

# Families as Peer Workers in Early Intervention Organisations: Knowledge Translation Plan

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Professional training

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# Introduction: Knowledge Translation

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The emerging field of knowledge translation challenges researchers to think beyond traditional ways of producing and disseminating research to increase the integrity, uptake, and applicability of their research

Dew & Boydell, 2017, p. 2

Knowledge translation refers to the process of translating research into practice and policy. Knowledge translation optimizes the impact of research, and describes the movement of research into action. As Leone, Modica & West (2017) argue, 'knowledge translation is the synthesis, exchange and application of knowledge by relevant stakeholders to accelerate innovation in improving children's health and strengthening health systems' (p. 3, adapted from the World Health Organisation, 2006). Knowledge translation ensures that research has impact, which is measured as the 'demonstrable contribution that research makes to the economy, society, culture, national security, public policy or services, health, the environment, or quality of life, beyond contributions to academia' (p. 11, quoting Australian Research Council, 2012).

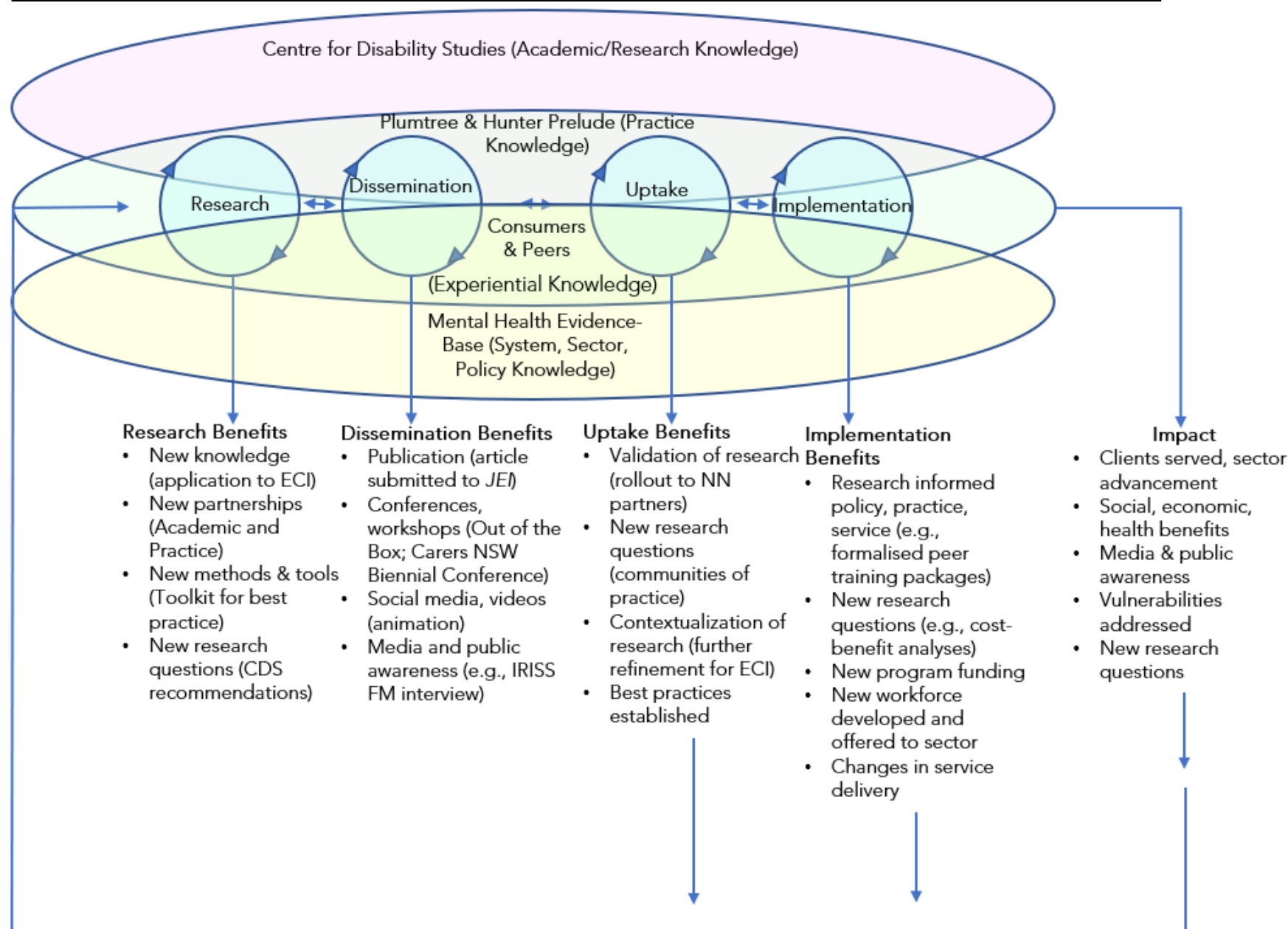
As Dew and Boydell (2017) note, 'although the aim of applied disability research is to influence practice, it takes a long time for research results to reach those who use and those who deliver services' (p. 1), with an average 17-year hiatus between health care innovations to reach practice, and with a mere 14% of all health research discoveries being realised in practice. They also note the likelihood for high quality research to be solely published in academic peer-reviewed journals, which (although a vital component of research quality control) has little potential for broader impact. They call for a variety of knowledge translation strategies to make research findings accessible to different stakeholder audiences: not every strategy needs to appeal to every stakeholder audience, but strategies should exist to communicate knowledge to all stakeholders.

In this document, we outline our plan (thus, our Knowledge Translation Plan or KTP) for ensuring that our research and project benefits knowledge users, with the understanding that knowledge translation should give attention to all possible stakeholders (Davis et al., 2003). We acknowledge that there are multiple sources of knowledge, including: research knowledge (held by researchers); practice knowledge (held by practitioners); experiential knowledge (held by parents and communities); organisational knowledge (held by service system organisers), and policy knowledge (held by policy makers) (see Figure 1). Our KTP thus encompasses all these diverse forms of knowledge and attempts to represent them. This KTP, then, is our plan for impact; it is an impact pathway that allows the transfer of our research, and its implications and significance to the ECI and disability sectors, to all stakeholders.

We also recognise that "'getting to impact is a shared enterprise" that requires ongoing collaboration throughout the process from research to impact' (Phipps et al., 2016 in Leone, Modica & West, 2017, p. 23). This KTP indicates such moments of necessary collaboration, in order to reduce the gap between evidence and practice (Davis et al., 2003; see Figure 1).

# Figure 1. Co-Produced Pathway to Impact

(based on Leone, Modica & West, 2017, p. 24)



# The Knowledge Translation Action Plan

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Dew and Boydell (2017) identify that at its basis, a KTP needs:

1. Clear knowledge translation aims
2. Identified stakeholders
3. Main research messages
4. Audience-specific knowledge translation strategies, and
5. Measurement of impact

The Melbourne Children's Knowledge Translation and Research Impact Project (Leone, Modica & West, 2017) expands upon this foundation to show goals (knowledge translation aims), inputs, processes, outputs, outcomes and impact. We have prepared the following KTP primarily using the latter model, with differentiated strategies targeting our identified stakeholders (academics/researchers; organisations; consumers and peers; sector and policy influences and directors).

## 1. The Knowledge Translation Aim

The aim of our KTP is to disseminate to the ECI and broader disability sector our key research messages that:

- ✓ Peer workers offer unique benefits to families of young children with disability and developmental delay that are not available through existing early childhood intervention (ECI) organisations but which are complementary to them; these benefits also impact positively on the peer workers themselves, and are vital and should be explored and developed further.
- ✓ Plumtree's experiences with introducing peer work parallel those in the mental health sector, which therefore have direct relevance to ECI.
- ✓ The implementation of peer workforce models faces challenges and barriers but these can be mitigated by rigorous and pre-emptive organisational action, sector development, and education of the community on the benefits of peer work.

## 2. Identified Stakeholders

In the project we acknowledge that there are four key stakeholder groups, which are both the recipients of the knowledge translation, as well as informing that knowledge. Thus we identify the requirement for:

- i. Knowledge translation targeted at building academic/research knowledge OR accessing academic/research knowledge;
- ii. Knowledge translation targeted at building practice/organisational knowledge OR accessing practice/organisational knowledge;

- iii. Knowledge translation targeted at building consumer and peer knowledge OR accessing consumer/peer knowledge, and
- iv. Knowledge translation targeted at building system, sector and policy knowledge OR accessing system/sector/policy knowledge.

### 3. The Research Message: The Concept of Peer Work

The concept of peer work evidenced by the project and core to the research message of the KTP are:

1. **Peer workers offer unique benefits to families of young children with disability and developmental delay that are not available through traditional ECI interventions but which are complementary to them; these benefits also impact positively on the peer workers themselves, and are vital and should be explored and developed further.**
  - What was particularly interesting is that both peer workers and service users saw peer workers as a 'neutral' or 'unbiased' source of information. Although neither group saw that the peer worker's role was to offer clinical advice, they both agreed that peer workers have no inherent conflict of interest and are more attentive to a holistic approach.
  - Peer workers saw their role as encouraging families to take greater responsibility for goal-setting and decision-making, rather than relying on traditional professional staff, and families agreed that empowerment and agency were unique benefits of working with peer staff.
  - Importantly, peer work is mutually beneficial: it benefits both service users and the peer workers themselves. By translating adverse circumstances into something positive, peer workers saw that they were 'giving back' and empowering themselves and others, and service users saw that peer workers were role models, showing the potential for living a better, more fulfilling life.
  - Implications for decreasing the social isolation and loneliness associated with parenting children with disability was another benefit experienced by both peer workers and service users alike.
2. **Plumtree's experiences very closely echo the mental health outcomes, and therefore lessons from the mental health sector have direct relevance to ECI.**
  - When we began the project, we did not want to ignore the lessons learnt in the mental health sector, which has employed peer workforces for decades. However, we did not anticipate that the correlations between Plumtree's experiences (both in terms of benefits and barriers) would be so exact.
  - With the publication of the CDS report, we were able to see how precisely Plumtree's experiences parallel those of the many mental health and associated service providers who have adopted peer workforce models.
  - The implication of this finding is that the ECI sector (and the disability sector more broadly) can and should have an intimate understanding of mental health best practice to inform our own best practices, to lessen the potential challenges and to amplify the potential benefits of peer workers, as well as to do so with a speed and cost-effectiveness that can only come from circumventing decades of research.

3. The implementation of peer workforce models faces challenges and barriers but these can be mitigated by rigorous and pre-emptive organisational action, sector development, and education of the community on the benefits of peer work.
  - It is clear from the mental health and Plumtree experiences that the implementation of a peer workforce can encounter many challenges, and the complexity of the task should not be underestimated or understated.
  - However, it is equally clear that when organisations proactively address these potential challenges and barriers prior to (or as integral to) implementation, the challenges are significantly diminished. For example, it is evident that having a conducive organisational culture is vital to the successful integration of peer workers, so that undertaking an organisational cultural assessment is a crucial first step to assessing suitability.
  - Understanding the challenges and facing them preventively is essential to realising peer worker benefits and to retaining a peer workforce.

## 4. Knowledge Translation Action Plan (audience-specific knowledge translation strategies)

### Project deliverables

The project commenced in June 2017 and ended July 30, 2018. During that period, the following activities were completed:

- i. A *Literature Review* on peer work in mental health and ECI, 22,000 words (Heyworth, 2018a);
- ii. Research into and report on the use of peer workers in ECI organisations conducted by the University of Sydney's Centre for Disability Studies (O'Brien, Taylor & Riches, 2018);
- iii. *Families as peer workers: A toolkit for professionals*, 18,000 words (Heyworth, 2018b);
- iv. Journal article on peer work in ECI (Heyworth & Mahmic, 2018);
- v. A script and storyboard for an animated video disseminating benefits of peer work to service users, and
- vi. Knowledge Translation Plan listing activities we will undertake to disseminate key messages from the project.

### Knowledge Translation Plan

The table on the following page documents the audience-specific knowledge translation activities that form the KTP.

Strategy for dissemination	Target audience	Resources available as part of project	Status
Project deliverables i, ii, iii available on Plumtree website	Policy makers, Academics, ECI organisations	Available	In progress
One page summary of the project	Policy makers, Academics, ECI organisations	Available	In progress
Presentation at conferences, including NDS Out of the Box September 2018. Abstracts submitted to date: ISEI Sydney 2019 Carers NSW 2018 NDIS Mental Health 2018	Policy makers, Academics, ECI organisations, and Consumers	Provided by Plumtree	In progress
International promotion of peer work in ECI via IRISS-FM, a Scottish organisation promoting best practice innovation in social services. Podcast due to be recorded August 2018	Policy makers, Academics, ECI organisations, Broader disability, and Social services sectors		
20 sets of deliverables i, ii, iii printed	Key influencers in disability policy and government	Available	In progress
Deliverable iv (journal article on peer work in ECI, Heyworth & Mahmic, 2018) submitted to <i>Journal of Early Intervention</i>	Policy makers, Academics, and ECI organisations	Available	Complete
Broader printing of <i>Families as peer workers: A toolkit for professionals</i> (Heyworth, 2018b)	Policy makers, Academics, and ECI organisations	None	Pending funding
Further journal articles written to contribute to the evidence of peer work in ECI	Policy makers, Academics, and ECI organisations	None	Pending funding
Social media strategy to promote peer work in ECI	Consumers, ECI organisations, and Broader disability sector	None	Pending funding
Infographics developed to disseminate via social media strategy	Consumers, ECI organisations, and Broader disability sector	None	Pending funding
Complete animation on benefits of peer work in ECI	Consumers, and ECI organisations	None	Pending funding
Blog posts to promote key messages	Consumers, ECI organisations, and Broader disability sector	None	Pending funding
Sector development to promote understanding and provide training	ECI organisations, and Broader disability sector	None	Pending funding
Further research on peer work in ECI	All stakeholders	None	Pending funding



# References

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- Davis, D., Evans, M., Jada, A., Perrier, L., Rath, D., Ryan, D., Sibbald, G., Straus, S., Rappolt, S. Wowk, M., & Zwarenstein, M. (2003). The case for knowledge translation: Shortening the journey from evidence to effect. *BMJ*, 327, 33-35.
- Dew, A., & Boydell, K. M. (2017). Knowledge translation: bridging the disability research-to-practice gap. *Research and Practice in Intellectual and Developmental Disabilities*, 1-17. doi: 10.1080/23297018.2017.1315610
- Heyworth, M. (2018a). *Families as peer workers in early intervention organisations: Literature review*. Marrickville, NSW: Plumtree Children's Services, Inc.
- Heyworth, M. (2018b). *Families as peer workers: A toolkit for professionals*. Marrickville, NSW: Plumtree Children's Services, Inc.
- Heyworth, M, & Mahmic, S. (2018). Families as peer workers: Implementing an innovative workforce in ECI organizations. Submitted to *Journal of Early Intervention*, July 2018.
- Leone, V., Modica, L., & West, S. (2017). *The Melbourne Children's knowledge translation and research impact project. Final report: A framework for action*. Parkville, VIC: The Centre for Community Child Health at The Royal Children's Hospital and the Murdoch Children's Research Institute. Retrieved from <http://apo.org.au/node/99511>.
- O'Brien, P., Taylor, D., & Riches, T. (2018). *The Role of Peer Facilitators in the Now & Next Program*. Centre for Disability Studies, University of Sydney.