



Peer Involvement in the Czech Republic

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Background

The Czech mental health care system has been struggling with its outdated structure and functioning (a lot of in-patient beds in big asylums, lack of community based services, lack of coordination among different care providers and services). In such a fragmented system, lack of common principles or basic philosophy of care is obvious. Supporting orientation on recovery and involving peer specialists into mental health teams was the main goal of two projects which were realized by the non-profit NGO - Centre for Mental Health Care Development, Prague, in co-operation with the Dutch partner GGZ Noord Holland Noord, and with Mrs Sarah Rae from the Cambridgeshire and Peterborough NHS Foundation Trust, UK.

Methods

In the two projects, 20 people with lived experience with severe mental health conditions were trained and employed part time. Both projects were evaluated by qualitative and quantitative methods and show some interesting outcomes.

A. Peer-consultants Involvement into Mental Health Teams

Within the first project, ten people were trained and hired as peer specialists in ten mental health teams. Both teams and the peer specialists were provided by different forms of support, including study visits in the Netherlands to provide them direct contact with experienced peer specialists working in FACT teams.

The project lasted 24 months (2012 - 2014) and included ten non-government organizations providing services for people with severe mental illness throughout the Czech Republic. In the first part of the project we prepared a training course for a group of people who had experienced mental health problems, mostly psychotic disorder. Then we organized a five day internship in the Netherlands to learn how peer involvement works there and, above all, to meet some of the experienced Dutch peer specialists. People who travelled to the Netherlands were both future peer specialists and some members of mental health teams - their future colleagues. In the second part of the project, peer specialists were employed for 12 months in 10 teams in various mental health services. Both teams and the peer specialists were given supervision and other forms of support.

Results

Nine of ten organizations participating in the project decided to prolong the contract of employment with their peer specialists after the project is finished, and some of them intend to engage even more peer specialists.

The program was evaluated on the basis of the data provided by 10 organizations participating in the project. 12 months of employment of peer consultants was included into analysis.

The turnover of peer specialists was not higher than the average turnover of the staff in social services.

The peer specialists were not more on sick leave compared to other workers.

The efficiency according to the amount of time peer specialists spent with clients was very similar to other members of the teams.

There were not reported any formal complaints of clients. Negative reactions of the clients to the peer specialists approach were rare and their content did not differ significantly from the reactions to other staff members.

B. Peer-lecturers Involvement at Universities

In the second project, another ten people with lived experience were trained as university lecturers in a specially designed course. Four courses were created together by peer specialists and mental health professionals: Recovery, Stigma and discrimination, Self-management and Peer programmes. Each course had 6 hours and was designed carefully – typically encompassing theory, work in groups, and discussions. Sharing lived experience of lecturers was also included, but not as a main topic. It was left up to lecturers how much of their stories they would reveal to students. Afterwards these courses were given to students of social work and psychology at two universities in Prague – taught by peer lecturers in couples. In this project peer specialists from the UK and the Netherlands were involved. It was important especially in the beginning for encouragement and sharing the recovery perspective.

Results

Altogether 54 students took part in described courses. Simple written form was used for feedback.

Students were asked to rate several aspects of the courses: structure of the lecture, quality of the learning materials, performance of the lecturer and usability in practice. On the scale 1 (outstanding) – 4 (insufficient) the mean score was 1,29.

Students were also asked to evaluate the course in plain words.

Positive feedback was prevailing. The students highlighted balance between theory and working in groups, sharing experiences, the courage of lecturers and the quality of materials. Generally they considered these lessons to be interesting and valuable. There were also several critical remarks regarding timing of lectures (not enough breaks), nervousness/uncertainty of some lecturers and unclear theory presentation.

The courses given at universities were evaluated by students as bringing new views and unique experience to them. On both universities there has begun the process of inclusion of these courses into regular curricula.

To disseminate the ideas of our projects (the recovery orientation and peer involvement in general), we held a closing conference of the project as a part of the Social Psychiatry Conference of the Czech Psychiatry Society. Besides, we compiled a printed Manual of Support for Peer Involvement into Mental Health Teams and also got translated in Czech and printed a useful American handbook Pathways to Recovery by Priscilla Ridgeway et al.

Conclusions

Both mental health teams and universities decided to go on with involving peer specialists as they brought a new quality and benefit. Both workers in mental health teams and university students reported a unique and enriching experience. At the same time peer specialists reported a remarkable progress in their own recovery, improvement of their social status and self-confidence. The results of these projects bring a new hope for positive changes to the mental health care system in the Czech Republic.

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