The development and delivery of peer research

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Workshop aims

• Gain an understanding of peer research
• Be able to articulate the strengths and weaknesses of the approach
• Understand when the approach may and may not be suitable
Scottish Drugs Forum

Current work:

• NIHR research grant with GCU and Bristol Uni – Epitope

• N of 1 - Minimum unit pricing study with University of Glasgow

• Navigate – Stirling - NIHR

• Peer research projects in Tayside, East Ayrshire, Fife and East Dunbartonshire
What is peer research?

- Researcher and research participants share a similar experience – in our case, problematic substance use
- This is explicitly discussed and researchers identify themselves as ‘peers’ to the group being researched
How does it work?

• Shared experience builds trust, common language, removes barriers around fears of judgment

• Can help create better relationships between service providers and users (Ning et al., 2010)

• Interviewees rate research as more enjoyable, easier to understand with peers, as well as feeling peers were more like them and easier to talk to (Hull study)
What makes it different from other methodologies?

- Doing with not doing to – most research is inherently paternalistic, reinforcing existing dominant power hierarchies – especially with marginalised groups!
- Researchers have status and power given to them by the institutions they work in and by the general public
- Academic researchers, not the individuals being researched are seen as experts
- Tends to be theoretical knowledge rather than personal
Types of peer research

• User involvement research

• Collaborative research

• User-led research

• Tends to be spectrum rather than discrete grouping, much research can involve elements of all three

• Our peer research: involvement throughout the project – info sheets, consent form, data gathering, analysis, report writing, presenting etc
Group discussions

• Can you think of possible advantages and disadvantages of the approaches?
Advantages and disadvantages

• Helps identify important research questions
• Service users more likely to open up and be honest
• Helps service users ‘say what they think’
• Recruitment – peer networks may be useful for hard to reach groups
• Impact on peer researchers
• Power dynamic – power sharing, ownership of research

• Objectivity
• Support needs - Lapse/relapse
• Time/resource implications – even if volunteers it is not ‘free’
• Tokenism
• Perceptions - where peer research is placed in research hierarchy
• When do you stop being a ‘peer’?
Our ethos

• SDF works to ensure that the opinions and experiences of people who use, or have used services influence service planning and delivery.

• Peer research allows the voices and experiences of people who have experienced or are experiencing problem substance use to be heard where decisions are being made.

• Also gets people who do or do not use services views.

• Peer research offers a unique and independent quality assurance mechanism to commissioners and/or service providers.
Our criteria for volunteers

• Lived experience of substance use – drugs and/or alcohol
• Able to commit to the project – group meetings, training, induction
• Able to be substance free while volunteering or otherwise representing SDF
• Interested in improving services
• Good time-keeping
Top Tips from Peer Researchers

• Listen! Take lived experience seriously – we are able to engage with people on different levels than academic researchers
• Don’t assume knowledge and use jargon and academic language
• But also don’t be patronising – we have skills and experiences to be valued
• Make sure there are resources to support us
• Give us opportunities to grow and develop
• Support is crucial
• Stigma – people will talk about things they wouldn’t to researchers – particularly painful or shameful experiences
Peer research in the substance user field

- Power – doing **with** not doing **to**
- Making knowledge accessible
- Expert by experience – valuing people’s strengths and skills
- Co-production
- Empowerment
- Engaging with marginalised groups
- Hearing stories and evidence that we could not through other methods
Ethics

- Tokenism – PPI is asked for – ‘box ticking’
- Informed consent
- Training and support – EAP etc
- Valuing participation – vouchers, stipend
- Vulnerability – participant and peer
- Potential for coercion – voluntary participation – peers knowing peers
- Consistency - across peers and over time
Impact on peers

- Gains in confidence, skills and knowledge
- Variety of opportunities – conferences, training, events etc
- Supported to reach their goals
- Peer researchers often use this experience to go on to further education or employment – many go on to our own Addiction Worker Training Programme
“Volunteering has boosted my confidence and allowed me to access training that will help in my next career move”

“Over the time spent volunteering with SDF my confidence, self-esteem and purpose in life have all changed for the better”

“It's great to be part of SDF, I am not judged on my past addiction and I feel valued”
Volunteer processes

• Recruitment process
• Induction
• Training
• Support
• Personal development
• Volunteer opportunities
What peer research is... And is not!

- Time and resources
- Genuine participation at all stages
- Valuing, supportive and empowering
- Opportunities for feedback
- Flexibility
- High quality training
- PVGs and other safeguarding

- Rushed timescales
- Inappropriate resources
- Power imbalances
- Support not accessible or appropriate
- Assumptions made
Group discussion

• When people would/wouldn’t use peer research in their areas/services (+service user involvement?)

• When would someone stop being a ‘peer’? What about academics/workers with ‘lived experience’?
SDF has over 25 years experience using this model and a range of trained peer researchers across the country.

We are available to provide input and advice about peer research and user involvement approaches.

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Q & A