

Interreg



2 Seas Mers Zeeën Ensure

European Regional Development Fund

ENSURE model / The steps

Introduction to the project

ENSURE is a project involving 9 partner organisations from the United Kingdom, France, Belgium and the Netherlands.

The aim of **ENSURE** was to create a model of peer to peer support that can be implemented with different groups of people and that can be instrumental in enabling social inclusion for people who, for whatever reason, may be vulnerable to or more likely to be socially excluded. The goal being that by enabling social inclusion for one group of people we can ensure social inclusion for subsequent generations.

The project draws peer to peer support from within the local community, and focuses on creating longer-term sustainable networks of support for individuals to ensure that they remain socially included and do not slip back into situations that would create future exclusion. A key element of this is connecting excluded people to the professionals, systems and organisations that can provide support over the longer term.

The project was based on the highly successful '**Mums for Mums**' project developed by Community Centre 'De Mussen' in the Netherlands. It was granted more than 2.5 million euros of European Development Funding via the Interreg VA 2Seas programme and ran from February 2020 to March 2023.

The Health and Europe Centre is the Lead Partner working with:

- IGEMO (BE)
- Kent County Council (UK)
- HZ University of Applied Sciences (NL)
- University College Artesis Plantijn (BE)
- Community Centre 'De Mussen' (NL)
- AFEJI (FR)
- Goes City Council (NL)
- Community Arques (FR)

The following document outlines the lessons that all our partners have learnt about setting up a peer support scheme over the duration of the project. We have broken the process down into a number of simple steps and have included examples from partners to illustrate how that step was implemented during the project and in their specific context.

PILOT PARTNERS PRESENTATION

IGEMO

Who are they?

IGEMO is the Intermunicipal association for development of the region of Mechelen and surroundings. It coordinates the regional cooperation on social economic themes, between its member municipalities and OCMW's (public centres for social welfare).

IGEMO is the main organiser of **"Wijk-werkers"** which is a program that allows jobseekers to work on their skills for one year. This allows them to find a job that suits them, under the supervision of the VDAB (Flemish governmental organisation that supports unemployed people in Flanders).

What they did through the ENSURE model

IGEMO piloted the model with the **"Wijk-werkers"**, especially with those who joined the program during 2018 because they can do this programme for only 1 year and then they have to go back to VDAB and look for a new job. However, they need some extra support in training their soft-skills and building confidence in finding out what they are good at.

Who are the peer supporters? The wijk-workers who joined the program before 2018 because they are allowed to remain until they retire, so they got more time to support those who came after 2018. The main goal is to empower wijk-werkers by working on their soft-skills and sharing experiences through a set of activities/workshops and team building activities.

KENT COUNTY COUNCIL

Who are they?

Kent County Council is a local authority in south-east England. Under the Care Act (2014) they have statutory duties regarding the provision of care and support to vulnerable people in their communities. These duties include: undertaking assessments to determine the type of care and support people need, supporting people to live independent lives within their communities, providing information and advice about the support that is available and how people can self-manage. As a public sector organisation, they also have to ensure that public expenditure is of the best value.

What they did through the ENSURE model

KCC piloted the peer to peer support program with autistic adults **(18+) with autism. The pilot is being delivered and supported by a community-based organisation.** KCC recruited peer supporters via stakeholders organisations and through KCC adult social care teams.

The **main goals** are to increase self-confidence, promote greater inclusion in the community, develop communication skills and enable people to transition into formal volunteering or paid employment if that is a personal aim.

HZ UNIVERSITY OF APPLIED SCIENCES

Who are they?

HZ University of Applied Sciences is located in the southwest of the Netherlands with a population of about 5,000 students. As a university of applied sciences, HZ focuses on practice-based education and research opportunities.

What they did through the ENSURE model

HZ piloted the model with **young migrants** supported by HZ students. Before that, students did not have contact with migrant peers which leads to lack of knowledge, tolerance and stereotyping young migrants. The peer supporting program helps to improve this situation by pairing HZ students and young migrants and engaging them in activities like sports, cultural visits, shopping, travelling, making dinner, etc.

Here, the **main goal** is to improve young migrants' social skills, increase their self-esteem and their feeling of being at home in Middelburg.

Besides piloting, HZ is an evaluation partner in the project. It means that they evaluate the progress and results of the ENSURE model piloted in different countries.

UNIVERSITY COLLEGE ARTESIS PLANTIJN

Who are they?

AP is a University of Applied Sciences in Antwerp. The thematic competencies of the bachelor in midwifery are related to health/midwifery education and research. The midwifery education has specific knowledge and experience in maternal life balance, transition to parenthood and family life and emotionally, socially and economically disadvantaged childbearing women in the Antwerp area.

What they did through the ENSURE model

AP University of Applied Sciences piloted the model in the frame of the information and counselling centre Nova Vida which has a dual purpose. On the one hand, it wants to introduce students to and care for **vulnerable pregnant women**. On the other hand, Nova Vida aims to provide quality and evidence-based care to vulnerable and undocumented pregnant women, in collaboration with other (health) care organisations.

The peer supporters are midwifery students from the Bachelor program. Through training the students will gain insight into the difficulties of working with vulnerable groups and learn to work together in a multidisciplinary way to optimise client-oriented care.

The **main goal** is to empower pregnant or new mothers in motherhood and strengthen them in their role as women in society so they can develop self-confidence and have a higher self-reliance.

COMMUNITY CENTRE 'DE MUSSEN'

Who are they?

De Mussen is a community centre in the Schilderswijk in The Hague, one of the most deprived areas in the Netherlands. It is an important meeting point for residents and self-help groups and has 2000 visitors of all ages and ethnic backgrounds every week. De Mussen works in an integral way with whole families and encourages residents to participate as volunteers and empower them to enhance their own well-being and a healthy lifestyle.

De Mussen developed the **project Mums for Mums (Schilderswijk Moeders) on which the ENSURE project built its model**. Mums for Mums is a program in which trained confidants (peer supporters) act as a bridge between vulnerable families and social services. **Mothers are the key figures of families** in the neighbourhood. For the well-being of families in the neighbourhood and to promote the living environment in the Schilderswijk in general, it is very important that mothers are empowered. If they step out of their isolation, meet other mothers, get more knowledge of the society in which they live, raise their children better and with more knowledge, undertake activities, take up voluntary work and/or find paid work, this will not only have an impact on their own lives but also on the lives of their children, family, neighbours and the neighbourhood as a whole.

What they did through the ENSURE model

De Mussen piloted the ENSURE model in the context of Mums for mums. Mothers in the Schilderswijk are in a vulnerable position. They are often isolated women, with language disadvantages, who have insufficient knowledge of the society in which they live and how to raise their children. They often feel powerless in their upbringing.

In this way, trained confident women from the same ethnic background act as the peer supporters. Because of their background, these confidants are able to make good contact with women in the neighbourhood. They come from the same neighbourhood and know the families' problems. They also speak their language which makes mothers more open to talk about their problems.

The **goal** is the empowerment of mothers and improvement of accessibility to regular care in order to prevent families from slipping into more serious problems.

AFEJI

Who are they?

AFEJI has been a key educational, social & socio-medical organisation in the Nord area for the last 60 years, running 110 services & establishments for vulnerable people. AFEJI offers several services to migrants, including a dedicated service for the integration of unaccompanied minors (NAMs) with strong experience in security & social mediation with several migrant groups i.e. Afeji used to coordinate the camp of 1300 people at La Linière.

What they did through ENSURE model

Piloted the model by involving its Service dedicated to **unaccompanied minors and those who just turned 18 years old**. While those under 18 years of age benefit from additional protection, those who just turn 18 are left with few solutions and cannot access the services they need because of a silo approach. Through ENSURE, Afeji wants to go beyond this limitation and create a new model of service to bring a sustainable solution designed with the target group itself. In this way, Afeji is developing a network of volunteering hosting families who are going to be trained soon and will act as peers for the young migrants that they welcome in their home. Indeed, hosting families provides a safe environment as well as peer-support in various aspects of life: accommodation, social and cultural life, employment.

The **main goal** is to foster the integration of young migrants into society by providing them with temporary accommodation and a stable and safe place to live.

GOES CITY COUNCIL

Who are they?

Goes is a municipality from the Netherlands. They are responsible for the policy and social welfare of the citizens. They focus on creating a more inclusive society and health promotion for vulnerable people by the method peer to peer support and social marketing.

What they did through ENSURE model

Piloted the model with **vulnerable families with young children**. By coming into contact with people in the same situation, learning from each other, getting positive energy from an activity, they can gradually grow towards a more positive health.

The peers were participants in Goes shared from experience what has helped them further in their life. Often these are the participants who have participated from the start and have not experienced any interim setbacks.

I work from a positive health. People look at daily functioning. Health is determined by several themes such as mental well-being, meaning, participation, quality of life, physically healthy, financially healthy. Professionals who can give time and in the right way attention to a group of vulnerable families by empowering them to develop their talents, so that they take steps on the participation ladder.

The **main goal** is the perceived health of the participating families based on the nine factors of health according to Lalonde's model, which has increased, making people more resilient, experience self-reliance and well-being in their own lives and are able to make healthier choices and build a social network.

COMMUNITY ARQUES

Who are they?

Community Arques is a French association whose aim is to maintain social ties between inhabitants & strengthen solidarity between generations. Engaging in many activities aimed at enhancing the wellbeing & health of the users. Community welcomes people of all generations, especially people in social & professional integration difficulties.

What did they do through the ENSURE model

Pilot of the model with low **socio-economic background inhabitants of the neighbourhood**. Community created a group of peers supporters selected among people who already have a role at the Association Community but also new people approached during the "laboratoires aller-vers", methodology experienced to meet and recruit new people. The peers' supporters, instead, act as intermediaries between the inhabitants and the local services (housing, employment, etc.) to facilitate communication and access to rights and services. The peer-support takes place during cocoon classes and workshops.

The **main goal** is to empower families and neighbourhoods, trying to make communication between services and people easier. All the actions in place aim to improve communication, digital and soft skills in order to reinforce their self-confidence, their employability and their trust in institutions.

PERSONAS

In this section we will introduce you to each project partner's "persona", these personas represent the specific group of people they worked with. These are people who have become vulnerable due to their contextual circumstances. At the end of this section you will follow "Lucie" through the ENSURE model, Lucie is an example of someone who has become vulnerable due to generalised socio-economic disadvantage.

To follow the other personas, some of whom have more specific needs, through the ENSURE model, you can click on the annexes mentioned below.

IGEMO

Name of persona: Marie

High level descriptor: Neighbourhood worker

Typical features

- 55+
- High school level
- 2 years unemployed
- Suffering from underlying problems such as health issues; vague symptoms such as severe headaches, stress, back problems, feeling depressed and unmotivated



Key challenges

Keeping Marie motivated to be part of the working society and to engage with the community. She wants to participate in the community in some form but doesn't know how to handle it. She thinks she lost feeling with the labour market and has low self esteem.

About persona

Marie is someone, because of restructuring and her underlying problems, who has been fired after a career of 35 years. She worked in the administration field and found her job fulfilling. Because of that she finds it difficult to get a job through the Flemish governmental employment services, VDAB. She's not getting call backs, any positive feedback after a solicitation and is starting to get demotivated after 2 years.

Through VDAB, she has been assigned to wijk-werken to find out what her interests are in the course of 1 year. In this activation trajectory she does a small number of hours to identify her thresholds. She works in an elementary school to supervise the playground during recess.

Personal aspirations / aims / goals

To get more hands-on tools to find her interests related to the job market. She wants to feel more confident in herself and wants to share her knowledge with other neighbourhood workers. Marie wants to know her qualities and where she can grow in her personal life.

Marie's journey through the ENSURE Model: annexe 1

KENT COUNTY COUNCIL

Name of persona: Mark

High level descriptor: Adult with autism



Typical features

- Struggled in school due to class sizes and learning style
- Struggles with social interactions and 'fitting in'
- Can get so involved with interests that forgets daily living tasks such as washing, eating
- Feeling isolated and anxious

Key challenges

Fitting in – social interaction and communication with others. Anxiety and mental health issues arising from this.

About persona

Mark was diagnosed as Autistic at an early age. He lives at home with his parents.

Mark attended a mainstream school but struggled to learn in classes with lots of students. He found it difficult to make friends and 'fit in'. Mark was obsessed with maths and science classes. Luckily, this was encouraged and the school gave him extra support for these lessons.

On leaving school, Mark's parents were worried. He had aspirations for his future but no idea how to communicate well with others. Eventually, Mark decided to go to university to pursue a science degree.

His family were concerned at how he would cope living away from home. He tended to forget to eat, wash his clothes and generally care for himself, especially when he was immersed in his studies. Mark found it difficult to keep friends because he would forget to return their calls to him.

Mark had a very good supervisor at university. Unfortunately, when the Supervisor died Mark could not find another person to provide the level of support that he needed. He returned home to live with his parents.

Mark's social worker told him that Kent County Council has a peer support programme being led by Advocacy for All, initially Mark was worried that he would find this overwhelming but after talking about it he decided to give it a go.

Personal aspirations / aims / goals / strengths

Mark would really love to find a job and work full time, but the idea of finding a job makes him very anxious. As a result, he is starting to feel isolated and this is affecting his mental health.

Mark's journey through the ENSURE Model: annexe 2

HZ UNIVERSITY OF APPLIED SCIENCES

Name of persona: Yazid

High level descriptor: Young migrant



Typical features

- 22 years old
- Unmarried
- Low education level
- Minimal (Dutch) language skills.
- Enthusiastic and eager to learn Dutch young people.

Key challenges

To better recognize the opportunities in the direct environment of young immigrants and as a result to improve their wellbeing and functioning in society.

About persona

This is Yazid. He is originally from Somalia and currently living in The Netherlands for over two years. For some time now he has been going to school to learn Dutch and other useful skills that help him to find his way in today's society. A social worker from a foreign affairs service that he is in contact with, asked him if he would like to learn Dutch more intensively and to learn more about the Netherlands.

She told him that they are introducing a peer support system. At first, he hesitated in joining this project but after talking to a contact person from the foreign affairs services he gained confidence and decided to join the project.

However, he lacks a social support network and he isolates himself from people and a world that doesn't understand him. He does this because the health/welfare system has not fully understood his needs or made adaptations for him.

Personal aspirations / aims / goals / strengths

Yazid has the same personal aspirations as every adolescent in the Netherlands. He wants to finish an education, get a job, a nice house, a relationship and maybe later on have a family life.

He wants to see, just like most young migrants, his family and friends from his country of origin. Most of all, young migrants want to get acquainted with adolescent Dutch people. They want to be a part of the Dutch society.

Participating in this peer project will be a good first step to achieve this.

Yazid's journey through the ENSURE Model: annexe 3

AP UNIVERSITY

Name of persona: An

High level descriptor: Vulnerable pregnant woman



Typical features

Vulnerable pregnant women often have 1 or more of the following characteristics:

- low socio-economic status
- low education level
- illiteracy
- undocumented
- social isolation
- young age
- little or no prenatal follow-up
- history of abuse (i.e. alcohol, drugs, sexual, domestic violence)
- little or no access to health care
- substandard housing
- difficulties with coping
- unhealthy lifestyle
- difficult communication due to foreign language

Key challenges

Vulnerable pregnant women have a higher risk of perinatal mortality and morbidity such as post-partum haemorrhage, infections, etc. The neonates are often smaller for their gestational age, are often born prematurely and/or have a low Apgar score. All of this means that these newborns already start their lives at a significant disadvantage.

About persona

An is a highly educated woman who is unexpectedly pregnant with her 2nd child. Her first child's pregnancy and delivery were traumatic so she is now very anxious that it will go wrong again. She is the only one of her group of friends who has already been pregnant.

She had a good job but due to the problems with her 1st child, she and her partner decided that she would become a stay-at-home mom.

Her family doesn't live in the city and she doesn't see them often. She doesn't really know where to go with her fears and feels extremely lonely. Because of the corona pandemic, her partner has less income so they also have money problems. This makes her more withdrawn and she locks herself up more and more in her own home.

Personal aspirations / aims / goals / strengths

An would like to get back out of her isolation and have some more contact with like-minded people. She would also like to overcome her fears and be well prepared for the pregnancy and delivery. She would also like to start working again after giving birth but does not know where to start applying.

An's journey through the ENSURE Model: annexe 4

COMMUNITY CENTRE 'DE MUSSEN' (2 personas)

Name of persona: Fatima

High level descriptor: Migrant person living in The Netherlands since her marriage at 18 years old.



Typical features

Vulnerable migrant women often have 1 or more of the following characteristics:

- low socio-economic status
- mother with young children
- husband with low paid job (if any)
- low education level
- very basic knowledge of Dutch language
- small network
- little knowledge about access to health care
- not familiar with the Dutch public system (housing, education, taxes etc)
- poor housing
- difficulties with coping
- difficult communication due to foreign language
- in debt.

Key challenges

Disadvantaged by educational problems and a public system that does not fully understand the needs of migrants.

People with a migration background often lack a support network and tend to isolate themselves from people and a world that doesn't understand them and they don't understand the world. Systems can be hard to navigate and have often let people down.

Also many people with a migration background get into debts and are unable to solve their problems themselves.

Getting a divorce for people with this background is not easy; they need help to find a lawyer. Finding a lawyer with a similar cultural background helps.

Other features that contribute to vulnerability include a low level of education and often no job at all, but the role of a housewife. This group needs support for language development.

About persona

Fatima has been raised in Morocco in the Berber area. Her family is poor. A cousin lives in The Netherlands and both were forced by their parents to marry each other. After the marriage they lived in The Hague with their parents-in-law. After a year the first child is born. Fatima doesn't speak Dutch and is not allowed to have any education. After the birth of the first child, relationship problems start. They get their own house and two other children are born. The husband loses his job and they receive benefits from the government. They have trouble paying their bills but as Fatima doesn't speak the language very well, she is not aware of the debts that are increasing. The husband doesn't feel very "manly" and starts to gamble and use drugs. Fatima is aware of the increasing problems in their marriage and wants to get out. She files for divorce. After the divorce she starts her own life with her children. She gets to know her neighbours, starts to learn the Dutch language, does voluntary work at the community centre and encourages her children to study.

Personal aspirations / aims / goals / strengths

She wants to participate in the Dutch community and would like to speak the language properly. Because of her planned divorce, she needs to become financially independent. Therefore she needs to engage with the labour market. As a start, she would like to become a peer supporter at the community centre so she can help people in similar circumstances. She is a good listener and an empathetic person.

Fatima's journey through the ENSURE Model: annexe 5

Name of persona: Hassan

High level descriptor: Migrant person living in The Netherlands after being a refugee.



Typical features

Vulnerable migrant men often have 1 or more of the following characteristics:

- higher socio- economic status in country of origin
- married middle-aged man with children
- job seeking
- high education level
- no validation of non-European bachelor degree in the Netherlands
- basic knowledge of Dutch language
- small network
- not familiar with the Dutch public system (housing, education, taxes etc)
- poor housing
- difficult communication due to foreign language
- English as a second language

Key challenges

Hasan is a well-educated man looking for a job that coincides with his level of education.

Refugees often lack a support network and they tend to isolate themselves from people and a world that doesn't understand them and they don't understand the world.

Systems can be hard to navigate and have often let people down due to the fact that they don't speak the language.

Sometimes this group of people have a high level of education, but remain unemployed. Support is needed for language development, and he needs help with validation of his degree and help with finding work.

About persona

Hassan used to live with his wife and two children in Syria and had a good job as a maths teacher at a secondary school. Due to the war he had to flee to Europe. The journey to Europe has been very dangerous and stressful. Finally arriving in The Netherlands, he has been put in a camp with his family for a long time. He has been moved from one camp to another camp several times.

Hassan is tired. He is afraid that his residence permit will be refused. Living in one room with four people and having the anxiety of being expelled is creating a lot of stress. Life seems aimless.

Finally, he gets his residence permit and he finds a house for his family. Now he wants to pick up his old life and do the job he loves most in the world: being a teacher. But the government does not acknowledge his degree and his Dutch is too bad.

Several institutions want to help him to find a job but he has to start as a concierge due to the fact that his Dutch is not good enough. He feels humiliated and ashamed. His children learn the language very quickly at school and his wife is also making friends from different cultures. Hassan feels very lonely and displaced.

Personal aspirations / aims / goals / strengths

He wants to participate in the Dutch community, by speaking the language and finding a job. He feels that this will make him a role model again for his children. He is very motivated to improve his life and he is patient with his peers, like he used to be as a teacher. By becoming a peer supporter for the next couple of years, he will improve his language and other skills and finally will find a job as a teacher or get the necessary education needed for this.

Hassan's journey through the ENSURE Model: annexe 6

AFEJI

Name of persona: Abdoul Kader

High level descriptor: Unaccompanied minor

Key features

Young people under 18 years of age, who have arrived in France and have been recognized as minors following the EMA evaluation, and who are under the care of the child welfare services, under the guardianship of a judge for children. The level of education varies according to their background. Some young people have been able to benefit from schooling in their country, while others have had to leave the school system quickly to work and bring income into the family.



The motivation of these young people who arrive on French territory is to have access to schooling, to find a job, to have access to health care, and to the common law in obtaining papers (receipt, residence permit), to then find an accommodation and build their life on French territory.

Key challenges

The main objective for these young people who arrive in France is to be recognized as a minor. To do this, when they arrive on French territory, they go to the police station or to the social services office and declare themselves to be “wandering”. They are then taken to a reception centre for extreme emergencies, and wait to pass the EMA evaluation for the recognition of being a minor. After that, they integrate a support and accommodation system, and they are accompanied by professionals in the elaboration and construction of their project.

About persona

Abdoul Kader was born in a village in Sirako, Mali. His father was a farmer and his mother was his father's first wife. He has an older sister and a younger brother. Abdoul Kader is the only child in the family to attend school. They live in a mud house (bunto) built by his father. Life was peaceful for the family until the death of Abdoul's father when Abdoul was just 15. It is at this time that the living conditions deteriorate, the field is not exploited any more, the famine sets in.

In view of his living conditions, Abdoul Kader decides to follow a group to leave for Algeria, to arrive then in France.

Personal aspirations / aims / goals

Abdoul Kader's project is to be able to build his life in France. To do so, he is involved in his professional and academic life (apprenticeship contract), to obtain his citizenship papers and to find a job and an accommodation.

He can rely on the educational team to build his project and obtain state aid.

It is important in this kind of situation to work firstly on trust in order to be able to accompany a young person in his life project.

Abdoul's journey through the ENSURE Model: annexe 7

GOES CITY COUNCIL

Name of persona: Claudia

High level descriptor: Vulnerable mother with young children

Typical features

- 38
- Married, two children special education
- Low educated
- Unemployment, her husband works
- Many concerns in the family about finances, upbringing, relationships, which cause stress and health disadvantage.



Key challenges

In order to support people like Claudia, it is first necessary to better match the range and working methods of professionals to the needs of the target group and improve the quality of life based on positive health for these families.

About persona

This is Claudia. She is married to John and has a daughter.

She is incapacitated because she had a stroke. This is unfortunate, because she has a secondary education and wants to work. She can no longer organise activities for herself and her family on her own.

She received an invitation to a free trip to a local swimming pool with the whole family. A mandatory part of the activity was a meeting to get to know the social worker. This meeting was about health delivered by Goes Bezig. During this meeting, participants were asked to participate in the next activity about health. Claudia enjoyed it. It became meaningful to her to attend these meetings which made her feel much better about her personal situation, this led to her becoming an ambassador for Goes Bezig.

Personal aspirations / aims / goals

Improve the well-being of their family and of her children.

Claudia's journey through the ENSURE Model: annexe 8

COMMUNITY ARQUES

Name of persona: Lucie

High level descriptor: Group of adult women aged between 45-70 years old



Typical features

The group is composed of women at the age of retirement from the labour market. Often, people impacted by vulnerability in this group have important needs concerning their status of isolation and their health conditions.

The biggest problems for this group is often the compilation of documents to allow for necessary administrative procedures to take place, especially concerning their documents to obtain their pension. Moreover, their awareness about accessing professional health services is often poor.

Key challenges

The majority of the group does not have any diploma or education certificates.

Slow replies from services lead people to have low trust or to give up on searching for answers and solutions to their problems.

Accessing their rights seems to be an important concern for the entire group; as first they do not know their own rights; secondly, they need to be accompanied to understand procedures and documents to get their rights guaranteed.

Members of this group often lack support networks and isolate themselves from people and a world that doesn't care about their needs, as far as they are concerned.

Systems can be hard to navigate and have often let people feel alone and without hope.

About persona

Some of these women have experienced violence within their marriage. Some others are divorced or single mothers.

Personal aspirations / aims / goals / strengths

Most of the people represented here expect:

- to be reassured
- to have understandable information
- to find a constant accompaniment for their specific cases
- to find professionals with whom to create professional and at the same time personal relationship (the group generally presents health problems concerning nutrition and therefore weight)
- to find a way to be within a network and to spend time with other people in their same situation. Some of them are looking for activities as volunteers, those are people who like to engage with the others –likely our future pairs.

Now you will follow Lucie's journey through the ENSURE model. If you would like to follow the journey of the other groups we worked with, please go to the different annexes mentioned above.

STEPS TO IMPLEMENT THE MODEL

1. Recognise the needs
2. Making a plan
3. Social marketing
4. Test the model
5. Recruitment of the participants
6. Selection process for the peer supporters
7. Deliver trainings
8. How to recruit people to receive peer support
9. Deliver the programme
10. Evaluation / Outcomes and sustainability

Step 1: Recognise the needs

If you are reading this document, then you already have an interest in the use of peer to peer support to help promote social inclusion.

Before you get started with implementing the ENSURE approach, it is important to understand the needs of the group that you or your organisation is hoping to support using this approach and how it can be applied to your specific context.

ENSURE is designed to be transferable to lots of different groups of people in different environments and contexts. You may recognise the people that you want to work with amongst one or more of the personas we have developed. However, you may also want to adapt the programme to meet the needs of a different group of people or a different context.

Before you get started, we recommend following the steps outlined below. These steps will give you a good foundation to build your project on by helping you identify the outcomes you want to achieve, the people and organisations (or stakeholders) you want to involve, the resources you have to deliver the project and how peer support fits within the wider system of support that is available to people.

Case study : Kent County Council

Talking to people from your target group is really important. This can be done using focus groups. Focus groups bring together a group of people to discuss a specific issue and identify solutions. When starting a new project, this can be a really helpful way to anticipate any challenges and barriers that might occur. Holding focus groups with people from your target group can provide extra insight into how the project can work - what might work well, and what might need to be changed or adapted for your specific target group. People on your steering group can help in funding people for you to talk to as well as helping with planning and holding focus groups. Often the people on your steering group are already people that are trusted by your target group and because of that the people from your target group will be willing to talk to you.

In Kent, we held several focus groups. We particularly wanted to understand how to deliver the peer supporter training and what the peer support model should look like once it was set up. The insight we gained was invaluable. It stopped us making assumptions about what would work and enabled us to make changes early on in the project.

One example is that we talked to people from our target group about the peer supporter training. We talked to them about the content of the training and the format. They told us that some of the learning exercises that we planned to use would not work well for them because they process information differently than most people. This made us realise that we would need to adapt the training for our target group. Using the feedback from the focus group, in this instance, saved us a lot of time and prevented us from running training that would not work for our target group.

Peer support can be a different way of doing things. Some people might not understand what peer supporters are, how peer supporters can help people living in the community or how peer supporters can compliment the work that professionals do.

Therefore, it is important to talk to people, including people who might be in the group that you want to support and professionals about the project. A really good way to do this is to engage with people right from the start. This means that the people likely to benefit from the project are involved from the beginning and can help to shape and develop the project. They can also help you promote the project in the wider community and be good ambassadors in talking to others about how the project has helped them.

1.1 Identify and engage with your stakeholders

As far as possible, it is important to collect the thoughts and insights of people from the group you are working with at every stage of the project.

People who have experienced the barriers that you have identified are an invaluable source of information and are uniquely placed to tell you what their experience was like, how it affected them, what worked well, what did not work well and how it could be improved.

You will also want to engage with a range of other stakeholders to help develop and implement the project. For example, other professionals who work with the group that you want to support identifying and engaging with your stakeholders from the beginning will help with all the next steps.

1.2 Bring people and professionals together to perform local SWOT analysis and define common goals

The first step in recognising the outcomes that you want to achieve is to bring together people from the group that you want to support, professionals and other stakeholders both from within and outside of your organisation, in order to perform a Strengths, Weakness Opportunity and Threats (SWOT) analysis. This will help understand the context that you are working in, define your common goals and give you a way to measure progress.

In Annexe 9 you will find a template and guidance to help you perform this analysis, as well as some examples from the ENSURE project. [Provided by HZ University & Artesis Plantijn University] This analysis will help you define your common goals for example: De Mussen have an established peer support programme that works with the mothers in families that are established in the local community to support mothers in newly arrived migrant families to integrate into the local community. Their focus in ENSURE has been about how peer supporters can be a bridge between the newly arrived families and professionals that can provide them with support and services. The common goals identified through their SWOT were:

- Allow a more fluid conversation between professionals and the groups that they support;
- Enable professionals to provide more efficient support,
- An accompaniment in which the group becomes strength for the single individual (creation of an experimental method of accompaniment- Peers support)

1.3 Analyse the situation: i.e logic model

The next step, using outcomes from your SWOT analysis and keeping in mind your common goals, is to analyse the current situation. This can be done using a logic model, you will find a template in Annexe 10. Logic models provide a visual summary of the project, including the resources that you have to achieve your goals, the steps that you need to take as well as the short and long-term goals that you want to achieve.

Logic models can be helpful in making sure that all stakeholders have a shared understanding of the project.

1.4 Define your goals:

Use your SWOT and your logic model to clearly identify the issue that you want to resolve. This will be an issue that is socially excluding a group of people.

Examples from our partners include:

- lack of trust in the government systems that stops people accessing the support and services that are available to them
- lack of understanding about what support is available and how to access it
- Cultural or language barriers that prevent people accessing services and support
- Lack of confidence or skills that prevent people participating in their community

Then identify the goal that you want to achieve. How will you know that you have been successful?

Examples from ENSURE partners include:

- more people engaging with government services, for example, receiving benefits that reduces crises
- More young migrant adults engaging in the education system
- more people accessing community services, reducing the level of demand on state run services



Hello, I am Lucie. I am 62 years old and I live in a poor neighbourhood in France. At first, I hesitated in joining the social workers that started coming to my neighbourhood every week as part of their outreach that took place outside on the street.

1.5 Understand how peer support can work within the existing system

As part of your logic model you may already have identified the resources that currently exist to support the group of people you are working with as well as the issues and barriers that you are trying to address.

It is important to recognise that peer supporters are not going to replace a resource that already exists, their focus is to compliment what is already there - and to help make existing resources, services and support more accessible to those that are excluded from them for whatever reason. Understanding the resources that are already available and determining how peer support can work within the existing system is an important decision to make - especially when talking to professionals about how peer support can help the people that they work with.

Summary

The aim of the ENSURE Model is to work with peer supporters to promote social inclusion for people or groups of people that are often excluded from society and the support, resources and services that exist to help them.

This is to ensure that no one person slips through the gaps or ends up in a difficult situation because they have been excluded from the resources that are there to help them.

If the first few stages of Step 1 have led you to believe that peer supporters can help promote inclusion and remove barriers that the people you are supporting experience then you are ready to move on to Step 2.



Step 2: Making a Plan


When you have finished the steps in Step 1, it is time to consider how the model can be applied by your organisation to support the group of people that you have identified as socially excluded and want to work with.

To make this process easier to illustrate this, we have chosen to develop a number of different personas for the model. The personas are based on the groups of people that the different ENSURE partners worked with during the project.

Using the personas shows how the ENSURE peer support model can be implemented in different situations, adapted to the needs of different groups of people and the organisation itself. You may recognise similarities between one or more of the personas and the group of people that you want to support. In this case, you may be able to implement the project exactly as described in relation to that persona.

However, you may also recognise the need to adapt the ENSURE model to meet the needs of a group not described within the personas or to create a project that is more suitable for your organisation or context. In this case, reading through how the model was implemented across different personas will help you understand the steps to take to adapt the model for your specific group of people.

In both instances, as previously mentioned, it is important to engage with the people that you are supporting in order to understand their experiences, the barriers they faced, and the goals that they want to achieve.

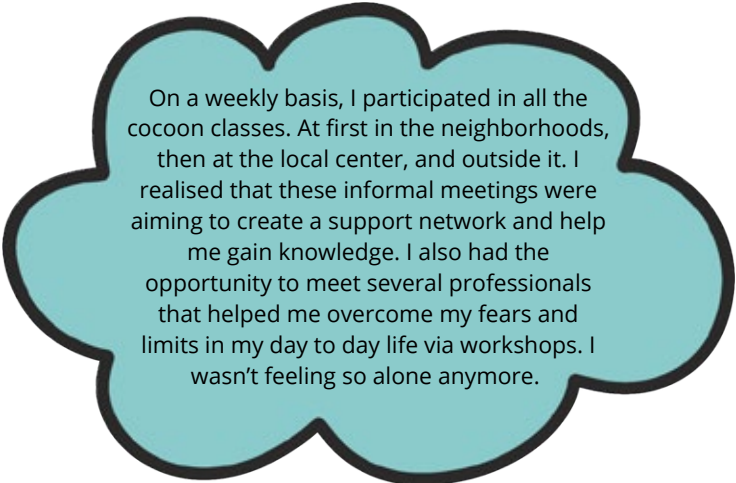


I started attending these meetings every week.
They were made up of my neighbourhood and the local social workers. I discovered a cozy environment where people are free to speak about their life, their problems and their feelings. I felt listened to and confident in expressing my thoughts.

Step 3: Social marketing

As part of the ENSURE pilot, all partners received training in social marketing. Using the SWOT and Logic model you will have identified the current situation that is creating social exclusion and the outcome – or goal – that you want to achieve.

Social marketing can be helpful in enabling you to understand what intrinsically motivates people and how to communicate in a way that achieves and enables positive behavioural change. Understanding both of these can help in promoting the project, recruiting people to participate and communicating your outcomes to stakeholders.



On a weekly basis, I participated in all the cocoon classes. At first in the neighborhoods, then at the local center, and outside it. I realised that these informal meetings were aiming to create a support network and help me gain knowledge. I also had the opportunity to meet several professionals that helped me overcome my fears and limits in my day to day life via workshops. I wasn't feeling so alone anymore.



Step 4: Test the model

At this stage, you will have:

- read through the ENSURE model and have a clear understanding of the purpose of the ENSURE project,
- engaged with your stakeholders to determine the barriers you want to address, the goals that you want to achieve and the resources that you have to do so
- Related the personas to your context to understand how this model can be applied and whether it can be implemented directly based on a familiar persona or whether it needs to be adapted to meet your specific context.
- Undertaken social marketing training to gain insight into how behaviour change can be achieved through understanding the motivation for people's behaviour and how it can be changed using different types of communication
- Developed a plan to implement the model

If you have achieved the above then you are in a good position to test out the model.

Testing before full implementation is a good way to understand whether the engagement that you have undertaken and the planning that you have done will be effective in a real life scenario.



It was easy for me to trust people who were attending the meetings already and I identified among them people with training who were ready to listen and help me at any time. They were applying a new method I had never heard about, it was called peer support.

These people from my neighbourhood have been trained and supported by social workers. These have been identified as people of reference, becoming peer supporters. It's easier to talk to them, sometimes people like me feel judged or misunderstood by professionals.

Case Study - Goes

The City Council runs a program called Goes Busy. Their mission is to improve the overall health of vulnerable families. These are families that are often socially excluded due to multiple barriers such as finances, chronic disability, unemployment and children with care. Tensions often run high in these families due to stress and the day to day challenges of engaging with government run health and care systems.

Healthcare in the Netherlands works with counters. At one counter you can request a wheelchair, at the other debt counselling et cetera.

The employees work according to protocol.

The eligibility for support depends on checklists.

Instead of asking the person in front of them how they are doing and what are the barriers they encounter in life, the employee asks him/herself: "Have I completed all the questions and is this person eligible for a provision?"

Busy supports families such as these by providing welfare activities delivered by and for the families themselves. They recognised the 'counter' approach as a barrier to families receiving the resources and support that they needed. As such the families were being socially excluded.

Goes Busy wanted to try a different approach to make sure that families were included by providing the support they needed. Their solution :

- *Remove the counters,*
- *Put an independent person at the beginning of the process and*
- *Put the client first.*

The hypothesis that showing interest and putting the person's needs first will show that sometimes simple and cheaper solutions make the day run much easier for a person. The use of welfare activities or a welfare coach gives them the support to see their problems but also to solve them themselves with a little support.

In this instance, there was a significant gap between the professional world and the experience of people needing support creating a large barrier and excluding people from receiving the support that they needed.

Testing their hypothesis and using focus groups to share their experiences and continue to discuss their findings during the change process means that the model can constantly be adapted to be refined to meet the needs of people. Only in this way can you better connect these two worlds. In this instance, Goes were able to work with stakeholders to recognise a barrier to inclusion for a group of people, identify a possible solution and test it out. Engaging with stakeholders through focus groups enables Goes to keep refining their project to make sure that it continues to help people access the support they need and bridge the gap between people and professionals.

Once you have developed and tested out your model you are ready to move to implementation on a larger scale. Following the steps below.

Step 5: Recruitment of the participants

5.1 How to promote the project

One of the benefits of engaging a range of stakeholders from the beginning of the project is that there are then a wide range of people available to promote it. Social marketing will also be helpful at this stage.

In some circumstances, people that have been involved in focus groups to shape the project, can go on to participate as people providing peer support. Professionals involved in the development of the project can be an advocate for the project within their own organisation or profession. Steering groups consisting of stakeholders involved in the project can provide support in terms of policy and content. Steering groups are formal groups with agreed Terms of Reference. They can help with decision making, holding the project manager to account and monitor the project to make sure that it is delivering outcomes as planned.

Case Study : Kent

In Kent we have two steering groups. One group is for people who are working directly on the project in Kent County Council and is our Core Steering Group. They are responsible for agreeing how we want to deliver peer support in Kent and making sure that the project delivers what was agreed. If we want to change anything - they have to agree. They also oversee how any funding is spent and make sure that we follow all the processes and procedures that are required when we work with people who need our support.

We also have a Wider Steering Group. The membership of this group is broader and includes representatives from community based organisations that support people from our target group. They help us understand how the project can work with our target group and share insight about what will and will not work. They can also help in reaching people from our target group directly to help shape the project, as well as making referrals and promoting the project.

You can also have representatives from your target group on your Steering Group.

Events and conferences are a great way to promote the project more widely. Local stakeholders, professionals, peer supporters and people who have benefited from the project can be invited to take part in the event.. This creates an opportunity for cross-fertilisation of experience, sharing of knowledge and communicating the benefits of the project to people not directly involved.

5.2 How to recruit peer supporters

A peer supporter is a person who is able to support another person in developing new skills, understanding a system, developing confidence or in accessing rights and services.

Peer supporters may be required to play a different role depending on the goals of your project.

Case Study 1 : Community Arques

Community Arques have trained peer supporters to act as intermediaries between professionals and people needing support. Their role is to decrease the distance between the two groups, building trust, improving communication and enabling change to happen more quickly.

At first hand, at the Association Community the role of peer support is played by our social workers.

Case Study 2 : De Mussen

Peer supporters at de Mussen play a similar role. Peer supporters are considered 'contact women' whose role is to help other mothers integrate into the community and improve their day to day life.

The peer supporters (or contact women) work as a bridge between the mothers and professionals. They empower other women and their families to integrate into the community especially in relation to understanding new systems and cultural norms, for example in relation to parenting, education,

finance, health, life and well-being. Importantly they promote confidence and self-reliance ensuring that mothers do not become dependent on the support but learn to use their own strengths.

Peer supporters are mostly volunteers in our organisation. They may benefit from participating in the project as much as those that they are supporting.

Although peer supporters may be recruited from different groups of people – depending on the needs of your project, importantly, the role of peer support requires some common personal characteristics. For example :

- An area of commonality or shared experience with the person they are supporting, for example speaking the same language or being from the same culture
- sense of responsibility,
- reliability
- knowledge of the local community resources
- Understanding of local health and welfare systems

Case Study 1: De Mussen

At the Mussen peer supporters are recruited from formal and informal networks in the neighbourhood. They tend to be people who have previously migrated to the area and successfully integrated into the local community. In order to support new arrivals they need to have the following skills:

- *adequate social skills to be able to make independent contact with isolated mothers in the neighbourhood*
- *adequate language and communication skills to be able to communicate with everyone*
- *Willingness to following a training course*
- *Accurate and punctual in attending meetings and recording appointments*
- *Being able to handle confidential information with integrity and reliability*
- *Can commit 8 - 12 hours per week to work in the project*

Sometimes they can become involved in your project as a recipient of support and then go on to become a peer supporter themselves.

Within the group I received fast and efficient peer support. This course of action was specifically adapted to my needs.

After some months I discovered that peer supporters were trained specifically to lead us out of vulnerable situations.

I felt that maybe I could be able to act like them to support others. So I asked how I could engage myself in this process, and I discovered that peer supporters were selected and trained based on their abilities.

I decided I wanted to be one of them.

Case Study 2: Community

At Community some of the people participating as the recipients of support are facing mild levels of difficulty or are experiencing a challenging stage in their life – rather than enduring, difficult issues. This group of people attend the project as participants and receive support to :

- *build their self confidence,*
- *understand their environment and the challenges that they are facing,*
- *learn skills and techniques that can help them overcome their challenges and make a lasting change.*

Having been through the project as a recipient of support, this group is then uniquely placed to be peer supporters and help others through a similar process.

Step 6: Selection process for the peer supporters

Given the role that they will play in supporting people in difficult situations, it is important that the peer supporters are well and stable in their own lives, have appropriate training to help them in their role, and receive ongoing support and supervision. This is key to helping peer supporters help others.

The selection process is two staged:

1. An application process: this is an opportunity for potential peer supporters to learn more about the project and the peer supporter role. It is also an initial opportunity for professionals running the project to understand more about the prospective peer supporter, their background, skills and motivation to participate, as well as their ability to commit their time to supporting others.
2. Training: this is an opportunity for peer supporters to receive training that will give them the skills needed for their role, and also for professionals running the programme to assess whether the people are suitable candidates to be a peer supporter.

Case study: De Mussen

When people apply to become a peer supporter they are assessed through two meetings. The purpose of the meetings are to determine that people meet the basic criteria for being able to undertake the role of peer supporter. These include :

- *the “objective” skills such as ability to speak the relevant language, past experiences, admin knowledge, etc.*
- *their perception of the group of people that they will be supporting, for example their capacity to question views and pre-conceptions, to not “transfer” their own experience onto the other, etc.*

At the meetings, the organisation will explain to prospective peer supporters their expectations including availability, time commitment, confidentiality and anonymity, acceptance to attend the training, etc.

During this process, people who do not have the relevant skills, are not able to make the required commitments or who are deemed to be lacking stability in their own lives are not recruited as peer support. A key feature of the project is that people who participate as peer supporters remain well and stable throughout their time on the project so that they do not themselves deteriorate or become unable to support others.

Step 7: Deliver trainings

7.1 Training for peer supporters

Once potential peer supporters have been selected based on the basic requirements of the project, they receive training to build the skills and knowledge required for the role. This training also helps build their confidence in supporting others.

The basic training programme for all peer supporters in the ENSURE project has been developed by De Mussen.

It is a 7 weeks programme covering the following topics:

- **Week 1 Introduction and basic training**
Introduction, mutual expectations, motivation and information
- **Week 2 Listening without judgement**
About confidants and listening without judgement
- **Week 3 Connect, connect, connect**
About gaining and giving trust
- **Week 4 Conversation techniques**
About conversation techniques and behavioural change
- **Week 5 Setting boundaries**
About setting boundaries and saying 'no'
- **Week 6 Life stories and self-reliance**
About support and motivation during the trajectory
- **Week 7 Social map**
About professional help and facilities
- **Week 8 Assessment**
Certificate award

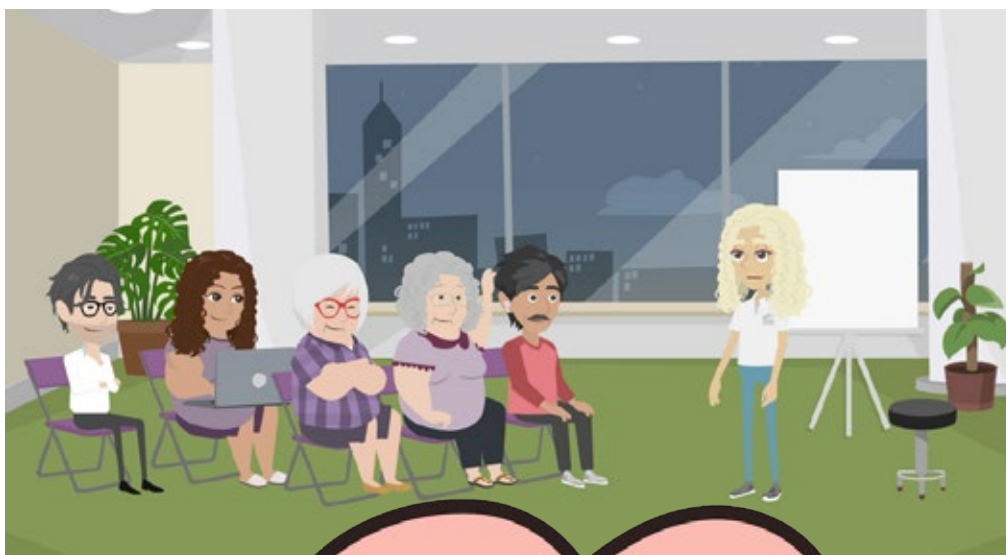
All of the individual modules have a set format that includes :

- Reflection on the previous session
- Information and knowledge sharing about the current topic
- Interactive activities to practice skills
- Reflection on the current topic

However, as previously noted, it may be necessary to adapt the ENSURE project to meet the needs of the people you are supporting. The training is no different.

Case Study : Kent

In Kent, we worked with autistic adults. In our focus groups, we asked autistic adults to comment on the structure and format of the training programme. They told us that some of the interactive activities would be difficult for them to do because they were hypothetical scenarios. Autistic people are neuro-atypical, they process information about the world differently than neuro-typical people. This means that hypothetical situations are very difficult for them to understand and learn from. This along with some other feedback meant that we had to adapt the training programme to meet the specific needs of the people we were working with.



I finally managed to solve my issues and since I had gained confidence and felt that I had the necessary attributes to become a peer supporter I decided to get into the training process. I'm throwing myself into this new experience with enthusiasm in order to gain all the specific skills and techniques to be identified as a peer supporter by the others.

7.2 Training for professionals + a section called “how to close the gap”

Several of the ENSURE projects involve peer supporters working with people to remove the barriers that people experience in accessing care and support. In this instance, the role of the peer supporter is to ‘close the gap’ between people requiring support and the professionals providing it. To further enable this, ENSURE have developed an awareness raising programme for professionals that describes the role of the peer supporter and how they can work alongside professionals to help the people needing support.

[Insert roadmap for the professionals here]

Step 8: How to recruit people to receive peer support

Recruiting people to participate in the project as recipients of support can be challenging. After all, the people that the project is designed to help are those that are socially excluded and may not be aware of the support that is available to them or might not be connected into services that can refer them to your project.

This is where your stakeholders can be of great help in promoting the project more widely to raise awareness. Social marketing will also help in identifying the most effective communication channels for the people you want to recruit, and speaking at events and conferences to promote the project will also be beneficial.

Case Study 1: Community

At Community a new strategy has been tested: The Laboratoire Aller-Vers (The Go-To Laboratory). This new way to meet people has been particularly good during the period of Covid-19 restrictions. The “aller-vers” is a methodology that we have developed and tested to approach people in the street and speak with the people directly, offer them some help and make sure they know about the project. It is a good method because it means that our professionals are recognized as individuals working within the welfare system who have the right information and advice to share, but also it allows people to trust us as local people who work in the community that people live in. Meeting people in their communities rather than asking them to come into offices makes our professionals more available to help people with their issues.

Using our social marketing training we were able to choose several specific places and times where we knew that the people we wanted to work with would be.

The “aller-vers” laboratory has also been developed using digital tools for younger people.

For us it has been successful.”

We have also used our Cocoon-Classes to engage with people and run training programmes. This is an informal place where people can speak and confront themselves without any fear of judgement. This cosy environment, that makes people feel at ease, sustains the development and personal empowerment of each individual attending the meetings. Different workshops and sessions facilitated by external experts take place in the framework of these meetings. The Cocoon-Classes remain flexible in order to meet the needs of the participants. Therefore, these can also be delocalized. This is also a good environment to offer training and counselling to peer-supporters.

Case study 2: De Mussen

At the Mussen, the peer supporters search for mothers themselves. These mothers are often found in the neighbourhood, on school playground for example. Often, mothers are also registered through regular institutions such as GPs, schools and food banks. Mothers receive counselling for one year. During the first three months, the mothers are visited weekly by the contact women. After that, the frequency decreases if the request for help from the mothers allows it. By reducing the frequency of visits over the course of the year, the aim is that in time the mothers will be better able to deal with their own problems.

9. Deliver the programme

By now you will have:

- Identified the group of people that you want to support, the barriers to inclusion that you want to address and the outcomes you want to achieve (step 1)
- Developed and tested a plan of how your project will work (step 2-3)
- Recruited and trained people to be peer supporters (step 4-7)
- Recruited people to receive support (step 8)

You are now ready to implement your peer support project.

The next step is to match up your peer supporters with the people they will support and to ensure that the peer supporters have the right support and supervision in place to help them stay well and motivated throughout their time in the project.



9.1 How to match people up

Matching peer supporters with the people that they will support is a delicate task. It is important that the peer supporter have the right skills and knowledge to help the person receiving support achieve their specific goals, but practical considerations also apply, for example, do they speak the same language, are they able to travel to meet each other, do they prefer to work with people of the same gender / age.

All of these need to be considered in the matching process.

Below are some examples of the approaches the different ENSURE partners took.

Case Study: Community Arques

We use the following process to match our peer supporters to the people that they will support.

- *We start by connecting a professional and a peer supporter. This is an opportunity for the peer-supporter to discover and understand more about the work of professionals. It is a different situation than when the peer supporter was themselves receiving support from the professional.*
- *The peer supporter is then able to meet people needing support with the professional and explain his/her role and how he/she can provide support on a longer process.*
- *If the person seems interested and willing to go further in the process, the peer supporter can propose to organise another meeting to discuss this process further and agree on the project but also on the terms of the peer-supporting program.*

Sometimes professionals may identify someone that they think could benefit from the help of a peer supporter and may discuss that person (without indicating who the person is) and why you think peer-support could be relevant with the peer supporter that they are connected to.

It is important that when a peer supporter is matched with a person to help that you take the time to present and explain the peer-support system to the person. If that person explains that she/he would like support from a peer in parallel with the professional support you can provide, then propose to organise a meeting between them to discuss and agree on the project, but also on the terms of the peer-supporting approach.

9.2 Ongoing support and supervision for the peer supporter

Peer-support is a great way to provide users with insights, approaches and responses that others have experienced and tested. It is an empowerment tool for all the people involved in the peer-support program. However, it is also a strategy that requires supervision because peer-supporters are not professionals and their knowledge and understanding of a situation is based on their life experience, which might sometimes be traumatic or not totally resolved.

Being a peer-supporter changes their relation to the services and the professionals they know and may cause them to re-evaluate their own life experiences. They might face some difficulties that can alter their ability to maintain the right distance with what is happening with the peer.

As noted previously, a key feature of the peer support approach is the ongoing support provided to the peer supporters themselves to help them maintain their own health and wellbeing.

Supervision can also be an opportunity to reinforce the training peer supporters have received and discuss how to apply it in real life situations.

It is, therefore, essential to supervise and support the peer-supporters. This can take different shapes depending on the structure of your project and how you are used to communicating with each other. For example, regular monthly individual meetings, chat groups, peer mentoring by professionals in groups.

Below are some examples of how ENSURE partners have implemented a support system for the peer supporters in their project.

Case Study: Community Arques

We use the following approach:

- *Establish, from the beginning, clear expectations with the peer-supporter, on their actions and roles, on the boundaries of their activities and involvement, so as to have a common grid for the analysis of practice*
- *Organise regular one-to-one meetings with a program staff (a professional involved in the program), when they can talk about how things are going, identify risks but also opportunities and progress (frequent SWOT analysis).*
- *Each peer-supporter should have a professional program staff acting as a contact point to answer his/her questions, difficulties or issues*
- *Solicit feedback from the ones receiving peer support to detect issues that may rise*
- *Make sure the professional team is informed, aware on, and understands the role of peer-workers, but also what might be peer-workers expectations*
- *Professionals and peers meeting: practice analysis groups, similar to what professionals can do, where experiences can be shared, where issues can be explained and discussed as a group. These can be small groups, varying from 2 to 5, for example. It will allow to address some topics such as:*
 - *Are the expectations/missions manageable?*
 - *What are they learning?*
 - *What is going well? What might be struggling?*
 - *Do they have identified strategies to solve the issues or difficulties identified?*

Case Study: De Mussen

Peer supporters are trained to answer practical questions and offer light support. They work in a structured way and register progress with the mothers. A digital client tracking system has been set up for this purpose. This system provides insight into the progress of the support but also allows bottlenecks to be tackled in a timely manner. The supervisors have the task of providing good support to the peer supporters so that they can support the mothers properly. Two project leaders provide the training and the supervision of the 20 peer supporters of different backgrounds.

After the training, there are weekly team meetings and the women are coached individually by the project leader. Once a month, intervention takes place in a small group and there is a case study meeting where the aim is that the contact women learn from each other and help each other further. The contact women are coached individually by the project leader. The purpose is that contact women do not take their clients' problems home and learn to let go. In the meantime the contact women learn how the social card works so that they can refer their clients to the regular care organisations promptly. An important aspect of this model is that the contact women are encouraged to take up vocational training themselves so that they can eventually move into paid employment.

The sustainability of this model could be partially assured through an annual volunteer allowance for the contact women under specific conditions as: participation in the meetings, reports, adequate caseload etc.

9.3 Common challenges and FAQs

There can be various types of challenges raised from implementing a peer-supporting approach. For example :

- scarce human resources and funding
- Management of time and resources not properly allocated within the different structures
- Little flexibility in terms of internal procedures of different services
- Frequent change of people involved and integrated into the peer-supporting system
- Being able to ask for help when it is needed

For the supervisor:

- Finding time to supervise
- Integrating the peer-support program within your pre-existing professional practice
- Being able to ask for help when it is needed

For the peer-supporter:

- Accepting and managing the limits of their own missions and capacities
- Signal if they feel unable, or if their own situation has changed and makes it difficult for them, to act as a peer-supporter
- Signal any difficulty they might face with the peer-support system or in terms of relation with the ones receiving peer-support
- Signal if they feel they are going to slip back into vulnerability
- Being able to ask for help when it is needed

Step 10: Evaluation / outcomes and sustainability

Monitoring and evaluation is important for the successful implementation of the peer to peer support method. If done correctly, you will be able to determine whether the goals that you identified at the beginning of the project have been achieved, and/or whether any adjustments are necessary to increase the success of the project. Being able to evaluate and communicate the outcomes of your project can also be essential in building a case to implement the project over the longer term.

Although this step is the final step of the current model, it needs to be agreed upon in the beginning of the project.

Below you will find the evaluation model developed by ENSURE and used by all our partners to evaluate the effectiveness of the project. This will support you in creating a well- designed monitoring and evaluation plan.

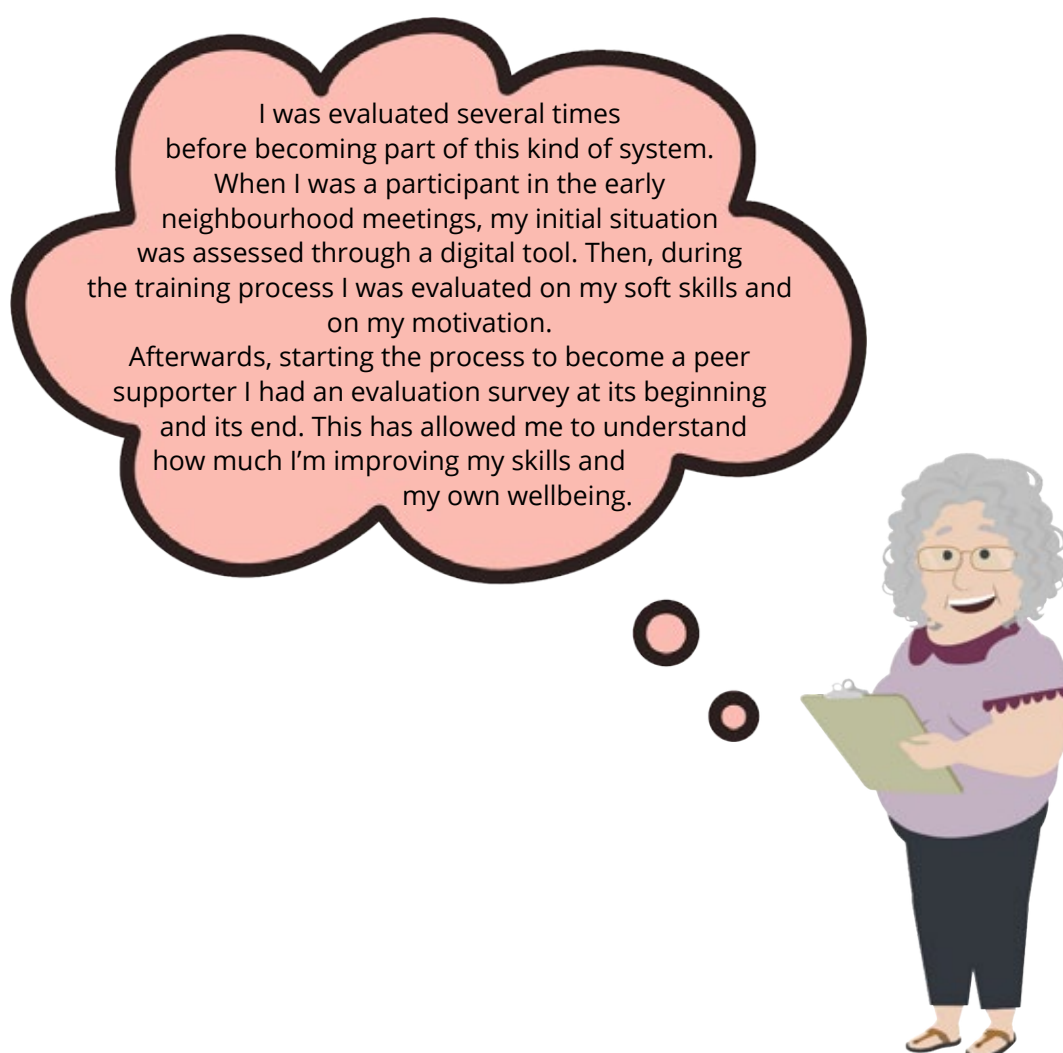


Figure 10.1. : Evaluation and monitoring model

Step 1 : Plan evaluation and monitoring structure

Start by describing the reason for evaluating and monitoring the peer to peer project. Explain the starting point with motives and clear objectives and conduct an analysis of the current situation. The SWOT analysis and logic model that you developed in Step 1 can be used again at this stage.

Make a monitoring and evaluation structure for four different phases of the project:

- i) the input,
- ii) throughput,
- iii) output and
- iv) outcome of your project.

For more information about these phases see the MAPE-model. It is important to involve your stakeholders from the start.

Questions to discuss with the stakeholders while writing this part are listed below.

1. Who are your stakeholders? (e.g. students, low-income families, refugees, professionals implementing the peer-to-peer support)
2. Which information do stakeholders need?
3. Which monitoring and evaluation tools are already in use?
4. What are the facilitators and barriers stakeholders encounter with the current evaluation tools? (e.g. literacy levels too low, no computer at home)
5. Are objectives formulated in such a way that they can be evaluated?

Step 2 : Select key indicators

Indicators are outcome measures: something you measure to estimate the change (in the behaviour / attitudes / emotional states etc.). On the basis of your answers of step one, you decide what a good measurement result would be per phase (input, throughput, output, outcome). Your goal in this phase is to set standards and targets in collaboration with your stakeholders. In other words: when are we satisfied with the results achieved by our peer to peer project?

During the phase of determining the indicators, everyone is free to formulate them, however, it is recommended to use (inter-)nationally recognized (=scientifically validated) indicators as much as possible.

An indicator must be concrete and recognizable and as stable as possible over time. This can be done by clearly and unambiguously naming indicators and by preventing multiple interpretations.

Questions that can be useful while writing this part are listed below:

1. Selecting and drawing up indicators: What do we want to measure? (e.g. self-esteem, feelings of isolation, depression)
2. Developing standards: What is a good measurement result? (scientifically validated measurements)

Step 3 : Decide how to research key indicators

After the choice of indicators, the method of measurement is chosen ("the research method"). At every phase (input, throughput, output, outcome), indicators and associated instruments can be found to measure.

Two concepts play an important role in choosing the research method and measuring instrument(s).

The first concept is the reliability of the study and indicates that when a measurement is repeated in the same circumstances, the same outcome will emerge. Reliability of a measurement is a condition for validity of your research method. Validity of the chosen measurement will affect the validity of the results. Questions that can be useful while writing this part are listed below:

1. How do we want to measure? (e.g. survey, interview, focus-group)
2. At what phase (input, throughput, output and outcome) do we want to measure what?
3. Does the measurement that we chose measure what we want to measure? (e.g. do the questions that we ask really measure self-esteem?)

In this step the evaluation becomes more practical, therefore this is a moment for discussion with the stakeholders. Will the peers be able to use your measurement tools? (e.g. online survey). Will the peers understand the wording used in the questions? If there are any barriers, discuss with the stakeholder how to overcome the barriers while maintaining the integrity of your evaluation.

Step 4: Gather and register data

After drawing up the right indicators and research method, step four deals with the collecting and recording of information.

Questions that are relevant during this step are:

1. What are advantages and disadvantages of qualitative and quantitative research methods?
2. What are points of attention in the field of data management (e.g. privacy)?
3. How do we collect the data and who has which role?

It is important that gathered data offer a representable sample of the participants to tailor the project to its setting based on the evaluation. Therefore, the registered data is best monitored. If there is a low response rate, a feedback moment with the stakeholders could offer you insights how to act; e.g. whether to raise awareness about the importance of the evaluation, to offer a safer environment or adjust the evaluation tools.

Step 5: Analyse data

This step provides points of attention for analysing the data, drawing conclusions and making recommendations based on the results.

The only question is:

How do we analyse the data? (e.g. quantitatively = statistical analyses; qualitatively = content analysis)

Step 6: Report

Reporting the research results and communicating the results to the stakeholders and the target group are central to this step. Questions that are relevant during this step are:

1. How do we report the research results and how do we communicate this to the stakeholders?
2. Did everything go well? Are there areas for improvement?

Annexe 1: Marie's journey

Specific vocabulary

Wijk-werken: program that allows jobseekers to work on their skills for one year

Team buildings: bringing the job seekers together to form peer support groups

Recognise the needs

Hello, I am Marie. I'm 55 years old and I'm living in a city in Belgium.

Two years ago I was laid off my job and since then I'm struggling to find another one. I am really demotivated and getting depressed because I'm at home all the time.



Because I am unemployed but still able to work I am registered at the Flemish employment centre. They recommended me to do Wijk-werken. This is a project where I can do low-threshold paid jobs for a couple of hours a week for one year in total.



At the start I met with a professional who explained everything about Wijk-werken and matched me with a job. At first I am hesitant because it's something completely new and out of my comfort zone. It's scary because I'm also on my own to go to the job.

Making a Plan

The manager of this project organises trainings every month for all the participants nearby my home. The first time they invited me it was really overwhelming. I didn't want to go because I was tired of starting new jobs.



When I knew the topic of the training I was convinced to go. It would help me do my job better and feel better about myself. It also helped that the training was close to my home and not at the same time as my job.



I was also invited to have a one-to-one conversation every month with a professional. They were interested in what my situation is like and what I'm struggling with. It was a good moment to get to know each other and also to give feedback. This way I gained some trust in this professional but also the training sessions that they organise.

Engagement

At the training sessions I got to know other people who are in the same sort of situation as me. It was nice to talk to them and share our experiences.

Every month I can go to this training, which feels more like team building because I do it with my peers. It helps that it's voluntary and not obligatory. I can choose when I go if I'm interested in the topic.

Adapt the model

Every time I go I feel more confident about opening up and engaging in the training because I feel comfortable around the people and feel heard about my struggles.

Because I go often to these team buildings I get to know a lot of my peers and what they are struggling with.

It's nice that we can share our experiences and enhance each other with own practice, guided by a professional. It can give solutions that I couldn't come up with myself.

Recruitment of the participants

Once a year there is a moment where all my peers and I are invited to share the subjects that we feel we need more support in. We can enhance our skills so we can improve our jobs but also use in private situations. It gives me the feeling that I can be in charge of the program of the training for me and my peers.



Deliver trainings

After a few months, I got more comfortable in my jobs and felt more motivated. I was able to help my other peers on my jobs and in the team buildings.

It was also possible for me to give my feedback on the trainings and that gave me the feeling that my opinion counted.



Deliver the programme

With this training and sharing experiences with my peers I felt able to engage more hours on the job.

In these training sessions we learned about skills to enhance our professional soft skills and also learned about our own qualities.

By the end of my year I felt motivated to be more active as a volunteer and also look again for jobs.



Evaluation / outcomes and sustainability

My professional contact at the Wijk-werken project contacted me after six months on the program to see how things were going with me and on the job. Whenever I had a problem he was able to help me.

At the end of the year I had a meeting with the professional of this project and also the professional of this social organisation to find a job. They evaluated me and the progress I made throughout the year. They told me I was ready to go to work again.

Since it's really hard to find a job I'm still working as a volunteer.



Annexe 2: Mark's journey

Recognise the needs

Hi, I am Mark; I was diagnosed as Autistic at an early age. I live at home with my parents.

I attended a mainstream school but struggled to learn in classes with lots of students. I found it difficult to make friends and 'fit in'. I loved maths and science classes. Luckily, this was encouraged, and the school gave me extra support for these lessons.

When I left school, my parents were worried as I have aspirations for my future but struggled to communicate well with others. Eventually, I decided to go to university to pursue a science degree.

My family were concerned at how I would cope living away from home. I tended to forget to eat, wash my clothes and generally care of myself, especially when I was immersed in my studies. I found it difficult to keep friends because I would forget to return their calls and keep in touch.

I had a very good supervisor at university. Unfortunately, when the supervisor died, I could not find another person to provide the level of support that I needed so I returned home to live with my parents. I felt very isolated and anxious.

My social worker told me that KCC has a peer support programme being led by Advocacy forAll, I was worried that I would find this overwhelming but after talking about it I decided to give it a go.



Making a Plan

I met with Advocacy for All on a Zoom call who explained everything that peer support could help me with, and I felt more confident in getting started. I was matched with an individual, who has similar experiences to me, and we met for the first time in my local Café with a member of Advocacy for all staff and we found we had a lot in common.



My volunteer also came with me to a games group, set up for people on the autistic spectrum, at a local games café. I enjoy games but I would have found it too difficult to go into the café and meet people on my own. I now attend the games group without my peer supporter, as I now know people and receive regular reminders from the organiser.

Engagement

After we spoke, I realised how much I would love to find a job, but I am anxious as the idea of working full-time worries me. It is very tiring maintaining eye contact and communicating with others. My peer supporter said they had felt the same and we talked about how I could do some volunteering or trial work to get my confidence up. I felt listened to and we had lots in common, we now meet up every week. They helped me find out how to volunteer at a local charity shop that they had volunteered at themselves, to build my confidence.

I now see the Education people and they are looking to help me find volunteer work in our local library. I really like the idea of this work.



Adapt the model

It was not always very easy for me to connect to my peer supporter as I find social interaction a challenge and I would not follow-up on our calls.

However, as time went by, I experienced that my peer supporter had lots of patience and was willing to follow-up with me to make sure we planned another meeting and to help me feel comfortable interacting socially with them. They said they had received training which can help to support people overcome social anxieties.



My peer supporter also told me about his supervisor so if we are feeling stuck, he has someone to go to for help. I also know from my meetings with his supervisor that sometimes peer support relationships don't work out. Not everyone gets on with everyone and we can do something different.

Recruitment of the participants

During the project I have gained a lot of confidence and no longer feel as isolated, we even met with a group from this programme, and I have made some friends. I began volunteering and now feel confident to apply for my first parttime job. They have said that I could train as a peer supporter myself to offer support to others, which I would really like to do.

Advocacy for all also helps provide autism awareness training and I would like to become a supported trainer. I think that I would like to be involved with this as not enough people who train others actually have autism.

Not everyone would enjoy being a peer supporter so it is important for people to attend the training and through training and discussion decide if this is right for them.

All peer supporters have regular supervision so that we can help support in whatever way is needed.

I think that almost everyone would benefit from a peer supporter as we all need people we can connect with even if we all connect in different ways



Deliver trainings

I felt that my experience was so positive and had helped me gain so much confidence that I wanted to sign-up to become a peer support myself and I began the training. I really want to help others with similar experiences and am enthusiastic to begin as a peer supporter.



Deliver the programme

The training had a clear structure and was delivered in a group so we could learn together.

After being trained, I had met regularly with Advocacy for All to monitor my progress and report back, I was responsible for arranging meeting after the initial meet-up with the person I was supporting, and I also met with my group of peer supporters to discuss how we were getting on. I feel no longer feel as isolated and have really gained confidence in social settings. Helping support someone with similar experiences makes me feel worthwhile.



Evaluation / outcomes and sustainability

I completed an anonymous form to discuss how I feel about taking part in the peer support programme and give feedback. I felt able to be honest and provide some useful feedback that would be taken on board and will be implemented into the project in the future.



Annexe 3: Yazid's experience

Specific vocabulary

buddy

= peer supporter

professional working with vulnerable people in Yazid's case:

= social worker from a foreign affairs services

= social welfare worker

= contact person from the municipality

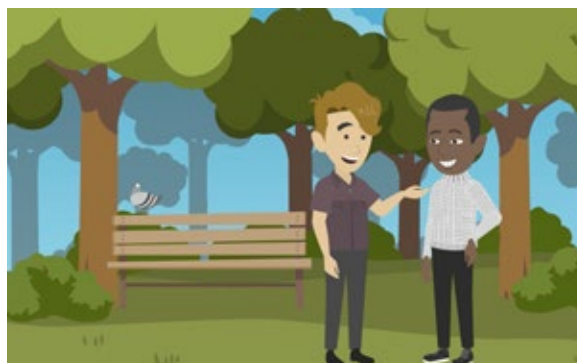
Recognise the needs

Hi my name is Yazid. I am originally from Somalia and currently living in The Netherlands for over two years. For some time now I have been going to school to learn Dutch and other useful skills that help to find my way in today's society. A social worker from a foreign affairs services I'm in contact with asked me if I would like to learn Dutch faster and to learn more about the Netherlands.

She told me that they are introducing a peer support system. At first, I hesitated in joining this project but after talking to my contact person from the foreign affairs services I gained confidence and decided to join the project.

Making a Plan

I started the project and got matched with a buddy having the same hobbies and interests as I have. The social welfare worker arranged a meeting with me and my buddy. We went to a park in the neighbourhood together. It was a fun day, we found out that we have many similarities and decided to meet up weekly. I felt listened to and confident in expressing my thoughts. I decided to prepare him some traditional Somali recipe next time.



Engagement



As weeks went by we kept meeting on a regular basis and I got to learn a lot from my buddy. We decided to talk in Dutch and he even introduced me to one of his friends. I realized that my buddy has become my friend. He helped me with difficult situations. He even helped me to apply for my first job in The Netherlands and miraculously I got hired! My buddy helped me integrate into society, which made me feel less lonely and overcame some fears.

Adapt the model

It was not always very easy for me to connect to my buddy. For instance, at the beginning my Dutch language was not so good, so we communicated with a 'body language'. However, as time went by I experienced that my buddy had lots of patience, was willing to listen and to help me



to learn the language. So I gained trust to communicate more and more in Dutch. When I told my contact person from the municipality about my buddy she said that this was part of a 'peer support project' and the buddy was trained to overcome obstacles in the communication. She even told me that I would have the opportunity to become a buddy myself in the future if I continued progressing in Dutch.

The social welfare worker asked me whether my buddy and I had a "connection". She told me that it is very important to have a connection otherwise she would arrange someone else.

Recruitment of the participants

During the project I've gained a lot of knowledge of the Dutch language, gained some friends and even a job. The social welfare worker asked me to join as a buddy. I was a bit nervous at first however the social welfare worker said that peer supporters were trained specifically to help others.

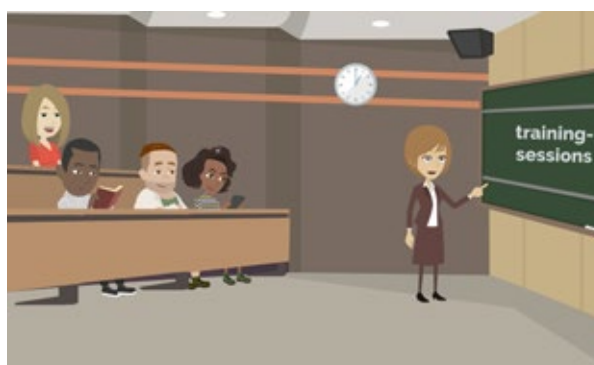
I felt that I would be able to act as a buddy to support others. I want to become a buddy.



Deliver trainings

I finally managed to solve my issues and gained confidence. I felt that I had the necessary attributes to become a peer supporter and decided to get into the training process.

I'm throwing myself into this new experience with enthusiasm in order to gain all the specific skills and techniques to be identified as a peer supporter by the others.



Deliver the programme



After being trained, I had a monitoring program to follow. Many group and individual meetings were organized in order to be as efficient as possible. We were responsible for organizing meetings with the buddies and to help them to master the Dutch language. These responsibilities make me feel like a worthy person.

Evaluation / outcomes and sustainability

I was asked to voluntarily take part in an assessment to see how I progressed during the project on certain aspects. I was told it is an anonymous procedure, so I was not worried that my data will be used elsewhere. I am happy that monitoring my progress can be of use for similar future projects like this one.



Annexe 4: An's experience

Recognise the needs

During my pregnancy I was not in contact with professionals, because I didn't know what was available and I did not feel the need for professional support. But at some point I had a complication and I had to contact the hospital. The gynecologist and midwife referred me to social services and they told me about the ensure project.



Making a Plan

I joined group sessions for prenatal consultations and together with other moms I can talk about my pregnancy and upcoming birth of my child. There is also a midwife that can give us medical advice. It is a safe place to ask my questions and discuss my worries.



Engagement



I joined the monthly prenatal care group meetings and I recognized the importance of prenatal care check-ups with my midwife. Because of the stories of the other moms in the meeting, it took my hesitation away. Professionals helped me overcome my fears and limitations. I wasn't feeling so alone anymore.

Adapt the model

It was easy to trust people who were attending the meetings already and I identified among them people with training who were ready to listen and help me. They were applying a new method: **peer support**.

Some moms in a similar situation have been trained and supported by social workers. They are people of reference who became peer supporters. It's easier to talk to them, sometimes people like me feel judged or misunderstood by professionals.



Recruitment of the participants

Within the group I received fast and efficient peer support. This course of action was specifically adapted to my needs.

After some months I discovered that peer supporters were trained specifically to lead us out of vulnerable situations. I felt that maybe I could be able to act like them to support others. So I discovered that peer supporters were selected and trained based on their abilities. I decided I wanted to be one of them.



Deliver trainings

I finally managed to solve my issues and since I had gained confidence and felt that I had the necessary attributes to become a peer supporter I decided to get into the training process.

I'm enthusiastic about gaining all the specific skills and techniques to be identified as a peer supporter.



Deliver the programme

After being trained, I had a monitoring programme to follow. Many group and individual meetings were organized. We were responsible for being mediators between services and the locals in order to help them access services within their rights. These responsibilities make me feel like a worthy person.



Evaluation / outcomes and sustainability

At the beginning we discussed whether or not I would be suitable to become a peer supporter. Then, during the training process we talked about my soft skills and my motivation.

Afterwards, starting the process to become a peer supporter I had an evaluation survey at its beginning and its end.



Annexe 5: Fatima's journey

Recognise the needs

Hello, I'm Fatima, I'm 30 years old. Five years ago I moved to the Netherlands, originally from Morocco. I attended four years of secondary education. My two children are in kindergarten. My husband has a low paid job as a parcel courier. I do the housekeeping at home and take care of the children.

Because I didn't speak the language, I'm not familiar with the Dutch system regarding housing, education, taxes etc. I wasn't able to read letters the municipality sends me, and has no idea about the debts our family is in.

Thanks to a neighbour, I got in touch with a peer supporter who explains the letters to me. They also manage to get a payment plan for all my debts.



Making a Plan

I started attending these meetings every week. They were made up of my neighbours and the local social workers. I discovered a cozy environment where people are free to speak about their life, their problems and their feelings. I felt listened to and confident in expressing my thoughts. The peer supporter invited me to the coffee meetings every week to get me out of isolation. I also started Dutch classes, thanks to the peer supporter.



By meeting other mums in the community centre, I got more confident about myself, and also was able to enlarge my network.

I wanted to start a new life here in the Netherlands but isn't sure how to handle the change. Thanks to the peer supporter, I went to a lawyer who speaks my language. The lawyer gave me advice how to proceed if I want a divorce.

Engagement

On a weekly basis, I participated in all the meetings. At first at the local community center, and outside it. I realised that these informal meetings were aiming to create a support network and help me gain knowledge. I also had the opportunity to meet several professionals that helped me overcome my fears and limits in my day to day life via workshops. I wasn't feeling so alone anymore.

Finally I was so sure of myself that I felt confident enough to apply for divorce and take care of my own life.



Adapt the model

It was easy for me to trust people who were attending the meetings already and I identified among them people with training who were ready to listen and help me at any time. They were applying a new method I had never heard about, it was called **peer support**.

These people from my neighbourhood have been trained and supported by social workers. These have been identified as people of reference, becoming peer supporters. It's easier to talk to them, sometimes people like me feel judged or misunderstood by professionals.



Recruitment of the participants

Within the group I received fast and efficient peer support. This course of action was specifically adapted to my needs.



After some months I discovered that peer supporters were trained specifically to lead us out of vulnerable situations.

I felt that maybe I could be able to act like them to support others. So I asked how I could engage myself in this process, and I discovered that peer supporters were selected and trained based on their abilities. I decided I wanted to be one of them.

I got selected to become a peer supporter for other refugees in the neighbourhood.

Deliver trainings

I finally managed to solve my issues and since I had gained confidence and felt that I had the necessary attributes to become a peer supporter I decided to get into the training process.

I'm throwing myself into this new experience with enthusiasm in order to gain all the specific skills and techniques to be identified as a peer supporter by the others.



Deliver the programme

After being trained, I had a monitoring programme to follow. Many group and individual meetings were organised in order to be as efficient as possible. We were responsible for answering people and being mediators between services and the locals in order to help them access services within their rights. These responsibilities make me feel like a worthy person.



Evaluation / outcomes and sustainability

I was evaluated several times before becoming part of this kind of system. When I was a participant in the early neighbourhood meetings, my initial situation was assessed through a digital tool. Then, during the training process I was evaluated on my soft skills and on my motivation.

Afterwards, starting the process to become a peer supporter I had an evaluation survey at its beginning and its end. This has allowed me to understand how much I'm improving my skills and my own wellbeing.



Annexe 6: Hassan's journey

Recognise the needs

Hello, I'm Hassan. I'm from Syria. I moved to the Netherlands four years ago. I'm 51 years old and married and I have three children. I graduated from University with a Bachelor degree in physics.

Via my wife, I got to know the peer supporters. I told one of them that I would love to work as a mathematics teacher, just as I did before I came to the Netherlands.

The peer supporter told me that I have to improve my Dutch first. But I know that some employers are willing to employ me because I speak Arabic and English.



In the next weeks, the peer supporter gained my trust, and I will accept her help and support. She signed me up at a community centre, it might be possible to get a job there.

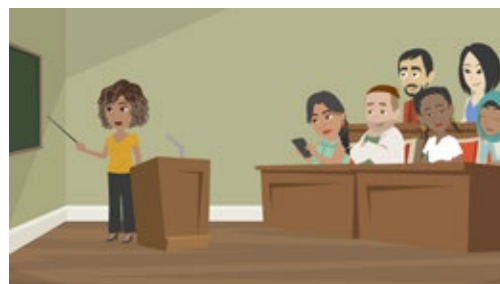
Making a Plan

I am going to participate in all the activities that are on offer (Dutch classes, job coach, sports, coffee meetings) There is a whole new support network where people help each other. I feel assured that I also can find help and assistance from my peers.



Engagement

On a weekly basis, I participated in all the classes. At first in the neighbourhoods, then at the local center, and outside it. I realised that these informal meetings were aiming to create a support network and help me gain knowledge. I also had the opportunity to meet several professionals that helped me overcome my fears and limits in my day to day life via workshops. I wasn't feeling so alone anymore.



Adapt the model

It was easy for me to trust people who came to the community centre already and I identified among them people with training who were ready to listen and help me at any time. They were applying a new method I had never heard about, it was called **peer support**.



These people from my neighbourhood have been trained and supported by social workers. These have been identified as people of reference, becoming peer supporters. It's easier to talk to them, sometimes people like me feel judged or misunderstood by professionals.

Recruitment of the participants

At the community centre, I received fast and efficient peer support. This course of action was specifically adapted to my needs.

After some months I discovered that peer supporters were trained specifically to lead us out of vulnerable situations.

I felt that maybe I could be able to act like them to support others. So I asked how I could engage myself in this process, and I discovered that peer supporters were selected and trained based on their abilities. I decided I wanted to be one of them.

I became an peer supporter for other refugees in the neighbourhood.

Deliver trainings

I finally managed to solve my issues and since I had gained confidence and felt that I had the necessary attributes to become a peer supporter I decided to get into the training process.

I'm throwing myself into this new experience with enthusiasm in order to gain all the specific skills and techniques to be identified as a peer supporter by the others.

Deliver the programme

After being trained, I had a monitoring program to follow. Many group and individual meetings were organised in order to be as efficient as possible. We were responsible for answering people and being mediators between services and the locals in order to help them access services within their rights. These responsibilities make me feel like a worthy person.

Evaluation / outcomes and sustainability

I was evaluated several times before becoming part of this kind of system.

When I was a participant in the early neighbourhood meetings, my initial situation was assessed through a digital tool. Then, during the training process I was evaluated on my soft skills and on my motivation.

Afterwards, starting the process to become a peer supporter I had an evaluation survey at its beginning and its end. This has allowed me to understand how much I'm improving my skills and my own wellbeing.

The outcome of the whole process is so good; the community center offered me a job as a janitor. I can gain work experience and enlarge my network.



Annexe 7: Abdoul's journey

Specific vocabulary:

Educator: social worker accompanying young migrants

Host family: volunteering family who hosts a young migrant full-time/during the weekends/ on holidays.

Recognise the needs

I came to France when I was 15 years old, before I lived in Mali with my family. My father was a farmer, we were happy with my sister and my little brother. Then he died and it became complicated for my family to feed itself. Our land was abandoned, so my mother advised me to leave to live better elsewhere.



The first day I arrived, I was alone and scared. I had to take an assessment to prove my minority. Then I arrived at the centre, the educators allowed me to settle down, to meet other young people with difficulties, they helped me to fill in the papers and to make the steps to stay in France.



Today, I am training to become a cooking chef, I love mixing the flavours of my country with those of here; chicken mafé is my speciality.



Making a Plan

Some time ago my educator came to see me to propose that I go on weekends and vacations with a host family. At first, I was worried and reluctant and especially sad when I thought about my family in Mali. I had also heard bad things about hosting families from my friends.

Engagement

But my educator reassured me and she explained that the host family had received training. The journey of a young person like me was explained to them. They also knew our difficulties to access our rights like other young people. They had learned to listen to us, to advise us, to welcome us in good conditions.

Adapt the model

Today, I live with my full-time host family. Over the months, we got to know each other, I live in their second room. We prepare meals together and share recipes.



Recruitment of the participants

It was really important that the family were selected carefully in order to make sure the experience is suitable for everyone involved. My family provides me with a form of peer support, because they have been carefully selected to be able to do so.

Deliver trainings

Thanks to the training, the experience was positive, and they agreed to take me in so that I could continue my studies. They help me fill out my documents if I need to and introduced me to their friend, who is also a cook. They also took me on vacation, it's more fun to get to know France with them. I feel fully integrated in this country, through their contact, I have learned to be more autonomous. Even though I miss my family, I feel less lonely, I have confidence in the future, and I look forward to finding a job and having my own place.



Deliver the programme

When I leave, they told me that they will continue to host young people like me, because they are enriched by their process, and they feel supported. In fact, under the guidance of my host family, Yacine, the cook, and his wife will also host a single youth in the fall.

Evaluation / outcomes and sustainability

The families that host people like me take part in an evaluation to make sure the best outcomes are being achieved, that way the training they receive can also be adapted as times change.



Annexe 8: Claudia's journey

Recognise the needs

I am Claudia. I am married to John. We have a daughter. I am handicapped because I had a stroke. This is unfortunate, because I have a secondary education and want to work. I can not organise activities for me and my family on my own. It's really tough.



I received an invitation for a free trip to the local swimming pool with the whole family. A mandatory part of the activity was a meeting to get to know the social worker. This meeting was about health and Goes Bezig. During this meeting we were asked to participate in the next activity about health. I liked it.

Making a Plan

There were more meetings that I could go to, to get support with different people. We formed a group that worked with the social workers. We got to know each other and started to trust each other. As a result we got together more often to discuss day to day problems.



Engagement

It helped me to undertake more, because I knew I wasn't alone. And we had a lot of family activities.

The most important part of the meetings and the activities is that we are working together. Because of this, the atmosphere feels very relaxed, which makes it possible to also discuss the more difficult topics. By organising the activities ourselves, this shows me what I can do for my family and others. It gives me more self confidence and self worth.

Adapt the model

It hasn't always been easy to trust others. However, the social workers always listened to what was going on in my life and I felt heard by them. Because of this the trust and cooperation between us has improved.



Recruitment of the participants

I contacted people to participate in the project and activities. I did this by handing out cards with a link to the movie about the project. I am very enthusiastic about the project. I got the possibility to think about my own development. I now have the freedom to carry out tasks and to bring in ideas. We also help each other by giving tips and sharing experiences.

Deliver trainings

I have learned that I can understand the situation of someone else, that I can take this into account without judging. We learned this by doing, we learned from each other through coaching and guidance from a professional.

Deliver the programme

I can now support my family better, I have more energy, I can apply what I have learned into my own life and I feel healthier.



Evaluation / outcomes and sustainability

When I just started I had to fill in a questionnaire. After half a year I received the same questionnaire to show what I have learned and still want to learn. Afterwards we discussed the outcomes of all participants anonymously in a group meeting.

Annexe 9: SWOT analysis

Below you find a guide to compose your SWOT-analysis. The questions will help you start. First we advise to learn from other projects such as ours and compose a SWOT based on the literature. Below you find an example. This example was made in 2020, in the meantime research on the topic has probably expanded.

SWOT-analysis guidance			
Strengths	Weaknesses	Opportunities	Threats
Questions:	Questions:	Questions:	Questions:
What are the best attributes of your peer support project?	Are there areas of inefficiency?	What are the opportunities that the peer support will give?	What challenges do the peer supporters face?
Why are you best placed to initiate the peer support?	What makes it difficult to proceed in initiating/maintaining a peer support program?	What situations can the peer support benefit from?	What are outside sources that could interfere with the peer support program?
What have other people told you that you do well, which will be beneficial for the peer support project?	Are there reasons not to pursue a peer support program?	Are there potential partners to improve your results?	Are there any known events that have negative consequences on the peer support in the future?
			Are you vulnerable to any external forces?

Example Project Ensure literature			
Strengths	Weaknesses	Opportunities	Threats
In general, peer to peer support provides a better outcome in the different target groups of vulnerable people, both psychologically and/or physically	Still little "hard" evidence on peer to peer support in numerous target groups because of research on small samples	It seems to be good for overall outcome, but more research is needed	The sustainability of the peer-to-peer support projects is often not taken into account
	There is a variety of peers used in different studies	Peer to peer support gives vulnerable people the chance to have positive experiences with formal care again	Peer to peer support can't /may not replace any formal or professional support
			Bond of trust is necessary to make peer to peer support a success

Example - Community Centre 'De Mussen'

Strengths	Weaknesses	Opportunities	Threats
Professional guidance of the peers	Heavy caseload for the peers which has consequences for their personal life	Closing gaps between professionals and vulnerable people	Professional aidworkers make excessive demands on the peers
Reach vulnerable people whom otherwise won't be reached by regular welfare organisations	Private lives are at risk because the job takes more hours than calculated	Reach more vulnerable people whom otherwise won't be reached by regular welfare organisations	Uncertainty about the continuity (funding of the local government)
Multilingual	The peers have difficulties to set boundaries	Role model for the neighbourhood	Not enough peers to take care of too many help requests
Peers originate from the neighbourhood		Peers start an education or get a job	
Approachable which is not the case for professionals		Cooperation between volunteers and professionals: they can work together on the same level	
Volunteer allowance whereby it's not without obligation		Problems in different habitats can be stabilised	
Peer to peer training		Solving the problems for the parents would help to give children a better future	
The peers get intervision and case study discussions			
Ethnic diversity			
Recognition by the professional aidworkers			
Empowerment and personal development			
Bridging the gap towards professional aid			
The community centre is the basis			

Annexe 10: Logic Model

[illegible]

Annexe 11: Peer support training

Programme Basic Training for Confidantes

1. Introductory meeting basic training confidantes

Introduction, mutual expectations, motivation, and information

2. Listening without judgement

About confidantes and listening without judgement

3. Connect, connect, connect

About gaining and giving trust

4. Conversation techniques

About conversation techniques and behavioural change

5. Setting boundaries

About setting boundaries and saying 'no'

6. Life stories and self-reliance

About support and motivation during the trajectory

7. Social map

About professional help and facilities

8. Assessment

Certificate award

Times: from 1 p.m. to 4 p.m.

- be present at 1 p.m.
- always cancel in case of absence
- bring a folder and writing material

Be present for at least 6 weeks to fulfil the attendance requirement and receive the certificate.

Meeting 1: Introduction

Getting to know each other:

- What is your motivation for wanting to be a confidante to others?
- What are your expectations of the training and of your role as a confidante?
- What do we expect from you as a confidante?
- Explanation about the duties of a confidante
(see **Hand-Out Meeting 1: 'Duties of a Confidante'**)

Meeting 2: A listening ear

Active listening without judgement

- Learning objectives**
- Participants understand the pitfalls of active listening
 - Learning how listening can help the other person
 - Learning how to prepare yourself to listen actively
 - Learning to make contact

- Homework**
- Write down 'good and new' on a daily basis (small things and about listening verbally/non-verbally)
 - Pay attention to the pitfalls, how do you react when you notice that you are stuck and how do you get out?

1. Introduction of the meeting

Questions/remarks following meeting 1.

Ask the participants to share their experience with the first meeting (to observe what role each Mom for Moms (Schilderswijk Moeder) takes in a group).

The first and most important role of the Mom for Moms is to lend a listening ear. Introduce the following exercise as an exercise in listening (through role-playing).

2. Mind map

What is active listening without judgment? Let the participants write down on the flipchart in the form of a mind map what listening without judgement is.

3. Listening exercise (role-playing)

The first and most important role of the Mom for Moms is to lend a listening ear. Introduce the following exercise as an exercise in listening (through role-playing). The aim is to practice:

- Making contact. How do you make contact? **Non-verbal**
- How do you step into the role of a Mom for Moms?
Preparing for active listening by parking your own thoughts and worries.
- Listening without judgement (pitfalls).

The participants are split into two groups.
Group A plays the woman reached.
Group B plays the Mom for Moms.

Instructions for group A:

The women reached have to pay attention to the body language and the tone of voice of the Mom for Moms. They will only start telling their story when they feel connected to the Mom for Moms.

Group A will go outside to prepare. Every woman reached plays **case 'listening ear'**.

Instructions for group B:

The Moms for Moms have to prepare themselves to listen actively, to temporarily put aside their own thought and worries.

- While the women reached prepare their case outside of the classroom, the Moms for Moms receive **Hand-Out Meeting 2: 'Listening without Judgement'**. This hand-out describes the four pitfalls when listening.
- Explain the pitfalls and that it is the intention of the role-plays to apply them as well as possible (maybe contrary to the participant's expectations). In other words: while role- playing as a confidante, to listen **badly** to the other person.
- Ask the participants playing the role of women reached to come back into the classroom.
- Let the participants play out the cases one by one in role-plays.
- Ask the spectating participants to observe closely and take notes in which they write down
 - the ways in which the Moms for Moms listen well
 - and what they can do to improve their listening. Discussion listening exercise

At the end of the role-plays you explain to the women you have reached that they have been fooled. The Moms for Moms have done their best not to listen. You can choose not to reveal this until you have discussed the first role-play on the basis of the two questions above (what went well and what could be better). Go through the pairs one by one by putting these two questions to the participants and asking the women reached how they experienced the role-play. **What did they think and feel?** Name the pitfalls one by one. In this way you 'fill in the pitfalls'. Make sure that this discussion makes it very clear what the pitfalls are. In other words: what happens when you judge, immediately come up with solutions, etc. Explain the pitfalls one by one.

Listening without judgement

If we listen to another person's story, we carry ourselves with us. Like the things we have learned in our upbringing, our environment, and events in our own lives. Everyone has their way of looking at the world. What the world should look like and how people should behave. We have to be well aware of this. Normally we listen with 'judgement': views on what is good, what is supposed to be and what is normal. That makes sense, but be aware that if you already have judgement, you cannot listen to someone openly and without prejudice. To gain trust and connect with the other person, you have to learn to listen without judgement. Not always easy! You carry your opinions, cultural values and prejudices with you.

Listening instead of advising

As a confidante, you are very keen to help the other person. A pitfall here is that you (too) quickly start thinking in terms of solutions and give advice on how and where and by whom someone can best solve their problem. By doing so, you deprive the other person of the opportunity to vent (this is also helping, we will come back to this in more detail later in this meeting) and to tell their full story. By listening, you can help someone to gain insight into their story, to order their story and, in the long run, perhaps also to find solutions to the problem themselves.

Listening to the other person's experiences

We tend to fill in the stories we hear from our own life experiences. The pitfall of this is that you form your own image too quickly. Things could be very different for your discussion partner than they were when you experienced something similar yourself. If you make too many interpretations from your own situation, you lose sight of important aspects in the other person's story. Then you project your own feelings, wishes, and experiences from the past onto someone else. The danger is that you think too quickly: 'I know exactly what you mean/how you feel'.

Trivialising

In order to encourage or enthuse someone you can sometimes (too) quickly choose the 'you can do it' approach. This comes from the best of intentions, but it also deprives the other of the opportunity to vent and tell their full story. The other person does not get the chance to tell why something is difficult. Because of this the other person does not feel taken seriously. Listen, show compassion, and take the other person seriously.

Then ask the participants whether they recognise these pitfalls (judging, solving, projecting, trivialising) in themselves or in others?

The alternatives to these four pitfalls are, of course, their opposites. In a nutshell, those are:

- Take your reached woman seriously
- Leave your judgements, opinion, and advice at home
- Don't take immediate action

4. Effective communication

How are you supposed to listen? Have participants read Hand-Out Meeting 2: 'Effective Communication'.

5. Listening exercise

The same people will now listen while leaving their opinions, judgements, and advice to themselves. This way, the participants can experience what is like being listened to without judgement.

What did they think? What did they feel? Write answers on the board.

6. How listening helps: the power of listening

In the discussion of the listening exercise you got an overview of what it does to people when they are NOT (properly) listened to. You have written this down for yourself or on a flipchart. Against this overview you and the participants can then compare the positive consequences of listening: how listening helps.

When you are not listened to

- You think the other person doesn't take you seriously
- You clam up
- You lose your train of thought
- Message: pull yourself together
- Je don't feel taken seriously; you feel belittled, you feel treated like a child
- Trust disappears and distance increases
- You become frustrated and defensive
- You feel invisible and insignificant
- You feel pressured
- You don't feel at ease
- The solution is not yours. Consequence: you become dependent and lazy

When you are listened to

- It feels like the other person has time for and interest in me
- You feel taken seriously
- Message: I am important
- You feel seen and valuable
- You open up
- Self-confidence and trust increase
- You get the opportunity to order your story and gain insight into your own situation
- You feel relieved and more relaxed, emotionally and physically
- Come up with your own solutions and take action

Summarising: How listening helps

- Listening helps, both physically and emotionally (feelings of fear and insecurity diminish and self-confidence grows).
- By listening actively and without judgement, you offer the woman reached the opportunity to order her story with more insight into the origins and effect on her life. In this way, you get closer to a solution.

Take your woman reached seriously, leave judgements, opinions and advice at home, and don't immediately take action!

As a Mom for Moms, you are not a saviour.

A Mom for Moms HELPS SOMEONE HELP THEMSELVES

7. Homework

Explain the aim of 'good and new'. By focusing on little things that were good or new, participants become aware of their skills and qualities.

Meeting 3. Connect, connect, connect

Learning objectives

- Participants gain insight into the conditions of trust (mind map)
- Participants learn how to fit in with the wishes and needs of the woman reached
- Which things can hinder trust-building (shame, pride, fear, taboos, inferiority complex, cultural-religious context)?
- Order the needs/story of the woman reached
- Return to homework, 'good and new' and how to get out of the pitfalls!

Homework

- Good and New
- Practice asking open questions

1. Meeting introduction

Ask what the participants remembered from last time. Also ask about the homework; 'good and new' and pitfalls. What was it like to do and what did they encounter?

What are we going to do this week?

This week you will learn more about how to fit in with the needs and wishes of the woman reached. Last week you learned more about the importance of active listening without judgement. Participants are going to learn not only the words but especially the right eye/body language and how to look for the story behind the story. Making contact and gaining trust is very important.

2. Mind map connect

Let the participants create a mind map on a flipchart.

- **Who was the last person you trusted? What makes you trust someone? Let the participants share their experiences and draw a mind map on the flipchart.**
- What are the conditions needed to gain and keep trust? For the other person but also for yourself!
- If there is no connection, don't impose and certainly do not force anything.

3. Connect trajectory

- Introduction
- Win trust
- Set goals (what are her needs)
- Look at the support offer

What does the woman reached need help with and where can she get this help?

- Evaluate and adjust goals
- When the goals have been reached, finish

4. Practice getting to know each other

- Introduction: How do you start the conversation?
- How do you start a conversation?
- Open attitude
- Practice how to make contact with an open, curious attitude

Getting to know each other consists of two parts: who am I and who are you, and what can I do for you? Something accessible, inviting them for a coffee

Radiate confidence and expertise. The woman reached feels insecure about what is going to happen now and is getting used to a new situation.

Hand out **Hand-Out Meeting 3: 'First Meeting'** and let the participants read it out. Give participants additional information on how to reach women and on how to start.

Tips:

Pay attention to the house and appearance

Which people or organisations are already aware of the situation?

Making notes for yourself about things you notice

5. Obstacles when seeking help

Read out **Hand-Out Meeting 3: 'A Matter of Trust'**

Obstacles when seeking help:

What stands in the way of telling the (life) story?

- Shame, mistrust and taboos
- People want to solve problems themselves
- Not daring to talk about the problem
- Living between two cultures
- Fear of gossip
- Inferiority complex
- The idea of perseverance ('sabr'); that it is your destiny and that you have to carry your cross yourself
- Traumatic experience
- Psychological problems
- Disturbed generational or male-female relationships
- Multi-problems, unable to see the wood for the trees

Do the participants recognise this?

6. Exercise on winning trust with case

Rita is a single mum with a daughter. She was born in Ghana and has been living in the Schilderswijk for 15 years. She has been divorced for some time. She received less unemployment benefits last month. She phoned the Social Services. She has been cut back on her benefit because her daughter has turned 18 while living at home. She does not have enough money this month to pay the bills. I ask whether her daughter is studying or working. She tells me that her daughter has problems. She is not doing okay. She has problems communicating with her daughter. She is not very good with computers and she has problems with the Dutch language.

7. Setting goals

Differentiate between primary and secondary issues. Some things go away on their own. Is a goal achievable for the woman you have reached? Always match her level and what she is already capable of.

How do you set goals? Short and long term goals

SMART

- Specific
- Measurable: reward/give compliments
- Acceptable: does the woman reach want to do the work to achieve the goal? Explain the importance/need of the woman reached
- Realistic: level of the woman reached and if she has the necessary tools to reach the goal
- Timed

8. Listen, summarise, question

Distribute **Hand-Out Meeting 3: 'Listening Skills'**.

The importance of listening, summarising and questioning: more information, a better understanding of the wishes and needs of the woman reached

Listen, not only to the words but to what someone means to say, emotions/face expressions/voice

Summarise, describe in your own words what has just been said. Ask if this is correct and drop a silence. This is an invitation.

Ask questions, while listening you got non-verbal information. You ask **open questions** to find out what else is going on. This will help you to get to the bottom of things.

Who? What? Where? Why? When? How?

Effects: you understand each other, a relationship can develop as a result of your understanding and attitude.

9. Exercise

- Write down a 'good and new' every day, focus on little things
- Practice asking open questions. What is the effect?

Meeting 4: Conversation techniques

Learning objectives

- How to listen well? Listening behaviour
- How do you find out what the existing problems or worries are?
- Listening, Summarising and Questioning explanation
- Summarising well
- Difference between and effect of open and closed questions

1. Introduction

- Welcome and today's agenda
- What do you remember from last time?
- Discuss homework
- Read through hand-outs from meetings 2 and 3
- Practice open and closed questions
- Case set SMART goals

Return to Connect. Your own principles should not stand in the way of supporting the woman you reach. Connecting is also putting yourself aside.

Today we are going to talk about conversation techniques. In order to be able to connect with the woman you reach, you need information. How do you find out what questions, worries and problems there are? And what conversation techniques do you need to create order in the chaos?

2. Exercise in asking questions (open, closed, and suggestive questions)

Participants ask questions to find out which questions give them the most information.

3. Explanation about different types of questions

Asking questions

- **Closed questions:**
 - Questions to which one answer is possible or can only be answered with 'yes' or 'no'
 - Questions with an or-or
 - Why questions (tone of voice)
- **Indirect questions:** questions "with a detour"
- **Suggestive questions:** you probably.... Am I right?

These types of questions are **less** suited to get more information.

Questions to get more information

- **Open questions:** questions that invite you to tell more, that give the other person room (for example: 'Can you tell a bit more about that?').
- **Direct questions:** you're heading straight for your goal. These questions often start with question words such as: who, what, where, how, how much, how long, how often etc.

Sometimes you don't get clear answers to certain questions. The answer remains vague.

- **Vague language**
 - "I can't take it anymore" (What can't you take anymore?)
 - "It's all becoming too much for me" (What is becoming too much for you?)
 - "I sometimes feel unhappy" (When do you feel unhappy/in what situations?)
- **Leaving out words or parts of sentences**
 - "I can't handle arguments" (Arguments with whom and when?)
 - "I have to" (Says who?)
- **Generalisations**
 - "He always insults me" (When does he insult you?)
 - "Everyone abandons me" (Who abandons you?)

4. Asking questions

The participants will be asked questions. They may only answer the **open** questions.

5. Mind map Fight, Flight, Freeze

Reactions of fear that you can recognise in the woman you reach or in yourself. Make a mind map together with the participants.

Top 3 Flight signals:

- Instead of answering the question, someone avoids it or suddenly changes the subject.
- This person no longer makes eye contact, usually their eyes move quickly back and forth through space in search of an escape route.
- This person leans back in their chair or takes a step back. They increase the distance between you and them and often make themselves smaller in the process.

Top 3 Fight signals:

- In this person's language you hear a lot of aggressive words like "Yes, but" and "I disagree".
- This person looks at you closely and you notice that you look away all the time.
- This person leans forward towards you or takes a step in your direction. They reduce the distance between you or make you take a step backwards.

Top 3 Freeze signals:

- This person falls silent or says "eeeh" for a very long time.
- It seems as if this person is looking through you or looking through the wall: they are staring.
- The facial expressions and body language of this person are frozen, they hardly move any more.

Yes, but...I don't know. Why? I'm not going to talk about it... Now listen carefully.... I'd like to, but.... You didn't think I...I don't have time right now...You're a...I didn't know... I'm sorry, but it's just that...I didn't understand that. Supplement with your own favourite strategies!

We often think of resistance when we think about these reactions. That the reached woman does not want to change or improve her situation. But she says these things because she is afraid.

6. Case reached woman in fear

Leila is a 30-year-old Moroccan woman. She has been married for 10 years and has 2 small children. You have been waiting for her for ten minutes. When she walks in, she is completely worked up. Her husband came home just before she left. He was angry because he just found a bill in the letterbox. Then he hit her. She is very upset and afraid to go home.

Listen, summarise, question

Explain the importance/effect of listening, summarising and asking questions.

- By listening carefully, the Mom for Moms gets information about which questions and problems there are.
- By summarising you will find out whether you have understood the story of the woman reached.
- And by asking questions in the right way you will get even more information you need as a Mom for Moms, you will find out if there are any other questions or problems and you will discover where the other person's own strengths and abilities lie.

So listening, summarising and asking questions go together!

The importance of listening, summarising, questioning: more information, a better understanding of the wishes and needs of the woman reached.

Listen, not only to the words but to what someone means to say, emotions/face expressions/voice.

Summarise, describe in your own words what has just been said and what you think the reached woman is feeling. **Always use I-statements**. Ask if this is correct and drop a silence. This is an invitation. Examples:

- "If I understand correctly..., Do I understand that correctly?"
- "So you're saying that... Is that correct?"
- "I hear you say..., Is that correct?"

Ask questions, while listening you got non-verbal information. You ask **open questions** to find out what else is going on. This will help you to get to the bottom of things.
Who? What? Where? Why? When? How?

Effects: you understand each other; a relationship can develop as a result of your understanding and attitude.

7. Exercise 'listen, summarise, question' case

Wendy is a new woman reached. She brings a large pile of letters with her to your appointment. She asks you to help her with the letters. When you read the letters, you notice that she has a lot of unpaid bills. She doesn't talk much.

As a Mom for Moms you have to investigate the question behind the question. How come she can't do her administration herself? And how did she get all this debt?

In this phase, it's all about listening – no judgements, opinions, and advice. We are not yet thinking about solutions and advice. Pay attention to all the pitfalls! What is important to remember:

- Empathise
- Explore and investigate the context and perception of the question, complaint, problem? It is all about facts/events and thoughts/feelings.

8. Exercise 'listen, summarise, question' case

Your woman reached is called Wanda. You have only just met each other so you are getting to know her better. She wants to tell you her whole life story at once. You are overwhelmed by all the stories and facts. She also jumps from one story to another. You find it difficult to understand her and order her story. She has had a bad childhood, has a lot of debts, has difficulty raising her kids, feels alone and lonely, is divorced....

Meeting 5: Boundaries

Learning objectives	<ul style="list-style-type: none">• Feeling boundaries• Insight into the saviour triangle• Practice setting boundaries
Homework	<ul style="list-style-type: none">• Communicate boundaries

1. Introduction of the meeting

- Welcome
- What do you remember from last time?
- Homework

This week you will learn more about feeling and setting your own boundaries.

2. Exercise to recognise boundaries

Make sure the participants are quiet and slowly walk towards each other.

- Participants stand in rows opposite each other, row A and row B. Participants in row B walk at a quiet pace towards the participants in row A. The participants in row A determine how close the others may get. They indicate their boundary by saying stop.
- Switch. The participants in row B now indicate their boundaries.
- Participants in rows A and B walk towards each other at the same time at a calm pace. Both participants indicate their boundaries. They stop at a distance that works for both.

Ask the participants what it was like to indicate their boundaries and what it was like having the other person to indicate their boundaries. Also ask what it was like to walk towards each other at the same time. Laughter, restlessness, and no eye contact are signs of insecurity and discomfort.

3. Explanation drama triangle

If a relationship takes a lot of energy then the cause can be a destructive pattern that we call the drama triangle. Three roles can be distinguished in this triangle: the victim, the saviour, and the accuser.

- The victim place themselves in a dependent position. The victim often makes others feel that they need to be helped.
- The saviour helps, solicited and unsolicited. They think they know what is good for the other. They treat people almost automatically as victims and often pity other people. From this role, the saviour does everything to please the victim. They are nice, helpful, give advice and propose solutions.
- The prosecutor is a role that can be played by both the saviour and the victim. The victim is often afraid of change, of the consequences of decisions and of taking responsibility. The advice and solutions of the rescuer meet with resistance from the victim. The victim does not want to change and becomes critical of the saviour. If the victim does not change, the saviour assumes the role of prosecutor. Because they become angry and disappointed in the victim, they will blame the victim.

When the Mom for Moms takes on the saviour role, she does not actually connect with the woman reached. She is not open about her boundaries and real feelings. Emotional honesty ensures equality in the relationship. As a Mom for Moms you have to let the woman reached take responsibility. How do you get out of the drama triangle?

1. Do not give unsolicited help.
2. Ask for the things you need (don't accuse, communicate your needs)
3. Clearly define your own boundaries.

4. Exercise 'the box'

Role play with shoebox...

There is a box with unopened mail, unpaid bills, a box of unprocessed grief (on a note), problems.

At the bottom of the box there are old memories, music, good food, things that give you strength, creativity and joy.

The box is closed and has a ribbon around it. It symbolises the reached woman's baggage. Often she thinks only of her problems. The box also contains objects that are more of a testimony to her own strength and ability to recover. She is more than her current problems.

The Mom for Moms must set boundaries and not accept or open the box. The box always belongs to the woman reached.

Discuss with the participants:

What happens if you, as a saviour/ Mom for Moms, take over the box (problems and luggage) of the woman you have reached? You also take away someone's possibilities:

- to tackle and solve the problems themselves and to create new experiences of success; and
- to (re)discover their forgotten sources of power.

The Mom for Moms should say 'no' not just for her own benefit, but for that of the woman reached as well. **What are the benefits of saying 'no' for yourself and for the woman reached?**

5. Exercises (role-play)

Case 1

Leila is a 30-year-old Moroccan woman. She has been married for 10 years and has 2 small children. You have been waiting for her for ten minutes. When she walks in, she is completely worked up. Her husband came home just before she left. He was angry because he just found a bill in the letterbox. Then he hit her. She is very upset and afraid to go home.

Case 2

You are helping out an acquaintance. Patricia is an Antillean woman with three children. Her husband has a gambling addiction. The family has a lot of debts. Patricia is depressed. In her community, psychological problems are taboo. Because she is afraid of gossip, she has not confided in anyone. You are the only one she trusts. She is very dependent on you. You gave her your phone number and she lives on your street. She often comes by, to show you a letter or to talk about her problems. The times when she visits you often don't suit you.

6. Homework

Practicing boundaries with family, children, friends and possible clients.

All participants have to draw a lifeline at home with all the events from their birth until now.

Meeting 6: Life stories and self-reliance

Learning objectives

- Awareness of one's own life story
- Practice lifeline
- Benefits and pitfalls of using your own experience

Homework

- Good and New self-reliance
- Social map

1. Introduction of the meeting

- Welcome
- What do you remember from last time?
- Drama triangle: how to get out of it
- Homework (lifeline)
- Assessment

2. Mind map experiential expertise

Exploring the difference between experience and experiential expertise

Experiential expertise:

- Is the experience over and has the Mom for Moms processed it?
- Is the Mom for Moms able to reflect on their own and other people's experiences?
- Can the Mom for Moms put her experience to use for someone else? The experience should be a tool, it is all about the woman reached.

3. Exercise Discuss lifeline

As homework, the participants have drawn a lifeline from birth to the present. Above the line they have mapped out the happy / nice periods and events in their lives, and their successes. What talents and qualities did the participants use? Below the line they have drawn the less happy and difficult events or periods in their lives. What problems did they have to deal with? What did she do? Who supported her? Did she solve it herself or did someone else solve it for her?

4. Benefits and pitfalls of using your own life story

Benefits:

recognition
involvement
empathy
loyalty
motivation

Pitfalls:

project your own story
saviour role, overburden
own boundaries are crossed
losing sight of reality
making yourself indispensable, making the other dependent

Moms for Moms can support, stimulate and motivate a reached woman by telling their own life story. It is important that the Mom for Moms chooses the right moment to tell her own life story. The Mom for Moms of course has to gain the trust and connect with the woman reached. What does she want and how can she be motivated and stimulated? When things change in life, the woman reached can become (more) anxious. For fear of change, she might refuse to cooperate. She can withdraw by not showing up for appointments or not picking up the phone anymore. Or she doesn't honour agreements or gets angry with her environment or with you. This is called resistance. It is important for you to ask her about her fears and to set clear boundaries. The Mom for Moms can ask the reached woman to draw a lifeline. In this way she gains more insight into the life of the woman reached.

5. Mind map self-reliance

Let the participants create a mind map with all the words that come to mind around the topic of being self-reliant or becoming self-reliant.

6. Exercise 'increase self-reliance' (case)

Sara is a 35 year old Nigerian woman with two children. She does not know how to get by financially. Her husband can't handle money well and they have large debts. Sometimes there is no money to pay the bills and do the shopping. She suffers from stomach complaints and heart palpitations. She is also afraid to go to the doctor. Her husband always goes with her because she doesn't speak Dutch very well. Sara doesn't get out much; only to take the children to school and do the shopping. She is afraid of getting lost when she travels by tram and bus. That's why she is afraid to go alone. Her son is being bullied at school. She wants the bullying to stop. She finds it difficult to discuss this problem with the teacher. Sara has trouble standing up for herself.

She's had a difficult childhood. Her parents were very strict. Obeying your parents and family was important. They gave her little warmth and encouragement. In her hometown there was only a primary school. Her family had no money to send her to secondary school. At a young age she had to start working. She is very creative and can sew beautiful African clothes. She can also cook delicious meals. Sara is uncertain about what she can do and finds it difficult to ask for help.

Draw up a plan to support her

The participants get 10 minutes to read the case and draw up a plan to increase Sara's self-reliance.

Questions:

- Is this woman self-reliant?
- What does she struggle with?
- What can you as a Mom for Moms do to increase her self-reliance?

8. Homework

- Draw up a plan of the case 'self-reliance'
- Exercise 'social map' in pairs of two:
Look for organisations in the neighbourhood and self-organisations where you can get support for women reached from the case. Use the Internet and your own network to find out about what is on offer in the neighbourhood.
Prepare well for what you are going to say.
Contact the various organisations. Make an appointment to visit an organisation for an introductory meeting.
Write down the websites where you found information for the woman reached.

Meeting 7: Social map

Learning objectives

- Insight into the social map
- Exercise in looking up information
- Visit an organisation
- Setting priorities

Homework

- Preparation assessment

1. Introduction

- Welcome/agenda
- What do you remember about experiential expertise/self-reliance?
- Discuss homework case 'self-reliance'

As a Mom for Moms, you connect people. You investigate the needs of the woman reached. Then, you bring her into contact with the organisations where she can get help and support. The woman reached needs correct information! The Mom for Moms will have to investigate what kind of help and support the different organisations in the neighbourhood and the city offer. Get to know the people in the community centres and self-organisations. A Mom for Moms will have to invest time to build and maintain their own network. When looking for information, you have your own network.

This way you will quickly get the right information. The Moms for Moms help each other by sharing their own network.

Many of the women reached are afraid of different organisations, for example child protection or debt counselling. They know nothing about the various organisations or have heard stories from acquaintances. It is the task of the Mom for Moms to find the right information. This is the only way to properly inform and advise the woman reached as to which organisation she can get help and support from. The woman reached finds herself in a new situation. This is exciting for everyone.

What's important?

- It is important to tell the woman reached where you found the information. Therefore **write down** the websites for her. She then has access to the information herself. This way, she can get and keep more control.
- Always check which persons and organisations already know about these problems! Does the GP now? This way, you can get more information about the problem. You can also help the GP and other professional aid workers to get a more complete image.
- Always ask for the reached woman's permission before you contact anyone else.

2. Presentation visit organisation

Participants hold a presentation about their visit to different organisations.

3. Exercise 'social map'

As an exercise, participants have looked up information about several organisations. Discuss what they have learned from this and what they didn't know yet.

4. Case

The Yildic family consists of a husband, wife and four children. The man has been living in the Netherlands for 15 years and his wife came 10 years ago. They have 2 boys and 2 girls, aged 9, 7, 4 and 2.

Mrs Yildic came to the office hours a fortnight ago. There is a humidity problem in some of the rooms in her home. She needs help to find a solution. Her 9-year-old daughter has health problems. Her husband cannot help. During the day he works, but at night he is often away. You suggest to go to her house to get a good look at the problem.

When you go on the home visit, you see stuff lying around everywhere and it smells weird. Her 9-year-old daughter is at home and is in a wheelchair. She is mentally handicapped and her asthma is getting worse because of the fungal problem in the house. The house has 2 bedrooms, for 6 people. You make a new appointment for next week and start to look for information to help her out.

On your second home visit, she is very restless. She often stands up and walks around. She doesn't look at you either. You can see that things are lying on the ground. You ask further questions. She tells you that she had an argument with her husband that morning. He wanted to take the money for the groceries. She didn't want to give it to him. He got very angry and beat and kicked her. Her husband gambles and has made a lot of debts. She does not know how to get by financially. Sometimes there is not enough money for the groceries and the bills.

She often suffers from headaches, stings in her stomach and other physical complaints. She often lies in bed worrying and doesn't sleep well. Sometimes she can't take it anymore and everything becomes too much for her. She hasn't been to the doctor. She is afraid. She is afraid of losing her children. She struggles raising her two youngest. They are also very active and do not listen to her. Her 7 year old daughter wets the bed and beats the other children. Sometimes she thinks about divorce, but that is difficult. She still has feelings for her husband and wants to help him. What would he do without her and the children! She is loyal to him. Her family and in-laws will not accept a divorce. She has few friends or acquaintances. She has always taken care of the children and the house alone. She doesn't know Dutch society.

The aim is to teach participants to set priorities and answer questions.

Questions:

- How do you initially react?
- What do you need to know about her before you can do anything?
- What arrangements are you going to make with her?
- Which problem has priority?
- Will you call in expert help? If so, which help?
- How do you do that?
- How can you support her as a Mom for Moms?
- How do you stay involved once the assistance programme has started?

Hand-Out Meeting 1: 'Duties of a Confidante'

As a confidante you have different duties, roles:

- Sounding board
- Ordering the story and connecting with the woman reached
- Giving advice
- Early warning
- Guiding and referring
- Support
- Connect
- Promoting self-reliance
- Expertise social/cultural/religious context

Sounding board

In the first instance, a confidante helps by listening. The fact that someone with a problem can tell their story to a confidante with a listening ear can have a liberating effect.

By listening, the confidante offers the opportunity to vent, tell the (life) story and translate the need for help into a request for help.

Ordering the story and connecting with the woman reached

The confidante listens, but also helps to order the (life) story by asking specific questions. Usually, a specific request for help can be distilled from that story. The next steps can then be taken to tackle the problems.

Giving advice

The confidante has knowledge of the social map and builds and maintains a network of specific care workers, social workers and coaches. The confidante advises in these matters.

Early warning

A confidante is able to identify problems and illnesses at an early stage, because of her position in the world of people living in deprived neighbourhoods. Early help often means effective help.

Guiding and referring

*The confidante refers the woman reached to adequate forms of health and welfare services. During the intake procedure and assistance process, the confidante can continue to offer guidance. The confidante works solely **as a complement** to the regular care institution and does not assume its role.*

Support

The confidante has a supportive function. She helps the woman reached order her story, gain insight into her own situation and needs (formulating a request for help), and refers her to the right people or institutions. The confidante also helps during the referral and during and after the assistance programme.

The woman reached stays in charge of the appointments and their execution. The role of the confidante is therefore purely supportive and she only takes action with the consent of the woman reached.

Connect

The confidant is familiar with the social map and the social circle of the woman reached that has confided in her. If necessary, the confidante connects the woman reached with subsequent forms of professional assistance, but above all with informal networks that are part of the world of the woman reached. The confidant also educates and is involved in preventive activities.

Promote self-reliance

The confidante promotes the self-reliance of the woman reached. Self-reliance can be encouraged in many ways. By investigating together what the woman reached can do herself, but also by investigating which people in her social circle can be asked for support. The confidante can also connect the woman reached with social networks, contact groups of fellow sufferers and all kinds of social activities. After making an inventory and obtaining the consent of the woman reached, the confidant mobilises a 'support network'.

Expertise social/cultural/religious context

Physical and mental health problems and other problems of various kinds faced by residents of deprived neighbourhoods are influenced by social, cultural, religious and societal factors, or have to do with male-female relationships and migration. Confidantes are experts in these areas because they come from the same backgrounds. In general, their expertise in this field exceeds that of professionals in care institutions. These professionals can therefore, if they are open to it, make use of the knowledge provided by confidantes in this area.

Hand-Out Meeting 2: 'Listening without judgement'

Four pitfalls when listening

1. Judgements and prejudices

If we listen to another person's story, we carry ourselves with us. Like the things we have learned in our upbringing, our environment, and events in our own lives.

Example: you condemn someone's anger (outburst). You say "you shouldn't have done that" or "I would never have done that".

Another example: the intention of a reached woman to divorce her partner. You say "I don't think that's a good idea".

2. Advise (immediately come up with solutions)

Instead of taking the time to listen and ask questions, you come up with solutions, tips and advice right away.

Examples: "If I were you, I'd do this and that" or "I think you should..."

3. Filling in with your own story

The story someone tells you reminds you of your own story. Instead of listening to the story and asking questions, you tell your own story.

Example: "I've had that too, I know exactly what you mean". You take over the story of the woman reached.

4. Making the problem smaller than it is or not taking it seriously (trivialising)

Examples of what you might say: "It's not that bad", "well, that'll be fine" or "if I were you, I wouldn't worry too much about that".

Actually, this person doesn't take the other person seriously. These reactions mainly say something about the listener. She is not interested in how the other person experiences a situation, complaint or problem.

Hand-Out Meeting 2: 'Effective Communication!'

Leave your judgements, opinions and advice at home

JOA means that in a conversation you should keep your Judgements, Opinions and Advice to yourself. I think you understand what I mean by this; some people are very good at judging, giving their opinion and giving advice. This is not what your conversation partner is looking for.

Listen, summarise and question

Listen, summarise and ask more questions. Listen to what the other person is saying, then summarise it and ask more questions. When listening, pay attention not only to the words used but also to body language. By summarising, you check if you have understood what the other person wanted to make clear. By carefully asking further questions, you make sure that everything becomes clear.

What about ANNA?

ANNA means Always Ask, Never Assume. This often goes wrong. Usually the opposite happens and people assume what they themselves think is the truth without asking if it is true.

Don't impose your own interpretations

Don't impose your own interpretations. It happens a lot that people think they know what the other person means or thinks. This is a pitfall, because it often happens that you are wrong.

Be open, honest, and curious

Be open, honest, and curious in a conversation. Be open to a different opinion. Be honest in what you think of it and be curious about the motivation of the other person.

Remember to think in qualities

Think In qualities: Often people only pay attention to things that don't go well or to the negative qualities of others, but try to pay attention to the things that do go well or to the qualities of others.

Hand-Out Meeting 3: 'First Meeting'

Step 1. Introduction:

- Make eye contact
- Introduce yourself, get to know each other
- Explain what a Mom for Moms can do: listen, give information, guide, come along to appointments, support during an assistance programme, increase social network, promote self-reliance.
- Tell her that you will work with her to find the solution and approach to the problems, that you will help and support her.
- Important: confidantes have a duty of confidentiality!

(she doesn't have to be afraid people will gossip about her)

- Gaining trust: tell her something about yourself or ask her about something she can be enthusiastic about; her kids or where she is from.

Step 2. What questions or problems are there?

Try to gain insight into her situation

- What questions or problems are there?
- If you have been set up: is the information you have received correct?
- Are there any other questions or problems?
- What's the story behind the question or problem?
- Who else knows about this? GP, school, social work?

Points of attention:

- Listening, without judgement or opinion (JOA)
- Show empathy (understanding)
- Talking from your own point of view, what you think
- Ask follow-up questions, ask open questions (problem clear)

Step 3. Ordering

- Give a summary of the information you have received from her
- Ask if this is all correct and if she wants to add something else
- Put the questions or problems in order of importance (prioritisation)

Step 4: Setting boundaries

- What does the woman reached want you to do? What are her expectations?
- What can she do herself or with the help from her surroundings?
- Make clear what you can and cannot do as a confidante.
- Empathise that she is the boss and decides what happens.
- Agree when and how often you will meet up (make sure it is regular).
- If necessary, make an agreement about phone contact.

Hand-Out Meeting 3: A Matter of Trust

Obstacles when seeking help:

What stands in the way of telling the (life) story?

- *Shame, mistrust and taboos*
- *People want to solve problems themselves*
- *Not daring to talk about the problem*
- *Living between two cultures*
- *Fear of gossip*
- *Inferiority complex*
- *The idea of perseverance ('sabr'); that it is your destiny and that you have to carry your cross yourself*
- *Traumatic experience*
- *Psychological problems*
- *Disturbed generational or male-female relationships*
- *Multi-problems, unable to see the wood for the trees*

A question of trust and the question behind the question

Trust isn't just there, it has to grow. Often people are cautious initially, but open up more when they feel the other person can be trusted. Trust has to be earned, the other person has to know and feel that their story is safe with you, that you handle information confidentially, and that it always stays between you two. It is important you make this clear from the beginning and that you live up to it at all times!

Trust starts with listening, when you build trust:

- The other person feels at ease
- You give the other person the space to be themselves
- The other person becomes more open and has the courage to share more
- The other person feels more secure and gets more self-confidence
- The other person can continue to develop.

What can stand in the way of the woman reached telling her story or sharing her troubles and problems?

Shame, taboos, and fear of gossip are all reasons the woman reached is afraid to tell her story, or doesn't want to. The problem is linked to thoughts of failure. These thoughts of failure lead to shame when it comes to poverty and domestic violence, for example. Or something is forbidden in a certain culture or shouldn't be talked about (taboos such as homosexuality or talking about sex). The fear of gossip is very strong.

How to open up such a sensitive problem to discussion?

- Most important condition: trust and listening without judgement.
You can rename problems or taboos: instead of 'domestic violence' you say 'there is no peace in the relationship'.
- Start with yourself and tell your own stories: if you are open and vulnerable, the other person is more likely to talk about difficult subjects.

- You can ask about her childhood dreams. How did you imagine a relationship as a 15- year-old? How did you see the future then? This way she can look at her problem in a different way and it is not framed as a self-evident part of her life.
- You can ask her: What would you like to change in your life?
- You give information about the effect of suppressing, hiding, 'suffering in silence': the problem doesn't get solved or it gets worse this way and she can become socially isolated.
- You give her information about different kinds of help she can get.

Not seeing the wood for the trees:

Sometimes you see that the woman reached needs help. She is overworked, has problems and many complaints. Because she is so deeply in trouble, she doesn't notice it. She is far too busy surviving. As a Mom for Moms you will reach women who ask you for help in solving a problem, but who actually need something else. For example: the woman reached wants to look for a bigger house. If you keep asking and take your time, you will find out that she needs help with raising her child. The house is too small because of the tension and stress.

There is a **question behind the question**. That is almost always the case with poverty and debt. Poverty can have several causes and other consequences. Debts can have to do with addiction and relationship problems. If someone is in debt, this can play a role in domestic violence, addiction and other problems.

If the Mom for Moms pays close attention to the obstacles (especially if both come from the same culture), she can respond tactfully to what is going on and support the woman she has reached in such a way that, despite everything, she still wants to tell her story.

The house metaphor

You can compare a person to a house. In the shop window (outside), someone likes to show his most beautiful and cheerful side, at the kitchen table other things are shared (ups and downs), in the basement are all the taboos, fears, sadness, anger, loneliness, traumas (tucked away) and in the attic are (under the dust) valuable memories, things you had forgotten, that make you happy again, that can give you hope and strength.

How do you set goals? Short and long term goals

SMART

- Specific
- Measurable rewarding/giving compliments

Hand-Out Meeting 3: 'Listening Skills'

1. Listening behaviour

- Relaxed posture
- Eye contact
- Responding to the story or non-verbal signs

2. Small encouragements

- Verbal encouragements (humming, saying things like 'oh!' and 'and then what?')
- Non-verbal encouragements (nodding, looking questioningly)

3. Summarise

- Ordering the information
- Show the other person that you've understood their story
- Giving the other person the opportunity to add to it

4. Open invitations

- Open questions (leave room for the other person)
- Occasionally leave a silence (gives the other person the space to think or recover and get back to their story).
- You can check whether what you think corresponds with the experience of the other person.

Another important aspect of active listening is summarising. It is a way of organising the information, of creating order in the chaos.

Tips to remember:

1. Listen attentively and don't get distracted
2. Use your posture to show that you are listening and look at the other person
3. Pay attention to what the other person is saying as well as to what they are not
4. Pay attention to any changes in non-verbal signal (gestures and facial expression)
5. Listen to understand, not to judge or argue
6. Occasionally test if you have understood the other person correctly and summarise what they've said.

Hand-Out Meeting 5: 'Boundaries'

Setting boundaries:

- **MAKING CLEAR TO THE OTHER WHAT IS AND IS NOT ACCEPTABLE.**
- **TO MAKE CLEAR TO YOURSELF WHAT IS AND IS NOT ACCEPTABLE.**

Why is it so important to set boundaries?:

As a Mom for Moms, it is very important so set boundaries and say 'no' from time to time. Sometimes, she is the only person who knows about the problems of the woman reached. The danger with this is that the Mom for Moms will be the only source of support and will be fully claimed by the woman reached. This can make it extra difficult to set boundaries or say no. A socially isolated reached woman can be very dependent. A Mom for Moms might feel responsible for solving her problems and won't want to disappoint her.

It should be clear from the start that:

- The Mom for Moms is **not** an aid worker. She can't fix any problems. What she can do is listen, advise, support, guide, and refer to professional aid.
- Only the reached woman **herself** can take the steps necessary to change her situation. The Mom for Moms can support her by practising conversations and accompanying her on appointments.
- The Mom for Moms is **not** available around the clock. You will make appointments together.
- The woman reached should **also** ask her own family, friends, or neighbours for help.

How do you say 'no'?

- *Clear and friendly:* "I don't have time today, but we can make an appointment for another time."
- Don't beat around the bush: no long stories before saying no, just be direct. Or ask for more time.
- *Get yourself some time:* If you don't know how to respond, say that you need to think about it.
- *Show understanding but insist:* Don't make up excuses! For example, say "I understand that it is difficult, but I can't make it today."
- *Encourage* her to ask family, friends, neighbours or to do certain things herself. You can help her with preparation and practice.

It is important to keep a distance and maintain the separation between work and private life. As a Mom for Moms you have to decide for yourself when, where and how often you want to meet a woman reached. If the woman reached knows your address, is a neighbour or family, you should decide when she is allowed to visit you. Respect your own boundaries. If you don't do this, it will have a negative effect on you and the woman reached!

How do you keep your distance?

- Don't give out your address. If you're address is already known, make agreements about when you are available!
- Only give out your work phone number;
- Don't invite your clients to your home;
- Seek professional help;
- Don't take over the duties of professional aid;
- Don't give or loan money;

- Don't meet up more often or for longer than initially agreed upon;
- Don't share your personal problems;
- Set boundaries.

If a relationship takes a lot of energy then the cause can be a destructive pattern that we call the **drama triangle**. Three roles can be distinguished in this triangle: the victim, the saviour, and the prosecutor.

- The victims place themselves in a dependent position. The victim often makes others feel that they need to be helped.
- The saviour helps, solicited and unsolicited. They think they know what is good for the other. They treat people almost automatically as victims and often pity other people. From this role, the saviour does everything to please the victim. They are nice, helpful, give advice and propose solutions.
- The prosecutor is a role that can be played by both the saviour and the victim. The victim is often afraid of change, of the consequences of decisions and of taking responsibility. The advice and solutions of the rescuer meet with resistance from the victim. The victim does not want to change and becomes critical of the saviour. If the victim does not change, the saviour assumes the role of prosecutor. Because they become angry and disappointed in the victim, they will blame the victim.

What matters is to recognise, appreciate and support the other person's own strength. To stimulate the other person's own strength, the Mom for Moms has to say 'no'. By setting your limits you build a good relationship of respect and equality. You and the woman you reached both take responsibility for your needs and emotions. Playing the saviour ensures that the woman reached cannot solve her problems herself. She cannot grow in this way and find her own strength.

When the Mom for Moms acts as a saviour, she doesn't only adopt the problems of the woman reached, she also takes away her opportunity to use their own strength and gain positive experiences. When Moms for Moms take on tasks that the woman reached could've done herself, she doesn't grow and doesn't become strong and independent!

Annexe 12: Training for professionals

Action plan for professionals

The objective

There is a huge gap between the systematic world of professionals and the world of vulnerable residents. The aim is to bridge the gap by deploying peer to peer supporters.

Definition of the problem

Many organisations work in the field of care, support and welfare of people in vulnerable circumstances. Professional institutions often consider that vulnerable people only come into the picture when problems become too serious. The reason for this is that there is a huge gap between the world of the institutional system and the world of the residents.

These residents often experience a too high threshold when they request for help from care providers. This may be due to unfamiliarity, lack of digital skills, language problems, cultural differences, and distrust and fear of these institutions. The result is that often these people do not receive the care they so desperately need. As a result, problems can get out of hand and, at a later stage, more expensive and more serious assistance is often required.

Professionals do not always succeed in getting behind the front doors of these vulnerable residents. This is because they do not always know who this target group is and how to approach it.

How can we bridge the gap between the professionals and the vulnerable target group?

The method

A. Understanding the target group

Explain who the target group is and how you can gain their trust by connecting with them. Building trust is paramount.

B. Informal support by means of a confidant training

Explain what the purpose of the confidant is to reach the VP

In 2013, De Mussen started the project "Schilderswijk Moeders": 20 trained contact women from the neighbourhood are committed to improve the living situation of vulnerable families. They have experience, they know the different communities in the neighbourhood and speak the language of the residents. De Schilderswijk Moeders work on a voluntary basis, they receive weekly training and they are guided by professionals. They enjoy great trust in the neighbourhood and have become important role models.

They offer informal support to families in the neighbourhood:

- *A listening ear for local residents who need it*
- *Practical support for families in their requests for help*

- They act as a bridge to care institutions;
- They advise social workers in their approach.

In recent years, the Schilderswijk Moeders have worked together with various organisations and institutions. The expertise of social workers and the experience of the mothers strengthen the support of local residents.

However, this cooperation was not based on a shared vision and approach and was not formalised.

C. Role of formal and informal organisations

Explain the role of the professional and the role of the confidant. It is important that the tasks are clearly defined so that everyone knows what is expected of them.

The confidant is a volunteer and it is important that this person does not form part of the systemic world so that the VP can be helped optimally.

D. Cooperation with professional organisations

Make clear which professional organisations are involved with the VPs you focus on. Seek cooperation with different organisations.

In order for families in the Schilderswijk to receive the right care at the right time, it is important that informal and formal care providers can find each other more easily and that cooperation agreements are established between them. With this in mind, De Mussen started the first discussions to establish a partnership in 2020. The partnership consists of the following partners:

- Schilderswijk Moeders
- Multiculturele vrouwen Foundation
- CJG
- WMO of the Municipality of The Hague
- De Koning Health Care Centre
- Ella Midwifery care
- Indigo prevention
- MEE ZHN
- Parnassia
- Sensa Zorg
- STEK
- Zuster Mina home care
- De Mussen Community centre

The common interest of all parties involved is that the hard-to-reach families in the Schilderswijk are helped in a timely and appropriate manner.

E. Process

In order to come to a cooperative arrangement, you should organise meetings with the various parties and with the confidants. This way, the professionals get to know each other as well as the confidants. In this way, they hear from each other what problems the VPs are dealing with.

- *Familiarisation between the Schilderswijk Moeders and the care institutions*
- *Drawing up a regional image, including an analysis of the most common problems in the Schilderswijk*
- *Formulating a shared vision and ambition in the form of a central message*
- *Establishing partnership agreements with each individual organisation*
- *Signing together the agreements and partnership-forming*

F. Partnership agreements

Make partnership agreements with all parties. Describe what means can be used, such as workshops, meetings, conferences, etc.

All partners showed a strong need to work together more intensively and integrally. These are some of the agreements we have come to with all partners:

- *To meet monthly in a sounding board group. In these meetings, we discuss case histories. We can also share developments in the neighbourhood and seek a joint response*
- *Achieving short lines of communication by appointing permanent contact persons in all organisations who can be contacted directly by the other partners*
- *Contributing to the promotion of mutual expertise by sharing knowledge and experience*
- *Reinforcing each other's services by sharing and/or developing them among each other when new developments are identified in the neighbourhood.*

G. Evaluation

It is important to evaluate with all parties involved whether the cooperation works and whether it should be adjusted.