

## Peer Research

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#### Introduction

Peer research is defined by the McPin Foundation as, “research that is steered and conducted by people with lived experience of the issue being studied.” McPin also notes that, “In mental health, a peer researcher is most likely to be a person living with or affected by mental health problems, including service users, and their friends, relatives or carers.”

This paper examines the use of peer research in health generally and mental health specifically. Both benefits and potential challenges to the use of this method of research are discussed, drawing from published research and the direct experience of the authors.

#### Types Of Peer Research

One of the academic leaders in the field, Peter Beresford, has identified three levels of service user participation in research projects: *user involvement research* where service users play roles ranging from advisory to decision making, *collaborative research* where service users work in partnership with academic researchers and *user research* where the project is initiated and controlled by service users. (Beresford 2007)

These categories are broad, and in reality may be better portrayed as points on a spectrum rather than as discrete groupings. There are many potential models with differing levels of user involvement at different stages of the project. But the crucial issue is the growing focus on service users as researchers themselves rather than purely as research subjects.

Roche, Guta and Flicker (2010) further categorise types of peer research by the role of service users: *the advisory model* where service users serve on steering or advisory committees, *the employment model* with service users employed to collect data and *the partner model* where service users are leaders or partners in all aspects of the research.

There is a growing recognition of the value of peer research across the world. An Australian study by Ning et al in 2010, for example, stressed the potentially transformative effects of peer research in creating better relationships between service providers and service users as part of efforts to support cultural change in mental health research and in mental health system reform more generally.

## **The Benefits of Peer Research**



There are a raft of published studies relating to the benefits of peer research. Many of these are in health research, several in the field of mental health, and others in more general social research, often related to children and young people. However, the benefits found are largely generic and equally valid across the various uses of peer research.

It is perhaps important to note here that much of the literature assumes service users have lived experience while academic researchers do not. It is, of course, to be expected that some academic researchers will bring their own lived experience of mental ill health even if this is not openly acknowledged.

Some of the benefits of peer research rely on the identification of the researcher as a peer by the research subjects themselves, but others relate only to the knowledge and experience of the researchers and these will therefore be realised without “coming out”.

There are potential benefits across all stages of the research process. The McPin Foundation acknowledges that personal experience can assist in identifying important research questions, designing research and providing an informed perspective on research data. Smith et al (2008) found that service user involvement in disseminating research results could enhance the power and credibility of the findings.

Many other studies see the benefits as mainly coming from the data collection stage, with Burns and Schubotz stressing in 2009 that common experience and a common language can help research subjects to say what they really think. A 2009 study by the homeless charity St. Mungo’s noted that subjects were more liable to open up to peer researchers and to be more honest in their responses, thus giving more accurate data.

Smith, Monaghan and Broad (2002) see wider benefits in what they term participatory research because of the underlying implicit values of empowerment and inclusion and the substantial improvement in understanding of the subject area that often result from the research because of the peers’ role.

There are also considerable benefits to individuals participating as peer researchers. Burns and Schubotz (2009) identify empowerment, validation and development of new skills as the key outcomes. Barber et al (2011) argue that benefits accrue to academics as well, as working in partnership with service users can give them a deeper understanding of the subject from their perspective.

## **Issues and challenges**



The literature also identifies several issues requiring consideration when undertaking peer research. These can be grouped under two headings: training and support, and objectivity.

Roche, Guta and Flicker (2010) make the general point that peer researchers will have very different requirements for support and supervision than those who are assumed to have followed a more traditional academic route to a research post. This study also raised the possibility of triggering among peer researchers who are exposed to discussions and experiences that may be distressing. Ning et al (2010) take this further and raise possible ethical

considerations in potentially exposing researchers to sensitive situations, while also questioning whether researchers who are well enough to participate can actually be representative of the wider service user population.

Burns and Schubotz (2009) raised the objectivity issue by stating that there is a real challenge in peer research to find service users who are close enough to the researched subject area to bring real experience whilst also capable of sufficient detachment to enable reflective and objective analysis.

Lushey and Monro, in a 2014 peer research study carried out by young people leaving care, pulled together several of the arguments that make more traditional academic researchers wary of peer research. They contend that the process is made complex by the relative inexperience and additional support needs of peer researchers, whilst also questioning whether policy makers will necessarily accept the validity of the outcomes of a peer research study.

### **Examples of Peer Research Projects**

There are many published examples of good peer research projects demonstrating that involving people with lived experience can improve our understanding of mental health in a unique way. In some of these people with lived experience have been involved to a greater degree than in others, but together they provide a body of evidence for the effectiveness of peer research as a methodology.

- In research described by Rose (2010), people with lived experience interviewed over 500 service users. This involvement was very helpful in determining good practices of care in mental health in both the community and hospitals. The results show that providing good access to information and preventing over-medication were especially important to people who use services and therefore should be considered as best practice.
- The Strategies for Living study (Faulkner, 2000) showed that mental health professionals should be more focused on supporting people in developing self management strategies rather than mainly on interventions that alleviate symptoms. Peer support was found to be very important for people diagnosed with mental health conditions. This research was both designed and conducted by people with lived experience.
- The review of patients' perspectives on Electro-Convulsive Therapy (ECT) (Rose et al., 2003, cited in Thornicroft and Tensella, 2005, p. 2) showed that patients report a significantly lower level of satisfaction with ECT when asked by a peer researcher than when asked by a professional delivering ECT.
- A service user study (Pitt et al., 2007) on the process of recovery from psychosis showed that, "recovery is a very dynamic process, rather than a definitive end-point or cure". It involves rebuilding life and self and hope for a better future. This research has many implications for clinical practice. For example, it suggests that having access to recovery stories and more choice in approaches that may alleviate suffering are very important for recovery. People who use services had influenced the design of the study by being members of a steering group and the primary researchers had experience of using services.

## **Conclusion**

It is clear that many benefits can be realised through peer research projects. As the examples given above demonstrate, peer research can improve our knowledge of mental health in a manner that traditional academic approach cannot. The additional knowledge and understanding of researchers with experience and the relationship they can have with their research subjects as peers can lead to more complete and accurate research findings. In mental health this process has proven its value many times.

However, there are issues that need to be addressed in the design and delivery of peer research projects that are similar to issues found in academic studies. For example, academic and peer researchers alike bring their own beliefs and experiences into the research process and this has the potential to bias the results. This might be a more significant issue in a peer research project where the researcher has, by definition, an empathy with the subjects and is likely to have a strong interest in the research questions. But if roles and boundaries are established as part of the study design then any potential conflicts can be carefully managed.

The other issues include the greater need for training and support and ethical issues resulting from peer researchers dealing with potentially distressing topics during the research. It is important to remember that all of these issues are not specific to peer research and all of them can be dealt with effectively by proper training and supervision.

Perhaps the core consideration here is simply that peer research should not be seen as a softer or less rigorous process than traditional academic research, however that is defined. In all studies, researchers should be properly supported and supervised and standards of objectivity should be high. The methods required to ensure this happens might be slightly different in peer research projects but the principles remain the same.

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