DEFINING 'LIVED EXPERIENCE' IN THE CONTEXT OF LIVED EXPERIENCE MENTAL HEALTH ROLES - WHAT EXPERIENCE COUNTS AND HOW MUCH IS ENOUGH? HELENA ROENNFELDT & DR LOUISE BYRNE

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WHY IS THIS IMPORTANT



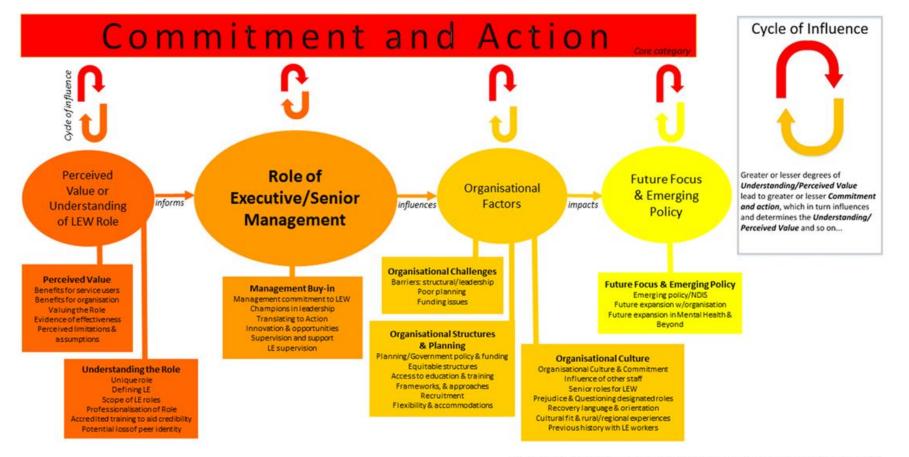
- Peer work is an emerging workforce but the employment and experience of peer worker is highly variable.
- How LE work is understood and valued within an organisation has a strong bearing on its success
- Fears of the unique nature of peer work being co-opted



PREVIOUS RESEARCH



- Sought to understand the perspectives of senior managers of mental health services regarding the barriers and enablers for lived experience workers within the mental health sector.
- Commitment and Action from Senior Management and positive workplace culture are core to the evolution of Lived Experience Workforce
- Impacted by the understanding and value of LE



"Defining barriers to change: the LEW as a valued member of the team"

FINDINGS: SUBSTANTIATIVE THEORY DIAGRAM

CHANGING LANDSCAPES



From the 1960's consumer movement to today

Currently, the inclusion of people with lived experience is seen as best practice (Voronka, 2017)

We have a growing lived experience workforce with both consumers and services now both navigating inclusion within service delivery (Gillard et al., 2017).



IDENTITY AND UNDERSTANDING LE



What is lived experience? How much is enough? Who defines it? Lived versus living? Is it the impact that is important? What is important? Is identity and identified roles more fluid?



DIFFERENT STROKES FOR DIFFERENT FOLKS

- Is it contextual?
- Could lived experience mean different things depending on the setting and the people accessing services?
- Who is my peer?



DOESN'T EVERYONE HAVE LIVED EXPERIENCE?



Do we need identified roles?

Is the ideal world one where anyone can use their lived experience, regardless of their position?