

Peer to Peer Support (PPS) training program: the importance of the face to face healthcare in a changeable virtual world

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Introduction

The Peer to Peer training aims to promote peer support, people who have suffered a mental health disorder and have recovered can be able to help others with mental health problems.

It has been shown that people with a mental health disorder who are helped by other “specialist colleague” experience an improvement in their recovery, as well as a decrease of the hospitalizations and other emergency interventions.

The peer to peer support increases the community participation and promotes the economization of resources.

This is an approach gaining support in recent times from the Spanish Health Administration, as they are starting to promote the participation of users in various health sectors. Our institution has a special interest in including this figure in our mental health system. This is why, following our previous experience with the EMILIA project. In Centre Fòrum (Parc de Salut Mar) we have done a training program to lay the foundations of this figure in our institution.

Aims

- To determine the competences, functions and skills to be integrated in the healthcare team in the mental health network.
- To discuss about the healthcare processes and the collaboration of service users.
- To create a Peer to Peer figure in our institution

Method

Firstly we met 3 times to prepare the training. In these meetings mental health professionals of the Parc de Salut Mar in Barcelona, service users from Federació Veus association and from the EMILIA Bcn association, assisted.

This group established a pilot training program of 25h (4 hours every 15 days) to talk about:

- health network
- support
- groups of help
- prevention of mechanical restraint
- self care and supervision

Each session started with a presentation of the topic to discuss that day by a service user and a mental health professional. Then a debate started with all the participants. After a 30 minutes break we created 3 groups of discussion to answer some of the topics commented before. Afterwards, all conclusions were discussed with the whole group to make a final proposal.

At the end of each session we decided who would be the person in charge of developing the next topic for the next session.

Results

45 people have participated in this training.

The role of this figure has been established to work in the institution with the health care team. Service users, families and also the professionals need to be trained to work together.

Global impression of the training pilot program has been highly satisfactory.

Conclusions

Users:

Due to the different processes that we have lived, our empathy and understanding of the descompensation states has increased. We know how to facilitate wellbeing and a better quality of life by activating the own person’s competence. We want our experience to be heard and to give value to our wisdom.

Professionals:

The TEAM figure can be of great utility for families, as he can offer orientation from an expert’s view in difficult situations. It is a complementary approach to the rest of mental health professionals. It contributes to knowledge from an emotional view that helps us to feel less guilty in specific moments.

The PPS is a necessary figure in the health network. The main value is the first person experience and the empowerment, key elements for the recovery process.

References

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