

A photograph of two people smiling on a beach. The person on the left has short, multi-colored hair (blue, green, and purple) and is wearing a red jacket over a yellow shirt. The person on the right is wearing large, reflective aviator sunglasses and a dark jacket. The background shows a sandy beach and a blue sky with clouds.

Technical  
package

# Peer support mental health services

Promoting person-centred and rights-based approaches



World Health  
Organization



Technical  
package

# Peer support mental health services

Promoting person-centred and rights-based approaches

Peer support mental health services: promoting person-centred and rights-based approaches

(Guidance and technical packages on community mental health services: promoting person-centred and rights-based approaches)

ISBN 978-92-4-002578-3 (electronic version)

ISBN 978-92-4-002579-0 (print version)

## © World Health Organization 2021

Some rights reserved. This work is available under the Creative Commons Attribution-NonCommercial-ShareAlike 3.0 IGO licence (CC BY-NC-SA 3.0 IGO; <https://creativecommons.org/licenses/by-nc-sa/3.0/igo>).

Under the terms of this licence, you may copy, redistribute and adapt the work for non-commercial purposes, provided the work is appropriately cited, as indicated below. In any use of this work, there should be no suggestion that WHO endorses any specific organization, products or services. The use of the WHO logo is not permitted. If you adapt the work, then you must license your work under the same or equivalent Creative Commons licence. If you create a translation of this work, you should add the following disclaimer along with the suggested citation: "This translation was not created by the World Health Organization (WHO). WHO is not responsible for the content or accuracy of this translation. The original English edition shall be the binding and authentic edition".

Any mediation relating to disputes arising under the licence shall be conducted in accordance with the mediation rules of the World Intellectual Property Organization (<http://www.wipo.int/amc/en/mediation/rules/>).

**Suggested citation.** Peer support mental health services: promoting person-centred and rights-based approaches. Geneva: World Health Organization; 2021 (Guidance and technical packages on community mental health services: promoting person-centred and rights-based approaches). Licence: CC BY-NC-SA 3.0 IGO.

**Cataloguing-in-Publication (CIP) data.** CIP data are available at <http://apps.who.int/iris>.

**Sales, rights and licensing.** To purchase WHO publications, see <http://apps.who.int/bookorders>. To submit requests for commercial use and queries on rights and licensing, see <http://www.who.int/about/licensing>.

**Third-party materials.** If you wish to reuse material from this work that is attributed to a third party, such as tables, figures or images, it is your responsibility to determine whether permission is needed for that reuse and to obtain permission from the copyright holder. The risk of claims resulting from infringement of any third-party-owned component in the work rests solely with the user.

**General disclaimers.** The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of WHO concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

The mention of specific companies or of certain manufacturers' products does not imply that they are endorsed or recommended by WHO in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters.

All reasonable precautions have been taken by WHO to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall WHO be liable for damages arising from its use.

Design and layout by Genève Design.

Photo credit: Cover photo: PSSEO/Lezly Cyr. Page 6. Hearing Voices – Helena Lopes. Page 15: USP Kenya. Page 26: PSSEO/Beverley Johnston.

[The accompanying guidance document and technical packages are available here.](#)

# Contents

Foreword . . . . .	.iv
Acknowledgements . . . . .	.v
Executive summary . . . . .	xiii
What is the WHO QualityRights initiative? . . . . .	xix
About the WHO Guidance and technical packages on community mental health services . . . . .	xx

## 1. Introduction ..... 1

## 2. Peer support mental health services – description and analysis ..... 5

2.1	Hearing Voices Support Groups . . . . .	.6
2.2	Nairobi Mind Empowerment Peer Support Group USP Kenya . . . . .	15
2.3	Peer Support South East Ontario (PSSEO) Transitional Discharge Model Ontario, Canada . . . . .	26

## 3. Moving forward: from concept to good practice peer support mental health service ... 35

References . . . . .	42
----------------------	----

## Foreword

Around the world, mental health services are striving to provide quality care and support for people with mental health conditions or psychosocial disabilities. But in many countries, people still lack access to quality services that respond to their needs and respect their rights and dignity. Even today, people are subject to wide-ranging violations and discrimination in mental health care settings, including the use of coercive practices, poor and inhuman living conditions, neglect, and in some cases, abuse.

The Convention on the Rights of Persons with Disabilities (CRPD), signed in 2006, recognizes the imperative to undertake major reforms to protect and promote human rights in mental health. This is echoed in the Sustainable Development Goals (SDGs) which call for the promotion of mental health and wellbeing, with human rights at its core, and in the United Nations Political Declaration on universal health coverage.

The last two decades have witnessed a growing awareness of the need to improve mental health services, however, in all countries, whether low-, medium- or high-income, the collective response has been constrained by outdated legal and policy frameworks, and lack of resources.

The COVID-19 pandemic has further highlighted the inadequate and outdated nature of mental health systems and services worldwide. It has brought to light the damaging effects of institutions, lack of cohesive social networks, the isolation and marginalization of many individuals with mental health conditions, along with the insufficient and fragmented nature of community mental health services.

Everywhere, countries need mental health services that reject coercive practices, that support people to make their own decisions about their treatment and care, and that promote participation and community inclusion by addressing all important areas of a person's life – including relationships, work, family, housing and education – rather than focusing only on symptom reduction.

The WHO Comprehensive Mental Health Action Plan 2020–2030 provides inspiration and a framework to help countries prioritize and operationalize a person-centred, rights-based, recovery approach in mental health. By showcasing good practice mental health services from around the world this guidance supports countries to develop and reform community-based services and responses from a human rights perspective, promoting key rights such as equality, non-discrimination, legal capacity, informed consent and community inclusion. It offers a roadmap towards ending institutionalization and involuntary hospitalization and treatment and provides specific action steps for building mental health services that respect every person's inherent dignity.

Everyone has a role to play in bringing mental health services in line with international human rights standards – policy makers, service providers, civil society, and people with lived experience of mental health conditions and psychosocial disabilities.

This guidance is intended to bring urgency and clarity to policy makers around the globe and to encourage investment in community-based mental health services in alignment with international human rights standards. It provides a vision of mental health care with the highest standards of respect for human rights and gives hope for a better life to millions of people with mental health conditions and psychosocial disabilities, and their families, worldwide.



**Dr Ren Minghui**

*Assistant Director-General*

*Universal Health Coverage/Communicable and Noncommunicable Diseases*

*World Health Organization*

# Acknowledgements

## Conceptualization and overall management

Michelle Funk, Unit Head, and Natalie Drew Bold, Technical Officer; Policy, Law and Human Rights, Department of Mental Health and Substance Use, World Health Organization (WHO), Geneva, Switzerland.

## Strategic direction

### *Strategic direction for the WHO documents was provided by:*

Keshav Desiraju, Former Health Secretary, New Delhi, India

Julian Eaton, Mental Health Director, CBM Global, London, United Kingdom

Sarah Kline, Co-Founder and Interim Chief Executive Officer, United for Global Mental Health, London, United Kingdom

Hernan Montenegro von Mühlenbrock, PHC Coordinator, Special Programme on Primary Health Care, WHO, Geneva, Switzerland

Michael Njenga, Executive Council Member, Africa Disability Forum, Chief Executive Officer, Users and Survivors of Psychiatry in Kenya, Nairobi, Kenya

Simon Njuguna Kahonge, Director of Mental Health, Ministry of Health, Nairobi, Kenya

Soumitra Pathare, Director, Centre for Mental Health Law and Policy, Indian Law Society, Pune, India

Olga Runciman, Psychologist, Owner of Psycovery Denmark, Chair of the Danish Hearing Voices Network, Copenhagen, Denmark

Benedetto Saraceno, Secretary General, Lisbon Institute Global Mental Health, CEDOC/NOVA, Medical School, Lisbon, Portugal

Alberto Vásquez Encalada, President, Sociedad y Discapacidad (SODIS), Geneva, Switzerland

## Writing and research team

Michelle Funk and Natalie Drew Bold were lead writers on the documents and oversaw a research and writing team comprising:

Patrick Bracken, Independent Psychiatrist and Consultant, West Cork, Ireland; Celine Cole, Consultant, Department of Mental Health and Substance Use, WHO, Airlingen, Germany; Julia Faure, Consultant, Policy, Law and Human Rights, Department of Mental Health and Substance Use, WHO, Le Chesnay, France; Emily McLoughlin, Consultant, Policy, Law and Human Rights, Department of Mental Health and Substance Use, WHO, Geneva, Switzerland; Maria Francesca Moro, Researcher and PhD candidate, Department of Epidemiology, Mailman School of Public Health Columbia University, New York, NY, United States of America; Cláudia Pellegrini Braga, Rio de Janeiro Public Prosecutor's Office, Brazil.

**Afiya House – Massachusetts, USA:** Sera Davidow, Director, Wildflower Alliance (formerly known as the Western Massachusetts Recovery Learning Community), Holyoke MA, USA

**Atmiyata – Gujarat, India:** Jasmine Kalha, Program Manager and Research Fellow; Soumitra Pathare, Director (Centre for Mental Health Law and Policy, Indian Law Society, Pune, India).

**Aung Clinic – Yangon, Myanmar:** Radka Antalikova, Lead Researcher, Thabyay Education Foundation, Yangon, Myanmar; Aung Min, Mental health professional and Art therapist, Second team leader, Aung Clinic Mental Health Initiative, Yangon, Myanmar; Brang Mai, Supervisor Counsellor and Evaluation Researcher (team member), Aung Clinic Mental Health Initiative, YMCA Counselling Centre, Yangon, Myanmar; Polly Dewhirst, Social Work and Human Rights Consultant/ Trainer and Researcher of Case Study Documentation, Aung Clinic Mental Health Initiative, Yangon, Myanmar; San San Oo, Consultant Psychiatrist and EMDR Therapist and Team Leader, Aung Clinic Mental Health Initiative, Yangon, Myanmar; Shwe Ya Min Oo, Psychiatrist and Evaluation Researcher (team member), Aung Clinic Mental Health Initiative, Mental Health Hospital, Yangon, Myanmar.



**BET Unit, Blakstad Hospital, Vestre Viken Hospital Trust – Viken, Norway:** Roar Fosse, Senior Researcher, Department of Research and Development, Division of Mental Health and Addiction; Jan Hammer, Special Advisor, Department of Psychiatry, Blakstad Division of Mental Health and Addiction; Didrik Heggdal, The BET Unit, Blakstad Department; Peggy Lilleby, Psychiatrist, The BET Unit, Blakstad Department; Arne Lillelien, Clinical Consultant, The BET Unit, Blakstad Department; Jørgen Strand, Chief of staff and Unit manager, The BET Unit, Blakstad Department; Inger Hilde Vik, Clinical Consultant, The BET Unit, Blakstad Department (Vestre Viken Hospital Trust, Viken, Norway).

**Brazil community-based mental health networks – a focus on Campinas:** Sandrina Indiani, President, Directing Council of the Serviço de Saúde Dr. Candido Ferreira, Campinas, Brazil; Rosana Teresa Onocko Campos, Professor, University of Campinas, Campinas, Brazil; Fábio Roque Ieiri, Psychiatrist, Complexo Hospitalar Prefeito Edivaldo Ors, Campinas, Brazil; Sara Sgobin, Coordinator, Technical Area of Mental Health, Municipal Health Secretariat, Campinas, Brazil.

**Centros de Atenção Psicossocial (CAPS) III – Brasilândia, São Paulo, Brazil:** Carolina Albuquerque de Siqueira, Nurse, CAPS III – Brasilândia, São Paulo, Brazil; Jamile Caleiro Abbud, Psychologist, CAPS III – Brasilândia, São Paulo, Brazil; Anderson da Silva Dalcin, Coordinator, CAPS III – Brasilândia, São Paulo, Brazil; Marisa de Jesus Rocha, Occupational Therapist, CAPS III – Brasilândia, São Paulo, Brazil; Debra Demiquele da Silva, Nursing Assistant, CAPS III – Brasilândia, São Paulo, Brazil; Glaucia Galvão, Supporter Management of Network and Services, Mental Health, Associação Saúde da Família, São Paulo, Brazil; Michele Goncalves Panarotte, Psychologist, CAPS III – Brasilândia, São Paulo, Brazil; Cláudia Longhi, Coordinator, Technical Area of Mental Health, Municipal Health Secretariat, São Paulo, Brazil; Thais Helena Mourão Laranjo, Supporter Management of Network and Services, Mental Health, Associação Saúde da Família, São Paulo, Brazil; Aline Pereira Leal, Social Assistant, CAPS III – Brasilândia, São Paulo, Brazil; Iara Soares Pires Fontagnelo, Occupational Therapist, CAPS III – Brasilândia, São Paulo, Brazil; Igor Manoel Rodrigues Costa, Workshop Professional, CAPS III – Brasilândia, São Paulo, Brazil; Douglas Sherer Sakaguchi, Supervisor Técnico, Freguesia do Ó, Brasilândia, São Paulo, Brazil; Davi Tavares Villagra, Physical Education Professional, CAPS III – Brasilândia, São Paulo, Brazil; Alessandro Uemura Vicentini, Psychologist, CAPS III – Brasilândia, São Paulo, Brazil.

**East Lille network of mental health services – France:** Antoine Baleige, Praticien hospitalier, Secteur 59G21, Centre Collaborateur de l'Organisation mondiale de la Santé (Lille, France); Alain Dannet, Coordonnateur du GCS, Centre Collaborateur de l'Organisation mondiale de la Santé (Lille, France); Laurent Defromont, Praticien hospitalier, Chef de pôle, Secteur 59G21, Centre Collaborateur de l'Organisation mondiale de la Santé (Lille, France); Géry Kruhelski, Chief Nurse Manager, Secteur 21, Centre Collaborateur de l'Organisation mondiale de la Santé (Lille, France); Marianne Ramonet, Psychiatrist, Sector 21, Centre Collaborateur de l'Organisation mondiale de la Santé (Lille, France); Jean-Luc Roelandt, Psychiatrist, Centre collaborateur de l'OMS pour la Recherche et la Formation en Santé mentale, Etablissement Public de Santé Mentale (EPSM) Lille-Métropole, France; Simon Vasseur, Psychologue clinicien, Chargé de mission et des affaires internationales, Centre Collaborateur

预览已结束，完整报告链接和二维码如下：

[https://www.yunbaogao.cn/report/index/report?reportId=5\\_23826](https://www.yunbaogao.cn/report/index/report?reportId=5_23826)

