



**MALE
SURVIVORS
AOTEAROA**

PEER SUPPORT

Practice Guidelines

Including

ORGANISATIONAL QUALITY STANDARDS

For the Provision of Support Services for

MALE SURVIVORS OF SEXUAL VIOLENCE

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Peer Support

Introduction

“We are all social beings by nature – connectedness and community are necessary if not vital to our wellbeing. The very existence of positive social relationships can be a source of healing for many psychological wounds. Because sexual abuse and sexual assault occurs in relative secrecy – in a state of disconnection between people – reconnecting and building trust are often at the core of healing from sexual violence. Some survivors turn to peer-support initiatives to build connection and heal”¹

As a result of suffering sexual harm, many survivors face relationship challenges with friends, family/whanau and workmates and experience great difficulty interacting with support service providers. These relationship and interaction difficulties can also contribute to their isolation and often make them more vulnerable to addiction, re-victimisation and further abuse. This is why effective peer support hinges on building a trust-based relationship between the survivor and their peer-support-worker (sometimes called a facilitator) and ensuring the physical and emotional safety of the survivor in that relationship. It is this safe and trusted relationship that can provide a real opportunity for the growth and recovery of the survivor...and also for their peer-support-worker.

Peer support initiatives, which were initially applied to help people suffering from addiction and mental health issues, are now applied more widely to assist trauma recovery, disability support, coping with grief, weight loss and mentorship programs, to name but a few common applications. In all of these areas it is the lived experience of the peer-support-worker, their first-hand understanding of their survivor’s experience, that is the essential ingredient for establishing a successful (hope, growth and recovery focussed) peer support relationship.

What is Peer Support?

*“Peer support is **person-centred** and underpinned by **strength-based philosophies**. The life experience of the peer-support-worker creates common ground from which the trust relationship with the person is formed. Empowerment, empathy, hope and choice along with mutuality are the main drivers in purposeful peer support work. There is a great deal of strength gained from **knowing someone who has walked where you are walking and now has a life of their choosing**. In this way it is different from support work, it comes from a profoundly different philosophical base.”²*

“Peer support is based on the belief that people who have faced, endured and overcome adversity can offer useful support, encouragement, hope and perhaps mentorship to others facing similar situations”³

¹ Rick Goodwin & Mark Patton – Survivors Helping Survivors

² Te Pou, 2009

³ Davidson, Chinman, Sells & Rowe, 2006

Typical characteristics of peer support include the following”

- It is usually facilitated by a trained peer-support-worker not a professional therapist although counsellors and social workers may have some involvement with the agreement of the survivor;
- People engage with each other and others for support that is based on mutual learning from their shared (lived) experience;
- The support may include a mix of self-help, mutual (one-on-one) support, group support and mentoring initiatives.

Peer Support Essentials

“Peer support:

- *Is grounded in the belief that people are their own greatest resource and that adverse life experiences can be sources of resilience and knowledge;*
- *Draws on a shared understanding of recovery;*
- *Focuses on what will sustain recovery – for example, employment, reconnection with family/whānau, achievement and purposeful activities, as well as being included in communities:*
- *Instils hope by being with someone who has been there and ‘through it’; and*
- *Is not about ‘fixing things’ but building on strengths.”⁴*

These essential characteristics are evident in the **six core values** that underpin the Male Survivors Aotearoa (MSA) approach to peer support:

Mutuality	<i>Peer support relies on authentic two-way relationships between people through ‘the kinship of common experience’ – trust-based relationships that enable peers to share their experience in a way that is mutually beneficial.</i>
Recovery and hope	<i>Peer support is sustained by the belief that there is always hope and that resiliency and meaningful recovery is possible for everyone.</i>
Experiential knowledge	<i>Peer support provides access to the essential learning, knowledge and wisdom that comes from sharing personal lived experience of sexual harm and the recovery process.</i>
Self determination	<i>Peer support recognises the right for people to make free choices about their life and to be free from coercion on the basis of their mental distress or victimisation.</i>
Participation	<i>Peer support recognises that people are often their own best resources and acknowledges the right of survivors to choose and lead their own recovery process.</i>

⁴ Power of Peer Support – NZ Mental Health Commission

Equality

Peer support asserts the fundamental right of people who experience sexual harm to have equal opportunities to other citizens and to be free of discrimination.

Peer Support is Person-Centred

The differences between some therapeutic programmes that tend to be ‘illness-centred’ (often a deficit-based approach) and the ‘person-centred’ (strengths-based approach) of peer-support can be summarised as follows⁵:

Illness-centred approach...the diagnosis is the foundation	Person centred approach...the relationship is the foundation
↓ Begins with an illness assessment	↑ Begins with welcoming – outreach and engagement
↓ Services are based on diagnosis and treatment needed	↑ Support is based on the persons experience and the support they request
↓ Services work towards illness-reduction goals	↑ Support works towards quality-of-life goals
↓ Treatments is symptom driven and rehabilitation (recovery) is disability driven	↑ Support is focussed on hope and recovery and is aspirational – moving towards wellbeing
↓ Recovery from the illness sometimes results after the illness, and then the disability is taken care of	↑ Personal recovery is central from beginning to end
↓ Track illness progress towards symptoms reduction and cure	↑ Track personal progress towards recovery
↓ Use techniques that promote illness control and reduction of risk damage from the illness	↑ Use methods that promote personal growth and self-responsibility
↓ Service ends when the illness is cured	↑ Peer support is voluntary; people engage or disengage as they choose
↓ The relationship only exists to treat the illness and must be carefully restricted throughout, keeping it professional	↑ The relationship may change and grow throughout and continue even after support ends

⁵ Informed by ‘Guidelines for the Practice and Training of Peer Support’ published by the Mental Health Commission of Canada.

Some Benefits of Peer Support

The Experience

Meeting with people who speak your language

When you are in a peer support relationship (one-to one or in a peer group), it's common to share your experience and talk about what you've been through and what you've done— things that relate to why you are there and why you are seeking support. It's helpful to know that you are in conversation with a person, or speaking to a group of people, who understand what you are talking about.

Learning with people who have been where you are

You will meet people who started out where you are, have had similar experiences and have moved forward to a place of recovery. This provides an opportunity to develop coping skills as you learn how others have navigated their life challenges. And it provides you with a regular reminder that healing and hope are real possibilities.

No judgment

No matter what you've been through, what you say or how you say it, your peers have likely been through it, seen it before, or heard it from someone else. There is no need to fear the judgment of your peer support person or the group when you are doing nothing more than sharing your own experience.

Focussed on hope and recovery

Peer support is not about what is bad, wrong or doesn't work but rather about what is possible and what can be achieved together. You will work with people who are not focussed on problem solving or fixing weaknesses but rather concerned with building on your strengths to co-create something new for the future.

The Outcomes

Some of the benefits commonly reported by people who participate in effective peer support activities are:

- Increased self-esteem and self-confidence
- A sense of purpose
- Increases motivation to implement life changes
- Increased involvement in meaningful activities
- Increases in the quality and number of relationships – greater social support network
- Increased resilience and quality of life
- A greater sense of wellbeing and increased ability to cope
- Longer periods of wellbeing
- Increased ability to communicate with and deal with other support services
- Positive outcomes where other services have failed.
- An opportunity to 'give-back' by helping others

Common Challenges of Peer Support

Keeping it safe and comfortable:

Informed consent

It is important that people entering into a peer-support relationship are fully informed about how the relationship is intended to work; the outcomes it may achieve; and what other alternative support options are available to them. It should always be their own decision to enter, sustain or leave the relationship and to be their own judge of what is best for them. This includes acknowledging the risks in the relationship and agreeing how their safety will be maintained.

Privacy and confidentiality

For people to feel 'safe and comfortable' in a peer support relationship they must be assured about the confidentiality of the information they share. They are entitled to know from the outset what personal or private information will be kept, how it will be protected and to be assured that this information will not be shared with others without their permission except as required by the law or in circumstances necessary to ensure their safety or wellbeing or the safety of others.

There are two commonly accepted exceptions to confidentiality which should be discussed with the participants:

- If there is reason to believe that a child or youth needs protection; and
- If someone states they have plans to harm themselves or someone else

Observing boundaries

It is also important that the boundaries or limits of a peer support relationship are understood and respected by both parties. The information and experiences that are shared in confidence within the relationship create mutual obligations to ensure that this shared knowledge is not used inappropriately in other social or work situations that occur outside the relationship. It is also important for participants to negotiate their personal boundaries that protect their personal space and other relationships. Respecting these boundaries is essential to create a safe environment and to preserve the mutual trust that enables the peer support relationship to be effective.

Enabling effective participation

Assuring ethical behaviour

For people to participate fully (openly and with confidence) in a peer support relationship they will need assurance that the person facilitating the relationship (the peer-support worker) will operate in an ethical manner – i.e. will operate in a way that:

- acknowledges their intrinsic human value and uniqueness;
- is focussed on achieving positive outcomes;
- builds a trust-based relationship
- respects their privacy and the confidentiality of their information;

- respects their autonomy – right to full information and decision making;
- demonstrates honesty and integrity – communicates openly frankly and sincerely;
- is always fair – even handed and impartial;
- reflects best practice peer support;
- is always professional; and
- has a responsive and positive regard for cultural diversity and difference

Managing unhelpful group behaviours

For people engaged in peer-support groups, the expression of intense emotions or negativity can be both helpful and problematic. Being part of a peer-support group can help people talk about and sooth painful or scary feelings. On the other hand, the expression of intense emotions or negativity can result in people leaving the group or causing a lot of strain on the group's ability to provide support to its members.

It is important that the peer support group members have agreed to a set of guidelines (sometimes called rules) that prescribe how the group will deal with unhelpful or disruptive behaviours. Effective peer-support group guidelines would normally include statements that establish a 'group etiquette' such as:

- Listening without interrupting
- Avoiding personal or side conversations during the meeting
- Acceptance of differences (including social, cultural, linguistic differences or where an individual is in their recovery journey)
- Respecting each other's opinions
- Refraining from judging people
- Using first-person language ("I" statements)
- Sharing the group's time so that everyone has an opportunity to participate

Managing group membership

While there are benefits in having peer support groups with members at different stages of recovery, members who have worked a lot on their healing may experience frustration with others who may seem "unaware" or "raw." Furthermore, group members who are relatively new in their recovery may be triggered by group members who can talk with ease about the details of their victimization.

This can be a challenge for groups as well as a risk for individuals themselves - e.g., "I don't belong" or "my needs are insignificant."

Also, given that connectedness is a key benefit of peer-support, it is important that participants who are new, or from a minority group are welcomed and do not feel like outsiders or left out.

The risk is that participants who feel isolated and do not feel their needs have been adequately met will feel let down and feel like they do not fit in, which may well reinforce a negative view of themselves or negative feelings for others.

It is important that there are clear guidelines, including a careful vetting process, for welcoming and retiring group members and that these guidelines are endorsed by the group.

It is also important to be able to provide other support options for people who are ejected from a group or decide to leave a group where they no longer feel safe or are unable to participate effectively.

Sharing misguided or inaccurate information

While sharing information between members of a peer support group is intended to be positive, there is a risk that the information shared may impede or disrupt the recovery journey of another member.

The information, though provided in good faith in sharing recovery experiences, may be inaccurate or possibly harmful and unduly influence or misguide a group member's decisions relating to their medications, treatment options, situational behaviours etc.

It is important for both peer-support-workers and group members to remember that 'what works for one person may not work for another', and to be ever mindful that the group may not have the expertise or experience to properly advise members who seek to copy or emulate another member's recovery decisions.

Providing competent and expert support

There is always a risk that the reticence of many survivors to participate in therapy-based recovery pathways, due to unhelpful personal experience or simply a reluctance to admit they may need therapeutic help, may result in survivors seeing peer support, either one-one-one or within groups, as their only recovery solution.

It is important to remember that peer-support is not intended to be a 'fix-all' solution for survivors of sexual abuse. Depending on a survivor's circumstances, peer support may only be one element within a more complex recovery program that involves other professional services such as counselling or social work support.

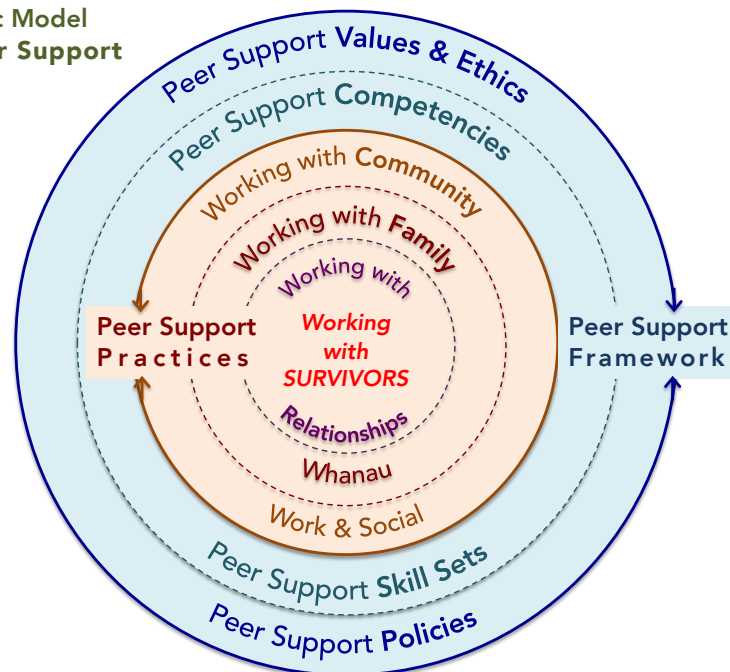
Peer-support-workers should be appropriately trained to appreciate the potential of peer support; to understand the ethics and standards that should apply to the provision of peer-support services; and to recognise and appreciate situations where it is appropriate to refer a survivor to another support option to advance their recovery.

Peer Support Practice Guidelines

Frameworks

The MSA Peer Support Framework outlines a holistic approach to peer support that positions the delivery of peer support to male survivors within a contextual setting that includes all of the individuals, groups and communities that may be engaged by a peer-support-worker in working with survivors to address their recovery and wellbeing needs.

**Holistic Model
of Peer Support**



This framework shows how the MSA peer support **values and policies** (*refer Policy Framework below*) are intended to provide a set of quality standards that wrap around the delivery of peer-support to male survivors. These values and policies also inform and guide the MSA peer-support **competencies** that are essential to assure the integrity and professionalism of the role that peer-support-workers play in facilitating (or navigating) effective peer-support for male survivors

Good Practice

These MSA Peer Support Practice Guidelines (the PSP Guidelines) aspire to reflect best practice in the provision of peer support services for the male survivor community in Aotearoa, New Zealand. As published, they represent an emerging code of practice that is sufficiently framed to qualify as 'good practice', acknowledging that there is currently a shortage of evidence-based research to fully inform the PSP Guidelines.

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However these guidelines are well informed by internationally accepted and 'practice-informed' peer support principles and practices and are also informed by the Intentional Peer Support approach, which has been embraced by MSA and provides the foundational basis for MSA's peer-support-worker education and training programmes⁶.

MSA is also developing quality standards for organisations who offer peer-support for male survivors. These standards will assure funders and the male survivor community that the organisation is appropriately equipped to offer peer-support.

Policies

The MSA PSP Guidelines are framed by the following set of operational policies, published on our website [<https://malesurvivor.nz/resources/>], which are intended to inform and guide the provision of on-one-one and peer support group services to the male survivor community.

- *Code of Ethics;*
- *Code of Conduct;*
- *Child Protection Policy;*
- *Supervision Policy;*
- *Confidentiality Policy;*
- *Working with Maori;*
- *Working with Offenders.*

Member organisations of MSA, and those other organisations that elect to conform to these PSP Guidelines, should be familiar with the above policy framework and expected to adhere to these policies, or similar policies, in the provision of good-practice peer-support to male survivors.

Peer Support Values

The following **six core values** underpin the MSA approach to peer support:

Value	Explanation
Mutuality	Peer-support relies on authentic two-way relationships between people through 'the kinship of common experience' – trust-based relationships that enable peers to share their experience in a way that is mutually beneficial.
Recovery and hope	Peer-support is sustained by the belief that there is always hope and that resiliency and meaningful recovery is possible for everyone.

⁶ these guidelines are informed by *The Peer Support Toolkit* published by the DBHIDS, City of Philadelphia, modified to embrace Intentional Peer Support principles and MSA policies.

Value	Explanation
Experiential knowledge	Peer-support provides access to the essential learning, knowledge and wisdom that comes from sharing personal lived experience of sexual harm and the recovery process.
Self determination	Peer-support recognises the right for people to make free choices about their life and to be free from coercion on the basis of their mental distress or victimisation.
Participation	Peer-support recognises that people are often their own best resources and acknowledges the right of survivors to choose and lead their own recovery process.
Equality	Peer-support asserts the fundamental right of people who experience sexual harm to have equal opportunities to other citizens and to be free of discrimination.

Ethical Practice

Peer-support-workers who offer peer-support as an employee, volunteer or affiliate of an MSA member organisation are required to comply with MSA’s Code of Ethics [<https://malesurvivor.nz/resources/>].

The following Ethical Practice Guidelines demonstrate how these ethical standards are intended to translate into ‘good peer-support practice’. They not only provide a good practice guide for peer-support-workers, they also set the benchmark for the quality of support that participating male survivors should expect to receive.

Ethical Standards	Practice Guidelines
1. Respect for the dignity of others: Every individual is treated with respect for his intrinsic human value and uniqueness.	<ul style="list-style-type: none"> • <i>Always maintain the dignity, welfare and rights of the survivor (individuals, whanau, families, groups, community);</i> • <i>Carefully consider each survivor’s belief system in sufficient detail to ensure an appropriate support response; and</i> • <i>Do not compromise survivor support by conflicts of interest relating to dual or multiple relationships – such conflicts should be resolved promptly and openly</i>
2. Beneficence (to do good) and non-maleficence (to do no harm)	<ul style="list-style-type: none"> • <i>Make sure survivors are fully aware of the overall aim and scope of the support that will be offered including services to their family/whanau or any other nominated support person/s;</i> • <i>Always foster a high degree of give and take and compromise when exploring the aim and scope of the support to be offered;</i>

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Ethical Standards	Practice Guidelines
<p>The intention is to enhance the wellbeing of the survivor, his whanau/ family, community and the public.</p>	<ul style="list-style-type: none"> • Examine all possible avenues with the survivor for the minimisation of harm and the promotion of good outcomes; and • Be prepared to take appropriate action to safeguard survivors when a co-worker or any other person endangers their recovery.
<p>3. Trust</p> <p>Trust is of paramount importance in any relationship between the survivor and the peer-support-worker</p>	<ul style="list-style-type: none"> • Avoid or try to stop any practices that may be seen as taking advantage of survivors; • Never abuse a survivor's trust by seeking any special benefits or financial or personal gain; • Never engage in or encourage sexual intimacy with a survivor at any time during the support relationship or for at least two years following its termination; and • Avoid or quickly resolve conflict of interest situations so that survivor interests are not compromised.
<p>4. Confidentiality and privacy</p> <p>Confidentiality signifies loyalty towards a survivor and his family/whanau when entrusted with information that should normally remain private.</p>	<ul style="list-style-type: none"> • Ensure privacy during consultations, the safe storage of information, and constant vigilance concerning the disclosure of any survivor details; • Maintain confidentiality from first contact until after the professional relationship has ended. • Advise family/whanau about their responsibilities for the protection of each other's confidentiality and the primacy of the survivor's confidentiality; • Explain to survivors the limitations to confidentiality – no disclosure without informed consent except for survivor or public safety, diminished capacity or legal requirement; • Allow survivors to check the accuracy of all documentation about them except for information that is confidential to others; and • Never share a survivor's personal information with other peer-workers without the agreement of the survivor.
<p>5. Promotion of survivor autonomy</p> <p>Autonomy indicates an understanding that the support offered is voluntary and the survivor will be entitled to choose his own support within the realms of safety.</p>	<ul style="list-style-type: none"> • Provide survivors with enough information and support options, including the right to refuse, to enable them to make a fully informed choice about how to engage with any support offered; • Provide survivors with all rights information as required by NZ legislation, and all relevant information about support options and processes; • Use clear, understandable and appropriate language to convey to survivors the purpose of the support offered; and

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Ethical Standards	Practice Guidelines
	<ul style="list-style-type: none"> • <i>Inform the support on offer by obtaining as much information as possible from survivors to inform and if necessary to assure their welfare, consider obtaining relevant information from members of the whanau, and/or significant others.</i>
<p>6. Honesty & Integrity</p> <p>Honesty requires that peer-support-workers use complete openness, frankness and sincerity (and plain speech) when communicating with survivors</p>	<ul style="list-style-type: none"> • <i>Ensure that peer-workers:</i> <ul style="list-style-type: none"> – <i>Maintain their competence in the declared area(s) of competence, as well as in their current area(s) of activity;</i> – <i>Accurately represent their own and their colleagues' activities, functions, contributions, and likely or actual outcomes of support activities;</i> – <i>Acknowledge the limitations of their own and their colleagues' knowledge, and of support available; and</i> – <i>Make every effort to fully inform the survivor of the peer-worker's status;</i> • <i>Never treat any survivor in an insincere or cavalier fashion, or show any distaste, dislike or disregard for a survivor's chosen way of expression or being; and</i> • <i>Always act promptly to resolve situations where personal issues prevent the peer-worker from acting in a professional manner</i>
<p>7. Fairness</p> <p>Fairness requires that peer-support-workers operate within a spirit of even-handedness and impartiality with all survivors</p>	<ul style="list-style-type: none"> • <i>Although peer-workers might specialise and direct their activities to particular populations, or might decline to engage in activities based on the limits of their competence or acknowledgment of problems in some relationships, they must not exclude persons on a whimsical or unjustly discriminatory basis;</i> • <i>Always treat survivors in ways that reflect a willingness to meet their needs without favouritism or bias. However, peer-workers are entitled to protect themselves from serious violations of their own moral rights (e.g., privacy, personal liberty) in carrying out their work; and</i> • <i>Ensure all survivors are informed, where appropriate, of the availability of other relevant support options.</i>
<p>8. Skilfulness</p> <p>Skilfulness involves the peer-support-worker in striving for best practice in all dealings with survivors.</p>	<ul style="list-style-type: none"> • <i>Always work within the limits of one's competence and qualifications, and be prepared to hand over support if and when the peer-worker's expertise is no longer adequate;</i> • <i>Accept personal responsibility and accountability for one's practice, and for maintaining competence by continual learning;</i>

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Ethical Standards	Practice Guidelines
	<ul style="list-style-type: none"> • <i>Ensure competency gained in one field of activity is not be used to improperly imply competency in another;</i> • <i>Engage in self-reflection regarding how one’s own values, attitudes, experiences, and social context influence one’s actions, interpretations, choices, and recommendations;</i> and • <i>Engage in professional development in cultural competence, recognise any limitations, and work within legislation, policy and in partnership with the cultural community.</i>
<p>9. Professional conduct Professional conduct implies that peer-support-workers will always act in a responsible, proficient and skilful manner</p>	<ul style="list-style-type: none"> • <i>Only engage in those activities in which they have competence or for which they are receiving supervision;</i> • <i>At all times maintain standards of personal conduct that reflects well on the peer-support-worker community and enhance public confidence;</i> • <i>Only engage in activities that will benefit and not harm the survivors, their families, and communities;</i> • <i>Keep up to date, reading suitable research and journal articles, attending and contributing to conferences, etc; and</i> • <i>Participate in ongoing professional development, continuing in and contributing to male survivor knowledge and education, and liaising with colleagues and other professional associations relevant to one’s field.</i>
<p>10. Cultural sensitivity Have a responsive and positive regard for cultural diversity that refuses to allow any individual to feel unappreciated, ignored or even insecure because of their real or even presumed cultural beliefs and values</p>	<ul style="list-style-type: none"> • <i>Uphold and protect the survivor’s cultural identity by acting only in a manner that is supportive of the survivor’s mana or cultural wellbeing;</i> • <i>Recognise that survivors have a cultural background that is of relevance to them. In cases involving Maori survivors, that background is often related to place, mana and relationships in a fashion that is sometimes significantly different from non-Maori. In other cases, such as non-Maori, the need for cultural recognition and respect is often important to them in a variety of different ways depending on their chosen cultural mores;</i> • <i>Be familiar with any appropriate legislation, agreements, policies or documents that aim to enhance the rights of all cultural affiliations in New Zealand;</i> • <i>Be informed about the meaning and implementation of the principles within the Treaty of Waitangi and seek advice and training in the appropriate way to show respect for the dignity and needs of Maori in their practice.</i>

Competency Framework

MSA have adopted the Intentional Peer Support (IPS) approach, which informs the following competencies that embody the attitudinal behaviours and practices which are required to successfully embrace that methodology and deliver effective peer support.

The MSA competency framework includes a self-assessment tool, which allows peer-support-workers and their managers to identify areas of practice where additional training and/or support may be required.

To assure the competent delivery of peer support, all peer-support-workers should be appropriately trained in the delivery of IPS or an equivalent strengths-based methodology.

It is highly desirable that peer-support-managers who assure peer-support quality and monitor peer-support outcomes should have completed the advanced IPS training, or an equivalent advanced course, and hold a higher (NZQA or graduate degree) qualification in peer support or a related health and wellbeing discipline.

COMPETENCY	Description
<p>Connection: Nurtures and cultivates connection with others</p>	<ul style="list-style-type: none"> ▪ Demonstrates warmth, openness, curiosity and interest in others’ experiences, stories and perspectives ▪ Practices empathetic listening to encourage openness and understanding ▪ Pays attention to where we connect and what we have in common, versus getting side-tracked by differences or dislikes. ▪ Is aware of disconnection ▪ Reconnects with authenticity, owning one’s own part
<p>Co-Learning: Shifting the focus from Helping to Learning Together</p>	<ul style="list-style-type: none"> ▪ Sees others as capable co-learners and responsible adults; does not take an advising or problem-solving role ▪ Approaches relationship with curiosity and interest (vs. set ideas, assumptions and predictions) ▪ Hears what can be learned from someone else’s way of looking at things rather than imposing own viewpoint ▪ Is open to new ideas and ways of seeing things

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COMPETENCY	Description
<p>Worldview: Awareness of Own and Other's Worldview</p>	<ul style="list-style-type: none"> ▪ Understands that "worldview" is the way we see the world based on our own experiences ▪ Is aware of own worldview and readily explores own assumptions ▪ Is aware of responsibilities in relation to the Treaty of Waitangi when working with Maori and their whanua ▪ Is comfortable with exploring and affirming others' worldview, listening with curiosity for the untold story ▪ Understands that trauma-awareness means listening for "what happened" rather than for "what's wrong" ▪ Uses language that explores meaning rather than diagnosis or symptom language
<p>Relationship: Shifting the focus from the Individual to the Relationship</p>	<ul style="list-style-type: none"> ▪ Works to co-create relationships that work well for all concerned ▪ Understands the importance of authenticity and confidentiality in building open, trust-based relationships ▪ Demonstrates cultural sensitivity in dealing with people of different ethnicity and/or from different cultural backgrounds ▪ Understands the role of family, whanua and community in people's lives and works actively to include them ▪ Notices disconnections, and is prepared to explore assumptions, patterns, power/privilege, and meaning ▪ Invites and encourages feedback about how the relationship is working for all parties concerned
<p>Mutuality</p>	<ul style="list-style-type: none"> ▪ Actively invites and makes space for everyone's perspectives without either ignoring others or imposing ▪ Negotiates relational needs and interests in ways that work everyone (self as well as others) ▪ Seeks to negotiate power and privilege in ways that work for everyone ▪ Is aware of and able to own power and privilege held by self and others ▪ Invites mutual exploration of impact on relationship ▪ Sets appropriate limits (boundaries) to ensure the safety of self and others and to nurture and protect the relationship ▪ Works to share risk and responsibility rather than taking control
<p>Hope: Shifting the focus from fear to hope and possibility</p>	<ul style="list-style-type: none"> ▪ Forms hope-based relationships, focused on: <ul style="list-style-type: none"> ○ What is possible ○ Where we are going ○ How we can co-create something new

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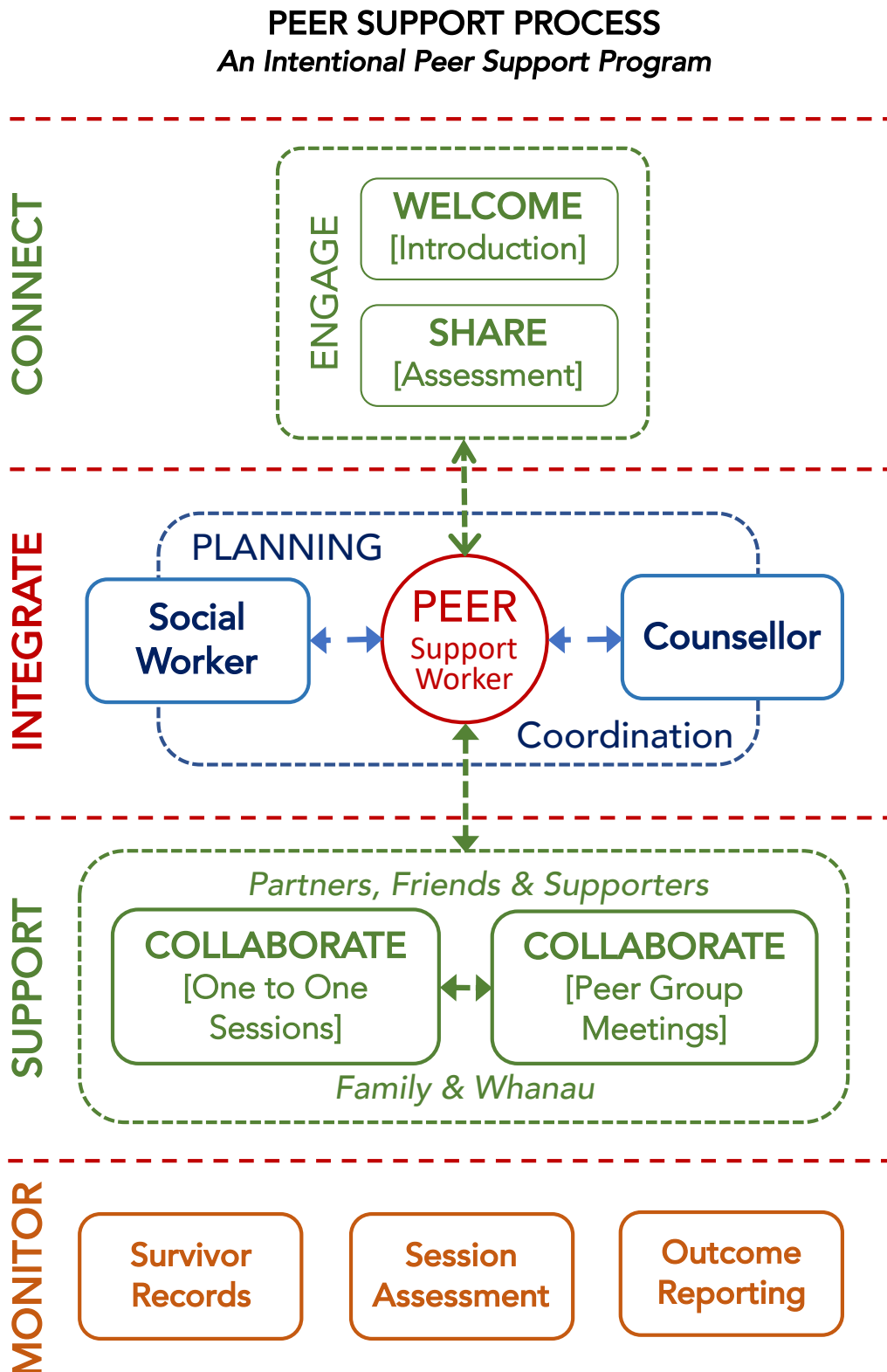
COMPETENCY	Description
<p>Co-creation: Moving Towards versus Moving Away From</p>	<ul style="list-style-type: none"> ▪ Invites mutual sharing around values, hopes, dreams, possibilities and aspirations for living ▪ Focuses on what is possible rather than what is bad, wrong, or isn't wanted ▪ Co-creating the future together rather than focusing on goals or problem-solving ▪ Focuses on strengths, offers optional recovery pathways, empowers self-choice and encourages self-determination.
<p>Self-Reflection</p>	<ul style="list-style-type: none"> ▪ Actively reflects on the experience of self in relationship – able to 'own one's own part' ▪ Is aware of own worldview and how it developed, including personal feelings, thoughts, attitudes, assumptions, judgments, agendas, power, privilege, defaults and patterns ▪ Welcomes differences in experiences/ perspectives/ beliefs/ judgments as opportunities to learn and grow ▪ Resists the tendency to blame others for uncomfortable feelings ▪ Uses relational differences or discomfort proactively to notice and examine personal agendas, patterns, default responses and worldview assumptions ▪ Asks and explores with curiosity and interest: "What is my part?" ▪ Invites and encourages others to share alternate perspectives and experiences that challenge personal agendas and worldview assumptions ▪ Uses self-awareness to build connection by being transparent, approachable and authentic
<p>Feedback: Able to Give and Receive Feedback</p>	<ul style="list-style-type: none"> ▪ Ensures connection ▪ Acknowledges and appreciates others' positive contributions ▪ Looks at the situation through the lens of the other person's life experience, in addition to one's own ▪ Considers whether own worldview is a reflection of privilege or bias ▪ Frames feedback around observation rather than judgment ▪ Keeps the focus on moving towards what is wanted for the relationship (closeness, connection, trust), rather than away from what isn't wanted (dishonesty, dirty dishes) ▪ Invites and gives honest responses ▪ Validates other's response and demonstrates willingness to learn and be changed by what they have

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COMPETENCY	Description
Co-Reflection	<ul style="list-style-type: none"> ▪ Attends co-supervision regularly ▪ Shows up prepared and on time ▪ Readily identifies areas for personal learning and growth ▪ Expresses curiosity about others' intentions and aspirations for co-learning ▪ Maintains connection, mutuality and actively cares for relationships with co-participants ▪ Listens for worldview and explores power and privilege and their impact ▪ Maintains attitudes of hope, possibility, co-learning, co-creation and moving toward during co-reflection period
Capability & Capacity	<ul style="list-style-type: none"> ▪ Understands what peer-support is, develops and maintains peer support competencies and uses appropriate tools and practices in their work ▪ Embraces a human rights approach to peer- support, work actively to eliminate discrimination, honour and protect survivors' human rights including equitable access to advocacy and promotes social justice ▪ Understands the importance of the Treaty of Waitangi in working with Maori, embraces difference and diversity and values people of different ethnicity and/or with different cultural values ▪ Confidently shares their lived experience to inform their work, and uses the peer-support values to guide their peer-support practice ▪ Understands the concepts of connection, worldview, mutuality and learning together (moving towards) and the importance of using them to build effective peer-support relationships ▪ Actively practices self-care strategies and use self-reflection, co-reflection and feedback to inform and assure their peer-support competencies and practices ▪ Understands recovery and resilience practices, embraces a strengths-based hope and possibility approach to co-creating recovery pathways ▪ Appreciates the facilitative nature of the peer-support-worker role and encourages engagement with other people and expertise as appropriate to enable and support an effective recovery pathway ▪ Understands the relevant legislation, policies, standards and protocols they operate within and works to align their peer-support activities

The MSA Peer Support Model

The following diagram outlines the typical pattern of encounter (connection, integration and support) for a male survivor seeking peer-support from an MSA member organisation



PEER SUPPORT PRACTICE GUIDELINES

The MSA peer-support model has three distinct support engagement phases (connect-integrate-support) and one quality assurance phase (monitor):

- **Connect:** Making the initial survivor connection and encouraging engagement may require several informal interactions before it is appropriate to initiate a support relationship, which typically is a two-step process:
 - ✓ **Welcome** – Introducing the survivor to an appropriately experienced peer-support-worker; explaining how peer support works; and building their confidence in the potential for a helpful and supportive relationship;
 - ✓ **Share** – Understanding the survivor’s context; sharing lived experiences and appreciating current challenges and aspirations to build trust and confidence in the relationship; and together assessing the options for building a relevant and appropriate recovery pathway.
- **Integrate:** Working openly and honestly with the survivor to determine their preferred recovery pathway; choosing the most relevant and appropriate support provider(s); and enabling and supporting their decision to access a preferred or appropriate mix of support including:
 - ✓ **Peer support** – enabling access to one-on-one or peer group support including facilitating supportive inclusion of whanau/family, life partners and ‘significant friends’ as appropriate;
 - ✓ **Counselling and/or social service assistance** – enabling and supporting access to trusted professionals to provide relevant therapeutic and/or social service support for their recovery journey; and
 - ✓ **Other support** – enabling and supporting access to other relevant support providers that offer potential to help survivors navigate particular challenges and assist their recovery.
- **Support:** Enabling the peer support options; collaborating with survivors to co-create and evolve a peer-supported recovery pathway;
 - ✓ **One-on-One** – providing one-on-one support including engaging with whanau/family, life partners and important friends as appropriate;
 - ✓ **Peer Group** – facilitating positive participation in a peer-support group; helping survivors to work with peers to emerge and sustain an appropriate recovery pathway; and
 - ✓ **Workshops** – supporting and enabling survivors by facilitating workshops that educate, instill hope and build confidence in recovery by learning from and with peers and other professionals.
- **Monitor:** Identifying opportunities to improve support outcomes and ensuring that survivors can access a sustainable network of experienced peer-support-workers:
 - ✓ **Survivor Records** – confidential and consented personal records, including key session outcomes, that enables effective planning, coordination and integration of support activities;
 - ✓ **Session Assessments** – confidential and periodic assessments completed by survivors that ‘rate’ the quality and effectiveness of their peer-support relationship; and

- ✓ **Outcome Reporting** – quarterly national summary analysis of peer-support activities, overall outcomes and improvement initiatives that inform national peer-support strategies, policies and funding arrangements. Consistent with MSA Confidentiality Policy, these reports do not include any individual survivor information.

CONNECT

Making a meaningful connection with survivors requires opening the door to a welcoming and safe environment and encouraging their participation in a peer-supported journey towards recovery – a journey full of hope and possibility and not focused on the past and what is wrong or needs to be fixed, but on discovering the potential for a different future.

Approaching connection – policies that matter

Raising awareness – opening the door:

Making a connection – welcoming engagement

Promoting hope, building rapport and establishing trust

Creating safety

Demonstrating the value of a peer-support relationship

Approaching connection – policies that matter

While there are a range of MSA policies (refer Policy Frameworks listed on Page 11) that matter in guiding the development of peer-support relationships, there are two policies that have particular relevance in connecting with survivors in Aotearoa – Working with Māori (connecting with the Tangata Whenua) and Working with Offenders (connecting with perpetrators).

Working with Māori

MSA recognises the Treaty of Waitangi and honours the special bi-cultural relationship with the indigenous people of New Zealand, the Tangata Whenua (refer MSA policy Working with Māori)

This policy has three core elements' that together reflect MSA;'s approach to working with Māori:

- ✓ **Being effective for Māori** by:
 - Seeking to deliver services that are responsive to the needs and perspectives of Māori in a culturally appropriate manner; and

PEER SUPPORT PRACTICE GUIDELINES

- Creating and maintaining a service that is responsive and respectful to the needs and perspectives of, and is culturally safe for Māori.
- ✓ **Being responsive for Māori by:**
 - Growing the capability and capacity of our people through appropriate training and development for all staff to enable them to deliver services that respect Māori values and support Māori processes.
 - Incorporating Māori values and perspectives in our policies, practices, processes and culture.
 - Seeking relationships with ropu Māori that are strategic and mutually beneficial.
 - Recognising that partnerships with Māori organisations are vital to the provision of effective and responsive services for Māori, and viewing partnership as a continually evolving relationship that balances the duties and obligations of kawanatanga and the aspirations of rangatiratanga.
- ✓ **Ensuring participation by Māori by:**
 - Providing opportunities to involve Māori in decision-making, planning, development and delivery of all services.

Working with offenders (perpetrators)

Males affected by sexual abuse include perpetrators as well as survivors (victims) and sometimes those affected may have been both survivors and perpetrators and in need of recovery support for either or both experiences. While MSA member organisations may elect to refer perpetrators to other organisations that specialise in helping them, MSA policy (Working with Offenders) enables member-organisations to work with survivors who have also been perpetrators.

The core elements of that policy, which is essentially designed to assure the safety of survivors, are as follows:

- MSA member-organisations are survivor focussed i.e. they provide peer support for male survivors of sexual abuse;
- Male survivors who present with overlapping offender issues (offenders) must be properly assessed before providing peer-support services;
- Male survivors with overlapping offender issues (offenders) should not be included in survivor peer-support group activities;
- Where the capacity or skill level of the peer-support-worker cannot meet the offender's needs, referral to appropriate services will be engaged;
- Where working with offenders increases the risks of a loss of service integrity or negative reputational impacts appropriate mitigation action must be initiated;
- Where working with offenders presents issues that threaten the safety of children and young people and/or other male survivors then immediate mitigation action must be initiated.

Raising awareness – opening the door:

Peer-support-workers have a role to play in raising community awareness of the male survivor community; providing a connection opportunity for other male survivors; promoting viable support and recovery options; and encouraging engagement with an appropriate peer support organisation. Potential outreach activities could include:

- ✓ Providing community education and social marketing programmes to raise awareness, promote the hope and reality of recovery and reduce the fear of disclosure;
- ✓ Participating in relevant forums, meetings, workshops and conferences to ensure the inclusion of a male survivor perspective and raise critical awareness of male survivor issues, incidence and victimisation to balance unhelpful public profiling;
- ✓ Engaging with Government and community organisations working within the sexual violence (harm) sector to increase awareness of male survivors victimisation, promote peer-support and recovery options and encourage the identification and referral of male survivors to organisations offering peer-support; and
- ✓ Encouraging partnership with organisations working within the health sector generally, and the family and sexual harm sector in particular, to include a peer-support offer (internal or referral) for male survivors;

Making a connection – welcoming engagement

The nature of the initial encounter between the peer-support-worker and a survivor can be a critical point in enabling the opportunity for both parties to connect. A survivor's call for recovery support can take many forms – referral from another survivor or a supporter or via another support professional or organisation; directly approaching a peer-support-worker or a peer-support service centre; or presenting in another environment (e.g. prison) or in a different crisis scenario (e.g. family violence, addiction).

Ideally, peer-support-workers should have the opportunity to connect with survivors in a welcoming environment (a relaxed confidential meeting place) for a pre-arranged conversation. However, the initial connection may come from a chance social meeting, a workplace encounter or a situation where the environment is less than ideal. And sometimes the call for support will require the peer-support-worker to meet with the survivor in a neutral space or a place where they both feel safe.

Whatever the circumstances of the initial encounter, it is important that the survivor feels welcome and safe to talk at whatever level they choose to engage.

Making the initial connection count requires the peer-support-worker to be ever mindful of the six peer-support values (*mutuality, recovery and hope, experiential knowledge, self-determination, participation and equality*) and to have a primary focus on building the relationship by:

- ✓ Being purposeful – always coming from a selfless, survivor-centric position of '*enabling the wellbeing of all survivors*'
- ✓ Listening empathetically and without judgement to understand their situation;
- ✓ Being culturally sensitive, appreciating and valuing their world view;

- ✓ Assuring confidentiality;
- ✓ Establishing credibility by explaining 'who you are and what you do'; and if appropriate sharing of relevant 'lived experience';
- ✓ Offering help and support; and if appropriate,
- ✓ Presenting the peer-support option as co-creating a hope and recovery journey rather than a problem-solving experience; and
- ✓ Making a genuine offer to connect.

Promoting hope, building rapport and establishing trust

For many survivors the hope of leading a fulfilling life within their community is often obscured by experiences and circumstances that present significant barriers to change and recovery. The role of the peer-support-worker is to shift the conversation from problems to possibilities; to engender hope by encouraging survivors to envision and move toward a different future for themselves.

Exploring strengths

To shift the conversation away from problems (what is wrong) towards what is possible, and to build the self-confidence of survivors to embrace a different future, requires the survivor to believe in their potential for change. This can be encouraged by focusing on their strengths and showing how these positive capacities can underpin their wellbeing journey.

Some questions that may be helpful in working with survivors to uncover their capacity for change:

- ? Have you experienced a time when you have been able to sustain your recovery or enjoyed a sense of wellbeing for more than a day? What do you think helped to make this possible?
- ? What are you good at? What have you been good at in the past?
- ? Suppose you woke up tomorrow feeling well and in control of your life. What would be some of the things you would notice that would tell you had suddenly gotten better?
- ? How have you survived the things that have happened in your life? What strengths have kept you going?
- ? How could I help to support your recovery? In what way could I support you that would be different from the support you have received so far?

Sharing your recovery journey

Peer-support-workers can promote a hope and possibility focus by sharing their own 'lived experience' – using their recovery journey to show what is possible.

If this sharing is done in a manner that embraces the peer-support-values and the core competencies of hope, co-learning, mutuality, worldview and co-creation, then it can dissolve stigma, shame and isolation and open the way to a productive peer-support relationship.

To be effective in sharing their recovery journeys peer-support-workers should be:

- ✓ Responsive and offer to share and not presume to share;
- ✓ Clear about why they are sharing their lived experience;
- ✓ Skilled at highlighting elements of their story that could be particularly relevant to the survivor;
- ✓ Conscious that all lived experiences are different and not glorifying their own recovery journey;
- ✓ Able to tell their story in a caring and responsive way that does not overwhelm the listener on an emotional level;
- ✓ Able to demonstrate that a personal practice of recovery can change a person's life

Creating safety

Co-creating a safe environment

It is important that peer-support-workers are ever mindful that the survivors they work with, however 'together' they may seem, may be experiencing the ongoing effects of trauma, often complicated by stress related to health, economic, social or environmental factors (e.g. chronic illness, addiction, social isolation, unemployment etc.). Denial, resistance, non-compliance, manipulation and the overuse of alcohol and drugs and other addictive behaviours are some of the ways survivors may try to cope and to tolerate the pain they are experiencing.

Peer-support workers need to understand each survivor's presenting behaviours within the context of their individual experience and to work with the survivor to understand how those behaviours may affect their safety and wellbeing or the safety and wellbeing of others. When survivors feel safe, and have the skills for ongoing self-protection, they will be better able to let go of unhelpful behaviours and 'move towards' recovery.

To create and sustain a safe environment for survivors engaged in peer-support activities, peer-support-workers should:

- Listen with empathy and without judgement to understand and acknowledge the survivor's current situation;
- Be careful to avoid saying or doing anything that could trigger symptoms of a pre-existing trauma or retraumatise the survivor;
- Understand how to use grounding techniques to help survivors who have been triggered to return to the 'here and now';
- Recognise situations where survivors may need to be referred to other people for support or professional advice;
- Ensure that they practice their own self-care and maintain appropriate limits (boundaries) with the survivors they are supporting; and
- Understand the safety risks that present within the survivor's current situation (for the survivor and other people) and work with the survivor to develop and implement appropriate risk management strategies (a safety plan)

Maintaining your wellbeing

Peer-support-workers who engage in a peer-support relationship are embarking on a co-learning journey with a survivor, a journey that recognises the differing worldviews and situations of both participants. While the intention is that both the peer-support-worker and the survivor work together as equals to maintain a safe relationship space for each other, it is important to recognise and acknowledge the special facilitation-navigation role of the peer-support-worker.

Effective peer-support-workers are typically people who have either totally recovered from their traumatic lived experience or learned how to successfully manage the residual impacts of that trauma. However, as survivors, many remain susceptible to situational triggers that can resurface old behaviours and disrupt their peer-support-relationships. This is why it is imperative that peer-support-workers mitigate the risks of failing to manage or recover from situational trigger-incidents by participating in regular (at least monthly) supervision (co-reflection) meetings (refer to MSA Supervision Policy).

In simple terms, if the peer-support-worker can maintain their wellbeing they not only bring a sustaining strength to the peer-support relationship, they also demonstrate what is possible to the survivor they are working with.

Demonstrating the value of a peer-support relationship

It is important that survivors who are sceptical or cautious about engaging in a recovery journey do not confuse peer-support with therapeutic interventions offered by counsellors, psychologists and psychiatrists. Peer-support-workers have a critical role in helping survivors to see the potential of a peer-support relationship and to understand how it can be different from a clinically-based recovery therapy.

Demonstrating the value of peer-support is best achieved by the peer-support-worker practicing what it means from the first encounter, observing the peer-support values and applying the competencies to focus on the survivor and collaborate with them to establish what support they need – what has happened to them, how they would like things to be different and what they think would enable them to move forward.

Simply identifying what is wrong with them, what problems they have and how they can be fixed runs the risk of retraumatising them or reminding them of unhelpful experiences with a deficit-based therapeutic approach. More importantly, this approach will obscure the real potential of engaging in a the strengths-based and future focused peer-support relationship.

Depending on how the conversation unfolds, the peer-support-worker may have the opportunity to share their lived experience and show how peer-support relationships have 'changed their lives' – demonstrating what is possible (fostering hope) – but in a way that doesn't 'glorify their own recovery journey' and diminish their selfless focus on the survivor's wellbeing.

INTEGRATE

It is important to remember that it is the survivor who determines what recovery pathway they want to pursue. The role of the peer-support-worker is to enable and support that choice by understanding the survivor's situation and their potential, working with them to build a strengths-based recovery platform, and together moving towards the future that they want for themselves. The mapping of the way forward is sometimes called a recovery plan but it is more appropriately termed a recovery journey for it is focussed on an uncertain aspirational future that will emerge as the survivor's individual potential is released.

Framing a recovery journey

Co-creating a way forward

Framing a recovery journey

Framing the recovery journey is about **integrating** what the survivor and the peer-support-worker know about where they are (the current reality), where they need to head (their aspirations for the future), how they intend to 'move towards' that future, and who they need alongside to enable and support the recovery journey.

Some would describe this as developing a Wellness Recovery Action Plan (WRAP) but it is important to recognise the peer-support-relationship as 'holding space' for an emerging recovery journey – a journey that has an intentional direction but not necessarily a project plan with hard goals or milestones.

The concept of 'moving towards' is more like a 'one step at a time' approach, which admits the likelihood of roadblocks and disruption and shifting 'goals' as the most appropriate recovery pathways emerge. For many survivors this journey will always be a work in progress.

Being an effective 'guide'

The role of the peer-support-worker in facilitating or navigating a recovery journey with a survivor is concerned with moving the survivor's current reality forward towards their future desired state – working together to close the gap between what is and what could be.

For that journey to be successful it should be:

- ✓ Oriented towards promoting recovery rather than simply minimising the impacts of what has happened;
- ✓ Based on a clear understanding of the survivors current situation and their own aspirations for the future;

- ✓ Enabled by a shared understanding of the collaborative roles of the peer-support-worker and the survivor;
- ✓ Focussed on co-creating a way forward that builds on the capacities, strengths and interests of the survivor;
- ✓ Avoiding formalised 'therapy-type' environmental settings' in favour of working in informal, relaxed community based settings; and
- ✓ Flexible and forgiving, allowing for uncertainty, setbacks and disconnections as inevitable steps on the path to recovery and self-determination.

Appreciating the context

The primary intention of the Connect phase (Engage & Share) is for the peer-support-worker and the survivors to get to know each other and to establish the foundations of a productive and rewarding peer-support relationship.

However, during this phase peer-support-workers also need to discover and understand the current situation (current reality) of the survivor and to form a shared view of what needs to happen to enable a different future.

It is important for the peer-support-worker to appreciate what things the survivor would like to be different (a view of their future hopes and aspirations) and to agree the things that may present roadblocks (a view of their critical presenting issues) including the risks to their personal safety and potentially the safety of others.

Taking a holistic view

It is also important for the peer-support-worker to take a holistic view of the survivor's current circumstances, recognising that all of their life domains contribute to their current situation and not just their trauma experience.

General areas of careful enquiry (preferably empathetic co-discovery) could traverse:

- Accommodation, housing and living independence;
- Financial, legal and institutional independence
- Relationships and social and cultural support structures;
- Leisure and recreation
- Education and employment;
- Medical, mental and spiritual wellbeing

Only with a clear understanding of the survivor's situation can the peer-support-worker work effectively with the survivor to consider a way forward together – identifying and agreeing the next steps towards recovery including what needs to be in place to support and sustain a positive and safe recovery environment.

Sustaining a hope and recovery focus

One of the key differences between a deficit-based therapy program and a recovery-based peer-support program is that the former is typically focussed on the past and the problems that need fixing, while the latter approach is focused on the future and what

is possible – building on strengths that can enable a different future and not focusing on weaknesses that disable that future and need to be overcome.

If the recovery program is concerned with identifying problems or what is wrong, it will reinforce the survivor's connection with the past, resurfacing unhelpful memories and feelings (e.g. shame, guilt, anger etc.) that compromise the possibility of moving forward in a productive peer-support relationship.

If the recovery program is strengths-based it will minimise the focus on 'what's wrong', diverting attention from the past and bolstering hopes for a different future that have previously been diminished by trauma. A focus on strengths and what is possible helps to restore a sense of personal dignity that will enable the self-disclosure and interpersonal trust that is necessary for building an effective peer-support relationship.

Co-creating a way forward

Focusing on 'moving towards'

Effective peer-support requires careful management of potential 'power and privilege' behaviours that can disrupt and undermine the peer-support relationship. These behaviours, which are inconsistent with essential peer support values (mutuality, equality, co-creation etc.), can emerge whenever a peer-support-worker shifts their focus, albeit unintentionally, from a selfless, survivor-centric and enabling focus to an all-knowing problem-solution focus.

The IPS concept of 'moving towards' recognises the importance of the peer-support-worker working alongside the survivor in an equal partnership, to 'emerge' a recovery pathway together. And so there is a careful balance required to ensure that a 'recovery plan' is essentially a co-created and flexible guide to a potential recovery pathway and not a rigid recovery project plan. It is about agreeing what the peer-support-worker and the survivor need to do together to make a difference now and how they can move forward towards recovery together, and not about the peer-support-worker setting goals and milestones for the survivor that presume a more-certain future.

This approach does not ignore the fact that sometimes peer-support-workers, based on their knowledge and experience, may need to be more assertive in offering advice to survivors, especially where they genuinely believe that the potential for recovery may be seriously compromised or the safety of any person could be jeopardised.

Considering support options

A peer-support relationship can provide survivors with an essential source of support as well as a 'safe anchorage' and/or reference point, but it may not be the only form or source of support that is needed to enable and/or sustain the survivor's recovery journey.

It is an essential part of the peer-support-worker's role to understand and appreciate the survivors current support connections, to know what other support options are available, and to be able to articulate the potential benefits of engaging with other support options – always acknowledging that it is the survivors decision to engage additional support.

It is always helpful if the peer-support-worker has trusted connections with specialist support people (e.g. counsellors, social workers etc) so that they can recommend these support options with confidence and where appropriate help to engage their assistance. However, for some support options, where the knowledge of the peer-support-worker is limited, it may be appropriate to include other people who can provide relevant community or expertise-based support in the recovery conversations – widening the support framework to include other contributors, but always with the agreement of the survivor.

The peer-support-worker can make a valuable contribution by helping the survivor to navigate these other support relationships and by providing a 'safe-place' to retreat and re-energise when the 'going gets tough'.

Some of the other support options that may be relevant and should be accessible to the survivor could include (for example):

- ✓ Community-based support:
 - Special relationships – partners, close friends and supporters;
 - Family/Whanau – members of the immediate or extended family;
 - Community-based social, cultural and spiritual organisations;
- ✓ Expertise-based support;
 - Counsellors;
 - Social Workers;
 - Medical Clinicians;
 - Crisis support providers;
 - Addiction support providers; and
 - Other support specialists or organisations.

Working with Whanau, family and special relationships

Protecting the relationship

Accepting that any decision to involve family, partners and close friends in a survivor's recovery journey must be made by the survivor, considering the potential of these close relationships to be a positive or negative recovery influence is essential to understanding the survivor's current reality and their opportunities for positive change.

For some survivors these special relationships may well be the origin of, or a contributing factor to, their traumatic experience. Nevertheless, they are often relationships that remain critical anchor points in the survivor's life. Accordingly, peer-support-workers need to carefully explore the relevance of these relationships, appreciate the support-opportunities or roadblocks they may present and work closely with survivors to decide if engagement would be helpful to their recovery journey.

If family, Whanau, partners and or friends (the supporters) are to be engaged to support the survivor's recovery, then the peer-support-worker should help to facilitate a conversation that is:

- ✓ **Hopeful** – enables and encourages the supporters to express their hopes and concerns for the wellbeing of the survivor;
- ✓ **Empathetic** - Invites and supports the survivor to share the challenges they are facing and clarify any misunderstandings of any concerns expressed by their supporters;
- ✓ **Responsive** – encourages an open (selfless, survivor-centric) offer of assistance from the supporters that does not presume what is needed but presents the survivor with an opportunity to enlist their support;
- ✓ **Supportive** presents an opportunity for the survivor to talk about how these relationships could best support their recovery; and
- ✓ **Open-ended** – explores the go-forward options and seeks agreement between the survivor and their supporters about what should happen next.

The critical issue with peer-support conversations that are extended to include other supporters is that they remain **survivor centric** – what the supporters can do for the survivor and not what the survivor needs to do for the supporters. This approach distinguishes the conversation from the addiction and relationship resolution conferences which tend to be problem-based and set resolution expectations (goals) which may include all the parties involved.

This is not to suggest that these conferences cannot make a valuable contribution to resolving specific issues or challenges for a survivor. It is simply to say that this approach can disrupt (disconnect) the peer-support relationship by shifting the focus of this relationship away from the forward-looking recovery journey of the survivor.

Facilitating these expanded conversations can be very challenging and peer-support-workers who invite other people to contribute within a peer-support relationship setting should ensure that they have the appropriate training and experience to 'hold the relationship space' for the survivor they are supporting.

Managing cultural sensitivity

New Zealand hosts a culturally diverse community within which there are differing cultural traditions regarding the engagement of family as participants in the 'recovery journey' of a family member. Usually the survivor will be aware of these traditions and it will of course be their choice as to whether they engage with their family or not. However peer-support-workers have an obligation to be aware of, and to respect, the survivor's family context and the cultural traditions that may apply to any family engagement. In this respect it is expected that peer-support-workers will be familiar with the cultural aspects of 'Working with Maori' (refer to MSA policy) and the protocols relating to engaging with Whanua, and also to have some knowledge of how to engage with the Pasifika families in the community.

Peer-support-workers should recognise situations where, due to cultural traditions or a lack of knowledge or experience, it may not be appropriate for them to facilitate a family engagement or indeed the engagement of partners and close friends. In these situations it is important to enlist the appropriate help and support but to do this in a way that strengthens the peer-support relationship.

SUPPORT

For many survivors, peer-support offers a safe place to be with people that have walked where they have been, a haven within which they can explore with their peers what may be possible for them. But often it is not the only support they need. Effective peer-support not only provides a gateway to other support options but also a safe, non-judgmental and hopeful space for survivors to return to at times when other support options become challenging or seem to be ineffective.

Offering a menu of peer-support options

Supporting multiple pathways to recovery

Providing short and long-term peer-support options

Offering a menu of peer-support options

The format of a peer-support relationship should respond to the survivor's individual recovery needs and challenges and their right to determine their own recovery pathway. Options range from individual (one-on-one) support through to peer-group support and participation in expert and peer-led workshops or a combination of all three.

One-on-one peer-support

Connection

This is the typical entry point to peer-support and for some survivors it may continue to be their preferred engagement. It is usually the first point of contact between the peer-support-worker and the survivor (refer '**Making a connection – welcoming engagement**' - refer Page 24) and the location and the format of the meeting can vary as it adapts to the survivor's particular circumstances.

There are three interrelated objectives for these initial one-on-one meetings:

- To 'make a connection' in a way that '**promotes hope, builds rapport and establishes trust**' (refer Page 25). In other words to build the basis for an ongoing and effective peer-support relationship;
- To appreciate the survivors current reality – to understand the challenges they face and the recovery support they may need;
- To co-create a recovery pathway – exploring options and agreeing on an appropriate way forward together, obtaining consents and gathering agreed personal data ('**framing a recovery pathway**' – refer Page 28) and, if appropriate, committing to 'next steps'.

Options

At the conclusion of the initial meeting(s), the options explored with the survivor should include:

- Continuing with one-on-one peer support meetings, preferably on a scheduled basis, but respecting the survivors right to determine the 'interventions' in their own recovery journey;
- Referral to a peer-support group via a one-on-one meeting with the group's peer-support-worker to assess compatibility with the group members;
- Considering other support options – counselling, social work, addiction services etc. – as stand-alone support or integrated with peer-support options; and
- Engagement with special support relationships.

Approach

One-on-one meeting protocols and practices should observe all peer-support policies and embrace the peer-support values but peer-support-workers should also pay special attention to the following principles (the three P's):

✓ **Being prepared:**

- Taking time to re-familiarise themselves with the survivor's current circumstances, recovery journey and recent history;
- Making the meeting environment safe and welcoming and being on time for the meeting; and
- Being in a positive personal space with a hope and recovery focus.

✓ **Being person-centred:**

- Committed to 'selfless service' – putting the survivor's interests first;
- Practising empathetic listening – always listening to understand;
- Appreciating and respecting the survivor's worldview – being non-judgemental;
- Acting honestly and with integrity – being open and speaking plainly, carefully sharing what you know to be true for you; and

✓ **Being possibility-focussed:**

- Encouraging openness, self-discovery and self-determination – remembering it is the survivor who makes the choices and decisions in respect of their own recovery journey;
- Focussing on what's possible and not what's wrong – building on strengths and sharing lived experiences in a way that affirms the survivor's potential and hope for recovery.
- Moving towards the future together – emerging a hopeful and flexible recovery pathway (one step at a time) and not pursuing a predetermined goal-directed recovery plan.

Peer-group support

Peer-support groups

"Peer support groups are a valuable service and resource that brings together people affected by a similar concern so they can explore solutions to overcome shared challenges and feel supported by others who have had similar experiences and who may better understand each other's situation⁷."

MSA peer-support groups are groups of survivors who have agreed to be members of the group and abide by the protocols established by the group. Meetings are facilitated by experienced paid or volunteer peer-support-workers who are typically also survivors.

MSA policies also permit the establishment of special peer-support groups for offenders. However, offenders are not permitted to participate in a survivor peer-support group.

The **benefits** of group peer support are wide-ranging and can include:

- ✓ the provision of a safe environment to freely express and share emotions and thoughts about one's current situation and challenges;
- ✓ sharing of information and experiences and learning from others in similar situations that can help provide ideas and solutions to overcome challenges that group members are facing;
- ✓ the opportunity to build new relationships and strengthen social support networks which helps to reduce isolation and feelings of loneliness;
- ✓ sharing of knowledge about available community resources and practical support to help group members access resources and support, for example, helping others complete administrative procedures to access social and disability benefits, employment programs and so on.

Setting up peer-support groups

The peer-support-worker's⁸ role

Peer-support-workers lead and facilitate discussions in a group and take responsibility for the development and functioning of the group.

They organise meetings, show up on time, open the meeting, provide guidance and listen to group members and arrange for a substitute peer-support-worker if they are not able to attend.

It is preferable that peer-support-workers have lived experience, but they are not expected to have answers to all the questions that come up during group meetings.

⁷ This section has been informed by the publication: *Creating peer support groups in mental health and related areas* – World Health Organization

⁸ This role is often referred to as the 'facilitator' role. These guidelines prefer the term peer-support-worker to underline the particular peer-support nature of the facilitation role.

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Once a group is established and has regular participants, the peer-support-worker may look for members who can take over when they are absent or not able to continue any more.

When the group is large it is very useful to have more than one peer-support-worker, w. All peer-support-workers should be appropriately trained and all should have access to supervision.

In addition to upholding peer support values and complying with relevant peer-support policies, effective group facilitation involves:

- ✓ Ensuring that members are aware of, and endorse, agreed group protocols (rules);
- ✓ Paying attention to members as they talk about their personal experiences;
- ✓ Being non-judgemental and mindful of the process;
- ✓ Facilitating discussion and allowing everyone to speak who wishes to;
- ✓ Ensuring members are adhering to the agenda and keeping to time;
- ✓ Encouraging a sense of security and safety within the group;
- ✓ Knowing your own limitations and boundaries;
- ✓ Seeking feedback from the group;
- ✓ Managing conflict within the group;
- ✓ Making sure members feel supported;
- ✓ Knowing when to advise group members to seek additional support;
- ✓ Summarising any key issues raised or decisions made by the group;
- ✓ Providing information on other potentially useful support services available outside of the group

Membership of the group

MSA peer support groups usually have closed membership . Unlike open membership groups people cannot just show up and join. Only people who have been accepted into the group are allowed to attend meetings. People interested in joining the group are usually 'screened' by the group's peer-support-worker and are invited to meet current members before the start of the peer support meeting in order to understand needs and expectations, and whether there is a good fit with the group. Closed membership allows members to get to know each other better over time, resulting in trusting relationships and a secure environment to share confidential experiences.

It can be helpful to talk about the significance of the group as an entity and each other's presence in the group. For some people, it can be important for their recovery to know that their presence is meaningful and important for the other members. Membership of a group can provide people with a sense of purpose and connectedness.

Due to the members' attachment to and reliance on the group and its members, the peer-support-worker must inform the group in advance when a member is not able to attend a meeting.

New members

Consistent with these guidelines (refer **CONNECT** above) , all new members should be met in advance by the group's peer-support-worker in order to understand their personal needs and expectations, to assess the potential of a peer-group to enable and support their recovery, to explain how the peer group works and to emphasise the importance of the group protocols.

As a minimum, new members should be informed about:

- ✓ Group protocols (sometimes called rules), particularly around confidentiality;
- ✓ Guidelines around punctuality and confirming attendance;
- ✓ Brief description of the process of meetings and the facilitation role;
- ✓ Brief insight into what peer support means and how it might be of benefit;
- ✓ Meeting times, duration and venue; and
- ✓ Who to contact concerning questions or information about meetings.

Group protocols (rules)

A "set of ground rules (protocols) for the operation of peer-group meetings should be agreed by the group members. These protocols help to set boundaries that will let members know what to expect from the group and help to provide a safe place for people to meet. They also set out how people are expected to behave with one another in order for the group to run more effectively for everyone.

Typically, members will be asked to endorse a standard set of protocols that have been developed to be comply with MSA policies and embrace peer-support values. However, it is important that members have the opportunity to discuss the protocols, make appropriate changes to clarify their meaning and formally agree to their adoption. Copies of the agreed protocols should be distributed to the group and people attending the group should be regularly reminded about the 'ground rules' for their participation.

Some principles to be considered in developing peer-group protocols are listed below as an illustration:

- ✓ Maintaining confidentiality (see below). What is said in the group stays in the group. Group members leave only with the shared knowledge and wisdom of group members' lived experiences rather than names or other personal information that would identify people.
- ✓ Not being judgemental or critical of other members – accepting their worldview.
- ✓ Recognizing that thoughts and feelings are neither right nor wrong and showing acceptance.
- ✓ Having the right to share feelings or not. People should be encouraged to speak during the meetings, but if they wish just to "be there" at times the group will accept that.
- ✓ Having empathy (fully comprehending the impact, having experienced the situation)

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- ✓ Having awareness of not overstepping each other's boundaries and promoting empowerment to encourage independence, not dependence.
- ✓ Appreciating that each person's feelings are unique to that person and need to respect and accept what members have in common and what is specific to each individual.
- ✓ Respecting the right of all the members to have equal time to express themselves, and to do so without interruption. However, allowing people who may be in crisis to have more time to talk through their issues.
- ✓ Sharing responsibility by taking turns in various group roles such as meeting co-ordinator, coffee-maker etc.

Confidentiality

Respect for the privacy of others within peer-support groups is particularly important

People often share personal stories and are often only able to do so after having developed a trusted relationship with group members. It is very important to respect this trust and for group members to keep all information and stories shared during meetings confidential, including, where requested, their participation in the group.

If someone needs to gather information about group members, they should first ask for their consent. The person should clearly explain to them why they would like this information and how it will be used. It may be interesting to conduct research within the group, but members should not feel pressured to participate. The person's consent to reveal personal information to third parties (e.g. counsellors, social workers, families) is also needed.

Information about members should be kept in a secure place to prevent others from having access to private information, even by accident (e.g. locked drawer or a password protected computer file).

Please refer to MSA Confidentiality policy for more information.

Running a peer-support group

The first meeting

The first meeting is important and often sets the tone for the group. The number of people attending should not be the main concern. What is more important is the connection with the people who do attend. Some of the steps to consider are outlined below, but these are only suggestions and the group may decide on other methods for running the group that may be more appropriate.

- **Set up** Bring an agenda and any other resources the peer-support-worker will need for the first meeting. It is important that the meeting room is easy to find and feels welcoming.
- **Greet people:** It is a good idea to have the peer-support-worker(s) at the door to welcome people

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- **Sharing stories:** Many people will be nervous or reluctant to speak at a first meeting, so it is really helpful for peer-support-workers to open the conversation by sharing information about themselves and what they bring to the group, as well as describing their aims for the group. It is important to briefly discuss confidentiality at this point although it might be more appropriate to establish overall group rules at the second meeting.
- **Discuss barriers to attending support groups:** It is important to understand and discuss with the group some of the challenges and feelings people have in relation to attending support groups. It is important to identify and acknowledge these challenges and agree how the group will try to address them.
- **Encourage sharing between members:** Sharing within the group provides a common ground on which people can start to identify with others and trust that they are not alone in personal challenges. It can also help people understand that everyone is not necessarily there for the same reason. For a while, people may say they just want to hear from other people. It may take some time for the group to become comfortable speaking about the specific needs that they have.
- **Identify common experiences:** There may be quite a range of challenges that bring people to a support group and it is important to try to identify the most common experiences of the group so that people feel connected on various levels with each other.
- **Provide a contact sheet:** The contact sheet allows the peer-support-worker to contact participants on the list with future meeting information and general information. People may not feel comfortable putting their name down the first time, so it is important to let them know they do not have to.
- **Identify communication needs:** It's important to have the group members identify how they would like to receive information. Email can be the most time-efficient, but there are other modes of communication that also work such as phone calls, text messages, WhatsApp messages, or other forms of group messaging services that are accessible for all group members. Listening to group members and knowing their preference for communication is important to keep the group together and functioning well. Preferred method of contact can be included on the sign-up sheet to identify the best options.
- **Meeting closure:** It is often helpful to go around the group to see if anyone would like to say anything. This might include:
 - If there was something in particular that they gained from the group meeting that was especially meaningful;
 - Something that they were grateful for;
 - Something that wasn't addressed that could have been useful;
 - Something that can be improved or done differently for them to feel more at ease

The second meeting

Discuss protocols: In addition to other regular agenda items, you may want to include a discussion of the group protocols during this second meeting.

How to be a good group member: Listening and supporting group members as they discuss their experiences and feelings is an important aspect of peer support groups. Being a good group member can encourage sharing and honesty, and be more beneficial for both the individual and the others in the group (please refer to 'How to be a good group member' below).

Sharing responsibilities: Sharing the responsibilities in a peer support group can help prevent 'burnout'. One way to identify and clarify roles is to create a volunteer sign-up sheet. It is important to create this list with your group and remind members that they will only be asked to do something if they can and are comfortable doing it.

Topics and speakers: Group members may find it beneficial to have guest speakers share information about topics of interest relevant to the individual and group. If there is interest, have members share what topics or speakers they would find meaningful.

Ongoing meetings

Starting the meeting: Reminding members of the purpose of your group and saying a word about confidentiality may be a good way to open ongoing meetings. You also need to create a relaxed atmosphere that favours confidence and discussion. Telling a personal story may also be a good way to do so. Members may also want to start by talking about a particular issue or by sharing their own reflection on a topic. They should be encouraged to do so. Having a welcome and warm environment conducive to sharing will be critical to the success of your meetings.

Taking a break: It is a good idea to take a break during the meeting. Offer refreshments and encourage people to move in the room. It will provide an opportunity for them to talk one-on-one, which is particularly useful for those who find talking in a group difficult. Also, it can contribute to creating a more relaxed and informal atmosphere where group members can connect on different levels.

Content of the meetings The actual content of meetings may include informal sharing as well as more formal components such as providing good quality up-to-date and locally relevant information, drawing upon external resources and speakers from time to time in line with needs and the wishes of group members. However, it is recommended that the group follow some basic rules to make sure that the content of the meetings remains relevant.

Group members are encouraged to freely discuss any topic that is relevant to their life at that time, including sharing their experiences since the group met last, any problems that arose and how these were managed. Members should be encouraged to share their own views and possible ways of handling challenging situations, yet it is important to promote conversations that flow both ways and not just advice-giving.

Listening attentively without interruption and maintaining a neutral attitude, always allowing objective listening without invalidating or trying to change people's feelings is important.

This creates space for people to create their own meaning, seek input or just share based on their own choice.

Group members should avoid making offensive or insensitive comments, sexual remarks or jokes. If group members feel distressed during the discussion of a certain topic, they should feel free to step out until they feel able to participate again.

There should be no pressure to share experiences. Some members may just like to observe and hear others in the first few meetings and this may also benefit them. It is important to respect that each experience is unique to the individual

Concluding the meetings

Before the group meeting closes, it is important to go around the group to see if anyone would like to share anything or if there was something that they gained from the group meeting which was especially meaningful. It is important to end on something positive. This might also be a particular achievement of a group member or recount a personal story of how someone managed a particularly difficult situation depending on what is relevant for the kind of group. Ending on a positive note can bring hope, encouragement and confidence to other group members. You can also collectively decide to support a particular group member who feels unwell until the next meeting.

How to be a good group member

It may be helpful to have a handout for group members, which could include the following suggested guidelines.

1. Keep what is said in the group confidential.

A major concern for some members is having their privacy respected. Be clear about what confidentiality means for the group. Members should not be talked about in any identifiable way outside the group.

2. Ask people if they want advice or a suggestion before you give it.

For many people, as soon as they hear a problem they have a tendency to start thinking about how to 'fix it.' However, sometimes people just need to say how they feel and aren't ready to start thinking about how to deal with the problem. Another thing to keep in mind is that one person's 'solutions' may not work for someone else.

3. Know that some people can be very intense and recovery-oriented.

At times, you may want to criticise or disagree with group members about aspects of their recovery journey. Remember that people may have different opinions and that no one has the right to judge another member for what kind of decisions they make.

4. Neglect, malpractice or abuse.

If there is a question of any neglect, malpractice or abuse of any group member or another person, the peer-support-worker will take appropriate action, in consultation with the member, to deal with such issues.

5. Understand that people in the group will be at different stages

For those who are still coping with the feelings of helplessness that often accompany the survivors of sexual abuse, remember that they need to be and feel listened to and understood. It can often make someone feel worse when another person tells them to “cheer up.”

6. Realise that people do not have to like everyone else in the group.

People do not need to share the same philosophy of life nor the same level of education or income to have a right to be in the group. All members should be made to feel welcome irrespective of their social, economic, marital or other status or their cultural beliefs and practices.

7. Realise that peer support groups cannot solve all personal problems.

Sometimes they can help people to clarify problems and find out where to get further support. Many problems or specific issues cannot be solved in the group. Members may be able to receive and benefit from suggestions, support or empathy, but they may also need to seek services of support outside the group.

Supporting multiple pathways to recovery

The peer-support ‘anchor’

The MSA Peer Support Model accepts that peer-support may not be the only support needed by a survivor to ‘move towards’ recovery but it does position peer support as an effective and potentially non-threatening entry-point in the recovery journey. And, as noted previously, an effective peer support relationship can also provide an effective anchor-point for survivors who need a ‘safe-haven retreat’ to sustain their recovery journey. Where survivors need to take time out from or exit other support arrangements or shift to an alternative arrangement, then the support of a trusted (lived-experience) peer can be invaluable.

It is not intended to position the peer-support-worker as the ‘ultimate recovery advisor’ as that would not only suggest an exclusive expertise that is inconsistent with the MSA (multiple-recovery-pathways) model, but it would also be in conflict with peer support principles and values that view the survivor as the ‘author of their own destiny’ – making their own decisions about their own recovery journey.

However, it is intended to recognise the pivotal role that a peer-support-worker can play as a trusted ‘recovery-guide’ – working alongside the survivor and applying peer-support principles and values to move towards recovery together.

Appreciating the potential in ‘community’

We all operate within multiple communities as we make our way through life. Our connections with our families and close friends, our work colleagues, our social networks and our cultural and spiritual communities will be more or less influential in shaping our life. Over time, these connections can be positive influences in our life, sources of ongoing strength and resilience that assure our wellbeing.

But they can also be negative influences, sources of lasting conflict and trauma that diminish our opportunity for living a meaningful life.

For many survivors, an essential part of their recovery journey is about 'rebuilding their community', remaking broken connections or building new connections that enable and support their recovery.

Peer-support-workers have an important role to play in this rebuilding process. Firstly by understanding and appreciating the dynamics of a survivor's community connections and secondly by enabling and supporting the development of connections that have the potential to play an important part in their recovery journey.

Community connections that can make a positive difference for survivors not only include the more obvious personal connections such as partners, special relationships and close friends and family and Whanau. They also include educational, work, social-cultural and spiritual communities that offer inclusion and a sense of belonging and community-based organisations that offer other forms of specific recovery support.

Accessing and integrating other recovery pathways

Recovery pathways

The recovery pathways available to survivors can be generally classified as follows:

- **Clinical (therapeutic) Pathways:** Recovery processes aided by the services of a healthcare provider, clinician, or other credentialed professional including, for example:
 - Levels of clinical care including residential and medication assisted;
 - Counselling and/or social work;
 - Psychiatric services.
- **Non-Clinical Pathways:** Recovery processes that do not involve a trained clinician, but are often community-based and utilise peer support including:
 - Peer-based recovery support;
 - Residential and community-based support; and
 - Educational, employment and/or faith-based recovery services.
- **Self-Help Pathways:** Recovery processes that involve no formal services, sometimes referred to as "natural recovery."

Integrating support

The MSA Peer Support Model provides for the integration of the different types and sources of support that may be required to enable and advance a survivor's recovery journey.

Integration means '*to combine things in order to be more effective*' and in this context envisages that it is beneficial to coordinate the different support options that may be 'wrapped around' a survivor's recovery journey – in essence for all support providers to work collaboratively with each other and the survivor.

The potential 'neutrality' of the peer-support relationship (shared, mutual, trusted, selfless etc.) presents an opportunity for that relationship to provide a stable platform for a survivor facing multiple challenges and dealing with multiple support providers. However it is important to acknowledge that there may be multiple peer-support based options in play (including organisation and community based support) and that the central co-ordinating role may be occupied by a clinical support provider.

Nevertheless for male survivors of sexual abuse (the survivors in this context) a peer-support relationship that is based on a shared-lived-experience and facilitated by a competent and trusted peer-support-worker should provide a safe anchor-point for an often rocky recovery journey.

The benefits of integrating the different support options for a survivor's recovery journey can include the following:

- ✓ Reinforces the importance of survivor-centric support – puts the survivor first and foremost as the central character within the support framework;
- ✓ Admits the reality that the survivor may be facing multiple issues and challenges resulting from complex trauma and requiring an integrated support-recovery framework;
- ✓ Guards against a single (supporter-based) view of the survivor's situation – admits multiple perspectives including intentional peer-support which ensures a hope and recovery focus to potential for a problem-solution focus;
- ✓ Helps to assure the survivors right to self-manage their own recovery – mitigates the potential for a single support provider to occupy an influential control position that can undermine the survivor's self-confidence in their own recovery; and
- ✓ Increases the potential for community engagement and support by ensuring that the recovery framework is connected with all of the survivor's current life-challenges.

Collaborative-integration

The MSA Peer Support Model expects that the peer-support worker will:

- Have gained a confidential and in-depth understanding and appreciation of the survivors 'current reality – their current situation and relevant history;
- Be aware of other non-survivor-based challenges that the survivor is facing;
- Be aware of the other recovery support options that are already in place or are available and may be helpful;
- Appreciate that a mix of recovery support options may be required for a survivor to 'move towards' recovery;
- Be open to engaging with other 'specialist-support-workers' to introduce, explain, and potentially facilitate the engagement of other recovery support options; and

It is important that peer-support-workers are fully aware of, and admit to, their own limitations as a 'recovery-guide' – acknowledging to themselves and the survivors they support that they may not have all the knowledge or skills necessary to advance and sustain their recovery journeys together.

Assuming the existence of a trust-based peer-support relationship and a survivor-centric approach to recovery then the peer-support-worker should feel confident in seeking the survivor's agreement to the introduction and/or integration of other support options.

Deciding how to facilitate that introduction, and assessing what level of integration with an existing peer-support relationship is appropriate, will depend on the circumstances but could involve the following choices:

- Simply referring the survivor to a trusted source of support, a support-worker or organisation that the peer-support-worker has confidence in based on previous experience;
- Meeting with the survivor and another support person(s), new or pre-existing, to explore what is possible and making an appropriate go-forward decision together; and
- Enabling and supporting the survivor to make their own choice altogether – raising awareness of the possibilities and the potential for integration of their support options and stepping back with a clear offer to support their decision.

Whatever the go-forward decision, it is critical that the survivor knows that the peer-support relationship will remain 'open and available' to sustain their engagement with other support options or to exit from those options and seek other more appropriate support.

Providing short and long-term peer-support options?

People who work with survivors know only too well that for many survivors their recovery journey never ends. It is often a life-long journey that is continually moving towards an aspirational future, frequently interrupted by ongoing challenges and sometimes disrupted by the re-emergence of past trauma. This is why the provision of effective peer-support must be flexible to meet both the short-term and longer-term needs of survivors.

Irrespective of whether the support provided is one-on-one or within a peer-support group, it is important that it can accommodate intermittent or non-continuous participation by survivors. For some peer-support-workers, who prefer a more 'planned' (goal and milestone oriented) approach to recovery, this off-again-on-again approach may present a challenge. However it is important to remember that a survivor's recovery pathway is likely to be more emergent than planned. This recognises the ongoing co-learning and re-framing that takes place within an intentional peer-support relationship and the inherent risks in establishing recovery plans with 'hard goals' – refer to '*Framing a Recovery Journey*' above.

This is not to say that agreeing a direction is not important but rather to say the way in which that is done can be a critical factor in enabling an effective recovery journey.

It is preferable to encourage a flexible recovery pathway that moves a survivor towards a hopeful future rather than establishing a more rigid action plan that risks relationship disconnection due to failure to achieve milestones that are seen to represent 'success'.

At the core of intentional peer-support is the viability and resilience of the peer-support relationship between the peer-support-worker and the survivor. The expectation is that this relationship should provide a learning experience for both parties and thus it needs to be open to change as new learning presents new opportunities to move forward together.

An effective peer-support relationship is not concerned with timeframes but rather with outcomes and these outcomes may be continually re-framed by the emergent nature of a survivor's recovery journey. Hence the provision of short-term or long-term, continuous or sporadic support is much less relevant than the provision of responsive support – ensuring that the peer-support relationship can accommodate the survivor's need to be the 'author of their own destiny', to be in charge of their own recovery journey.

MONITOR

Any survivor information made available to a peer-support-worker can only be recorded with the consent of the survivor, is strictly confidential, must be held in a secure location, and cannot be released to any third party without the express permission of the survivor – except to comply with legal requirements or to protect the safety of the survivor and other people (refer MSA Confidentiality Policy)

Focussing intervention

Managing progress

Keeping a record

Reporting outcomes

Focussing intervention

The following high-level Intervention Logic Map (ILM) was co-designed with the NZ Ministry of Social Development (MSD) to embrace MSA's shared purpose and ambition for working with survivors; to reflect how we expect to operate (values and ethics); and to be clear about the outcomes we hope to achieve in moving towards 'enabling the wellbeing of male survivors'.

This ILM also forms the basis for the design of the **client support assessment** (refer below).

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If we	<p>Deliver one-to-one peer support and peer group support that is:</p> <ul style="list-style-type: none"> • Culturally responsive • Age relevant • Sexual orientation & gender sensitive • Available nationally • Easy to access • Sustainable • Competently delivered
We will help	<p>Male survivors of sexual harm to:</p> <ul style="list-style-type: none"> • Feel listened to, understood and respected • Make sense of what has happened to them • Be more confident and able to cope • Recognise their support needs; and • Know where to get support they may need
Which will contribute to	<p>Enabling male survivors of sexual harm to enjoy:</p> <ul style="list-style-type: none"> • Greater independence and autonomy • A greater sense of self-worth • Healthier relationships • Increased understanding and support from family/whānau and the community • Increased connection and sense of belonging • An enhanced capacity and sense of hope • Improved access to the range of services they need
For the ultimate goal of	<p>Enabling the wellbeing of male survivors of sexual harm. (Male Survivors Aotearoa Purpose Statement)</p>

Managing progress

MSA provide access to a case management system (PAUA) for their membership organisations to keep records of their peer-support work and to monitor the progress of survivors they support. This system has been configured to record the minimum data required to enable peer-support-workers to track their peer-support activities and to provide the reports required to monitor outcomes and to sustain Government funding programmes.

All data captured is subject to the consent of the survivors involved, is maintained in the strictest confidence and cannot be released to any other person without the explicit consent of the survivor except where it is a legal requirement to do so or it is necessary to protect the safety of children or to prevent a survivor from harming themselves or other people (refer to Confidentiality Policy).

MSA have a long-term interest in the cumulative statistical data captured by their member organisations. This data, which does not include any personal identifiers, and which provides critical information about the incidence of male sexual abuse across Aotearoa and the summary demographics of survivors supported, is important to inform national support strategies and the funding of survivor support.

Keeping a record

There are three basic records of peer-support activities that are maintained (with consent) in the case management system:

Confidential Client Record

This record (refer MSA Form1) is intended to include the following information:

- Personal information:
 - Contact details
 - Key contact/support people;
 - Presenting Issues.
- The Way Forward:
 - Hopes and Aspirations;
 - Next Steps;
 - Keeping Safe.
- Support Offer:
 - Peer Support (One-on-One or Peer-Group);
 - Counselling or Social Work; and
 - Other.
- Client Consent.

Client Support Assessment

This form (refer MSA Form2) is designed to monitor the progress of survivors who are engaged in peer-support activities.

The form has been designed to ensure that it is simple to complete and responds to MSA expectation of the peer-support experience and the outcomes we hope can be achieved for the survivors our membership organisations support.

The intention is that survivors will complete this assessment on at least a six-monthly basis to help us understand how our one-on-one peer-support and peer-support group activities are helping survivors recovery journey and how these support activities could be improved.

Recording this information, which is reported in summary form (without any personal identification) to our funders, is important if we are to continually improve the peer-support we offer to the survivor community.

Client Session Records

The case management system also provides for our peer-support-workers to maintain a record of the peer-support activities they facilitate.

This record may include important emails between the survivor and the peer-support worker, notes of one-on-one session or peer-support group outcomes, referrals, notes from whanua and family or supporter sessions etc. These records are important to enable peer-support-workers to plan their support activities and to provide consistent and helpful support for the survivors they have committed to work with.

As with all confidential client information, survivors are entitled to know what information concerning them is held within the case management (or other) systems and can ask to be shown a copy of their record. They can also request that session records are not to be kept though they should be appraised of how this may impact the ability of the peer-support-worker to optimise their support activities.

Reporting outcomes

MSA member organisations provide a limited number of quarterly outcome reports that inform the national database and respond to funding contract requirements. These reports, which all comply with the provisions of the MSA Confidentiality Policy (do not include any personal survivor data), can be briefly summarised as follows:

Operational Outcomes

This report essentially summarises the number of survivors that are being supported by each member organisation.

Support Outcomes

This report tracks the cumulative survivor assessments of the peer-support they have received to present a national 'consumer view' of the quality and effectiveness of peer-support activities conducted by member organisations.

Qualitative Outcomes

This report provides the opportunity for the peer-support provider to share qualitative information, as distinct from quantitative data. This report could include sharing ideas and opportunities to improve the effectiveness of peer-support including (anonymously) sharing peer-support-worker and survivor feedback.

Organisational Quality Standards

Service Standards

These organisational standards⁹, which have been adopted by MSA, are designed to assure the quality of all support services (clinical and non-clinical) offered to male survivors of sexual violence and to recognise that the provision of those services will be most effective when they take account of the male-specific responses to trauma resulting from sexual violence.

These standards differ from the UK standards on which they are based in three areas related to governance and service.

Firstly, Standard 1.3 recognises our obligations under the **Treaty of Waitangi** to work in partnership with Maori

Secondly, Standard 3.1 qualifies the services to be offered as '**strength-based and recovery oriented**'. The intention here is to ensure that all services offered to male clients are consistent with 'person-centred' and 'moving towards' recovery approach, which is fundamental to the 'intentional peer-support' methodology and provides the underlying principle for the peer-support services offered by member organisations of Male Survivors Aotearoa (MSA). The hope is that all services (including counselling and social work) provided to make clients can integrate this approach and thus avoid presenting an illness-centred approach that is focused on illness-reduction. For more information please refer to Page 5 – Peer-Support is Person-centred).

And thirdly, Standard 3.2 requires that the provision of **peer-support services** for male clients complies with the MSA Peer Support Practice Guidelines (PSP Guidelines). The expectation is that providers will be familiar with the guidelines and have appropriately trained and experienced peer-support-workers to work alongside their male clients.

Peer Support Considerations

Standards and guidelines for peer-support

For organisations that offer peer-support services it is important to understand that the MSA Peer Support Practice Guidelines (PSP Guidelines) will set the standard for those services and compliance with those guidelines may require a degree of flexibility in the way some of these Organisational Standards are applied.

The PSP Guidelines, which embrace the Intentional Peer Support methodology, are intentionally less prescriptive in some areas of service delivery than these standards may expect.

⁹ These guidelines are informed by the Quality Standards for supporting Male Survivors/Victims of Sexual Abuse developed by Lime Culture in collaboration with the Male Survivors Partnership UK.

This difference may well reflect the influence of traditional clinical practice, which is typically more focussed on a structured approach to achieving a particular outcome than the more flexible peer-support approach of progressively 'moving towards' wellbeing.

This difference is particularly evident in the Service Standard's requirements for the completion of **risk and needs assessments** (Standard 3.7) and the establishment of **bespoke (recovery) support plans** (Standard 3.8).

The provision of peer-support for male survivors may be only one of many support services offered by an organisation supporting male clients. However the over-arching nature of these standards presumes consistent application to all services offered, including peer-support. While supporting that application in principle, it is important to appreciate that the PSP Guidelines encourage a more flexible approach to client assessment and planning practices and to understand that this difference can be accommodated without compromising service standards.

It is important to remember that the effectiveness of peer-support is determined by the quality of the relationship between the peer-support-worker and the survivor.

That relationship is about equality and mutuality and should not be influenced by the negative power dynamics that may present in a traditional service encounter where the 'provider' is seeking to procure an outcome for the survivor.

That is not to say that peer-support is not outcome focussed but how that outcome (or benefit) is measured – how we judge the mutual value received by both parties in the relationship – may not be simply assessed within a traditional service outcome or 'results-based accountability' framework. For example, the core benefit (outcome) for the survivor may simply be the ongoing sustenance provided by peer-support relationship, which enables the survivor to cope with their daily life-challenges.

Risk and needs assessment

People who work with male survivors will be aware of their low disclosure rates and related reluctance of many survivors to engage with recovery support services. The PSP Guidelines advocate peer-support as an effective, non-threatening and safe entry-gateway for survivors seeking recovery support. The process of establishing the initial connection between a survivor and a peer-support-worker and facilitating the development of an effective, trust-based peer-support relationship is outlined in more detail in the CONNECT section of the PSP Guidelines.

These guidelines clearly acknowledge the importance of appreciating and understanding the survivors 'current reality', being aware of the risks that they may present to themselves and others and agreeing appropriate risk-mitigation strategies. However those guidelines also acknowledge that it may not always be appropriate to formalise this assessment process while 'connecting' and that a more flexible and low-key approach to collecting, recording and confirming this information may be necessary.

There is no substantial philosophical conflict between the MSA peer-support approach to assessment and the requirements of the Organisational Quality Standards but rather a difference in approach that need to be factored into any assessment of the degree to which a support service based on intentional peer-support complies with these standards.

Recovery support plans

The emphasis of the Organisational Quality Standards on the existence of 'bespoke support plans' may be somewhat problematic for a peer-support-worker following the PSP Guidelines, which advocate guiding an emergent recovery journey as distinct from following a prescribed action plan.

Those guidelines do embrace the benefit of the survivor having an aspirational outcome as a focus and an overarching guide for their recovery journey. But the extent to which that journey can be committed to the achievement of specific (measurable) outcomes will depend on the survivor's current situation and their ability to envision the way forward. For many survivors achieving a sense of stability and control and taking one positive step forward at a time is the pressing and immediate objective.

The PSP Guidelines advocate a more open and flexible approach to 'recovery planning' that deliberately differentiates peer-support from traditional clinical therapies by adopting an approach that enables and encourages survivors to embrace the possibility of 'moving towards' an emergent and aspirational future rather than focusing on the progressive achievement planned outcomes.

This is why the PSP Guidelines talk about the peer-support-worker guiding an emergent recovery journey or pathway one-step-at-a-time rather than facilitating the implementation of a 'bespoke recovery plan'.

The Quality Standards

Organisations that offer peer-support to male survivors should be able to demonstrate that they can meet the following set of quality standards:

1 Leadership and Governance

The service provider:

- 1.1 Is an incorporated legal entity and has a defined purpose and ambition for the future;
- 1.2 Has a strategic agenda, which focuses on the long-term sustainability of service delivery for its clients;
- 1.3 Has a specific policy for working with Maori as the Tangata Whenua (the Indigenous peoples of Aotearoa) that honours the principles of the Treaty of Waitangi.
- 1.4 Has policies and procedures in place specifically for supporting male clients;
- 1.5 Has adequate financial controls in place to safeguard funds intended to support male clients;

ORGANISATIONAL QUALITY STANDARDS

- 1.6 Ensures staff have appropriate experience, training and/or qualifications to support male clients;
- 1.7 Demonstrates a culture of inclusivity with a visible male presence across the organisation.

2 Access and Engagement

The service provider:

- 2.1 Utilises male specific and culturally sensitive marketing of its services for male survivors, reflecting the diversity of the community it supports;
- 2.2 Has a strategy for engaging marginalised and disadvantaged male survivors in the community it supports;
- 2.3 Ensures equitable access to all services and premises for all clients, regardless of gender, ethnicity or cultural/spiritual difference; and
- 2.4 Ensures its premises are welcoming and accessible to all clients regardless of gender, ethnicity or cultural difference.

3 Service Delivery

The service provider:

- 3.1 Ensures leaders and staff understand how males respond to trauma and have developed appropriate strength-based and recovery-oriented services to meet their needs;
- 3.2 Ensures that any peer-support services provided to male clients comply with the Peer Support Guidelines issued by Male Survivors Aotearoa;
- 3.3 Empowers male clients to identify the services they need and adopts a flexible approach to engagement;
- 3.4 Ensure staff can identify male clients in need of urgent support or those 'in crisis' and can manage accordingly;
- 3.5 Adheres to all appropriate ethical and regulatory frameworks;
- 3.6 Ensure all male clients can choose the gender of the professional(s) supporting them;
- 3.7 Ensures that individual risk and needs assessments are carried out with all male clients;

- 3.8 Ensures bespoke plans are developed for all clients, based on their individual needs;
- 3.9 Has established referral pathways to other services that may benefit its male clients; and
- 3.10 Is transparent about whether it supports perpetrators of sexual offences and has implemented policies to ensure client safety at all times.

4 Outcomes and Evaluation

The service provider:

- 4.1 Has a process for encouraging feedback from male clients including those who chose not to proceed with support;
- 4.2 Has a client consultative panel or user group that includes representation from its male clients;
- 4.3 Identifies and monitors client outcomes;
- 4.4 Collects and analyses outcome data to understand whether it is making a positive impact on the lives of its male clients; and
- 4.5 Reviews data, evaluation and feedback from male clients to develop new and innovative services.

Meeting The Standards

1. Leadership and Governance

This standard relates to the service provider's leadership and governance arrangements.

This standard also recognises the particular obligations of New Zealand service providers to honour the principles of the Treaty of Waitangi, which requires service providers to work in partnership with Maori, the Tangata Whenua of Aotearoa (the Indigenous peoples of New Zealand).

This standard ensures that the service provider can be held accountable by its clients and the commissioners and/or funders for the services and support it provides.

All of these standards (1-4) will ensure that the specific needs of male clients have been considered within the service provider's objectives, financial planning, policies and procedures including the training of staff.

1.1 The service provider is an incorporated legal entity and has a defined purpose and ambition for the future.

Rationale	Achieving the Standard
<p>It is essential that service providers supporting male survivors have a governance structure by which they can be held accountable.</p>	<ul style="list-style-type: none"> ✓ Leaders comply with all regulatory and legal obligations on behalf of the service provider and ensure staff do so too;
<p>The service provider should have a clearly defined aim and objectives that they work to deliver. This should include an appropriate leadership structure with governance accountability.</p>	<ul style="list-style-type: none"> ✓ Staff demonstrate an understanding of the service provider’s purpose and ambition and work with leaders to achieve these; and ✓ Clients can access the service provider’s purpose and ambition in a format suitable to them

1.2 The service provider as a strategic agenda, which focuses on the long-term sustainability of service delivery for its clients.

Rationale	Achieving the Standard
<p>The service provider should be sufficiently focussed on maintaining and ensuring long term stability of services for all clients and avoid disruption or withdrawal of services.</p>	<ul style="list-style-type: none"> ✓ Leaders have written a long-term strategic agenda which is reviewed and updated annually, focussing on long term sustainability for its clients;
<p>This could include funding/commissioning arrangements for the service, staff, recruitment and retention plans and development opportunities etc.</p>	<ul style="list-style-type: none"> ✓ Staff demonstrate understanding and work towards delivering the strategic agenda and are engaged in the review process; and ✓ Clients can access the service provider’s strategic agenda in a format suitable to them and are encouraged to engage in the review process.

1.3 The service provider as a specific policy for working with Maori as the Tangata Whenua (the Indigenous peoples of Aotearoa) that honours the principles of the Treaty of Waitangi.

Rationale	Achieving the Standard
<p>Aotearoa, New Zealand hosts a diverse, multicultural society but its peoples have a special commitment to bi-culturalism that is founded in the Treaty of Waitangi, which obligates all service providers to honour the principles of that Treaty by working in partnership with Maori.</p> <p>The specific obligations, which should be included in the service provider’s policy, will support three key policy principles:</p> <ul style="list-style-type: none"> - Being effective for Maori; - Being responsive for Maori; and - Ensuring participation by Maori 	<ul style="list-style-type: none"> ✓ Leaders have developed a specific policy for working with Maori and ensures the principles of that policy are evident in its governance and service delivery processes across the organisation; ✓ Staff demonstrate an understanding of the policy for working with Maori and are engaged in implementing that policy across the organisation; and ✓ Clients can access the working with Maori policy and understand how that policy may affect them and are encouraged to engage in the review process.

1.4 The service provider has policies and procedures in place specifically for supporting male clients.

Rationale	Achieving the Standard
<p>It is important that service providers understand that the specific needs of male survivors differ from the needs of female victims/survivors. To address this it is essential that service providers should ensure appropriate policies, procedures and working practices are in place.</p> <p>For example this might include adapting language and designing processes of engagement and models of working so that they are male specific. These policies must be sensitive to the diversity in the male community it represents.</p>	<ul style="list-style-type: none"> ✓ Leaders have developed policies and procedures specifically for supporting male survivors which are reviewed regularly and implemented across the organisation; ✓ Staff demonstrate an understanding of the service providers policies and procedures and are engaged in the monitoring and review process; and ✓ Clients can access the policies and procedures that affect them and are encouraged to engage in the review process.

1.5 The service provider has adequate financial controls in place to safeguard funds intended to support male clients

Rationale	Achieving the Standard
<p>Where a service provider has been commissioned or awarded funds specifically to support male clients, there should be transparency about how these funds are utilised. Ensuring appropriate financial control and audit practices are in place is essential.</p> <p>Any ring-fenced, restricted or dedicated funds should not be redirected to support other client groups (unless there is specific agreement or approval to do so).</p>	<ul style="list-style-type: none"> ✓ Leaders ensure that any funding intended to support male clients is used effectively and exclusively for that purpose and adequate financial controls and audit practices are maintained; ✓ Staff involved in commissioning or delivering services should be aware of any ring-fenced or restricted funds for supporting male clients; and ✓ Clients can access the financial information published by the service provider policing a format that is suitable to them.

1.6 The service provider ensures staff have appropriate experience, training and/or qualifications to support male clients

Rationale	Achieving the Standard
<p>All staff accessing and providing support to male clients should have the relevant skills and knowledge to support male survivors appropriately.</p> <p>Training should focus on the specific response to trauma and societal issues that male survivors experience</p>	<ul style="list-style-type: none"> ✓ Leaders ensure that analysis of staff training needs is conducted annually to include continuous professional development and have a plan to address any gaps through an appropriate training programme; ✓ Staff met their continuous professional development obligations and commit to advancing their knowledge of gender-specific issues relating to male clients through training made available by the service provider; and ✓ Male clients can be assured of staff competency and qualifications by being able to view training certificates and accreditation awards if requested.

1.7 the service provider demonstrates a culture of inclusivity with a visible male presence across the organisation

Rationale	Achieving the Standard
<p>Male survivors report that having a male presence across the organisation creates a sense that this is a place ‘for them’ where they feel welcome.</p>	<ul style="list-style-type: none"> ✓ Leaders demonstrate their commitment to inclusivity by recognising the importance of a visible presence across the organisation and have implemented recruitment policy to address this; ✓ Staff understand why a visible male presence is important for a service provider that supports male clients and work with the leadership team to achieve this; and ✓ Clients respond positively to the service provider’s culture of inclusivity and are encouraged to engage in any review process.

2. Access and Engagement

This standard relates to access and engagement with male clients and seeks to ensure that the service provider recognises the specific needs of male clients.

Research indicates male survivors tend not to engage with support service providers in the same way that female victims/survivors do. Male survivors may take longer to access support following their experiences of sexual violence and they make take several attempts to meaningfully engage with the service or its staff.

Additionally, service providers should also recognise that males represent a diverse group, rather than one homogenous group, that do not respond, engage or access services in the same way. Therefore service providers will require specific strategies to engage with marginalised groups in the communities they serve

2.1 The service provider utilises male specific and culturally sensitive marketing of its services for male survivors, reflecting the diversity of the community it supports

Rationale	Achieving the Standard
<p>It is clear that engaging with male survivors is more successful if they see themselves represented in the marketing or engagement material.</p> <p>All advertising, including website design and social media should explicitly reflect the communities that the organisation supports and is aiming to engage with. Consideration should be given to ensuring that marketing or engagement material is visible in locations that are known to be used by men.</p>	<ul style="list-style-type: none"> ✓ Leaders ensure any marketing material about services for male survivors provided by the organisation is gender specific, distributed appropriately and reflects the diversity of the male community the organisation supports; ✓ Staff can demonstrate they understand why male survivors are more likely to engage if the marketing is male-specific and highlights messages of recovery, hope and life after accessing services; and ✓ Male clients respond positively to marketing, report finding it in a format and location suitable to them and are encouraged to engage in any feedback process.

2.2 The service provider has a strategy for engaging marginalised and disadvantaged male survivors in the community it supports

Rationale	Achieving the Standard
<p>It is well known that there are many barriers for male survivors to overcome when trying to access support services. This seems to be especially true for disadvantaged groups such as homeless, gay, bi-sexual or transsexual and minority groups.</p> <p>The service provider should consider the needs of a diverse range of male clients when designing, promoting and delivering support services that are intended to be equitably accessible.</p>	<ul style="list-style-type: none"> ✓ Leaders implement a strategy for engaging with male survivors who are marginalised or disadvantaged; ✓ Staff understand and work towards the strategy for engaging with male survivors who are marginalised or disadvantaged; and ✓ Male clients from marginalised or disadvantaged backgrounds respond positively to the efforts of the service provider to engage with them and report improved access to services.

2.3 The service provider ensures equitable access to all services and premises for all clients, regardless of gender, ethnicity or cultural/spiritual difference.

Rationale	Achieving the Standard
<p>Providing equitable access to the full range of support service will ensure that male clients are not disadvantaged by their gender and can access the services that meet their needs.</p>	<ul style="list-style-type: none"> ✓ Leaders do not restrict access to services or premises based on gender, ethnicity, cultural or spiritual or other protected characteristics; ✓ Staff understand the importance of unrestricted access to services and premises for all clients and work with leaders to ensure this is delivered; and ✓ Male clients seeking support understand their rights and are made aware of the escalation process if they believe access is being restricted without good reason.

2.4 The service provider ensures its premises are welcoming and accessible to all clients regardless of gender, ethnicity or cultural difference

Rationale	Achieving the Standard
<p>In considering the delivery of services it is important to ensure that the support environment is welcoming to all those who will be using the service.</p>	<ul style="list-style-type: none"> ✓ Leaders recognise the importance of creating a welcoming and accessible environment for all clients and are mindful of the needs of male survivors; ✓ Staff recognise the importance of welcoming clients into an accessible environment and are mindful of the needs of male survivors; and ✓ Male clients report the support environment is accessible and welcoming, that their needs are met and are encouraged to engage in any review process.

3. Service Delivery

This standard relates to the operational delivery of support services for male survivors of sexual violence.

Where support providers for male survivors do not pay special attention to the specific service needs of males, this can create significant challenges for males wishing to access support and may result in some males feeling their needs have not been taken into account.

Where services for male survivors have been added to existing services provided for female victims/survivors, special consideration should be given to the specific service support needs of males.

The service delivery to clients should be based on the risk and needs of individual clients. All clients should have a choice about the gender of the professional supporting them, without a requirement to justify this decision.

3.1 the service provider ensures leaders and staff understand how males respond to trauma and have developed appropriate strength-based and recovery-oriented services to meet their needs.

Rationale	Achieving the Standard
<p>Awareness of how male survivors respond to sexual violence is essential to the delivery of appropriate and effective support that meets their needs.</p> <p>Service providers must ensure that support for male survivors is underpinned by an understanding of how society typically views male behaviour, including attitudes around masculinity, patriarchy and responses to trauma.</p> <p>And to consider how services that do not understand or recognise these factors can retraumatise survivors that try to engage with their support services.</p> <p>Research supports the use of person-centred, strength-based support services (as distinct from illness-based therapies) for enabling the recovery of male survivors.</p>	<ul style="list-style-type: none"> ✓ Leaders have implemented appropriate recruitment and training processes to assure staff working with male survivors can demonstrate they understand male-specific responses to trauma in their work; ✓ Staff are trained in working with male-specific responses to trauma and have access to appropriate supervision and resources (when working with clients) to support their work; and ✓ Male clients report the support they receive has provided them with an understanding of male-specific responses to trauma and how this has informed the support they have received.

3.2 The service provider ensures that peer-support services provided to male clients comply with the Peer Support Practice Guidelines issued by Male Survivors Aotearoa

Rationale	Achieving the Standard
<p>Male Survivors Aotearoa (MSA) have adopted a strength-based approach to peer-support. The internationally accredited Intentional Peer Support methodology has been selected to underpin a comprehensive set of Peer Support Practice Guidelines specifically designed to meet the support needs of male survivors.</p> <p>These ‘good practice’ guidelines embrace relevant values, ethical standards and competencies that inform practical guidelines for providing effective peer-support services.</p>	<ul style="list-style-type: none"> ✓ Leaders confirm that peer-support services provided for male survivors are compliant with the MSA Peer Support Guidelines (PSP Guidelines); ✓ Staff can demonstrate familiarity with the PSP Guidelines and can evidence appropriate training and experience in delivering peer-support services that are consistent with PSP Guideline standards and protocols; ✓ Client records and outcome monitoring reports demonstrate adherence to the PSP Guidelines.

3.3 The service provider empowers male clients to identify the services they need and adopts a flexible approach to engagement.

Rationale	Achieving the Standard
<p>Service providers should support clients to identify their own support needs i.e. what support they believe would benefit them personally, or indeed, what support would not work for them.</p> <p>Research indicates that male survivors typically engage in a different way to females and may need different levels of support delivered in different ways in different timeframes. Also male survivors may take longer to decide if the service is right for them before they engage.</p>	<ul style="list-style-type: none"> ✓ Leaders acknowledge that male survivors may take longer to engage in support so flexible working practices are in place to allow male survivors to engage with the service that best meets their needs; ✓ Staff implement flexible working practices that encourage male survivors to engage with the support services; and ✓ Male clients report feeling empowered to choose how they engage with the support service.

3.4 The service provider ensures staff can identify male clients in need of urgent support or those in 'crisis' and can manage accordingly.

Rationale	Achieving the Standard
<p>Many male survivors seek support following a significant life crisis</p> <p>Therefore it is essential that services are able to identify clients in crisis and prioritise their support.</p> <p>Where services operate a waiting list or are not available out-of-hours, male survivors should be provided with details of other support organisations who can offer immediate support</p>	<ul style="list-style-type: none"> ✓ Leaders have implemented working practices to identify male clients in crisis, identify and manage the risk and refer to immediate external support where necessary; ✓ Staff are trained to spot the signs of a male client in crisis, identify and manage risk and make referrals to other services where necessary; and ✓ Male clients report the staff responded appropriately to their needs and are encouraged to engage in any review process.

3.5 The service provider adheres to all appropriate ethical and regulatory frameworks.

Rationale	Achieving the Standard
<p>Service providers should ensure that each aspect of service delivery adheres to ethical and regulatory frameworks wherever possible to ensure the safety and effectiveness of their services.</p> <p>For MSA Member Organisations this includes compliance with relevant policies and adherence to the values and principles of intentional peer support.</p>	<ul style="list-style-type: none"> ✓ Leaders comply with all relevant ethical and regulatory obligations on behalf of the service provider and ensure services delivered are safe; ✓ Staff are expected to comply with all relevant ethical and regulatory obligations; and ✓ All clients can access information about regulatory and ethical compliance.

3.6 The service provider ensures that all male clients can choose the gender of the professional(s) supporting them.

Rationale	Achieving the Standard
<p>It is clear from the research that not all male survivors will have a preference for the gender of the professional who supports them. Whilst some will prefer a male professional, others may prefer a female professional. Therefore it is important that male survivors are given a choice.</p> <p>Service providers should monitor that a choice has been offered and how the male survivors need have been met.</p>	<ul style="list-style-type: none"> ✓ Leaders acknowledge the importance of ensuring all clients can choose the gender of their support worker and have implemented working practices to ensure this choice is met and respected; ✓ Staff understand why choice is important for clients accessing services and have implemented working practices to ensure this choice is met and respected; and ✓ All clients report that their choice of gender of support worker has been met and respected

3.7 The service provider ensures that individual risk and needs assessments are carried out with all male clients

Rationale	Achieving the Standard
<p>Service providers should aim to build a culture of safety that supports clients and staff by ensuring risks and needs assessments are an integral aspect of service provision.</p> <p>Recognising the dynamic nature of an individual's risk and needs, ongoing and regular assessment should be routinely conducted in order to identify, monitor and manage the individual risk and needs of each male client.</p>	<ul style="list-style-type: none"> ✓ Leaders demonstrate they understand the effects of trauma and work with staff to understand the risks and needs of male clients; ✓ Staff understand the importance of identifying the individual risk and needs of male clients and carry out appropriate risk and needs assessments; and ✓ All clients receive an explanation of the purpose of the risks and needs assessment to enable them to participate in the process.

3.8 the service provider ensures bespoke plans are developed for all clients, based on their individual needs

Rationale	Achieving the Standard
<p>Following the outcome of any risk and needs assessment a support plane should be developed. This should form the basis for the support the service will provide to the client.</p> <p>The support plan should be regularly reviewed with the client to identify what actions should be taken either by themselves or the support service in order to meet their needs and mitigate any risks to themselves or others</p> <p>Support plans may identify the need to engage with other or alternative services to specifically meet the needs of male clients</p>	<ul style="list-style-type: none"> ✓ Leaders have implemented a delivery model that incorporates individual support plans for all clients and ensures appropriate supervision and monitoring pf caseloads in place; ✓ Staff understand the importance of an individual support plan and demonstrate they engage and empower their clients in the development and implementation of the plan; and ✓ All clients understand their individual support plan and their role in its continued development.

3.9 The service provider has established referral pathways to other services that may benefit its male clients.

Rationale	Achieving the Standard
<p>Male clients may have needs that require the support of other or alternative support services. Such services may be different to the types of services that are typically accessed by female clients. Therefore service’s supporting male clients need to be aware of their client needs, available services and any trends in services required by male clients.</p> <p>The service should ensure that clear referral pathways are in place to a range of local services. These should be reviewed routinely to ensure they are up to date and arrangements are in place to allow for referral.</p>	<ul style="list-style-type: none"> ✓ Leaders have established appropriate partnerships with other organisations to establish timely and appropriate referral pathways for its male clients; ✓ Staff demonstrate an awareness of other services and the referral pathways, as well as competence to identify where new pathways should be established to address specific needs of male clients; and ✓ Male clients experience timely and appropriate referrals to other services with appropriate information shared to support their access.

3.10 The service provider is transparent about whether it supports perpetrators of sexual offences and has implemented policies to ensure client safety at all times.

Rationale	Achieving the Standard
<p>It is important to acknowledge that some male survivors accessing support services may disclose that are, or have previously been perpetrators of sexual offences. Such disclosures may be made either when first accessing support or during the course of support.</p> <p>Service providers should therefore have a clear and open policy regarding whether, and under what conditions, they will continue to engage with that individual, and provide support to them,</p>	<ul style="list-style-type: none"> ✓ Leaders implemented a policy of transparency regarding working with perpetrators of sexual offences and have implemented procedures to enable safe working or onward referral; ✓ Staff demonstrate an awareness of the service provider’s policies around working with perpetrators of sexual offences and can implement this to work safely with others; and ✓ All clients have access to information on the service provider’s policy and procedures on working with perpetrators of sexual offences at the point of referral, assessment and during their support.

4. Outcomes and Evaluation

This standard relates to outcomes, evaluation and the ability of the service to meet the needs of male clients. This can be done through a variety of methods including routine data collection, service support outcomes evaluation and client feedback and service review and improvement.

Monitoring the service provider’s ability to meet the client’s needs will be important for the service commissioner and/or funder, the service and its staff and importantly for the client himself.

Commissioners and/or funders will want to be assured that the service provided is effective to meet the needs of the local population, does not unnecessarily replicate other services and provides value for money.

Service providers will want to monitor outcomes to ensure that they are performing as well as possible to meet the needs of their client groups.

Individual male clients will benefit from tracking their own progress throughout their journey of support. Many males report feeling empowered by being able to see how far they have come in their healing and recovery.

4.1 the service provider has a process for encouraging feedback from male clients including those who chose not to proceed with support.

Rationale	Achieving the Standard
<p>Service providers should encourage all clients to provide feedback about the support they have received (or are receiving) from the service. A range of options should be available to encourage feedback including face-to-face, written and on-line feedback.</p> <p>It is important that service providers also encourage feedback from those who choose not to proceed with support as this can identify potential barriers to engagement and assist the development of new types of service or delivery methods.</p>	<ul style="list-style-type: none"> ✓ Leaders recognise the importance of feedback from male clients about the support they have received and have implemented processes to facilitate this; ✓ Staff encourage their male clients to give feedback about the support they have received and practices are informed and improved as a result; and ✓ Male clients are made aware of the processes for feedback and are able to engage in this process and have access to the outcomes.

4.2 The service provider has a client consultative panel or user group that includes representation from its male clients.

Rationale	Achieving the Standard
<p>Being able to consult with clients will be a useful mechanism to ensure the service is as good as it can be.</p> <p>Developing the facility to discuss ideas and challenges with male survivors will be important in order to design and monitor services that truly meet the needs of those who use the service.</p>	<ul style="list-style-type: none"> ✓ Leaders recognise the importance of engaging with male clients to seek advice about service design, delivery and improvements; ✓ Staff can share information with the consultative panel and have access to feedback from the panel where it will benefit their work with male clients; and ✓ Male clients are made aware of the consultative panel, are able to engage in this process and have access to the outcomes.

4.3 The service provider identifies and monitors client outcomes

Rationale	Achieving the Standard
<p>The identification and monitoring of outcomes for clients is an important aspect of service delivery. Ensuring outcome measures are appropriate for male survivors will be key to ensuring the service is continuing to meet the needs of its clients.</p> <p>It is important to recognise that a positive outcome for a male client may not always be the same as the positive outcome for the service of the commissioners or funders.</p> <p>It is important to remember that the survivor will usually be the best judge of whether the outcome is positive for them.</p>	<ul style="list-style-type: none"> ✓ Leaders recognise the importance of identifying and monitoring client outcomes; ✓ Staff are trained and experienced to identify and monitor appropriate outcomes and these are used to direct the support provided; and ✓ Male clients are empowered to identify and report what positive outcome of support would be for them.

4.4 The service provider collects and analyses outcome data to understand whether it is making a positive impact on the lives of its male clients.

Rationale	Achieving the Standard
<p>It is important to understand how services are changing male clients lives for the better. To this end, data should be collected, monitored and analysed regularly.</p> <p>Where appropriate, data collected by the service should be published in accessible formats to highlight the work of the organisation which might encourage more male survivors to engage with it.</p>	<ul style="list-style-type: none"> ✓ Leaders recognise the importance of data collection to monitor and improve outcomes; ✓ Staff recognise the importance of data collection to monitor and improve the service. They are confident discussing why data is collected and how it is used; and ✓ Male clients can access data collected as well as information on how it is used to improve the service or their individual support. They are empowered to contribute data as an essential element of their support

4.5 The service provider reviews data, evaluation and feedback from male clients to develop new and innovative services.

Rationale	Achieving the Standard
<p>It is essential that services routinely review the data they have collected from supporting male clients, including the feedback from the clients to inform their service provision and identify any development requirements.</p> <p>This should also be done in the context of wider population needs assessment to determine whether an equitable service is being provided to the community they intend to serve.</p>	<ul style="list-style-type: none"> ✓ Leaders understand that service development should be driven by the needs of client (and potential clients) and are proactive in developing practice to review research and feedback to develop new and innovative services to meet these needs; ✓ Staff are able to implement recommendations from evaluation and feedback into their work and confident contributing to evaluation and feedback processes as well as empowering and enabling their Clients to do so where appropriate; and ✓ Clients are able to have an input into the development of new services and contribute to the delivery of the support provision.

Appendices

FORMS

Confidential Client Record [MSA FORM1]

Client Session Assessment [MSA FORM2]

REPORTS
