How to get involved

PARTICIPATE IN OUR STUDIES
There are several studies ongoing. You are very welcome to join them and to support our research. Contact us for details!

MEET THE RESEARCHERS
Attend a public meeting at an UPSIDES site near you. Contact us for details!

Stay in touch

VISIT OUR HOMEPAGE
Interested in who we are and what we are doing? Take a look at our website! We have produced some short video clips to introduce our team members to you, check it out at: https://www.upsides.org/output/#videos

SOCIAL MEDIA
Stay up-to-date on Twitter: @UpsidesProject

Subscribe to our newsletter by contacting UPSIDES@uni-ulm.de

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NEXT NEWSLETTER: #03 - JUNE 2019
→ Description of the intervention
→ Train the Trainer Workshop in Tanzania
→ Interview with Candelaria Mahlke (Hamburg, Germany)

Send your news to UPSIDES@uni-ulm.de to see it featured in the next newsletter!

FIRST RESEARCH PROJECTS
Read more about our first research activities: focus groups, local advisory board meetings, and more.

CONCEPTUAL FRAMEWORK FOR PEER SUPPORT
What common features will UPSIDES peer support have across sites? And what needs to be adjusted to fit with the local context?

INTERVIEW WITH DONAT SHAMBA
The lead of work package 2 on peer support in Tanzania and UPSIDES’ next steps.

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www.upsides.org
First research projects

Phase 1 of the UPSIDES study focuses on evaluating the current stage of peer support at each site, developing the intervention, translating all documents into local languages and preparing for implementation. Each study site has created a local advisory board (LAB). It consists of various stakeholders who will advise the researchers at each site, mainly on implementation-related issues.

Systematic literature reviews have been conducted to help develop a conceptual framework for peer support for discussion in focus groups. Between September and November 2018, the first focus groups were conducted in several UPSIDES study sites to help the researchers to find out more about existing peer support structures, facilitators and barriers of peer support in each region, and to adapt our conceptual framework to the local context. Lively discussions with mental health staff and various stakeholders have taken place and the UPSIDES consortium has received many helpful tips and gained interesting findings. We thank all participants for their engagement and help!

As a next step, we want to feed those results into the development of an intervention, which we will describe in our next issue of the UPSIDES newsletter, alongside a report from our Train-the-Trainer Workshop which will be held in Dar es Salaam, Tanzania in February 2019.

Conceptual framework for peer support

UPSIDES’ conceptual framework of peer support was developed through work package 2, led by Mike Slade and Donat Shamba. The team of work package 2 defined eight fundamental principles that describe what UPSIDES peer support should incorporate. In addition to these principles, there are five culture-specific implementation factors which need to be discussed on a local level, and which will influence how the conceptual framework looks at each study site.

Q: What is peer support from your point of view?

Donat Shamba: "People with mental illness in process of recovery share their challenges and how to overcome them with other patients. Peer support has three effects: 1st it closes the gap between communities and facilities, 2nd it closes the gap between people with mental illness and community on a household level, by showing others that people with mental illness are still resourceful and 3rd it helps to reduce the work load in the facilities."

Q: What is special about peer support in Tanzania?

Donat Shamba: "It is a type of intervention which is not yet very common in Tanzania. However, it would be a possible solution to reach marginalized groups of people. Especially in Tanzania there is isolation of people with mental illness, because a lot of people have a different perception concerning the cause of the illness, many believe people with mental illness are bewitched or possessed by demons. Those beliefs influence their treatment and their personal life. Also, there are not enough hospitals in Tanzania, so there is a huge treatment gap; some districts are completely without a psychiatrist. This leads to people with mental illness having to be separated from their families and traveling far distances to receive treatment. However, with peer support people can receive psychosocial support at the facility or at their home and it is an effective method to change the attitude of a whole community since the peer support worker will visit the service user at home and will be in contact with the families."

Q: What are the next steps?

Donat Shamba: "In the UPSIDES work package 2, we want to know more about what is the current stage of peer support at each of the study sites. We are conducting focus group discussions with stakeholders and mental health staff and by means of qualitative analyses of these discussions we want to understand: What are existing initiatives at the different sites? What are barriers and enablers for the implementation? Is peer support feasible at this site? How can potential peer support workers be recruited? Concerning the cultural feasibility, we want to find out: how do people perceive peer support workers coming to their house? Once we know the challenges, we can start thinking of ways to overcome them. Like this we can anticipate some problems and learn about facilitators of peer support. Based on this we get to know the do’s and don’ts for the intervention which will be developed as part of work package 3."

*The scientist is not a person who gives the right answers; he’s one who asks the right questions.* - Claude Levi-Strauss