INTERVIEW WITH DR. CANDELARIA MAHLKE
The lead of work package 3 reports how the UPSIDES intervention has been developed.

IMPLEMENTATION OF PEER SUPPORT
Read more about our implementation activities at UPSIDES sites. What common strategies will be followed across sites? And what local specifications will exist?

START OF THE RANDOMIZED CONTROLLED TRIAL
How will the effectiveness of UPSIDES peer support be assessed across sites?
Interview with Dr. Candelaria Mahlke

Q: What was the process of preparing the training material?
The training manual was developed stepwise. We gathered information with a systematic review on peer training programs and from the training manuals used at study sites with experience in peer support. We developed a first manual draft that was discussed in expert panels in each country and adapted according to the feedback. The resulting training manual was tested in a train-the-trainer meeting in Tanzania with experienced peer trainers, peers, and mental health staff from all sites for further review and finally adapted after piloting the training at all sites followed by another round of focus groups.

Q: What were challenges?
The challenge was to develop a program that could be used in low-, middle- and high-income countries and therefore be flexible enough to fit in with local social norms and could work mostly independent of how the mental health system is set up and available resources in a country. We focused on experiences that seem universal in peer support and recovery, independent of location and cultural differences through having someone by your side in mentally challenging times, who understands where one is coming from and be a companion by supporting in looking forward on path to personal recovery.

Q: What do you think about the final manual?
The training manual and the accompanying workbook is kept flexible enough to be used and adapted to local contexts everywhere. It is supposed to build a foundation for a peer support network and provide a hopeful and community-oriented support, that helps to empower those affected and combat stigmatization. The "tree of life", a concept which was used in the peer training in Uganda before, became a core element of the training that is consulted repeatedly throughout and helps an individual to integrate the own story and develop new perspectives, based on the own strength and resources.

Implementation of UPSIDES Peer Support

Pilot Testing
Six recruiting sites finished pilot testing and training last year. The training was done in local languages that include Gujarati (India), Luganda (Uganda), Swahili (Tanzania), Hebrew (Israel) and German (Germany). The training was well received at each site. We are now in the phase of beginning our trial using the skills of the training.

"The training provided me a platform to express and helped me think about my own recovery journey, future goals and improved my communication skills." - PSW, PU site

Organisational readiness:
All the implementing sites conducted face to face organizational readiness workshops with staff. The aim was to introduce the project and set up workspace for peer support workers (PSWs). The discussions were on recovery focused mental health services and peer support in practice. Several concerns such as lack of a clear role description of PSWs, work being complicated by PSWs, previous bad experiences with peer support came up during the workshops across sites. These concerns were considered during the implementation planning. Some sites required much more intensive activities to ensure organisational readiness than a single workshop and introductory meetings.

Start of the randomized controlled trial

Study Design
The randomized controlled trial aims to examine the effectiveness of peer support across six sites on service users and peer support workers. The study applies a waiting list design and group allocation occurs randomly. All participants in the control group receive treatment as usual, consistent with local service provision and will receive peer support after one year. Participants allocated to the intervention group receive peer support immediately.

Outcomes in view are social inclusion, empowerment, recovery, mental health, functioning and quality of life. These outcomes will be assessed over twelve months.

In January 2020, all sites began the process of recruitment of service users for this study. Please, contact us, if you are or you know somebody interested in taking part.