
CONFERENCE ABSTRACT

Hope, bridge, meaning: Implementing peer-support in homelessness during the COVID pandemic

1st North American Conference on Integrated Care, Toronto, 4 - 7 October 2021

Mathieu Isabel¹, Daniel Turgeon, Antoine Boivin, Nadia O'Brien, Gwenvaël Ballu, Genevieve Castonguay, Ghislaine Rouly

¹ Canada Research Chair in Partnership with Patients and Communities, Canada

Introduction

The COVID-19 pandemic disproportionately affects people experiencing homelessness, both in terms of health and psychosocial impacts. Building trust and collaborations with healthcare services and community resources are paramount to mitigate the consequences of the pandemic, especially in heavily affected urban areas across Canada. Peer-support programs have been associated with improved sense of empowerment, quality of life, reduced substance use, and increased access and use of primary care services. However, it is unclear whether the implementation of a peer support intervention in homelessness is feasible in the context of a pandemic that has profound impacts on existing community services.

Aims Objectives Theory or Methods

This project aimed at assessing the benefits, feasibility and acceptability of implementing a peer-support intervention for people experiencing homelessness during the COVID pandemic in Montreal. Working collaboratively and playing a bridging role between primary care professionals and community organizations, a peer-support worker performed on-site visits in shelters, outreach interventions in the street, and participated in clinical discussions. He offered support through shared experiences, role modeling, and linkages to different resources. A focus group was conducted in March 2021 with clinicians, administrators and the peer-support worker himself to reflect on their experience of integrating a peer-support worker within their team.

Highlights or Results or Key Findings

We documented strong support and reciprocal benefits for all those involved in this initiative, including clinical team members, the peer-support worker himself and people living with homelessness. Three key findings emerged from our focus group. 1) Peer-support offers hope for people experiencing homelessness, through the embodied example of a peer who built a new life beyond his experience in the streets. 2) Peer-support acts as a bridge, helping to establish trustful relationships with people experiencing homelessness despite social stigma and suspicion toward public institutions. It practically helps to connect with a number of resources in the community and

healthcare system. 3) Peer-support brings a sense of shared meaning among team members, reconnecting them with the purpose of their work during the darkest days of the COVID crisis. Peer-support also prevents compassion fatigue by supporting care providers in addressing their client's psychosocial needs.

Conclusions

Peer-support offered a model of hope for people experiencing homelessness during the COVID pandemic. It served as a bridge between health and community resources, and contributed to a sense of shared meaning and mutual support for care providers. Strong and productive relationships between clinical and community partners were also established.

Implications for applicability/transferability sustainability and limitations

It is feasible to implement peer-support in homelessness, even during an acute crisis such as a pandemic. Peer-support can act as a powerful leverage for integration between clinical and community care for people living with complex conditions. Future research should document the long-term impacts and sustainability of such programs.