPPORT PRIMER

Published by



Journeys

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Cover Painting: THE BRIDGE by Ronson Green.

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Acknowledgments

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Foreword

The funds which produced this book also supported a participatory action research study of the affect of peer support in Hamilton. Financial support began with a private donation to the Mental Health Rights Coalition, and subsequent grants from the Canadian Centre for Disability Studies and the Ontario Trillium Foundation. Many studies have been done to demonstrate the effectiveness of peer support but this one is looked to the inclusion of those trained in peer support as part of the staff of traditional mental health service providers.

Peer Support workers, trained by The MHRC, were placed with partner agencies. McMaster University professor, Sandra Moll and students in the occupational therapy program evaluated the benefits and barriers of hiring peer support workers. The research found peer support is valued among clients, front line workers, managers and peer support providers. Participants rated the top benefits of peer support as: inspiring hope; creating a positive image of individuals with a mental illness/addiction; providing role models for clients who are struggling; and creating meaningful job opportunity for consumers. Peer support was found to have a positive effect on clients, on the peer supporters, and the overall organization. It also recognized peer support providers bring a new perspective, or as one manager put it, a "new clinical depth", to the team.

From the perspective of a consumer/survivor initiative with a long history of training peer supporters we know peer support works and is an important component of recovery. MHRC believe peer support needs to be available to every consumer and that the varied roles peer supporters adopt are key in providing flexible services which meet the unique needs of consumers as they pursue individual recovery goals. This study appears to support our assertion that peer support is finding its place within the traditional mental health system and peer supporters are finding meaningful opportunities to help their fellow travelers.

Predictors expect that within the next few years mental illness may become the top reason for people to seek medical help. In a climate where medical professionals and clinical supports are carrying caseloads which are unmanageably large, there is plenty of room for the work of peer supporters

This collection of the works of Hamilton artists who live with mental illness provides a verbal and visual snapshot of those who receive peer support and what it means to them.

Men have called me mad, but the question is not yet settled, whether madness is or is not the loftiest intelligence--whether much that is glorious--whether all that is profound--does not spring from disease of thought--from moods of mind exalted at the expense of the general intellect. Those who dream by day are cognizant of many things which escape those who dream only by night - Edgar Allen Poe

A quick internet search of "art and mental illness" brings up hundreds of names of the world's most famous artists who have lived with some form of serious mental illness. While the artists exhibited in this book are not world famous, they are certainly extraordinary people not just because of their art but because they have allowed their art to move them toward recovery from the illness which has threatened to weaken and marginalize them.

"You can't give peer support without getting peer support," says Mark Sadler, the author and creator of this collection. Mark has been working in different peer support roles in Hamilton over the past two years and his achievements are now moving him into full time work as a peer supporter. He says besides putting him back to work, peer support he has received has improved his self esteem and confidence. "It took me out of a feeling of isolation and connected me with other consumers with similar challenges. It helped me realize we're all in this together and I've been able to turn a negative into a positive."

An artist in his own right, Mark has compiled this book with an understanding of how much art has affected his recovery. "He says, "It is like therapy for me. At a time when I was coming out of a deep depression art gave me something to focus on and express myself through. The creative process in itself was a catharsis. It gave me, once again, a purpose in life."

Mental health consumer/survivors generally want to believe they can walk down the street with their heads held high because they have been able to find meaningful employment. They want to know they are respected by their fellow

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citizens. They hope for healthy relationships which are not impaired by the side effects of medication or the stigma of having to depend on public support.

In their own words, the artists represented in this book tell how their art has helped on their journey toward wellness. Read between the lines and discover the hearts of ordinary people with extraordinary talent.

Recovery is not cure and while those who live with mental illness may never expect to be completely free of it they

Jason Keelys—“When people compliment me on my art it makes me feel special. It gives me confidence and a good feeling.”

Rebekah Argue—...besides a mental illness I also have addiction issues but,” she says proudly, “this is my fourth year clean and sober.”

“My art is my outlet and I use original colours, Rebekah explains. “I use only the primary colours and make all my own colours. What I paint is from my heart. It’s whatever I’m feeling that day.

My secrets kept me sick, Rebecca says. Now I keep healthy by expressing myself.”

Ronson Green—Speaking of his health in relation to his art Ronson says, “...it’s 100 fold better. My art has allowed me to see things about myself I couldn’t see in normal living. Every painting has a bit of me in it. I put it on the canvas and then I can see myself. I have to know myself to know where I am going. I am discovering my emotions again.

The art which is the cover of this book is one of Ron’s favourite pieces. He explains he grew up in Parry Sound and then moved to Hamilton. He needed to bring the two places and the two lifestyles together and he feels he accomplished that with “The Bridge”. He says with a little hint of homesickness for the northern shore, “It bridges the gap between the city and Georgian Bay for me. They are both in the same painting.

Lorraine Shein

“When I start to paint I have no idea what it is going to be. The spirit guides my hands.” Lorraine says it often takes her, “six months to a year to figure out what it is after it’s done. Pointing to a bright and intriguing self portrait Lorraine says, “I still haven’t figured out what that is about.”

Jude

Before Jude was even asked the question about how her art has helped in her journey toward recovery, she was explaining her use of bright colours and her love of detail in her art. “For a long time my art wasn’t coherent.” she explains. “Then I did some work trying to reproduce some of Robert Bateman’s art and my own art had an awakening.”

“When I was sick,” says Jude, “I used art to express how I felt. It was a way to figure out how I was feeling.” Alluding to her wellness, Jude says, “Art and colour are now my language.” They speak for me.”

After receiving a compliment about the 85 pounds she has lost Jude says, “My art has done wonders for my self esteem. It represents a gap in life. Many people don’t understand mental illness but I think those of us with illnesses are the sensitive ones. We are more aware and have a need to express it.”

hold the same dreams as all citizens. They hope for a life which has some measure of normalcy and includes things like nice homes, families, good friends, vacations and of growing old.

Along with the “normal” dreams, those who live with mental illness have some dreams which some may find difficult to understand.

Mental Health Rights Coalition

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What Is Peer Support?

Mental Health Peer Support is a structured relationship whereby a trained volunteer or worker, who has undergone a process of recovery from a mental health illness, assists other people with mental health issues to identify and achieve life goals as part of their own recovery process. It is about the sharing of life's experiences, listening empathically, and making connections based on commonalities of the mutual suffering of psychological pain. Both the Peer Support Worker and the person seeking support know what it's like to fight the label of being diagnosed with a mental illness and the stigmatization that label brings.

“Professionally defined identities based on illness and disability can overwhelm individuality and become the way persons living with mental illness, and their families, are known – by caregivers, by society, by the media and by themselves. Social and systemic forces coalesce to present them a bleak future – unproductive, lonely and hopeless. Self-help supports the concept of recovery and responds to the full tapestry of people’s individuality. Illness is only one part – perhaps even the smallest part – of a rich life fully worth living.” (‘Out of the Shadows at Last: Transforming Mental Health, Mental Illness and Addiction Services in Canada.’ 2006, Standing Senate Committee, written by the Honourable Michael Kirby and the Honourable Wilbert Keon.)

Peer Support is a recovery based approach to healing in which psychiatric labels and definitions can be transcended in favor of common ground between peers. Mead, Hilton, and Curtis (2001) state: “When people find affiliation with others they feel they are ‘like’ them, they feel a connection. This connection, or affiliation, is a deep, holistic understanding based on mutual experience where people are able to ‘be’ with each other without the constraints of traditional (expert/patient) relationships.....Peer Support can offer a ‘culture’ of health and ability as opposed to a ‘culture’ of illness and disability.”

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The Role of Peer Support Workers

Peer Support Workers can draw upon their own experiences and challenges in their own recovery process and offer:

- ⇒ Emotional Support
- ⇒ Problem Solving
- ⇒ Goal Setting
- ⇒ Crisis Risk Assessment
- ⇒ Social Support
- ⇒ Role Modeling
- ⇒ Referrals to other Community Service Providers

People seeking peer support can talk with a ‘fellow traveler’ so to speak, someone that has been there and knows the peaks and valleys in navigating the path to wellness. The Peer Support Worker is a kindred spirit and a listening ear to the mental health consumer, someone who understands from their side of the fence. Peer Supporters provide support that is non-judgmental, promotes empowerment, wellness, and demonstrates empathy. It is a support system not rooted in psychiatry and a clinical environment, but in the sharing of a common experience: both Peer Support Worker and the person seeking support know how it feels to suffer from a mental illness. They may not both share the same diagnosis, but they have both faced, or face, similar challenges.

The Peer Support Worker is a kindred spirit and a listening ear to the mental health consumer, someone who understands from their side of the fence.

How Is Peer Support Offered?

Peer Support is offered in a variety of ways.

- ⇒ Transitional Discharge: On being discharged from hospital, Transitional Discharge may be offered in an effort to aid the client back into the community. This involves the intervention of hospital inpatient staff and a Peer Support Worker. The Peer Worker will

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provide friendship, understanding and encouragement until a therapeutic relationship is established with a community care provider.

- ⇒ Skills Training: Peer Support Workers are able to assist in everyday skills development such as assisting with shopping lists, cooking lessons, budgeting, and supporting the client if s/he expresses the desire to return to school. This may be in the form of obtaining course catalogues, focusing on desired goals, etc.
- ⇒ Client Accompaniment: To use one example, a person may feel they need a medication change but are unable to properly communicate this to their doctor or may simply need a little support in doing so. While every effort is made by the Peer Support Worker to empower clients (see peer support example on page 6), in some cases a little extra support may be needed. In client accompaniment, the Peer Support Worker, on request of the client, will accompany the client to the doctor to support and aid him/her in their request for a medication change or related endeavor.
- ⇒ Advocacy: This can be in the form of a Consumer Support Initiative (CSI) advocating for its members by speaking up at various committees, attempting to create change through the system. Or it can be in the form of individual advocacy, for example handling a complaint from a client about a housing situation (i.e unacceptable living conditions), and working with all the parties involved in reaching a satisfactory resolution.
- ⇒ Crisis: Most Peer Support Workers are trained to handle crisis situations should they arise. This may involve assessing a person's level of risk of suicide in extreme cases, whether over the phone or in person. For example, at the Mental Health Rights Coalition, all Peer Support Workers are trained to recognize whether the person they are supporting is at a low, medium, or high risk of suicide in a crisis situation and to respond accordingly. Peer Support Workers may also be placed in Crisis Support Centres, a safe place for people to stay for a short period of time when they are experiencing a personal crisis. In this setting the Peer Support Worker would work alongside the crisis workers, supporting the client with empathy, understanding, and caring. The Peer Support Worker may also lead recreational activities such as yoga, walking groups, etc.
- ⇒ Case Management: Peer Support Workers are also employed in Assertive Community Treatment (ACT) Teams. ACT teams are comprised of a psychiatrist, a program/administrative assistant, a team coordinator, registered nurses, and, at a minimum, a social worker, an occupational therapist, a substance abuse specialist, a vocational specialist, a peer worker — known as a peer specialist on an ACT team — and other clinical staff. As defined by the Ontario ACT Association, "Assertive Community Treatment is a team

...at the Mental Health Rights Coalition, all Peer Support Workers are trained to recognize whether the person they are supporting is at a low, medium, or high risk of suicide in a crisis situation and to respond accordingly.

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approach designed to provide comprehensive, community-based psychiatric treatment, rehabilitation, and support to persons with serious and persistent mental illness such as schizophrenia. “

The Ministry of Health and Long-Term Care in their Ontario Program Standards for ACT Teams, defines Peer Support Services as follows:

ACT teams are expected to promote client-centered practices by the deployment of a peer specialist, the active participation of clients in service planning and development, and the creation of opportunities for clients to be able to bring forth complaints and suggestions to a third party without fear of adverse impact on the services rendered. Peer support services serve to validate clients' experiences in their own recovery. In addition, services help clients identify, understand, and combat stigma and discrimination against mental illness and develop strategies to reduce self-imposed stigma.

Services include:

- 1. Judicious utilization of self-disclosure and sharing of life experience to serve as mentor and role model;*
- 2. Assisting clients to recognize and develop coping mechanisms to deal with symptoms and social stigma;*
- 3. Educating staff within the team regarding the consumer perspective on the mental health system and assisting the team to maintain a client-centred approach that maximizes client participation and empowerment;*
- 4. Advocating for development of consumer initiatives within the community and identifying opportunities for client empowerment; and*
- 5. Introducing and referring clients to consumer self-help programs and advocacy organizations that promote recovery.*

⇒ Vocational Support: Peer Support Workers have the knowledge and the skills to provide support for consumers who may need support in getting back into the working force or may simply want to upgrade their job skills and/or education. This may take the form of assisting the consumer with resume preparation, writing cover letters, assisting with job searches, goal setting, problem solving, and action planning. Currently, in Great Britain, ‘Peer Mentor Support’ is spearheading a project that will pilot and evaluate the efficacy of using a Peer Mentor Support System for people from specific target groups, e.g. young offenders, or those who are at risk of offending, disaffected young people, people with disabilities or those with learning difficulties, adults with mental health problems, that will provide them with a “round the clock” support and advocacy service to assist them into (re)

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integrating into mainstream training and employment. The project will produce a comparative study of the peer support methodology with the different target groups in different countries.'

Traditional Peer Support can be offered in a group setting or on an individual one-on-one basis. Groups usually meet once per week, facilitated by one individual, and lend themselves more to sharing with the group. Individual one-on-one Peer Support provides for a more private relationship between the Peer Support Worker and the person seeking support. One-on-one Peer Support can be offered in the form of matching a Peer Support Worker with an individual, usually meeting weekly or bi-weekly.

Individual one-on-one Peer Support provides for a more private relationship between the Peer Support Worker and the person seeking support.

Drop in Peer Support is also offered at some agencies, such as The Mental Health Rights Coalition, where a person can drop in whenever they feel the need to problem solve or talk over some issues. This is invaluable in that it is immediate and support is always available. An example of a one-on-one peer support may go something like this: "My psychiatrist put me on new medications and they make me very sleepy all the time. I had an appointment with her today and tried to tell her that these medications aren't working for me, but she didn't listen."

Because Peer Support Workers have recovered from a mental illness, they can empathize with the member's current situation because they too have experienced similar challenges. This, combined with the Peer Support Training, is what makes Peer Support truly unique and essential. In the above example, the Peer Support may unfold in the following way:

"How long have you been on these new medications?"

"About four weeks."

"Would you mind if I ask you what the medications are for?"

"No, I don't mind. My old meds for depression didn't seem to be working anymore, so my doctor put me on these new anti-depressants."

"Have you noticed any difference in your mood?"

"Yeah, I've noticed that my mood has improved a bit, it's just the sleepiness that's bothering me. Sometimes I like to read and I end up reading a few pages and I just feel like having a nap. A lot of the time I feel too tired to even make dinner. I do, but it's so much effort. And then in the evening I just wanna veg. The other evening I went out with my friend to a movie and I was late because I fell asleep when I was supposed to be getting ready. At least I stayed awake for the movie."

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“Yeah, I can understand how all of that must be a real drag, and really frustrating for you.”

“Exactly, I mean, I don’t feel that depressed anymore, but this tiredness is starting to make me depressed. Well, not depressed — but you know, fed up.”

“Did your doctor ask you how the new meds were working for you?”

“I told her my mood had improved.”

“So the medications are working for you, it’s just the tiredness. Am I correct?”

“Yeah, but what good is it if the meds are working but I’m tired all the time?”

“Well...for me, in the past, when I’ve gone on new medications it’s taken me awhile to adjust to them. I know that’s also been an issue for me. Have you considered that perhaps your doctor right now is just concerned that the medications are working?”

“Yeah, that’s a possibility.”

“And that maybe she’ll address your tiredness next time around?”

“What if she doesn’t?”

“When are you seeing her next?”

“Right now it’s every week. So it’ll be next week.”

“How do you think you could make yourself clearer to your doctor, so she doesn’t just concentrate on the effectiveness of the medication on your mood, but also addresses your tiredness?”

“Tell her I’m fed up with being tired.”

“Okay, but how about giving your doctor a little more information. Like what you’ve told me here today. Tell her exactly how you feel. So how would you put that to your doctor?”

“That, uh, that although the medications have improved my mood I’m having a really hard time with the tiredness and I want to know if it will get any easier. And that if it doesn’t then I either need to go on a lower dosage or go on a different medication, because right now it’s interfering with my day to day living.”

“I think that’s pretty clear. You’re expressing how you feel really well. Do you think she’ll listen to that?”

“If I say it like that, I’m sure she’ll listen.”

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Drop-ins such as the Mental Health Rights Coalition also provide a meeting place where people can socialize in an environment that is relaxed, safe, and informal. While activities are offered, there are no structured programs -- in other words, members can choose to participate based on their own preferences, therefore empowering individuals to make their own choice.

Peer Support Services In Hamilton

Currently, Peer Support is available through various agencies, hospitals, and organizations. In Hamilton Peer Support is offered through The Mental Health Rights Coalition, The Hamilton Program for Schizophrenia, The Barret Centre, Good Shepard HOMES, and the Wellington Psychiatric Outreach Program. St. Joseph's Healthcare Hamilton provides the Cleghorn Program for Early Intervention in Psychosis, Assertive Community Treatment Teams (ACT), and Peer Support Services. Peer Support continues to be embraced by the community and more agencies are getting on board with Peer Support.

Peer Support Training

Training of Peer Support Workers and Volunteers is offered in Hamilton by the Mental Health Rights Coalition. The course is offered two to three times per year and is free to all consumer members of the Mental Health Rights Coalition. During training, Peer Supporters learn about supportive listening, communication skills, problem solving, goal setting, some crisis intervention skills, special topics in mental health and addictions, and self-care. Training is interactive and participants are required to do individual, small and large group activities, as well as participate in role play scenarios. Participants in training are also required to obtain a criminal reference check, do a small research project, an oral presentation, and complete a take-home exam.

Training is interactive and participants are required to do individual, small and large group activities, as well as participate in role play scenarios.

Following the training sessions, participants complete 10 hours of practicum experience at

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the Mental Health Rights Coalition providing Peer Support to its members. The Peer Support Coordinator then evaluates the participants' skills as a Peer Supporter based on their performance in training, the take-home exam and practicum experience. Participation in training does not guarantee that participants will receive a Peer Support Certificate. The Mental Health Rights Coalition expects all graduates of the training to volunteer for one full year of service. While the Peer Support Training teaches people specific skills that they can use when doing Peer Support, there are some natural qualities that people have that make them good Peer Supporters:

- ⇒ A personal experience with a mental health and/or addiction problem
- ⇒ A personal experience with a recovery process from a mental illness and/or addiction problem
- ⇒ Having a belief that people with serious mental health and/or addiction problems can and do recover
- ⇒ A desire to help others
- ⇒ Being a good listener
- ⇒ Being reliable and committed

“The Peer Support Training was invaluable to me, especially the suicide crisis intervention training and the role playing. I use my Peer Support skills everyday and will continue to use them for the rest of my life. My present focus is on senior citizens who require Peer Support.”

Lorraine S.

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A Brief History of Peer Support

The idea of Peer Support can be traced back to 1935 with the creation of Alcoholics Anonymous, whose guiding principle was that a recovered alcoholic could support and demonstrate to a drinking alcoholic that life could be enjoyed without alcohol. Recovery, Inc., a self-help mental health organization was founded in 1937 in Chicago by the late neuropsychiatrist Abraham A. Low, M.D. The organization uses a method called 'Mental Health Through Will Training', based on the writings of Abraham A. Low, M.D. and boasts more than 800 chapters worldwide. The organization is run by non-professionals and it should be noted has a strong self-help element to it that is designed to help people deal with 'trivial, everyday situations.'

The voluntary, community based organization, GROW, was founded in Sydney, Australia in 1957, and has since expanded internationally. Recently, a study of GROW by Dr. Lizabeth Finn at Curtin University in Western Australia found that, "GROW's major advantage is that it offers a 'real life' mini-community where people can develop new skills. The benefits are concrete in terms of developing communication, social, life management and problem solving skills. But there are also improvements in the less tangible 'quality of life' arena which come via gradual identity transformation in terms of development of a sense of being useful, valuable and belonging."

"...there are also improvements in the less tangible 'quality of life' arena which come via gradual identity transformation in terms of development of a sense of being useful, valuable and belonging."

Dr Lizabeth Finn, Curtin University, Western Australia.

The Mood Disorders Association was founded in 1982 and is dedicated to: "providing education and information for people with mood disorders, families, professional and the public concerning mood disorders; fostering self help within a peer support model for people with mood disorders and their families; eliminating discrimination and stigma; working with community partners; advocating on behalf of people with mood disorders and their families." All support groups are peer led by volunteer facilitators who are trained by experienced mentors.

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Following are thoughts and feelings by people some of the people that give and receive Peer Support in Hamilton. Accompanying the text is a showcase of fine art by some of the Artists at the Hamilton Cottage Art Studio.

TWO DAMES



Jude Mersereau

“I have learned by working as a Peer Worker I can make a difference in people’s lives.”

Jennifer A.

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SPIRITUAL CONNECTION



Lorraine Shein

"I like one-on-one Peer Support because it helps me focus better on necessary issues and situations."

Patricia S.

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PEACE 06



Anita Helen MacLean

“I don’t know where I would go if Peer Support was not available to me.”

Calvin

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SUMMER STORM



Rebekah Argue

“Peer Support strengthens me to go on and not to give up on life.”

Donna S.

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MY BEST FRIEND THE MOON



Patti de Verteuil

“Since receiving Peer Support I have noticed improvements in daily living and independence, which has given me a chance to teach others and to have courage.”

Anonymous

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SCULLER'S PUDDLES



Canadiana James

“Being a Peer Support Worker has become my first step back to becoming a productive member of society.”

Carl J

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POINT BREAK



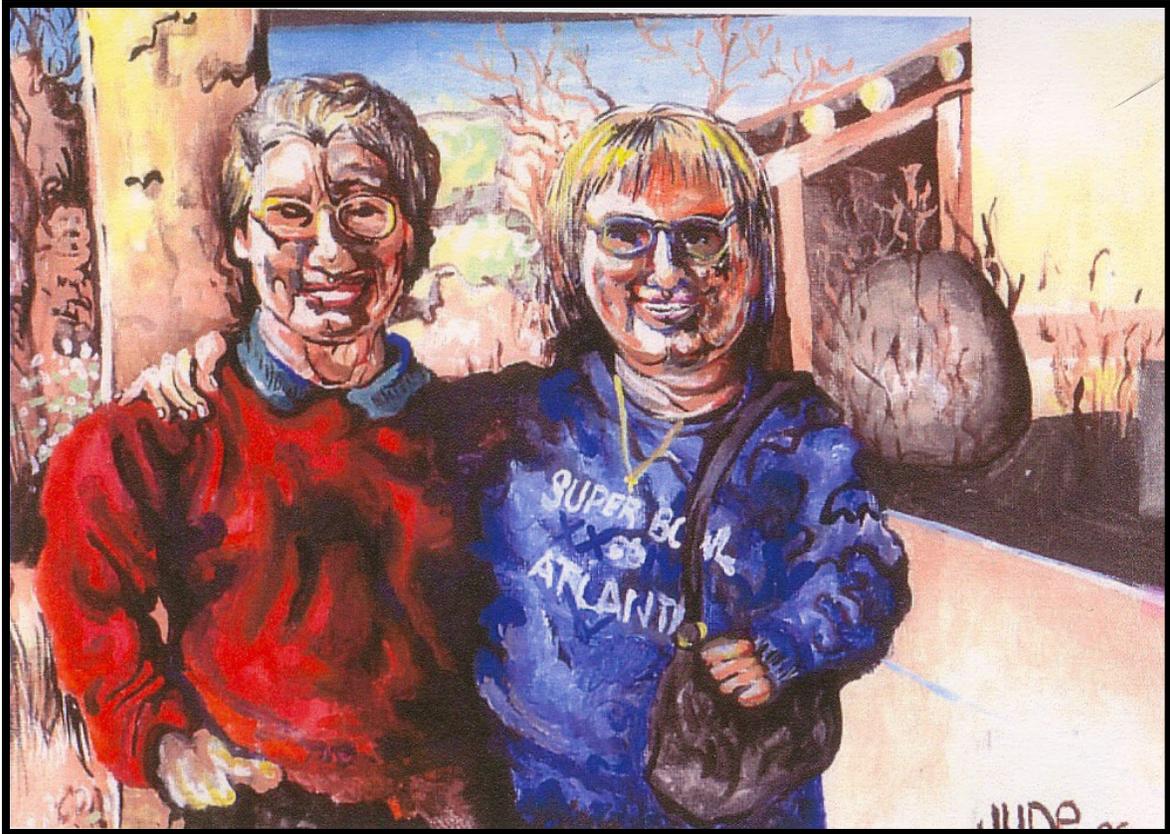
Jason Keey

“When I received Peer Support I got the help I needed. I’m not scared anymore. I have more self-confidence. A new chapter in my life has begun.”

John K.

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HAPPINESS AND JOY



Jude Mersereau

“Peer Support at the Mental Health Rights Coalition is great. I think it is better than talking to a doctor. I recommend it to everyone. It will help make your life better.”

Stacey R.

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TIM



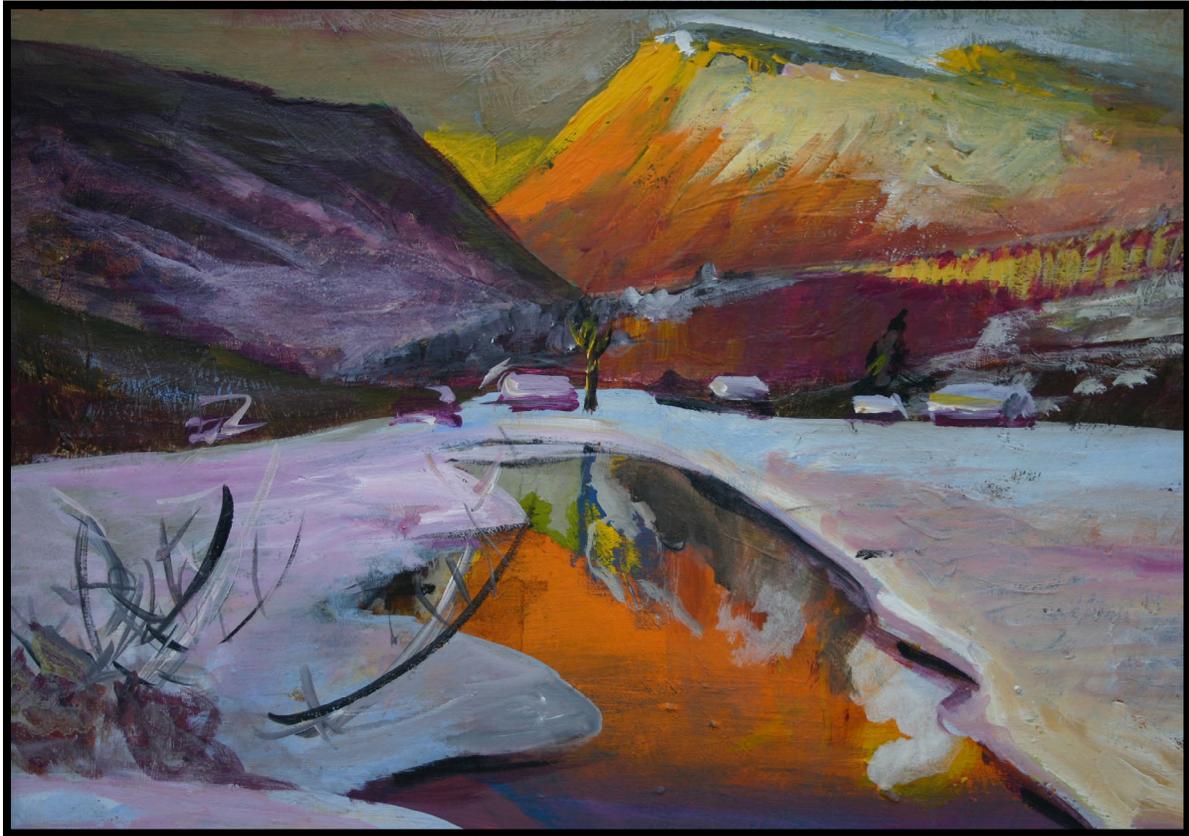
Anita Helen MacLean

“When I received Peer Support in the past it helped me with loneliness with my mental illness.”

R.L.

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WINTER SCENE IN THE VALLEY



Lorraine Shein

“Since receiving Peer Support I don’t have as much stress with having a lot of things on my mind day to day.”

Anonymous

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MAN IN THE BOX



Claire Hutchinson

"Peer Support helps keep me focused."

Robert A.

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WHAT IS IT I SEE



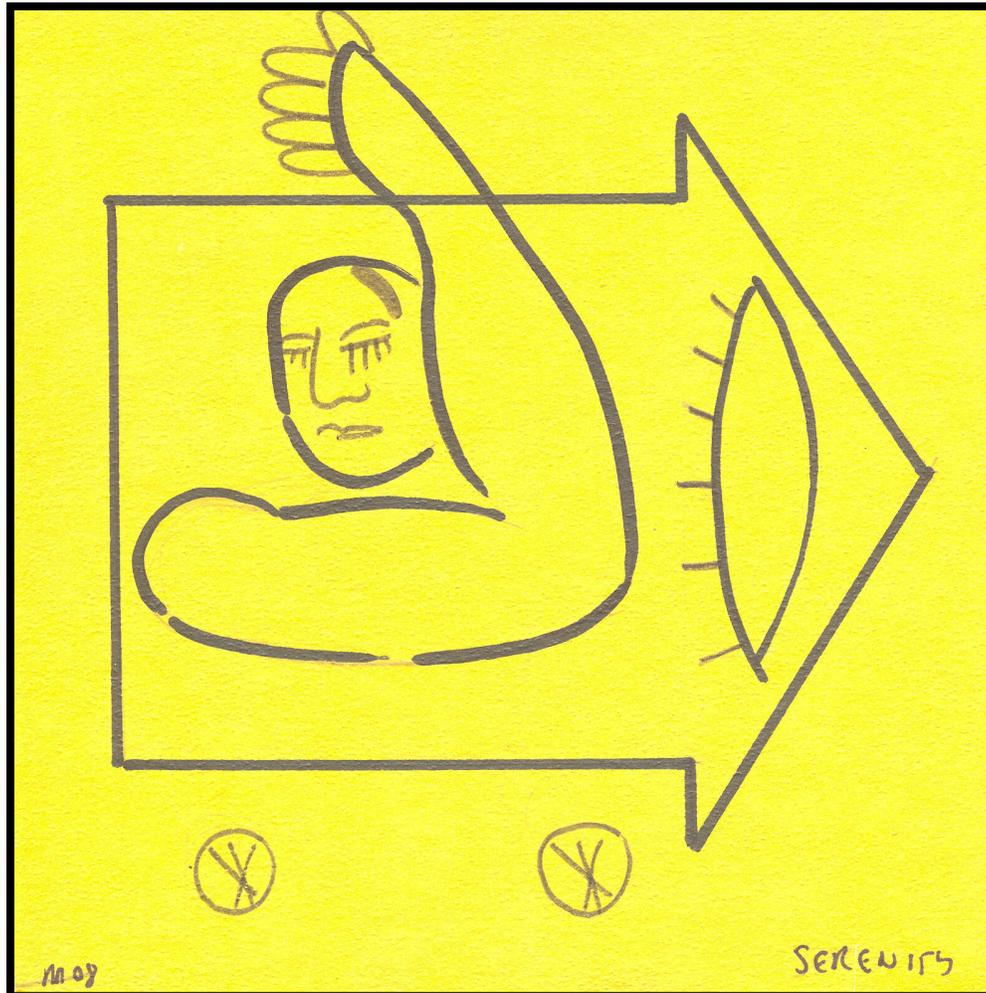
Lorraine Shein

“Peer Support to me means that we all have something in common
and with a group effort we can teach and learn from each other.”

Anonymous

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SERENITY



Peter Malone

“Peer Support has given me the skills to support people with talking, empathy, caring and guiding.”

Jennifer A.

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KALEIDOSCOPE



Loma Wheeler

“Peer Support helps me to live in a healthier state of mind and gain a refreshing look at life.”

Anonymous

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COMPASSION UNFOLDED



Ronson Green

“I have learned as a Peer Support Worker that many others have similar problems and have used it positively.”

Carl J.



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