> *'Finally, someone who doesn't judge me'.*

Evaluation of Peer Research Method for the YOLO Study:
'Transitions and Outcomes for Care Leavers with Mental Health and/or Intellectual Disabilities'.

Dr Sandra Dowling
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1. Introduction

This report presents an evaluation of the peer research methodology used in the study: *You Only Leave Once*: *Transitions and Outcomes for Care Leavers with Mental Health Needs and/or Learning Disabilities.* The study employed a two-stage mixed methods approach, the second stage of which involved conducting 31 case studies of care leavers across NI. For these case studies, care leavers aged between 16-25 who have mental health needs and/or intellectual disabilities were interviewed three times over the course of 18 months (the mid-stage interview being at 6 months, where possible, by phone). Young people who had personal experience of care were employed and trained as peer researchers on the project. They were involved in conducting interviews with participants and in the analysis of interview data.

1.1 Overview of project team

The study was led by Principal Investigator (PI) Dr Berni Kelly with Dr Theresa McShane as the full time researcher on the project. Other members of the research team supporting the peer research approach as co-investigators were: John Pinkerton (QUB), Gavin Davidson (QUB), Eithne Gilligan (VOYPIC), Teresa Hazzard (Mencap) and Paul Webb (Praxis Care).

This independent evaluation of the peer research approach was funded by the R&D office and undertaken by an external evaluator, Dr Sandra Dowling, who was not a member of the research team. It involved a formative evaluation of the process of the peer research approach at core stages of the research process (recruitment and training; interviewing and involvement in data analysis) and a summative evaluation of the experiences and outcomes of the peer research method. The report also brings together key messages and recommendations for designing and delivering peer research projects.

1.2 Aims and objectives of the evaluation

The overall aim was to evaluate the process and outcomes of the peer research methodology. The specific objectives were:

- To investigate the process of recruitment, selection, training and management of peer researchers;
- To examine the benefits and challenges of the peer research approach;
- To ascertain the views of research participants on the experience of being interviewed by a peer researcher; and
- To investigate the added value of the peer research approach to the study and to the peer researchers.

2. Methodology

A range of methods were employed in this evaluation, both quantitative and quantitative. Methods were responsive to the particular stage of the evaluation and included:

- Analysis of data on all activity related to recruitment and training of peer researchers including recruitment strategy, drop-out rates and demographics of those recruited
- Pre- and post-training training questionnaires completed by peer researchers
- Individual interviews with peer researchers
- Focus groups with peer researchers
- Focus groups with the research team
- Short surveys completed by each interviewee at the end of their first and third interview
- Final workshop

Table one below shows the timing of these data collection points as the study progressed, including data collected from peer researchers, the professional research team and study participants.

Table 1: Overview of data collection

	Peer researchers	Research team	Participants
Post initial interviews May 2015	Focus group	Focus group	Feedback sheets
	Interviews		
	Interview with peer researcher leaving project		
Following MAXQDA training July 2015	Brief focus group/discussion		
Post follow –up interviews and refresher training September 2015	Focus group	Focus group	Feedback sheets
	Short questionnaire		
	Interviews		
Final Workshop April 2016	Reflection/discussion	Reflection/discussion	

2.1 Overview of methods

Data were collected using a range of methods including focus groups, 1-1 interviews and short questionnaires. With peer researchers focus groups were used to draw out key issues and these issues were then explored in more depth during 1-1 interviews with each peer. Focus groups were at times structured around an exercise/activity to get the group talking about the presenting issues. A short questionnaire was also used on occasion to gather feedback data from peers.

Data was collected from the research team using focus groups primarily, however on occasion when a member was unable to attend the focus group a 1-1 interview was carried out.

In all instances interviews and focus groups were audio recorded and transcribed for analysis. Transcripts were printed, carefully read and reread then manually coded using a process of thematic analysis.

Research participants completed feedback questionnaires following their interviews. These recorded participants' views on being interviewed by a peer. The questionnaires became a component of the evaluation data. Data from these forms were entered into excel. Data were aggregated and analysed in relation to the impairment type of the participant, the gender of participants and the gender of peer researchers and in terms to feedback relating to individual peer researchers.

May 2015
A focus group followed by 1-1 interviews were carried out with peer researchers at the end of the first stage of interviews. Two peer researchers were able to attend in person and a third was interviewed on the phone on a separate occasion. The timing of these interviews coincided with the departure of one peer researcher, who was interviewed separately in relation to their role on the study, both in terms of input and what they had gained through participation. During the same period a new member of the peer research team was recruited to the study. An interview was carried out with this young person at the time of their recruitment and a focus group was conducted with the research team at this time point.

Participant feedback forms were collected from the majority (26/31) of study participants, following their initial interviews. These forms captured participants' views on being interviewed by a peer researcher.

July – September 2015
Following MAXQDA training a brief focused discussion was held with peer researchers (July 2015) and this was followed in early September by a detailed focus group and individual interviews with each peer researcher. During the focus group peers completed a brief feedback questionnaire and together worked on an exercise considering the benefits and challenges of their engagement in the study. The identified three benefits and challenges, then three positives and negatives and ranked these, by consensus according to importance. This produced a useful structure for discussion. 1-1 interviews with each peer researcher followed the focus group. Three of the four peer researchers were able to attend on this occasion. A peer evaluator assisted with the focus group and interviews in the September data collection. The recruitment and role of the peer evaluator is described below.

The research team took part in a focus group at this time point. As the representative from VOYPIC was unable to attend a separate telephone interview was conducted to capture her views.

April 2016

A final workshop was convened at QUB and led by the project PI. Members of the research team as well as the remaining four peer researchers were in attendance. The agenda for the day included time to revisit the underlying premise of the research, namely social justice. Then to go on to look at peer researchers reflections on what they had learnt, contributed and how they had grown through the project. Peer researchers then went on to consider themes from the project and to develop recommendations for a peer research approach to research. Time was also given over to consideration of project outputs and peer researchers potential involvement in dissemination.

2.2 Recruitment and role of peer evaluator

To continue the peer research method in the evaluation, a peer evaluator was recruited to assist with the evaluation. There was a delay in recruitment of a peer evaluator as the young person initially identified by VOYPIC turned out to be unavailable to take part in the project. The peer evaluator was eventually recruited to the project in July 2015 in advance of the evaluation data collection which took place following telephone interviews and in advance of final interviews.

The process of recruiting the peer evaluator was as follows. With the permission of the young person contact details were passed on to the evaluator from VOYPIC. The evaluator then contacted the young person by phone and gave him some initial information about the project and the proposed role of the peer evaluator. The young person expressed an interest and the evaluator set up a meeting with the young person. At the meeting the evaluator was able to give a fuller description of the project, and to assess whether the young person might be able to undertake the work in terms of their fit with the role and their availability. This young person is care experienced and has previously engaged with VOYPIC through which initial contact with him was made.

Following this meeting, it was agreed that this young person would begin to assist on the project at the next round of interviews planned with peer researchers in September 2015. Prior to taking part in interviews the young person received training from the evaluator. This consisted of providing detailed information of the work that peer researchers were engaged in, revisiting the aims of the evaluation and the role of the peer evaluator, as well as working on interview skills.

This training was undertaken during a 3-hour period in early September prior to the peer evaluator actively engaging in work with the peer researchers. Following the work with peer researchers, the peer evaluator and the evaluator had a debriefing session where they discussed the work that had been conducted and how the peer evaluator felt the work had gone from their perspective. There input was valuable and added a further dimension to the peer research methodology by having peer researchers interviewed by a peer. In a future evaluation of a peer research method this approach could be developed more fully.

3. Recruitment of Peer Researchers

An early task of the study was to recruit a team of peer researchers to the project. This required detailed planning and a sensitive approach. Recruitment of peer researchers took place between October 2013 and February 2014. Potential participants were alerted to the opportunity through targeted advertising which was circulated through the project partner organisation VOYPIC as well as other relevant organisations in the voluntary sector in Northern Ireland. Student Support Officers and Disability Officers at the University of Ulster and QUB also informed care experienced young people involved in third level education, by direct email, about the position. In addition, posters were placed across the QUB campus. Finally, information about the peer research opportunity was shared with 16+ social services teams across Northern Ireland. An application form and job description was made available to everyone who enquired about the post.

The research team found that advertising the role through 16+ teams yielded a good response, however, these young people were less likely to attend for interview or express clear motivation for the position peer researcher:

> 'The motivation of those contacted through Trusts seemed to more closely reflect the aspirations of their social workers for them than their own interests'.

Recruitment via VOYPIC yielded a satisfactory response, however, in retrospect it was suggested that more efforts could have been made to market the opportunity more widely through this organisation:

> 'It may have been beneficial to 'roadshow' recruitment through VOYPIC prior to formal recruitment beginning, to encourage interest'.

A total of 21 care experienced young people, aged between 18-25 years, applied for the positions. All of the young people who applied were offered interviews and invitation letters were sent to each detailing the time and location of their interview. To assist young people to prepare for their interview, they were asked to consider two questions which focused on their relevant skills and experience and what they considered to be the challenges of peer research.

In preparing for the interviews young people considered this preparatory questions and also used a range of additional strategies. Some undertook research online to learn more about the role of a peer researcher, others turned to their personal advisors at VOYPIC for advice and guidance. Some young people reflected on their personal and previous work experiences and related these to their ideas about the role of a peer researcher.

There were two main motivating factors for young people who applied for the peer research role. Firstly, young people expressed an altruistic stance, hoping to make a difference to others, to help and to have an impact on policy. One young person stated that they wanted to:

'…make *a change in policy and to give unheard people a voice.'*

Whilst another said they wanted an:

 '…opportunity to help in an area that had been neglected.'

Secondly, peer researchers reported that being part of the project would enable them to gain new skills, develop their confidence and acquire *'valuable work experience'.* Team members who sat on the interview panels noted that applicants were commonly motivated by empathy or a desire to help alongside the opportunity to develop their own skills:

 'There were two types of applicants – those who felt they had skills to bring to the project and those who thought they would gain skills through taking part'.

It was acknowledged that, for some applicants, it was their first experience of being formally interviewed for a post. The formal interview process, whilst challenging for many of the young people was deemed to be necessary to elicit enough information about young people and their fit with the peer research role. Experience of a formal interview was also considered to be a good learning experience for applicants.

 'The formality of the interview process communicates the seriousness of the task ahead'.

3.1 Withdrawal from the application process
Nine of the 21 who were invited for interview did not attend for interview. Two of these young people contacted the researcher in advance of their interview to withdraw due to college or work demands. One applicant was ill at the time of interview and declined the offer of an alternative date. A further young person was homeless when making the application and he could not be contacted to arrange the interview despite the extensive efforts of the researcher and his social worker to locate him. Five young people did not attend for interview without giving any reason.

3.2 Interviews
Interviews were held in both Derry and Belfast (in the West and East of NI) on four separate occasions. Each applicant was interviewed once. The panel was made up of three people; Berni Kelly (PI), Theresa McShane (Researcher) and Eithne Gilligan from VOYPIC (three occasions) or Gavin Davidson from QUB (one occasion). Panel members used a series of set questions to assess applicants' suitability. These included questions about relevant experience or skills and their views on the issues which may affect care leavers with intellectual disabilities or mental health needs. Applicants were also asked about practicalities such as their availability for training (it was made clear that attendance at five full days of training was compulsory), willingness to undertake travel to conduct research interviews and willingness to having an Access NI check completed.

Twelve young people attended for interview. A score sheet was used to assess their performance at interview in relation to each question asked. A possible score of 10 points could be achieved for each question, with six questions in total. The maximum score was therefore 60 points. The panel decided that all applicants who scored above 30 would be offered a position. Ten applicants were successful and were offered the opportunity to become a peer researcher.

3.3 Unsuccessful applicants

There were two applicants who attended for interview and were not offered a position. One applicant did not attend at their allocated time as they had overslept. They arrived late, and interview went ahead but the applicant did not perform well. The second applicant did not offer any evidence of independent motivation to become a peer researcher, indicating that her social worker had encouraged her to apply. She did not perform well in other areas of the interview. This applicant was also expecting a baby and was unsure about the level of commitment she could offer to the position. Both applicants were given constructive feedback to enable the development of interview skills and inform applicants of areas in which they could improve in future and offered a second opportunity to be interviewed with a view to helping them to develop their skills for job interviews. The female applicant declined this offer. The other applicant accepted but did not attend the second interview.

3.4 Successful applicants

Ten applicants were successful at interview. They were aged between 20-24 years and had a variety of care experiences (although applicants were not asked to give detail of their care experiences during interview, they usually volunteered information independently). One young person had lived in a kinship placement whilst others had lived in long term placements both in foster and residential settings. Some had experienced numerous placement changes during their time in care. Applicants also volunteered information about their own experiences of mental health needs, behavioural issues and learning difficulties (including poor literacy skills).

Applicants commonly gave altruistic reasons for wanting to take part in the project with a desire to be part of shaping a better future for young people leaving care. At interview it was clear that some applicants confused the role of mentor with that of peer researcher, the former being a role that they were more familiar with due to their association with voluntary organisations who offered mentoring opportunities. Applicants, however, did demonstrate an understanding of basic research skills and most were aware of the boundaries of confidentiality. Three of the applicants were enrolled in, or had completed, third level education which had included research skills training. At the time of the interview the remaining seven were either engaged in college courses or were unemployed.
At interview, applicants reported relevant experience which included working with young people as peer mentors or having held voluntary positions in their community. Applicants were also clear in their ideas about the issues which might affect care leavers including lack of adequate or appropriate support as well as vulnerability to poor mental health. Some young people related to their personal experiences and

demonstrated an empathetic understanding of the mental health issues which may face research participants. Applicants were less familiar with some of the issues which may affect care leavers with intellectual disabilities. General skills referenced by applicants were being good listeners, problem solvers and ability to work efficiently, on their own initiative and as part of a team. Some young people also discussed outside interests and hobbies.

3.5 Profile of applicants

Table 2 provides an overview of the profile of applicants. There are some differences in those who attended their interview and those who did not attend, although the numbers are too few to be able to make any meaningful inferences from them. However, it is notable that amongst those who did not attend over 70% were female, whereas amongst those who attended for interview only 41% were female. Although we only have an age recorded for 4/7 applicants who did not attend, three of these were amongst the youngest applicants in the process being aged 18 or 19 years.

Table 2: Profile of interviewed applicants

	Gender	**Age**	**Highest Educational Qualification**
Successful applicants	F	20	Degree
	F	23	Degree
	M	19	A-Level
	M	24	A-Level
	M	20	GCSE
	M	23	Degree
	M	21	FE College – Occupational Studies Level 1
	M	20	FE College – Essential Skills Level 1
	F	20	A-Level
	F	21	FE College Level 2
Unsuccessful applicants	M	20	FE College – Essential Skills Level 1
	F	22	FE College – City and Guilds
Applicants who did not attend for interview[1]	M	Not given	FE College - BTEC Level 2
	F	19	FE College - QCT Level 2
	F	23	Degree
	F	18	FE College - OCN
	F	18	FE College
	F	Not given	GCSE
	M	Not given	FE College – Access Diploma

3.6 Orientation workshop

In the early stages of the project, two key activities took place to orientate successful applicants to the role a peer researcher and the project. The first was a two-hour introductory session at QUB with the purpose of bringing the peer researchers together to meet each other for the first time and to give them more information about the study. This was attended by all successful applicants. At this session, the PI

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[1] Information available for 7/9 applicants who did not attend, the remaining two applications were made via their social worker by telephone and a written application is not available.

provided a presentation on the background to the study and the expected role of the peer researcher. This was followed by interactive activities led by Eithne Gilligan (VOYPIC) to encourage the peer researchers to make introductions and get to know each other.

The second orientation event was a day long peer research workshop held in March 2014 at QUB and attended by the research team, peer researchers, other academics engaged in peer research and representatives from voluntary organisations working with peer researchers. The morning session was a presentation from Dr Jo Dixon and Jade Ward (a peer researcher) from National Care Advisory Service (NCAS) and the University of York who had experience of doing peer research for a care leaver project in England.

In the afternoon session, young people divided into sub-groups with academic colleagues in attendance, with a view to discussing the benefits and challenges of peer research, and to share experiences of doing peer research. Discussions were recorded on flip charts and peer researchers took a lead in presenting feedback of their group's discussion to the wider group. Findings from analysis of this flip chart data indicated perceived benefits and challenges for peer researchers, research participants and the research process.

Three core themes were identified in relation to the benefits of peer research. Firstly, the growth in peer researchers' skills and experience including professional (research skills, communication, team working, and presentation skills) and personal (confidence and self-esteem) development. An increase in subject knowledge and understanding was also highlighted as a benefit to peer researchers which added to their potential to have a part in influencing policy relating to care leavers. Secondly, it was suggested that participants might be able to more easily relate to peer researchers who were close to them in age, had a common understanding of youth culture and shared experience of leaving care. These factors were thought to potentially enable the interview experience to be more accessible and less intimidating for participants. This redressing the power imbalances or hierarchies of expertise could have a potentially empowering experience for both peer researchers and research participants. Moreover, as interviews may have a relaxed and informal feel, more in-depth, high quality data may be generated. Groups also discussed the possibility that peer researchers could be positive role models for participants as young people who had left care and were moving on positively with their lives. Finally, peer researcher involvement in analysis could bring additional insight to the data through their personal experience and understanding of leaving care.

The challenges of a peer research methodology were also identified. Anticipated practical challenges included time management, maintaining a commitment to the project and lack of clarity about peer researchers' role and responsibilities. Thorough training and support was recommended to ensure that peer researchers are equipped with the relevant skills to make a meaningful contribution to the study. A further concern was around peer researchers' management of their own emotions during

interviews as memories of their own leaving care experiences may come to the fore. Learning how to manage the dynamics of an interview was also identified as a key challenge for the peer researchers. Ethical and professional issues of concern included: maintaining confidentiality; refraining from over-use of own leaving care experiences to respond to participants; and adopting an over-sensitive approach that avoided asking questions about important issues. These benefits and challenges are summarised in table 3 below.

Peer researchers were motivated by a desire to help other care leavers, however, there is a danger of interviews becoming more focused on advice and advocacy than the collection of research data due to the over-involvement of peer researchers. It was suggested that these concerns need to be addressed in the training and supervision of peer researchers. Finally, the additional financial and time costs of recruitment, training, supporting and supervising peer researchers as well as the cost of payment for peer researchers may be a challenge for this type of research.

Table 3. Summary of Benefits and Challenges of the Peer Research Approach

	Benefits	Challenges
To peer researchers	Skill development Acquisition of knowledge Growth of confidence and self-esteem Opportunity to have a voice and participate in leaving care research	Practical – time management, understanding of role, skills Personal – maintaining commitment, managing emotional involvement in issues
To participants	Able to make a connection with peer researchers – empathy, shared experience, shared youth culture Less stress as interview relaxed and informal Inspiring as having a chance to have their say	Skill deficit Maintaining an ethical and professional approach Adopting a sensitive attitude
To the research	Redressing power imbalances may elicit better responses from participants Connectedness to participants through personal experience Additional insight to analysis	Quality of data collection and analysis may be compromised Advocacy prioritised over research Financial and time costs

3.7 Attrition and subsequent recruitment

Following these orientation workshops, of the ten applicants who were offered a position as a peer researcher, 6 proceeded to training. One of the remaining four gained employment and, as a result, withdrew from the project. Three applicants attended a workshop day held at QUB (described below) but did not proceed to training. The research team reflected that, at this point, some of the applicants had

gained a better insight into expectations of the role of a peer researcher and felt unsure about the skills and time they could contribute to the study which may have led to their decision to withdraw from the project.

Of the six young people who proceeded to training, one applicant failed to attend two days of training and, as a result, effectively withdrew from the process. In total, five young people proceeded to complete the initial training programme. During the first round of interviews one of the peer researchers exited the project due to personal circumstances that led to the closure of their contact with VOYPIC, who were supporting the peer research element of the study, including administration of their payments. An exit interview was held with this peer researcher and three members of the professional research team who had worked closely with this peer researcher during training and interviews. At this meeting, the decision to withdraw from the study was confirmed. The peer researcher was offered the opportunity to analyse the transcripts of interviews he had conducted to ensure questions he felt were important for the follow-up interviews were included. The team also took the opportunity to give detailed positive feedback on the peer researcher's work to date and offered to be a point of contact for future employment-related references.

The peer researcher conducted a final interview with the evaluator at the time of their departure from the project. Although sad to be leaving the project, the peer researcher reflected extremely positively on the time that they had spent working on the project. They valued the training received and the experience gained from interviewing young people. The peer researcher felt that they had gained a lot both personally in terms of self-confidence and friendships, as well as professionally in terms of training and experience gained. This young person was also positive about the support they had received from the university and other staff on the project, in particular over the challenges of leaving the project earlier than anticipated.

As the departure of the peer researcher had been unplanned there had been no opportunity to prepare the remainder of the group. The peer researchers keep in touch using social media and were able to maintain contact with him in this way. The departure of this peer researcher did not appear to affect the rapport or morale of the group.

The cohesion of the group of peer researchers was apparent in their willingness to welcome a new member to their cohort. A new peer researcher was recruited midway through the project to replace the person who left, and he was quickly assimilated into the wider group at a planned opportunity for him to join the group for a co-training session. Their confidence and personal attributes as individuals meant that they were both flexible and welcoming with the change of personnel. An interview conducted with this peer researcher when newly recruited revealed that he had similar altruistic motivation to that expressed by others at interview, being keen to shape improvements in the care leaving experiences of young people. The new peer researcher brought experience of residential care, self-advocacy and a keen understanding of the

difficulties care leavers might face were combined with a willingness to learn and to face new challenges in the project.

Peer researchers and the wider research team indicated at the end of the study that, in contrast to the ten peer researcher that has been planned for the study, the smaller size of the team of peer researchers was helpful and led to close working relationships. One peer researcher stated:

> *'It can be better with a smaller team; it can ensure that everyone works well together.'*

Another reflected:

> *'If there had been more of us we would each have done fewer interviews and maybe not have been involved in the analysis, it wouldn't have worked well with more people I don't think'.*

The professional researcher concurred with this viewpoint:

> *'The reason we were planning on having a bigger team was because of the size of NI geographically…. So people wouldn't be leaving at 7am to get to an interview, but while it might have helped geographically, they wouldn't have got the same experience.'*

4. Training of Peer Researchers

Peer researchers came to the project with a range of skills and aptitudes. Two were university students, one was a graduate and the remaining two had training in mentoring and advocacy skills. Peer researchers had known people with intellectual disabilities or mental health needs informally or had experience of personal mental health difficulties. None had specific training or experience of qualitative research nor had they received formal training on disability or mental health. Initial training, therefore, had to address these areas in detail and develop interview skills and knowledge gaps in order to prepare them for their role in the study. Later training was responsive to issues arising at each stage of the research study, for example analysis or refresher training on alternative communication strategies.

An intensive, five-day, mandatory training programme was provided for peer researchers at the outset before they proceeded to undertake fieldwork. This training took place during March and April 2014 at QUB in Belfast or VOYPIC offices in Derry. All peer researchers were expected to attend training on each day. Training was delivered by the core research team with contributions from a care leaver and two adults with experience of intellectual disability or mental ill health. On completion of training, an 'assessment day' was held at QUB to offer peer researchers the opportunity to role play interviews raising challenging issues, and to have a one-to-one meeting with the research team to assess their progress and discuss their preparedness for the beginning of fieldwork.

In advance of commencing training, peer researchers met with two members of the research team (John Pinkerton (JP) and Eithne Gilligan (EG)) to discuss their hopes and fears in relation to the role and to complete a pre-training questionnaire. This was followed up after training when the peer researchers reflected on the training and discussed their readiness for the role of peer researcher.

During fieldwork, peer researchers met throughout the study for workshops and refresher training. In December 2014 a workshop day was held with the purpose of reflecting with peer researchers on the work completed to date during first interviews with participants. The peer researchers had the opportunity to consider the the challenges they had faced, the strengths they could identify in their practice and to reflect on whether there were areas where more training could be beneficial. They also used this workshop as an opportunity to plan for the next stage of the study, the mid-point interviews.

A one-day training session on using MAXQDA data analysis software took place in early July 2015. The aim of this session was to co-train the peer researchers, PI and lead researcher on using this computer package to assist data analysis. Refresher training took place in early September, over two separate days, delivered at QUB by the research team with input again from VOYPIC and Mencap. This training reiterated the rationale for the study, considered ethical issues and revised issues around disability and mental health issues.

This chapter will present feedback on the training given from the research team and peer researchers. It will begin with a description of all training given before going on to discuss feedback on the training process. Informal supports provided to peer researchers in the course of the project will also be described. Table 4 below shows training given to peer researchers throughout the project.

Table 4: Record of training throughout the project

Timescale		Training
March - April 2014	5 days	Initial training
April 2014	1 day	Assessment day
December 2014	1 day	Team building, reflection and training workshop
July 2015	1 day	MAXQDA training
September 2015	2 days	Refresher training

4.1 Mandatory training

Each day of the mandatory training programme had a specific focus, with a detailed structure and defined content, as outlined in the table below. Peer researchers were paid for their involvement in fieldwork, refresher training and analysis, however, they were not financially compensated for attending the initial mandatory training course. Only travel and catering costs were covered as an internal motivation was an important aspect of their attendance and engagement.

Table 5: Outline of initial training programme

TRAINING DAY	TRAINERS	TOPICS ADDRESSED
Day 1: The Research Context	Berni Kelly (PI) John Pinkerton (CI) Eithne Gilligan (CI) Theresa McShane (Researcher)	Issues for care leavers Own care leaving experience Aims of the study Overview of method Theoretical context
Day 2: Mental Health Awareness	Gavin Davidson (CI) Paul Webb (CI) Theresa McShane (Researcher) Jason Martin (Praxis care)	Understanding mental health Appropriate language Responding to mental health needs Own emotional well-being
Day 3: Disability Awareness	Berni Kelly (PI) Teresa Hazzard (CI) Theresa McShane (Researcher)	Understanding disability Appropriate language Assistive communication strategies Role playing interviews

	Paul McGowan (Mencap)	
Day 4: **Ethics**	Berni Kelly (PI) Eithne Gilligan (CI) Theresa McShane (Researcher) Olinda Santin (VOYPIC)	Consent process Confidentiality Keeping yourself and others safe Dealing with capacity issues Conflicts of interest Professional and personal relationships
Day 5: **Research Interview Skills and Process**	Berni Kelly (PI) John Pinkerton (CI) Theresa McShane (Researcher)	Planned interview process Themes and types of questions Expected follow up questions Inappropriate questions Practising interview approach Recording interviews

Training was delivered using a range of strategies which included presentations, group exercises, role play, use of online/multi-media resources and discussion groups. There was a strong emphasis on participation and active learning and a drive to keep the young people engaged and interested to enhance the learning experience, assist with the retention of new knowledge and encourage the development of supportive relationships within the group.

There was also opportunity for peer researchers to influence the planned interview approach. During the ethics training day peer researchers decided to script how they would introduce themselves to research participants and explain the peer research role. This could then be rehearsed in advance of actual interviews to help ensure clarity and to avoid sharing unnecessary personal details of their own leaving care journey. During the interviewing skills training day, the peer researchers discussed at length whether they would like to pair with another peer researcher or a member of the research team (PI or lead researcher) for the first interview. They unanimously agreed that they would prefer to pair with a member of the research team for support and for an opportunity to learn from an experienced researcher how to address any complex issues that may arise.

Four sources of data were analysed in relation to training evaluations: (1) a focus group with peer researchers to reflect on their hopes and fears for undertaking peer research role; (2) each day peer researchers completed a post-training evaluation form; (3) at the assessment session, peer researchers and research team members reflected on the training experience; (4) a focus group was held with the peer researchers to review the training and discuss preparedness for fieldwork; and (5) a pre-fieldwork focus group was held with the research team.

At the focus group conducted with peer researchers prior to their training, the peer researchers expressed their concerns about the work ahead of them. Much of this centred on interacting with research participants with concerns that they would not be able *'to connect with young people'* or that they would experience *'conflict or silence*

during the interviews'. Peer researchers also expressed some concerns about the amount of time and commitment that taking part in the work would involve, given their other work or study commitments. Additional comments volunteered by peer researchers focused on their being glad to be part of the study and positively a sense of being *'valued and appreciated'* by their research colleagues.

Following each training day, peer researchers were asked to complete evaluation forms. These forms provided an opportunity for peer researchers to score their level of understanding in relation to the particular topics covered on each day, at the beginning of the day (pre-training) and at the end of the day (post-training). Figure 2 shows the consistently higher rating given by peer researchers in relation to their knowledge and understanding of topics at the end of the training day by comparison with scores given at the beginning.
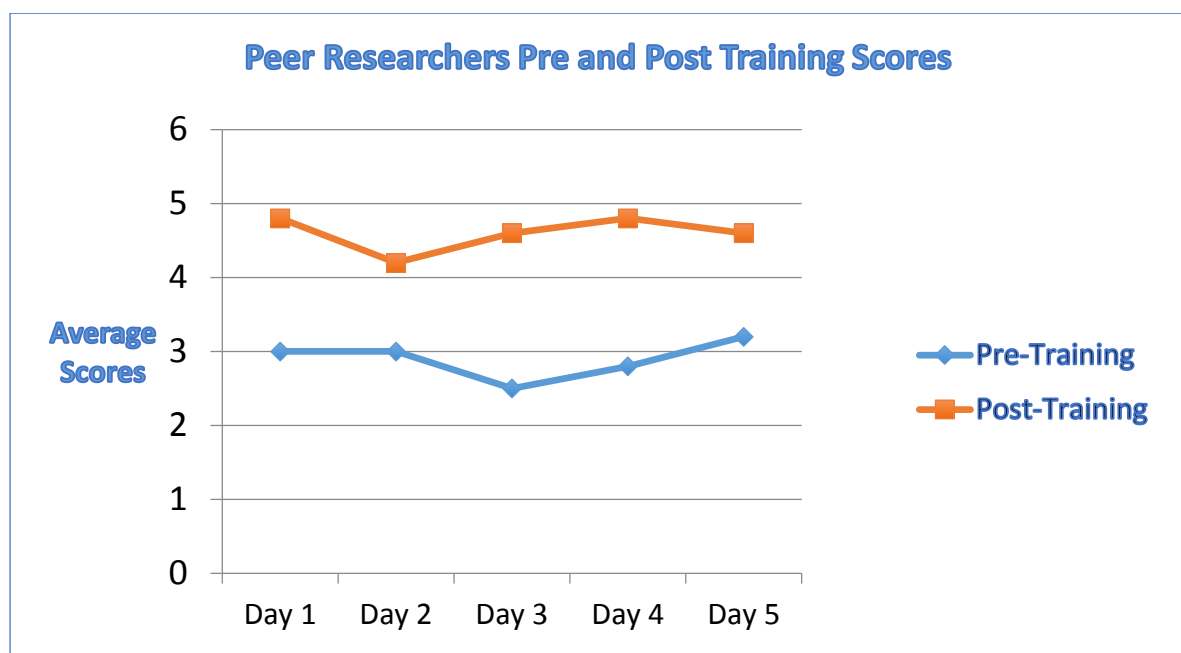
Figure 1: Peer researcher score on impact of training.

Daily scores showed enhanced knowledge and understanding as an outcome of training and these were supported by comments given on the evaluation forms by peer researchers. These can be brought together in four categories:

Enhanced knowledge *-* Peer researchers consistently reported an increase in their knowledge of each topic covered on the training days. Of particular note was an increased understanding of disability related issues following the input from a trainer with intellectual disabilities.

Greater understanding of the role – Peer researchers consistently reported that they had acquired a clearer picture of their role in the project through the experience of training including the boundaries of the role of a peer researcher in an interview setting and how to make adjustments in approaches to communication.

Team building – Peer researchers noted that as the training days progressed a sense of being part of a team developed. Many commented on how they were getting to know their colleagues and had a growing recognition of being part of a shared experience and supportive group of colleagues.

Appreciation **–** Peer researchers demonstrated an appreciation of being part of the project in that they were privy to an exciting opportunity, and were grateful that the research had the potential to improve outcomes for care leavers.
Trainers and members of the research team also completed evaluations at the end of each training day. Figure 3 below shows the average scores pre and post training given by trainers'/team members on each training day. Whilst the level of knowledge was high prior to training, there is a reported increase in knowledge following training which shows a positive impact of training on the peer researchers.
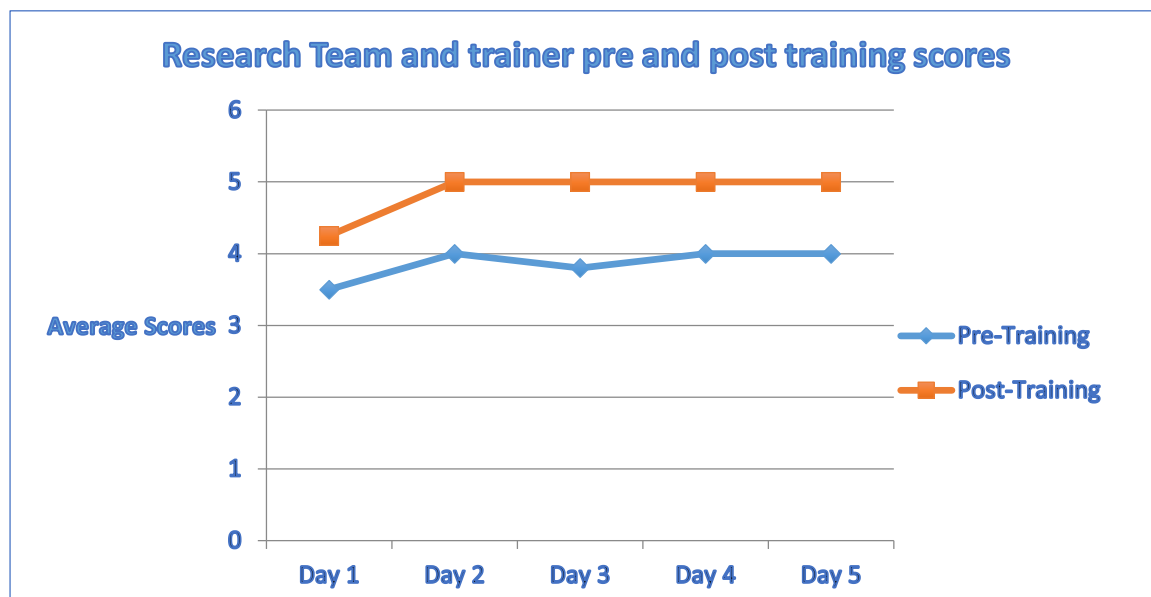
Figure 2: Trainer score impact of training.

Trainers/team members also reflected on the training days in comments made on evaluation forms.   These can be divided into three groups:

Suggested additions to training - trainers and peer researchers made some suggestions as to how the programme of training could be further developed. For example, having opportunity for role playing at earlier stages of training and potentially practising role plays with young people rather than research team members.

Reflections on peer researchers' participation **-** amongst the research team and trainers there were consistently positive reports of the engagement and commitment which peer researchers demonstrated during the training days.

Team bonding **-** the research team, like the peer researchers, noted the positive opportunities for team bonding and getting to know one another better which had resulted from the intense training schedule.

Training techniques - both peer researchers and the research team found some training methods particularly useful including role plays, the use of video and training from specialist trainers e.g. trainers from Mencap, VOYPIC and Praxis Care.
Following training peer researchers were asked to complete evaluation forms. Peer researchers rated how well the training was explained and delivered and whether it had met their expectations and prepared them for their role on the project. Peer researchers offered scores on a scale of 1-5 where 1 is 'not at all' and 5 is 'yes completely'. Evaluation forms also asked peer researchers to respond to open questions about their hopes and fears about taking on their role, they also had space to volunteer further comment should they wish to. The findings from these evaluation forms are presented below. Note that PR-4 is missing in the figure as this peer researcher exited the process. For a period of the training a sixth peer researcher took part, however they did not attend all days of the training, which was mandatory and did not complete the evaluation.
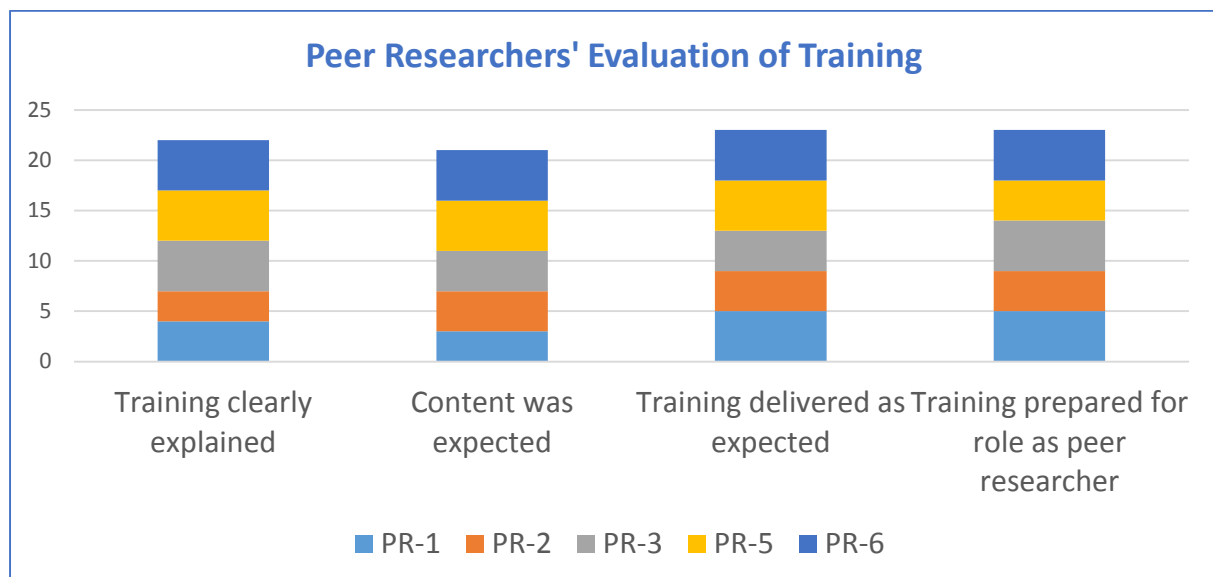
Figure 3: Peer researcher evaluation of training

The scores given to training by peer researchers was generally high, in one instance (PR-6) a maximum score of 20 was given, the lowest score was given by PR-2, but this was still scored at 75% of the total possible. Feedback on the content and delivery of training can be regarded as very positive. In offering an additional comment one peer researcher stated:

> 'We have been given all the knowledge that we need. I feel ready to go out and do my first interview! It will be great to put it all into practice.'

In identifying their hopes in engaging in their work as peer researchers, young people in part identified their desire to enhance their experience both academically and professionally with a view to developing life skills and enhancing their employability. In addition, young people expressed hopes that their contribution to the research would be a useful one and that they would achieve 'sufficient data'. Some further developed the altruistic motivations mentioned in their pre-training questionnaires,

stating a hope to be able to *'listen to others,'* and to *'grow in confidence and self-belief as a worker for vulnerable people.'*

Peer researchers also identified some fears about taking on their role. In part these related to concerns about their interview skills; perhaps *'going blank',* or not being able to complete the interview adequately and *'walking away disappointed, not having done well.'* One participant recognised the need to ensure that good preparation was made prior to interviews so as not to be over-reliant on the schedule, as a way of alleviating fears of about lack of experience or the opportunity to test interview skills. Further, one peer researcher raised concerns about the emotional wellbeing of research participants in stating their fear of *'opening wounds I am not trained to close again.'*

In additional comments, peer researchers shared their enjoyment of the training overall, which *'although intensive at times, was beneficial*; and to restate how they welcomed the opportunity to be involved in the project.

4.2 Assessment session
A post-training ending and assessment session was provided to re-group the peer researchers and review learning from training provided. Peer researchers had an opportunity to practise role playing with scripted scenarios raising ethical issues relating to disclosure of harm as peer researchers were anxious about how to identify and respond to such issues. The research team and peer researchers found it helpful to have scripted scenarios to act out (rather than creating their own questions and responses) and to work in pairs with peer researchers to test out their individual skills and enable them to provide targeted, individual feedback.

Peer researchers were then asked to take time on their own to reflect on their learning and identify both their strengths and areas for further development. The research team members who formed the original interview panel also met to discuss their views on the progress made by each peer researcher, their strengths and areas to focus on when preparing fieldwork. Each peer researcher then met individually with the panel and presented their reflections. These were mostly similar to those noted by the panel. Strengths included their ability to develop rapport, listen actively, use a range of question styles and respond effectively to issues of risk or harm. Areas for development included: taking time to prepare for interviews, dealing with emotions, use of silence, and responding quicker to communication from the research team. The panel remarked on the maturity and openness of the peer researchers to willingly engage in self-reflection and respond to constructive feedback.

The peer researchers were then presented with a certificate of completion of training which they reported to value. The aim of the training was to produce effective ethical researchers who had sound motivation and willingness to develop their skills, and a sense of personal and professional development for each peer researcher was apparent within this time.

At the assessment session, peer researchers also reflected on particular aspects of the training they appreciated. Interactive and hands on sessions were popular in helping to embed particular concepts and cement ideas. The disability training stood out both as one that challenged peer researchers' preconceived ideas about people with intellectual disabilities, and challenged them to undertake role plays for the first time. On reflection, it would have been helpful if peer researchers had prior role play experience to build on for this training day. Peer researchers also appreciated the input from external trainers who contributed to particular sessions. This variety of personnel and accompanying changes in style and pace were well received. However, it was noted how important it was for one person to be present at all the training days in order to promote consistency and facilitate reflection over how far the peer researchers had come through the training, and to be able to identify their strengths and weaknesses. The researcher, Theresa McShane attended all training days and Berni Kelly (PI) attended four out of the five training days. This allowed the research team to monitor the progress of the peer researchers, draw connections for peer researchers from one training day to the next and address any gaps or issues identified in evaluations of the previous training day.

The training was reported to have been very intensive, with few breaks during the day and tendency to run over at the end of each day. Young people responded well to this, and worked hard. The intensity of the training also gave the peer researchers time to bond. During breaks in training, conversations centred on sharing personal interests, holidays, social events and work/education. This social aspect of the training was highlighted as particularly important as it helped the group to develop close working relationships and to support each other. The importance of social interaction was highlighted by the peer researchers during the training with requests to meet up for a social event. In response to this, it was agreed that the peer researchers and trainers would go out for an evening meal following the end of training. On reflection, the research team indicated that more time could be built into the training programme for social interaction and team building. One research team member suggested that incorporating a residential aspect to the training programme may help to support the social aspect of bringing the peer researcher group together. However, several peer researchers indicated they would be reluctant to attend overnight sessions given their prior experience of residentials whilst in care.

A focus group was conducted with peer researchers immediately after they completed their training. They reflected on the process and content of the training, what worked well, what were the issues which were raised for them during their training, and how prepared they felt to being work on interviews. The focus group was audio recorded and transcribed for analysis. The emergent themes are discussed below and illustrated with quotes from the peer researchers.

Peer researchers noted that their engagement in training had clarified the role in which they were engaged to a greater extent. Although they had some awareness of the expectations of the role in applying for the position, they now had a greater degree of

clarity as to what was expected from them and to the potential usefulness of the peer research method:

> 'Before I went for the interview I had an awareness of what a PR was, I knew that it was someone who had a knowledge of the subject matter and who was going into act as a researcher because of that, but my understanding or what I have to do and why it is important is much greater now'

Peer researchers described how they considered the training had prepared them in a number of ways for undertaking interviews. Some stated that they now had a good mental image of what doing an interview would be like and that whilst it was good to be prepared in this way. Peer researchers also noted the importance of maintaining an open mind as to what they could experience and not to be too fixed in preconceived ideas. Peer researchers identified elements of the training which they considered to have been particularly beneficial in preparing them for the work ahead, in particular role playing:

> 'The role plays. I don't think anything could prepare you more than actually doing the interviews themselves; like today, we didn't know what we were going to be asked and we were acting on the spot… it brought home to me what is actually going to happen.'

Another peer researcher identified how role plays had been good preparation for actual situations, giving the example of *'red flag'* issues:

> 'The role plays highlighted how you can really be on the spot and you really need to know your themes. For instance, (trainer) was talking about self-harm, and I didn't know at first that that was a red flag, and I really started to sweat and I wasn't sure where to go with it and I was looking at my interview schedule and then I kind of went em! … and we stopped and talked about it and (trainer) said that once you start to feel that awkwardness then that is the red flag, and I kind of knew that was a red flag and it is important to recognise it so that you don't go blank, so it is important to learn the themes off by heart so that in that situation you are not panicking and being unsure'.

Reflecting on the knowledge which had been imparted during training, one peer researcher highlighted that this would be understood at a deeper level when placed in the context of fieldwork:

> 'We have been given loads of knowledge but I don't think it will actually mean as much until we are actually in the interview itself'.

However, others noted that the knowledge imparted during training did provide a greater understanding of issues which they will face in their engagement with the study for instance one peer researcher reflected that training from partners in Mencap and Praxis Care had been very beneficial in portraying:

'…the different obstacles people with mental health issues face and raised out awareness and understanding'.

This they stated had help with preparation as it would:
'…help us not judge or stigmatise them'.

In preparing for the work peer researchers noted that the training had been a vital element in making them ready to engage in interviews. One peer researcher stated:

'Without the training you would not be too sure what you should be saying to the interviewees and your mind would just go blank, but with the training you could be better at the interview and work with their emotions at the same time'.

Peer researchers also recognised their role in preparing for interviews and developing their readiness by reviewing the training before their first interview and ensuring they were familiar with the interview schedule. This level of personal responsibility in preparing for interviews was echoed throughout the group, and is a point which comes up again in later focus groups.

Peer researchers had varying degrees of experience of disability, and many reported on the beneficial aspects of the training in relation to gaining a better understanding of the issues facing disabled care leavers, an example of this was articulated by one peer researcher:

'We all have an awareness about care leaving... Those disability videos and all the information we received really highlighted the problems that people with intellectual disabilities face every day when they go outside or go into a pub or whatever and they face all that discrimination. Then I thought what's it like for somebody with intellectual disabilities who is leaving care? What sort of services can they receive? It is like a double whammy, but basically it just highlighted it - opened my eyes. Both the disability and the mental health training opened my eyes to the discrimination they face. One thing about the mental health training was that idea about maybe under 18's being in homes for adults, that was eye opening, that they might not be receiving services that are suitable to them, so that is something that we need to be aware of as well.'

Peer researchers also reported on the approaches they would adopt in interviewing study participants in terms of the skills they had learnt during training and the approach they would take. Communication skills featured strongly as an important aspect of training:

'I think the big one for me is communication skills and what we have covered here. When you study you learn so much about communication skills and it really is something else that you are able to apply rather than just write about it'

> '*The most important thing to me about that is communication techniques, if you are open and willing to hear what they have to say then I think they will feel really respected, not judging or assuming things, and being open.*'

This '*being open*' approach resonated with the responses of others in the group, as did the question of respect and adopting a non-judgemental attitude to disabled participants. The discrimination that people may face and the stigma often imposed on disabled people had a significant impact on the peer researchers who were motivated to combat these negative factors in the attitude and approach they brought to interviews.

Overall, peer researchers reported feeling extremely positive about the training and keen to get out into the field to commence interviews as summed up by one peer researcher:

> '*I was just excited and anticipating, but now I feel equipped with the skills to match the anticipation*'.

In terms of benefits to research participants, peer researchers identified young people's opportunity to engage with the research in the interview situation and to have someone listen to their points of view as integrally beneficial, one stated:

> '*It is known that none of the leaving care research has really included people with disability, so it might be really good for them to know that people are interested in what they have to say and it is their opinion that matters in the research – perhaps they have had people always talking for them and they have never been asked their opinion – just having a conversation about it might help them in general, anybody, they might just want to talk. Some people that really benefits them*'.

In preparing to commence their work on interviews peer researchers reflected on what they felt they could bring to the interviews. They anticipated having a sense of empathy with study participants due to their own care experiences:

> '*We have a real understanding of what it feels like to go through care*'.

Although acknowledging that everyone's care experience is different, they reported that their own experiences as care leavers would impact on their approach to interviews and their ability to connect with participants. They felt they would be able to empathise and relate to what participants were saying. However, this did raise the issue of their own emotional reaction to the interview situation. One peer researcher felt that an important aspect of the training was thinking about their own emotional responses to interview situations, and the impact that emotion may have on the work, recognising that:

'…emotion definitely does determine how it will go and the way questions will be asked'.

The issue of boundaries is pertinent here. Peer researchers were aware following training of the need withhold personal information in the interview situation and not to be tempted to share too much of their own story in the interview setting. One peer researcher reflected on the challenge this might present:

'I am a very open person and I would near enough tell anyone anything, but this is going to be a shock, a big role change, you can't open up as much as this young person will be doing in the interview, but you do want to help them'.

It is clear that following training peer researchers had developed a degree of self-reflection towards the task in hand. This would seem to offer a strong foundation in terms of their preparation for the forthcoming conducting interviews.

Practical considerations also required attention. Not least amongst these were travel and transport arrangements for peer researchers to reach interview locations at participants' homes. Only one of the peer researcher was a driver with access to their own car, the others were depending on public transport or the professional researcher for transport. As these interviews were to be co-produced with the professional researcher arrangements were made for peer researchers to meet at an agreed place to travel to the interview together. This was a practical solution to the issue of transport, although travel to interviews at times involved a long journey for peer researchers given the location of interviews in relation to where they lived. Peer researchers, however, did tend to interview in an area in which they themselves had not grown up so as to limit the potential for them to meet people they had known when they themselves were looked after.

Peer researchers highlighted the importance of revising the interview schedule and reviewing their training notes before interviews commenced but were also keen to get started on the interviews:

'I don't think I will be really ready until after the first one, you can talk and talk about it but it is never the same as doing it'.

In reflecting on the things which were important to bring to interviews peer researchers returned to their approach to participants:

'I'll just treat people with respect, just as normal'.

'…it is just about making adjustments for each of them'.

They also voiced some concerns, in particular how participants would feel during interviews and their eagerness to do a *'good job'* and not *'let the research down.* One peer researcher further elaborated on these concerns which were shared by the group:

'…it means that after you ask the questions you are not leaving thinking oh, I didn't ask this one very well, or you left out questions or didn't probe for more details…I think it is about not having many regrets when you first leave.'

4.3 Refresher training following first interviews

An afternoon workshop was held in December 2014 and was attended by all peer researchers. The workshop was led by the PI with input from other members of the research team to give peer researchers the opportunity to work together reflectively in review of the work completed to date. By this stage of the study, peer researchers had completed some of their initial interviews with participants and were able to share their thoughts on this. The workshop was structured around group work and discussions which focused on peer researchers' sense of the positives aspects of the work as well as the difficulties they had faced and their thoughts on what they as peers were bringing to the process.

Following this workshop, peer researchers reflected on the importance of these re-grouping sessions and the positive impact they had on their professional development. Peer researchers described feeling that they were part of a team with a shared sense of purpose and understanding. They also reported that they learnt from each other's experiences of handling particular situations. There was a consensus that initial training had been a good preparation for the work which followed and their skills had further developed through the experience of doing interviews. Peer researchers also noted how they had developed skills for adopting a more fluid interview style, being less reliant on the script to get through the interview. They also reported on a growing confidence in their work as well as positive developments in their communication skills.

Peer researchers reported that co-producing the initial interviews had been a positive experience for them as they had learnt from watching how the professional researcher handled more sensitive questions, which they found more difficult to approach, especially questions about disability and mental health difficult as they were worried about 'upsetting', 'embarrassing' or 'insulting' participants.

Peer researchers also felt they had learnt a lot through meeting participants. Some talked about their developing awareness of the range of different experiences of being a care leaver and the extent of difficulties some care leavers faced. Peer researchers had worries about some participants following interviews and found the debriefing with the professional researcher following the interview very helpful in allaying their concerns. Meeting young people in difficult circumstances, also gave peer researchers a deeper understanding of the rationale for the study and the hope that findings could be used to improve care leaving services.

4.4 MAXQDA training

This one-day training was delivered by an external trainer who specialised in training courses on the use of MAXQDA software to assist qualitative data analysis. The course was a preparation for both peer researchers and core members of the research

team who would be undertaking analysis of data. The course was held at QUB and was practical in orientation, with each participant working at a computer terminal to practice skills throughout the day. Three of the four peer researchers (with four remaining in the team at this stage) were able to attend this training; one peer researcher was on long term leave at this point. Peer researchers were adept at picking up the necessary computer skills and were very positive about the course and the skills they were acquiring as a result. Some said that they had not anticipated having access to this type of training or indeed being involved in the analysis of data, when they began to work on the project but that they were very pleased to be able to take on this stage of the work. This training was also received very positively by members of the research team who enjoyed an opportunity to learn new skills alongside peer researchers.

4.5 Refresher training prior to final interviews

Refresher training took place in September 2015 in advance of peer researchers commencing the final phase of interviews. This training was delivered by the research team at QUB with input from Mencap and Voypic. This training focused on a revision of the social justice theoretical basis of the study, ethical matters and revisiting issues related to disability and mental health. All four remaining peer researchers took part in the training.

The research team felt this was an opportunity for the team to reconnect with one another and to share their experiences of working in the field. It had also been an important time to revisit some of the core principles underlying the project and provide refresher training on challenging issues arising from fieldwork. The research team had noted how engaged the peer researchers were during this training session. They demonstrated self-discipline and a collegial attitude to the workshop. For example, one of the team noted that there had been no need to revisit ground rules such as having a mobile phone switched off during training, which had featured in early training sessions. It was also apparent during the training that a strong bond of friendship had grown between the peer researchers beyond the bounds of the project.

Peer researchers also commented on the benefits of refresher training on how to address mental health and disability issues in interviews. They appreciated the additional input from members of the research team who had delivered the initial training programme on mental health and disability, and who could provide more advanced information and advice at this later stage of the project. A particular aspect of this refresher training was the opportunity to ask questions based on their experience of interviewing young people. Peer researchers sought clarification on the pace of interviews and alternative communication styles. For instance, one peer researcher recalled asking about how to know when a disabled young person had finished what they wanted to say on a particular issue, so as not to move them on too quickly or to talk over them. This researcher appreciated specific advice on how to pace and focus the interview and clearly communicate to the participant how the interview would progress. Peer researchers reported that this refresher training was both timely and useful.

5. Support for Peer Researchers

In addition to regular workshops during the fieldwork stages of the project, two key support strategies were put in place for peer researchers throughout the study: informal individual support during briefing and de-briefing for each interview; and an allocated worker at VOYPIC on whom they could call should they need to talk over any challenges or emotional difficulties in the course of the study. However, the latter source of support was not used by any of the peer researchers who reported that they were given sufficient support within the project, and that they would have felt awkward calling someone who they had not previously met to seek support, had they needed to.

Throughout the project peer researchers preferred to use the individual informal support offered by the research team. This often revolved around meetings in advance of interviews and debriefing following interviews which was reported to have been crucial to peer researchers both in terms of the development of their skills and balancing their emotional responses to interviews with participants.

Car journeys following the first round of interviews offered an opportunity for peer researchers to discuss and reflect on how interviews had gone with the professional researcher. These journeys happened for three of the four peer researchers who relied on the researcher for transport. For the fourth peer researcher who travelled independently, time was set aside to meet for coffee before and after interviews to ensure an opportunity for briefing/debriefing and reflection with the professional researcher.

Time before and after interviews was used to talk about concerns the peer researchers had about particular research participants, or when they could seek advice on aspects of the interview process. The researcher had the opportunity to offer guidance and strategically develop peer researcher's skills and confidence. Informal supports and debriefing meetings had been a planned element of the study; however, these car journeys became a timely and important part of the debriefing and supervision process providing peer researchers with a very important sounding board as they developed confidence in their role. One reported that it was time to:

> *'Go over the interview, think about whether it went ok, were there bits that could have been done better, did we get the right information, all of that.'*

Another stated:

> *'I get to talk to (researcher) on the way home and it helps to just deal with the emotion of it all. I think I would go off and think about it on my own if I didn't have that time to talk it over.'*

The professional researcher also commented saying that she had the opportunity to build peer researcher skills through '*emphasising what had worked well'*, and to further develop their practice through *'going over, carefully, areas where they could improve*

or develop'. She emphasised that in order to build confidence it was always best to start and finish with a positive and to mention areas of improvement between these two so as to enable personal growth and be careful not to undermine the developments in peer researchers. Clearly, this was handled with sensitivity and care.

Peer researchers valued the debriefing time. One stated that she considered this support to be:

> *'The reason that we don't have lasting worries about anyone in the study and we didn't need extra emotional support. IT was all dealt with in the car after the interview and when you got home you were able to just put it away and get on without anything staying behind to worry you too much'.*

An additional aspect of the time spent in conversation following interviews was that during these relaxed interactions peer researchers often shared more of their personal experiences of leaving care. This reflective process may have assisted in their processing of interviews in relation to similarities or differences in their own experiences. Although peer researchers were never asked to share their personal stories of care, knowing more about these experiences helped the professional researchers to understand the reactions of peer researchers to particular issues arising during interviews and their access to personal sources of support during the study.

Peer researchers gave strong voice to the support they had received from the professional research team. They reported that they felt valued for their contribution to the project and that the support they had been given had far out weighted their expectations.

> *'It has been a brilliant experience. I have learnt so much and been treated so well, I cannot speak highly enough of the team at QUB.'*

6. Peer Research Approaches to Interviewing

This section of the report will consider the peer researchers' experiences of interviewing at each phase of the study. The initial interviews were co-produced with one of the professional research team (the PI or lead researcher). The mid-point interviews were conducted by telephone independently by the peer researcher and the final interviews were a mixture of peer produced and co-produced interviews; this depended on the situation that the participant was in and the thoughts of the peer researcher in relation to interviewing participants alone or with the support of the professional researcher. This section of the report will consider peer researchers' preparations and practical considerations in advance of interviews, their views on co-production, and reflections on interviews and participant feedback on their experience of being interviewed by a peer.

6.1 First phase of research interviews

The first round of interviews began in October 2014 and continued for 4-5 months as more young people were recruited into the study. These interviews were co-produced with the professional researcher and each peer researcher interviewed between 3-6 participants.

6.1.1 Co-production

The professional researcher's role during interviews required a delicate approach. Indeed, it soon became clear that, although the interview was led by the peer researcher, the professional researcher also needed a clear role. In initial interviews, one participant had questioned why the professional researcher was *'just sitting there saying nothing'* during the interview. Following this early feedback, it was decided that the professional researcher would assist with introductions and consent at the start of interviews and with the administration of questionnaires at the end of interviews. During the interview, they also helped to ensure that necessary data was gathered, however, it was important not to intervene in the interview inappropriately. Professional researchers did report offering support to develop questioning relating to the 'eco map', a tool used to map relationships and their relative importance to participants. This was to ensure that the depth of data elicited in this exercise could be captured; that is not simply recording the relationships, but also talking about why people had been placed in particular positions closer or more distant from the participant. A further example relates to questions about disability. The researcher could step in to ask this question but did not want to assume that the peer researcher was not going to or undermine the peer researcher. During interviews, the professional researcher approached this by reading body language and responding to non-verbal cues from peer researchers. Following interviews, the professional researcher also asked the peer researcher for feedback on the extent of their role and whether they felt they needed more or less support during interviews. The role of professional researchers was increasingly minimal as the confidence and skill of peer researchers grew. Both professional researchers report similar approaches and experiences of their part in interviews.

As noted previously, the first stage of interviews was conducted jointly with one of the research team. Peer researchers talked about the benefits of this at this early stage of the study. Peer researchers said that there was an element of learning through experience and having the guidance of the professional researcher was viewed as really helpful in their development of both skills and confidence. For example, the experience of the professional researcher was noted as beneficial in tackling questions which peer researchers regarded as sensitive. Bringing up questions about mental health was mentioned as one which peer researchers found this difficult to approach.

> 'She wasn't sharing it or bringing it up and I didn't want to offend her or anything, so (researcher) brought that up and it was much better. Just with her being that wee bit older as well and I think the way she phrased it was good – like, do you access mental health services? It just never came into my head to ask it like that I just felt like I shouldn't. I kept having it in my head to ask but I wasn't sure about how to go about it.'

When asked whether they would have felt prepared to undertake the first interviews on their own, there was agreement that this would have been difficult.

> 'I would have freaked out. This is not just on me, it is for QUB which makes an additional pressure, and you are taking that out with you'.

However, there was consensus amongst peer researchers that going to do the repeat interviews alone would be something they felt they could manage:

> 'I wouldn't mind going back to the same people on my own, it would be like continuing the conversation, not starting from scratch'.

Another said:
> 'It would be nice to see them again, to hear how they are getting on'.

Peer researchers also felt that the level of support they had had in terms co-production had been pitched just right. One stated:

> 'I felt that it was appropriate there you were there when you were and that I was able to develop more with that support there, then I felt fine about the interviews that I did on my own.'

Peer researchers also appreciated having the support of the professional researcher:

> 'It was good to have X there for the ones we did together, I learnt from her.'

Whilst another highlighted particular situations were having the professional researcher present had been of particular help:

'It was quite fortunate to have X there, I might have been more apprehensive in the one where the child was there and it was helpful to have X there to support with that.

This peer researcher went on to do an interview alone when the professional researcher was unexpectedly ill and reflected on how he had developed the necessary skills to interview independently through the earlier experience of co-production:

'The interview with the guy with severe LD and mental health problems, I was happy enough to do that on my own because I had met him before. If I had have been doing the interview with him on my own from the start I would have been a bit apprehensive about how I was conducting myself, but with X there from the beginning I realised that my assumptions about someone with that level of need overshadowed his ability, I became more aware of him and felt more confident.'

There was some discussion amongst peer researchers and the professional team about how the proposed method had altered as it had been planned for peer researchers to interview on their own from the outset of the study. However, peer researchers felt that the initial co-production was the right approach to give them confidence, develop their skills and to enable them to work independently in the latter parts of the study. They felt that if they were to be involved in similar work in the future they could work independently from the outset; there was also a suggestion that they could act as mentors for new peer researchers if there were further work in this vein.

6.1.2 Research participant feedback

Interview participants were asked to complete a short feedback questionnaire at the end of their first interviews. Twenty-six of the 31 participants completed these forms. Of the five who did not complete feedback forms, one was too tired at the end of the interview to complete the form, two were not interviewed by peer researchers, and a further two did not engage in formal interviews and, therefore, did not complete the feedback form.

The data from these short questionnaires are presented below in relation to the overall responses from the total 26 participants, and subsequently through discussion of small differences found in relation to the gender of participants, the gender of peer researchers and, finally, by the impairment type of participants.

Young people were asked to rate, on a five-point scale[2] their thoughts on their interaction with peer researchers. They were asked to comment on:

- whether it was easy to talk to the peer researcher
- whether they thought the peer researcher was good at interviewing them
- whether they considered that they were able to share more with the peer researcher than someone without care experience
- if they thought that young people in care should always be interviewed by peer

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[2] The response options were: don't agree at all; don't agree; not sure; agree; and agree very much.

researchers

- if they preferred to be interviewed by the professional researcher
- whether they consider that involving peer researchers in interviews with care leavers is important.

In general, as illustrated in figure 4, participants responded positively both to their interaction with peer researchers and their more general thoughts on the role of peer researchers in research with care leavers. The trend in the data was for participants to 'agree' or 'agree very much' with the statements. Just a few participants reported that they were unsure. In response to the statement that young people would prefer to be interviewed by a professional researcher, as expected, the trend was reversed with young people stating that they 'don't agree at all' or simply 'don't agree'

Young people's perceptions of being interviewed by peer pesearchers (Interview 1)

	Don't agree at all	Don't agree	Not sure	Agree	Agree Very Much
Easy to talk to PR			1	7	18
PR good at interviewing			1	7	18
Share more with PR		1	1	6	18
PR's should always interview care leavers			2	8	16
Prefer researcher to interview	16	8	2		
Important PR's interview care leavers				3	23
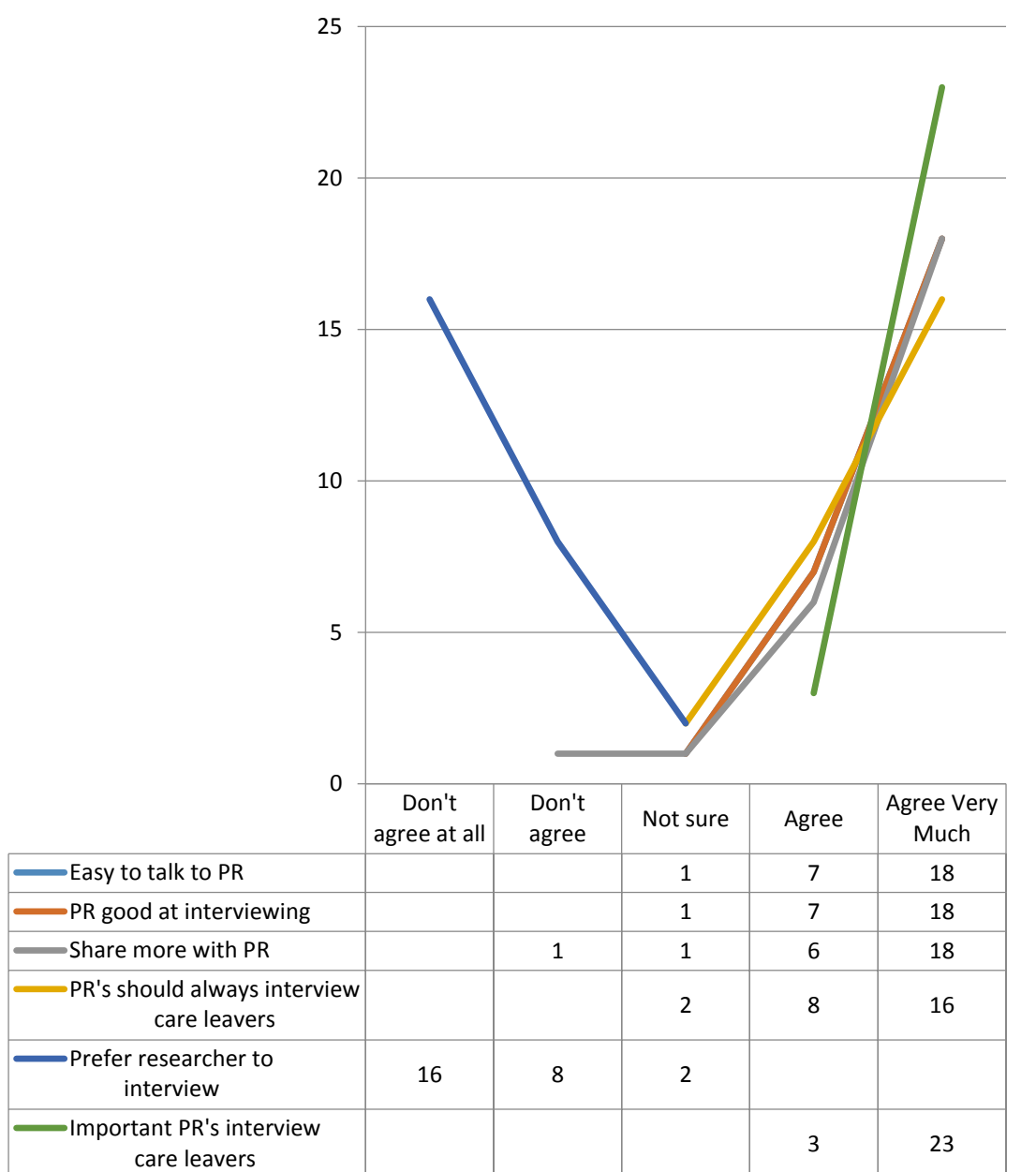
Figure 4: Participant feedback on peer researchers at first interview

Comparison of responses of male and female participants revealed a few differences, see table 6 below. Whilst the trend is reliably positive, males were slightly more cautious in their praise of the peer research process, with more reporting that they 'agree' with statements, rather than 'agree very much'. However, there remains a positive appraisal of the process amongst both genders. Comparing data in relation to the gender of the interviewer (Table 7) also revealed that there were small differences in participants' responses to their interviewer based on their gender. One small difference is discernible, which was in response to the question about whether young people would prefer to be interviewed by the professional researcher. Those

interviewed by female peer researchers presented slightly less opposition to this statement than those interviewed by a male peer. This trend was similar for male and female peer researchers and not related to individuals. Professional researchers who on occasion co-interviewed with peer researchers were always female.

Table 6: Female and male participant feedback on being interviewed by a peer

	Don't agree at all		Don't agree		Not sure		Agree		Agree very much	
	F	M	F	M	F	M	F	M	F	M
Easy to talk to PR					6%		20%	50%	74%	50%
PR good at interviewing						10%	27%	40%	73%	50%
Share more with PR					6%	20%	34%	20%	60%	60%
PR's should always interview care leavers					6%		34%		60%	
Prefer researcher to interview	80%	60%	12%	20%	6%	20%				
Important PR's interview care leavers								20%	100%	80%

Table 7: Participant feedback on female and male peer researchers

	Don't agree at all		Don't agree		Not sure		Agree		Agree very much	
	F	M	F	M	F	M	F	M	F	M
Easy to talk to PR					9%		36%	33%	54%	66%
PR good at interviewing							36%	33%	63%	66%
Share more with PR					9%	7%	45%	33%	45%	60%
PR's should always interview care leavers					9%	7%	45%	27%	45%	66%
Prefer researcher to interview	45%	80%	36%	13%	18%	7%				
Important PR's interview care leavers							18%	13%	82%	87%

In relation to participants' impairment type, three discrete groups are present, those with an intellectual disability, those with a mental health need, and those with ASD. There are also young people with co-existing impairments such as mental health need and intellectual disability, ASD and mental health need or ASD and intellectual disability. In evaluating the experience of being interviewed by peer researchers there was generally a positive trend across each of the impairment groups. Young people with intellectual disabilities were the most enthusiastic about being interviewed by peer researchers with 100% either agreeing very much or agreeing with the statements posed. Young people with mental health needs were also largely positive although one young person said that they were 'unsure' in response to statements posed. One young person amongst those with ASD also reported uncertainty, otherwise the response to working with peer researchers was positive. Uncertainty may reflect the position of those with more complex needs and may relate to difficulties in understanding the survey questions.

6.2 Mid-point telephone interviews

Stage two interviews were typically undertaken by telephone. Peer researchers, in most instances undertook these interviews alone without the support of the peer researcher and reported that, in most instances, these went well. The interview was shorter than that carried out face to face, although that was as planned as this was a 'check in' type interview.

6.1.2 Preparation & practical considerations

Peer researchers conducted mid-point interviews with the same participants they had interviewed in the first round of interviews. To prepare for these mid-point interviews peer researchers had the opportunity to analyse interview transcripts from initial interviews to prepare questions for each individual depending on their particular circumstances. In this way, the interviews could be personalised to each individual.

One practical challenge emerged in making arrangements for follow up interviews, namely logistical difficulties in contacting some of the young people. For some it was the case that they had changed their number, others did not answer their phones and were difficult to track down. In part this spoke of the complexity of some participants' lives that would be a challenge for any professional researcher. One example was a care leaver who repeatedly changed her contact number for safety reasons, due to an experience of domestic violence. This participant was unwilling to answer her phone to an unfamiliar number making it difficult to reach her to arrange a follow up interview. Although this was eventually achieved by using this young person's email address to contact her to plan the interview.

The professional researcher took a less active role in the follow up interviews than during initial interviews. They read through interview transcripts with the peer researcher to construct an individualised interview schedule for follow up interviews with young people. However, the peer researchers, on the whole, carried out follow-up interviews independently. The professional researcher was able to leave the bulk

of arrangements to the peer researcher and was only available in the background for support and advice, when necessary.

In one instance, the follow up interview was conducted in person as the young person was not able to engage in an interview by phone. In this situation the professional researcher accompanied the peer to the interview and it followed a process more like that which had been used in the initial interviews, with the professional researcher in the background whilst the peer conducted the interview. The need for transport support to enable the peer to get to the interview location was present in this instance.

6.2.2 Post mid-point interview reflections

Peer researchers reported that these interviews had a more '*surface quality*' than those conducted face to face, and that being on the phone made it more difficult to engage with participants in a deeper way. However, overall the feedback was that these interviews had achieved what they had set out to do, that is to check-in with participants in advance of final interviews which would again be face to face. Peer researchers reported that they were content to conduct them without the support of the professional researcher.

6.3 Final phase of research interviews

The third and final interview which peer researchers had with participants, was approximately one year after their first interview. These interviews were either conducted by the peer researcher independently or were co-produced again with the professional researcher for reasons detailed below.

6.3.1 Co-production and independent interviews

Seven participants were interviewed by the professional researcher alone. Of these two had previously taken part in a partner study about disabled young people in care and had never been interviewed by a peer researcher, so it would have been inappropriate to introduce the peer at this final stage. Two further young people with severe learning disabilities were living in specialist residential services and there were concerns about violent and challenging behaviours. These young people were never interviewed but took part more through a 'visiting with' technique, with the professional researcher on her own. In three more cases it was decided in collaboration with peer researchers that the professional researcher should complete the final interview alone, as these young people had been co-interviewed initially by the peer researcher who left the project, and it was thought to be unhelpful to bring in a new peer researcher for the final interview. A final two young people exited the study early and were not interviewed at the final stage of fieldwork.

Decisions as to whether the remaining 22 participants should be interviewed solely by the peer researcher or co-produced were taken on an individual basis with consideration of the particular needs and circumstances of each participant. In total peer researchers completed 13 final interviews alone and 9 were co-produced. One of the peer researchers completed two interviews alone and co-produced three, another completed three alone and two were co-produced, a third completed three

alone and co-produced three and the fourth peer researcher completed five interviews alone and one was co-produced.

The reasons for decisions to co-produce interviews were based on a careful assessment of each case and the decision was jointly taken between the peer researcher and the professional researcher. Decisions to co-produce interviews were informed by consideration of issues relating to: gender, risk, dynamic of having others present during interviews, and communication needs of participant. Each case presented unique circumstances which were carefully considered to ensure the peer researcher was happy to interview alone or preferred to have the professional researcher involved. For instance, an interview with one participant with a severe learning disability was co-produced again because it had been difficult to focus the initial interview and for the peer researcher to respond to a lot of personal questions posed by the participant. Another interview was co-produced because the participant had experienced a deterioration in their mental health and it was decided it would be useful to have two people there to offer additional support. In cases where young children or dominant family members were expected to be present, interviews were also co-produced to help keep the interview on track, and manage family dynamics to allow the young person to give their own opinion. In a couple of cases where there were concerns regarding intimate partner violence or sexual exploitation coupled with mental health need, it was also thought beneficial to have a (female) professional researcher present together with the (male) peer researcher. On reflection following interviews, both peer researchers and professional researchers agreed that decisions to co-produce or interview alone had been made appropriately.

Peer researchers talked about the issues that arose in the co-produced interviews and noted that it was useful to have the researcher there to pick on things that they might have missed. This point was reiterated by the professional researcher who noted the subtle ways of co-working which had developed over the course of the project:

> *'Sometimes when they were coming to the end of a section they would look at me, there was eye contact – or they might say, is there anything else you wanted to ask Theresa? It was very good, both verbally and through body language we just kinda got to know each other and worked together really well.'*

In advance of completing final interviews some peer researchers were concerned that they would miss out on data without the professional researcher present, however, they also said that they would feel more empowered working alone. Some wondered whether the outcome would be the same if the professional researcher was present. On completion of interviews conducted alone peer researchers reflected on their experiences of conducting individual interviews. They had a positive view on how the interviews had gone:

> *'I was really glad to interview my own. I was able to go in and I had learnt a lot from the last two interviews with all the young people I had interviewed before,*

> *I felt well equipped, I felt that I knew what I was doing and I wanted to do it and to prove to myself that I could do it on my own'.*

Another endorsed this confidence:

> *'The interviews I did on my own at the end, I felt confident to do them'.*

Final interviews were also reported to be more direct and probing and peer researchers reflected that they had learnt from their experience of previously co-producing interviews with the professional researcher to push for answers to questions. Some reported that they had felt they were being too pushy or appeared to be nosey.

At this final stage of interviewing, co-produced interviews were very much led by the peer researchers with professional researchers taking a very minimal role, mostly as back up. As one described:

> *'I think it is more of the support that you get. So X was there for the two young people with moderate learning difficulties, and we both said it would have went ok if she wasn't there, but we were just making sure it would go ok'.*

Although, in some instances, the peer researcher relied on the support of the professional researcher:

> *'She came out with me which was good, especially that one I done with the young person with severe learning disability – the first interview, was grand she was really chatty, then the second interview she couldn't remember who I was and then when we were starting she went really off course and was talking about other random stuff that was nothing to do with the interview but without x there I wouldn't have know how to have proceeded if x wasn't there'.*

Professional researchers commented on the working style which developed between themselves and the peer researcher in the co-production of interviews and also underlined the central role which peer researchers took in co-produced interviews. This is exemplified in the following extract, which also demonstrates how peer researchers were often able to deal with difficult situations:

> *'The interview nearly didn't happen if it hadn't been for [peer researcher] being there. She [participant] was very nervous and anxious... she had just come off the phone from her mum, that's why we were in the other room, and she was saying she didn't want to do the interview and the social worker was trying to talk her into it. She said she was nervous, she said she needed a cigarette, she didn't have any cigarettes, this kind of thing. So at that point [peer researcher] offered a cigarette, she said, 'listen, why don't you and me go outside, we can have a smoke, if you want we can do the interview outside, we can do it very informally, we don't even need the script, I know the kind of things*

that we are looking for to talk about'. So [peer researcher] gave her a range of options to help her, to put her at ease and to build rapport, and in the end she went out for a smoke, she came back and decided she wanted to do the interview herself. I think it was very much down to [peer researcher's] interpersonal skills with her, giving the participant a range of options and sort of empowering her, so it was her choice then to do it or not to do it, there was no pressure being put on her.'

The peer researcher clearly reaching out to this particular participant in a way that a professional researcher could not have, to achieve a good outcome both for the project and the participant.

6.3.2 Reflections on interview process

Professional researchers reflected with the peer research team on the following developments in peer researcher skills as the study progressed:

a) Communication skills in interviews improved as peer researchers had become skilled in rewording questions to ensure understanding amongst participants.

b) Initial reliance on the professional researchers in co-produced interviews had shifted as the confidence of peer researchers grew so that they were skilled in leading interviews and interviewing independently.

c) Time keeping had been an issue for some in training stages of the project, however, peer researchers had been punctual for all interviews and recognised the importance of good time keeping. This, they reported, impacted positively on other areas of their lives as well.

d) Managing competing priorities had been an initial difficulty for peer researchers who reported that they had become skilled in prioritising their workload and saying no when they needed to avoid over-stretching themselves to a point where they could not realistically fulfil their commitments. Again, this was a skill which was likely to lend itself to other areas of peer researchers working lives.

Another issue which arose when reflecting on interviews was the fact that peer researchers had not been matched with participants in relation to having had a common care experience and led to discussion on what factors made the peer researchers 'peers' to participants. Participants were care leavers aged 18-25 who had experienced mental health or intellectual disability. Peer researchers reflected on the points at which their shared experiences made them peers. Of course, in terms of age, they shared a peer relationship and certainly as care experienced young people who had also left care. The disability and mental health link was more tenuous. Some peer researchers had accessed mental health support in the past and some had learning support needs but not an assessed learning disability. Peer researchers reflected on their role as peers and emphasised how being a care leaver was of the utmost experience in terms of shared experience:

> *'I think the care experience was most important cause you can have an LD or mental health need without the care experience, but the experience of leaving care was the most significant part of the study.'*

Whilst care leaving experience was crucial, peer researchers acknowledged that they also need to access learning on disability and mental health issues which had been covered in their initial and refresher training.

The question then arose as to whether peer researchers with a different care experience to participants impacted on their approach to the interview. One responded:

> *'I think it did, but I don't think that was a negative thing, it didn't take away from the way that I asked the questions or anything, whereas if I had to interview someone that I didn't relate to that much it was more inquisitive. But if it was someone that I related to more you maybe asked questions in a way with the same 'language'…. With more insight. But I think both worked just as well.'*

Another reported:

> *'I think that having a different experience made them want to tell their story.'*

Peer researchers said they did not think they should only interview someone who had a similar care experience:

> *'I think it would have made it biased if you were only talking to someone with similar experiences. Even the questions you would have asked might have been more from a personal perspective.'*

Another thought it would have impacted on group dynamics:

> *'We all have different experiences; we wouldn't have been able to share our experiences with each other so much.'*

Peer researchers went on to talk about how they felt in relation to sharing their own experience of care. One peer researcher said that they had not been asked about their own experience whilst another reported:

> *'I felt I couldn't share my experience, not for personal reasons, I was not guarded over it, but I felt it was their chance to talk about their experience and I didn't want to make it about me'.*

This peer researcher went on to talk about how not sharing her experience had been perceived by a participant:

'One girl, she said 'unsure' to something on the evaluation, whether it was worthwhile being interviewed by a peer, and she said no 'cause I don't really know anything about her, so basically what she was saying was that I might be care experienced but I didn't share anything so that was really good that she was honest. When I finished the last interview she reminded me of her saying that and she said she then found the peer research approach to be more valuable, so obviously that was a journey for her.'

One peer researcher reflected on the personal impact of meeting people who had experienced a more difficult journey through care and care leaving than their own:

'It made me feel fortunate compared to so many, probably gave me more regard for those young people and made me want to help.'

Peer researchers' early concerns about talking about disability and mental health with participants in case they said the 'wrong thing' had also changed in the course of the study.

'It helped just knowing what questions to ask, we got that in the training, it helped to know that you were not embarrassing them. Paul came in from Mencap and that helped cause he said just to treat them like a 'normal' person and don't tip toe around, and that kind of helped me.''

Another talked about not worrying about being direct:

'I wasn't as afraid about being direct, I would have been worried about it coming out in the wrong way, but by the third interview I just asked.'

A third reported ongoing sensitivities:

'I think I will always be worried. Each person will have his own issues and complications, but it helped that you developed a relationship with people and then you could ask more easily.'

Another talked about the benefits of signposting the interview:

'I felt that you had to kind of put in when you went in that you wanted them to be open about their mental health.'

6.4 Research participant feedback

As with initial interviews a feedback form was completed by participants following their interview with a peer researcher. Responses from participants (n=18 completed feedback forms) are shown in figure 5 below and were overwhelmingly positive. Participants selected 'agree' or 'agree very much' in response to all of the questions posed with the exception of the question which asked whether they would prefer to be interviewed by the researcher. In response to this most selected 'don't agree at all',

or don't agree'. In only two instances did participants select 'unsure'. In one case this was in response to the question about preferring to be interviewed by the researcher and in another instance it was in response to a question asking their opinion on whether peer researchers should always interview care leavers.

There were no notable differences between responses given to different peer researchers, or in relation to the gender or impairment type of participants. Some participants included brief comment on their forms ranging from saying that the experience of being interviewed by a peer had been 'good', 'very good' or 'brilliant. One participant stated:

> 'I think (peer researcher) has been through the same system as I have... They have been a joy to talk to. Finally, someone who doesn't judge me.' (Participant)

Young People's perceptions of being interviewed by peer researchers (final interview)

|	Don't agree at all	Don't agree	Not sure	Agree	Agree Very Much
Easy to talk to PR				5	13
PR good at interviewing				4	14
Share more with PR				7	11
PR's should always interview care leavers			1	4	13
Prefer researcher to interview	7	9	1		
Important PR's interview care leavers				2	16
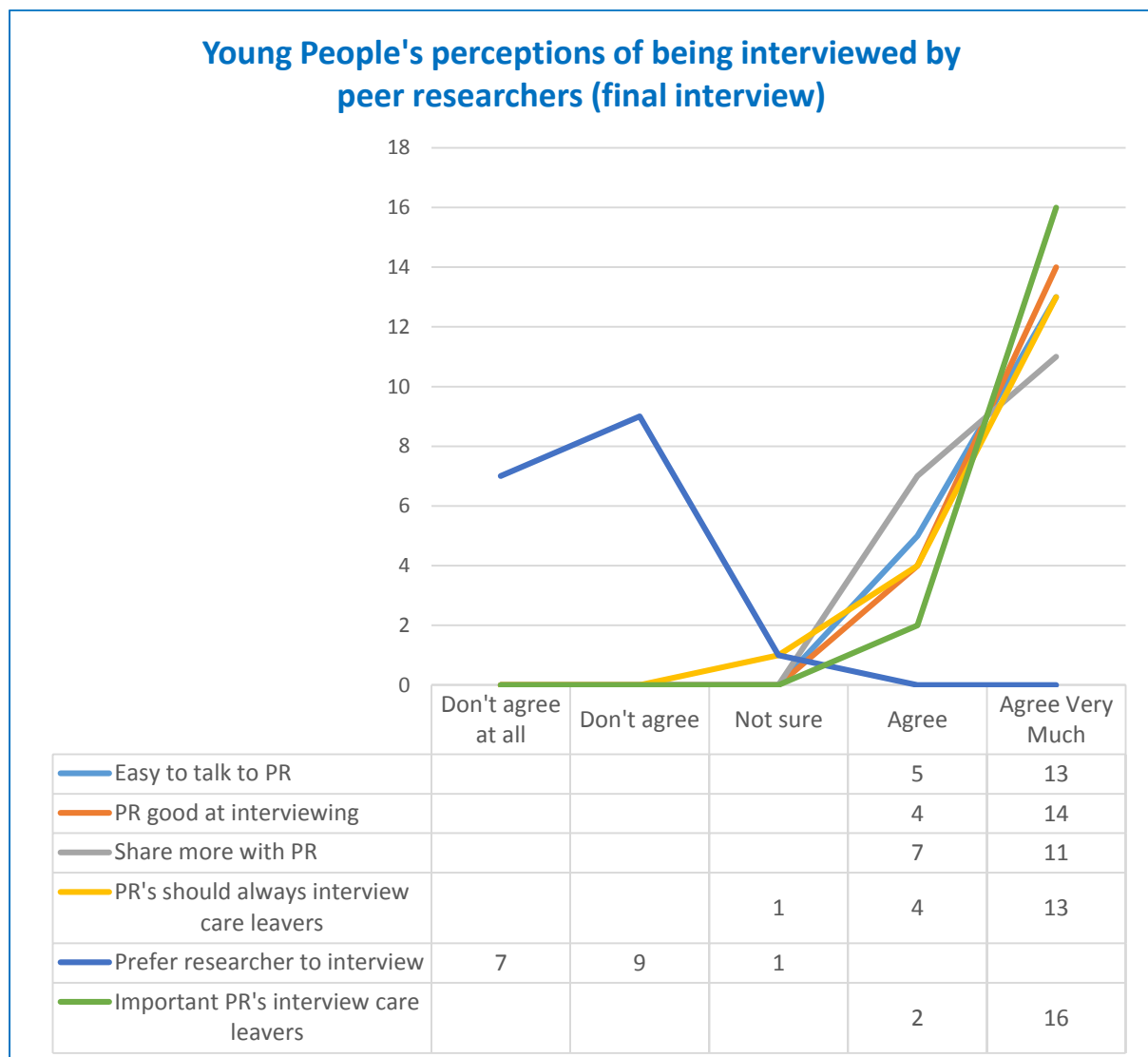
Figure 5: Participant feedback on peer researchers at final interview

7. Peer Researcher Involvement in Data Analysis

Peer researchers were involved in the analysis of data throughout the project. This was undertaken in different ways depending on logistics and the needs of the project at a given point. What follows describes each stage in which peer researchers were involved in analysis and draws upon their views on their contribution to analysis.

7.1 Analysis of data from first round of interviews

Following the first round of interviews, peer researchers were involved in the analysis of interview transcripts to identify themes and questions for the follow-up interviews. As peer researchers had not yet been trained in the use of MAXQDA, this manual process involved reading through the transcript with the professional researcher and highlighting issues to be further explored; for example, whether hopes for moving onto college or independent living had been realised. The peer researchers then worked with the professional researcher to devise an interview schedule under broad themes: living situation, relationships, education or training, employment, parenting, use of services and expected changes in next six months.

As transcript data was not anonymised, peer researchers came to the university for this phase of analysis and spent a half day conducting analysis with support from the professional researcher.

Some concerns were raised by peer researchers about their involvement in this initial stage of analysis. Peer researchers reported that they would have like to have had more time to devote to this as they did not feel they could do justice to the interviews on the time they had available when they came to the university. This raised concerns that they were, in this instance, not meeting the expectations of the research team and worries that their work may not be as good as they hoped as they felt rushed. However, peer researchers also reported that their involvement in analysis from this early stage assisted them to recall participant narratives in advance of second stage of interviews. In this way, the narrative thread for each participant was maintained throughout the study for peer researchers; as one reported:

> *'Being involved in analysis at each stage and seeing the development of participant's journeys right to the end has been the best way to do it in my opinion'.*

7.2 Workshop on coding framework

Following this manual analysis process, peer researchers accessed MAXQDA training which allowed for a more systematic and paced approach to data analysis. At these two half-day workshops the professional research team joined the peer researchers to work collaboratively on establishing an agreed coding framework.

The first workshop focused on establishing a draft of the coding framework based on analysis of a sample of interviews. At this point, the team worked together to identify coding categories and confirm overarching themes. By the time of the second analysis

workshop, the professional researchers had created a draft coding framework using MAXQDA so the focus of this workshop was analysing a sample of transcripts together to test the coding framework and offer an opportunity for peer researchers to suggest amendments or additions. This workshop was held on the same day as refresher training so it linked well with their ongoing reflection on the interview data and issues arising during analysis. Peer researchers talked about how they preferred working on analysis using MAXQDA to agree a coding framework:

> *'I liked using the computer package, it was an interesting and secure way to analyse the data as we had all agreed on the process.'*

The researcher also commented on the usefulness of working on data using MAXQDA with a common coding framework:

> *'It made it easy for me to manage that data and to keep track of who had done what'*

7.3 Independent analysis of mid-point interview transcripts

Following this process, peer researchers came into the university to analyse transcripts from telephone interviews they had conducted using the MAXQDA computer package. Peer researchers were free to add codes and sub-codes to the coding frame as they undertook this inductive analysis process. These additions were then discussed with the professional researchers who agreed to all of their suggestions. By the end of this process, the peer researchers and professional researchers had a confirmed coding framework that had been jointly agreed and could be used for future analysis of further interview data as the study progressed. In addition, peer researchers noted how their involvement in this stage of analysis assisted them with their final interviews:

> *'It helped because we were doing three interviews, because we looked over the first interviews when we were getting ready for the second ones, and then the second ones when we were getting ready for the third ones and it kept us involved and understanding the young person more before we went in to do the next interview. Instead of their being a gap and us like, who is this person again, it meant that we stayed familiar with their story, this helped do the interviews'.*

7.4 Key messages from involvement of peer researchers in analysis

Peer researcher projects typically involve peers in interviews, but their involvement in analysis is less common. The findings of this evaluation would suggest that it is beneficial to both the project and to peer researchers themselves to be directly involved in the analysis of data they have collected.

Peer researchers felt that they brought a particular understanding to the data, which may have been overlooked if data was only analysed by researchers without care experience. One example of this was that the professional researcher had not coded data on pets, however, peers highlighted the importance of relationships with pets in

the lives of young people in care, noting that pets sometimes bridged feelings of loneliness as they were always available and could be trusted. Peer researchers reflected on their own experiences to bring a deeper understanding to the data:

> *'There was a dog where I lived growing up, I told that dog everything. He was always there and he was very, very important to me. I don't think the impact of this would be understood to someone who wasn't care experienced.'*

From a personal perspective, peer researchers reflected that through being part of the analysis of transcripts they acquired a deeper understanding of the role of research in having the potential to impact on the lives of, perhaps not the actual participants, but their successors who experience the same system. This cemented the meaning of the research for peers and diluted feelings that they had in some way listened to people's stories and then left them in the same situation. One peer researcher reported how their involvement in analysis assisted in balancing out feelings of *'listening to young people's stories and then leaving to let them get on with it.'* Involvement in data analysis and write up showed peer researchers how individual stories led to a thematic report with recommendations that would contribute to positive change in the longer term. Another peer researcher stated:

> *'It was good to be involved in analysis as well as doing the interviews. I don't think it would have been as worthwhile without doing the analysis, like at a personal level.'*

7.5 Ending the peer research process

A full day workshop was held at the end of the project at QUB which was attended by all peer researchers and all of the key members of the professional research team. The day aimed to bring the team together for a final time to reflect on salient issues and discuss key themes arising from the peer research experience. The group reflected on the social justice framework underpinning the project and the journey of the project, where they started and where they have come to. Key themes were discussed including the benefits of co-production, the added value of peer research and the peer researchers' contribution to the data analysis and development of recommendations.

Difficult issues such as unexpected aspects of the role, approaches to discussing disability and mental health and endings were addressed. A group discussion was also held on potential project outputs including varying methods for disseminating the research findings. Peer researchers expressed a keen interest in being involved in presentations of the findings at seminars and launch events, and contributing to the development of an accessible version for participants. Time was taken then to review the personal and professional development of individual peer researchers during their work on the project. For this stage of the workshop, each peer researcher met the original interview panel members (PI, professional researcher and Eithne Gilligan from VOYPIC) to receive verbal and written feedback on their work on the project. All of this feedback was positive and peer researchers informed the panel that they had:

appreciated the opportunity to work on the project and to meet the research participants; enjoyed working with the research team; and felt that they had played a valued role in the project overall.

This was an extremely fruitful day in terms of the data it generated for the evaluation and also in terms of taking time to recognise the positive contribution each of the peer researchers had brought to the study and appropriately bring their involvement in the study to a close. The research team and peer researchers enjoyed an evening meal to celebrate the success of the peer research approach and mark the end of their involvement in data collection and analysis.

8.0 Challenges of Peer Research

The peer research process produced a number of challenges at different stages of the study. There were practical challenges for the peer researchers in terms of the execution of their work as well as personal and emotional impact of interviewing participants and dealing with resonances or differences in terms of their own leaving care experience. This section will examine the challenges faced, with data drawn from interviews and focus groups with peer researchers and the research team.

8.1 Issues raised by the interview process

In the initial stages of the work, peer researchers recounted their experiences of embarking on their interviews, commonly feeling nervous and a little uncertain:

'I was really nervous at the start, my mind was going real crazy, kind of like when you are going in for an exam'.

'I was self-conscious, when they were talking you were thinking about what you were going to say next and that affects your listening and the flow of the conversation.'

Peer researchers talked about how the experience of conducting interviews had differed from their expectations. One reported how well things had gone:

'It went better than what I expected, in the sense that the actual information that you get off each interviewee –they gave a lot more than what you thought'.

Others felt that each interview experience was different:

'I didn't know what to expect and each one has been quite different, so my expectations for my 2nd and 3rd ones were different from what actually happened in the first one'.

Another issue raised by peer researchers, was the *'awkward questions'* that they were on occasion asked by participants. In particular, questions about personal relationships, which felt a little intrusive and put peer researchers in a slightly uncomfortable position. However, they were skilful in side stepping these questions and, whilst this was made them feel uneasy, it was not a frequent occurrence.

An area which was often cited as provoking anxiety was that of introducing some of the more sensitive topics in the course of the interview. In particular, peer researchers were concerned about asking questions about disability or mental health if this had not arisen naturally in the course of the interview. They reported concerns around possibly *'insulting participants', 'being judgmental'* or *'making people uncomfortable.'* This concern was most acute in the early stages of the study when peer researchers had limited experience of conducting interviews. The co-production of interviews was useful in this respect as peer researchers were able to observe how the professional researcher approached sensitive topics in the interview and learn from this. During

refresher training, there was the opportunity to revisit these issues and to develop strategies on how best to ask such questions in interviews.

8.2 Emotional challenges

Central to the accounts peer researchers gave about their interview experience were their concerns for the young people they interviewed. The peer researchers brought differing personal care experiences to the project and were at times shocked by the sharp end of difficulty faced by some of the research participants. Following interviews, peer researchers found it difficult to leave young people, who described being depressed or lonely, who were short of money or were in cold, sparse, living conditions.

> *'Seeing the physical states that people were living in, there was this girl that was only 18 living in an awful place and leaving her in that condition was horrible.'*

Moreover, stories that participants told and their current circumstances, all too apparent, stayed with peer researchers who spoke of the difficulties they had in detaching themselves from the information they had gained in the interview. One told their story:

> *'There was this one girl, she has lived her whole life in care and has decided to come out of care and has regretted the decision and is in a real state, a mess…and I come to do this interview. I was able to offer her some practical advice about money and that, but apart from that there was nothing I could do to help her situation. It stays with you and you worry about them.'*

Another spoke of the difficulties she had in leaving participants after interviews without being able to offer any help:

> *'It has been a challenge for me detaching myself from the young people, being in that specific role of an interviewer. I have never been in the role of a researcher before, it has always been in the role of a mentor or a friend role, being there listening to people and then signposting help. So it was quite hard for me to interview, ask questions, and then for them to get emotional and they all did, especially the girls, and I would be quite drawn to helping vulnerable girls and then just to leave and that was it, no more contact, I found that quite difficult'.*

One of the peer researchers reiterated this thinking;

> *'It feels bad just going there and doing the interview and then leaving and not knowing how the young person was feeling.'*

Peer researchers did talk of mechanisms which had been put in place by the project to support them with emotions or worries that might develop following interviews. They

said that debriefing with the professional researcher after the interview was an important time to talk worries over and not carry concerns about the participant into their daily lives outside the research situation. Peer researchers were also aware that a named person within VOYPIC had been identified to support them with any concerns they might have, however, they generally felt that they did not wish to avail of this support, one said:

'I didn't feel that the worker in VOYPIC that was given to us was an effective one at all, 'cause I have never met the one that was given to me and there was never a point to get introduced so I would 'a felt stupid, I would'na called them cause it would have just felt silly'.

Another stated:

'I haven't felt the need to ring them, but if I did need to I don't think I would'.

Peer researchers suggested that having the option of a telephone call with the researcher with whom they had co-produced the interview, later on the same day was a more useful way to check in, ensure there were no lingering concerns and discuss any that were present. This was also deemed to be more useful than contacting the named VOYPIC supporter as:

'They were outside of the research and maybe you needed to speak to someone who was more involved.'

Whilst the interviews had, at times, raised concerns about participants, peer researchers generally reported that this was not personally emotive.

'I didn't have any big emotional issues that I would have needed to ring anyone to talk over.'

Peer researchers largely put their emotional resilience down to their stage of life and that they had dealt with much of the emotion of their own childhood experiences. As one peer researcher said:

'In terms of it bringing up stuff for us it really depends on where you are at in your own life, on that map there were all different stages and it depends – pre care, in care, future – for me it is in my past I am not defined by it and I can speak about it without getting overly emotional, it depends where you are at, as X says, it is all in the bin. I think it is good to try to use your past to try to see things that can help other people, but at the same time it depends on how raw things are for you.'

Nevertheless, the emotion of the situation could not be ignored, especially when the emotion was evident in the interviews with participants:

'A lot of the girls and some of the fellas too got really emotional, I think when you talk to people on that emotional level the relationship kind of develops naturally, it was good to share this with them and to feel they trusted you to let their emotions show.'

Professional researchers were aware of the emotional impact of the project on peer researchers, one stated:

'Emotional support is very important, some of the peer researchers are more expressive emotionally than others, but all four were affected by the interviews they did'.

8.3 Ethical issues

Ethics formed a significant element of peer researcher training in preparation for participation in the study. At the outset, peer researchers were concerned about responding appropriately to situations where participants disclosed a risk of harm to themselves or others. These were referred to as 'red flag' issues in their training and peer researchers were advised to refer these cases to the PI who could follow up with the individual's social worker. In the end, no such referrals were made in the course of the study. There were situations where peer and professional researchers were concerned about participants' wellbeing and asked them to consider re-engaging with relevant services. However, these often refused contact with services or were already seeking help on their own behalf via health services. Those who were in need of support, without contact with services, were usually those young people who peer researchers felt would benefit from ongoing contact through peer mentoring.

Whilst issues such as consent to participate and the confidentiality of participants' stories were well understood by the peer researchers, there were also less obvious ethical issues which emerged in the course of the fieldwork. For example, there were instances of peer researchers discovering they unexpectedly knew someone they had arrived to interview. In such cases, the peer researcher did not know the young person well or as a friend, but through connections within the relatively small care community in Northern Ireland. This was the case for one peer researcher who was reported to have handled the situation both *'ethically and sensibly'.* In these situations, participants were offered the choice to re-schedule the interview with a different peer researcher, however, in all cases they opted to proceed. Indeed, it seemed that some personal knowledge of each other created a natural rapport. However, the peer researcher and professional researcher were aware of a sharpened need to respect the privacy of these participants and maintain the confidentiality of their story. There was significant trust on the part of the participant in sharing their story with someone who had even a distant connection to them and the professionalism of peer researchers was evident in their commitment to maintain the confidence of participants in these circumstances.

There was also the possibility of meeting a participant again by chance. This happened on a couple of occasions and was handled with a polite hello, but no further engagement with the participant. As one peer researcher reported:

> '*It was very hard... I would keep seeing him, sometimes getting the bus, but I haven't really been talking to him, sometimes just see him passing.*'

The PI and professional researcher offered guidance to peer researchers on what to do should they meet a participant by chance in the future in the initial training programme and again at refresher training days.

In a small number of cases, participants wanted to see the peer researcher again. In one occasion this was articulated through flirting during the interview, which had to be handled delicately:

> '*I was glad that [professional researcher] was there like, it helped it all go smoothly and keep the participant on track in the interview.*'

In other cases, peer researchers recognised young people's desire to develop a friendship given their limited sources of informal peer support:

> '*I think it was almost on the tip of her tongue to ask could we stay in touch. I had to be clear that I have a professional role, it is part of this study and not something that I could just provide. You are in there and you can feel a friendship, but even then you have to have your professional head on and think, for a lot of people because of the hurt they have gone through and they have had broken relationships and broken families, maybe they haven't developed any real friendships, and we come in and we listen to their stories and empathise a lot, they are crying…. It is natural that they might see us as friends.*

Peer researchers were able to rely on their training in relation to ethics, as is demonstrated in the quotation above, to maintain a professional presence and ethical positon in the research and emphasised how important it had been to address ethical issues during training:

> '*Covering ethical issues were really important in the training, especially issues around communicating with the young person after the interview. Obviously you can't get into a relationship with the young people after the training, so it was really useful to cover those kinds of ethical issues…. And they were covered… that you wouldn't know that would be a bit difficult if it wasn't you wouldn't know what to do*'.

8.4 Endings

Reflecting participants' interest in keeping in contact with peer researchers. Peer researchers themselves identified the challenges associated with saying goodbye to participants for the final time. Some expressed a desire to re-connect with the young person again to show ongoing interest in their lives:

> *'I wouldn't mind meeting every couple of months to see they were still getting on ok.'*

In cases where a close rapport had developed, peer researchers reported the difficulty they had with endings.

> *'The closing of it was difficult. The walking away and losing contact with the person. That was hard.'*

Peer researchers talked about how they had gotten to know participants well over the three interviews and felt a wrench at not seeing them again, some felt quite a bond with participants, one reported:

> *'By the third interview, there were some I felt more comfortable with like I had known them for years. And it surprised me, I had thought it would be awkward, going in asking people about their personal questions, but most of them were comfortable, and maybe because of work and that I have to be able to get young people to talk and I have to be able to build up good relationships, so I think just with the age group and because of the same background I was able to build up a relationship. And I came away thinking, aww, I am not going to see them again, that's a bit sad. I feel like kind of proud of them cause a lot of them had made a lot of progress, so I was feeling proud of them, but it is not like really upsetting.'*

These situations really arose from a desire to help and to offer mentorship to participants who were perhaps in difficult circumstances or with whom peer researchers felt a particular connection:

> *'There was one in particular, well she is at a good stage now, but she had a lot of things going on, and she was a wee bit younger than me, and she didn't have any friends like and I sort of felt that I would love to kept in contact with her, just to let her know that if she needed anybody, like she could get in contact with me, and I could sort of continue that mentoring sort of role. But I understand like that with a study like that you can't. That you wouldn't be able to do something like that. I think it is just my nature, I am a very relational sort of person and I genuinely care for people, I have a heart for them. At the end of it there were a couple of girls and I thought I wouldn't have minded keeping in touch with them'.*

During training, ethical guidelines around avoiding building a relationship beyond the study with participants had been outlined. Therefore, whilst peer researchers maintained the recommended professional distance, they were at times torn by their emotional connection or desire to help. Peer researchers discussed this with the PI, professional researcher and each other. They found disclosing these feelings with other peer researchers was helpful as they had shared feelings of wanting to stay in contact with some of the participants they had interviewed.

In terms of ethics, there was some worry though amongst peer researchers that they had mined information from the young people's lives and then were leaving without feeling they had given anything back. This was particularly the case for young people who they were worried about, as one explained:

> 'You sort of felt at the end, it was like see you later have a nice life, and there were some of them who weren't in such a good place. One girl was just out of prison, and she was talking about her worries about going back there, and getting in with friends and drugs and stuff. And we chatted and at the end I asked her, and just talking to her, encouraging her and then taking the information that I need and leaving. And you feel that's awful. But like you can't be with everybody, you can't be by everyone's side. It is just one of those things it is part of the study'.

There was a natural desire, driven by empathy to help and, although ethical boundaries were not breached by peer researchers, some did feel that:

> 'For someone who was depressed it would have been nice to share my number – give us a call if you need to, if you want to talk.'

Peer researchers accepted that endings were a difficult part of the study. For some the emotional connection was not so powerful and the issue was more about the nature of a qualitative research interview where someone gives a lot of themselves and then the exit of the researcher underlines the non-reciprocal nature of the relationship:

> 'I felt like I had just taken all of the information then bye see you later, like it was bit strange'.

Peer researchers drew on the support from the professional researcher in managing endings:

> 'Talking it over afterwards, that helped to put it all into context,' like you could see that you might not be helping this person, but that maybe their story would help to get things changed and then that reminded you what of your role.'

Another brought further perspective, recognising the natural desire to offer help which does not go when people are in their role as a researcher:

> 'I kind of felt like I wanted to help her more than be her friend. When I left I felt that I wanted to help her and give her advice. I think that is only natural, I don't think that is anything to do with peer research per se. It is just you listen to people and their stories and it is natural that you want to help people'

Peer researchers also talked about how they brought a reciprocal element to the ending by sharing their own care experience with participants. One talked about how they had given the participant the opportunity to ask the researcher any questions before they left:

> '*I asked him if he had any questions for me. I just talked away. He was open and honest with me about his care experience and I just felt like I could be the same way. It was good like, it felt ok.*'

Professional researchers also talked about the difficulties relating to endings for peer researchers:

> '*With endings it came through quite a bit... when we brought them all back in to look at analysis... A couple of them had struck up a friendship with the people they interviewed who have wanted to continue the relationship – one in particular has struggled with the ethics of that, they knew that they couldn't and knew that they had a history of trying to do that before with clients they had worked with, so they knew that was a boundary they couldn't cross, but they did struggle with it. The others wanted to know why you couldn't keep in contact whether through Facebook or something else*'.

At the final peer research workshop there was some discussion of managing endings. There was an option of leaving a pack with participants detailing contacts for other sources of support, however, this was not always given to participants and peer researcher still felt this was an impersonal approach to endings. Peer researchers noted how there was the potential to use their own experience as care leavers to signpost young people to support:

> '*You could say you know there is a way out of things and you could have quite a natural conversation.*'

A further suggestion was that peer researchers may be able to move into a peer mentoring role, potentially supported by VOYPIC who already run a similar scheme. This may enable, within the bounds of ethics, ongoing support for participants, in particular those with whom peer researchers had connected or for whom they had ongoing concerns. As one peer researcher pointed out, the 'role' which peer researchers occupy is not necessarily a concern to participants:

> '*Young people would not be concerned about the role, just more accepting of the fact that you were willing to stay and go beyond.*'

However, the professional team highlighted that ethical issues need to be carefully considered:
> '*There are ethical concerns about researchers making friends with participants, however a peer mentoring role would offer the possibility to have contact with peer researchers in a different capacity.*'

There was some concern amongst peer researchers that it would not be ethical to offer peer mentoring to some participants and not to all of them, however, others felt that it was *'not everyone that you built a rapport with'.*

8.5 Practical challenges

A number of practical challenges presented in the course of the project for peer researchers. Peer researchers highlighted the practical difficulty of negotiating demands in other areas of their lives to ensure that they can fit in their work as peer researchers. For some peer researchers the pressure of other work or college commitments led to some difficulties in them having as much time as they would have liked to dedicate to the project. As one said:

> '*It has been hectic in the past couple of years and hard to fit things in.'*

They expressed concerns that they are not always able to be available when they are needed to conduct interviews. Peer researchers reported being worried when they were unavailable and that they did not like to say no.

> *'I really try to fit in with the interviews when (researcher) contacts me. But sometimes I have to say no and I feel really bad 'cause I don't like to feel I am letting her or, like, the project down'.*

Whilst there were challenges in managing competing schedules, in particular for those at university and at work, peer researchers clearly held the project as a high priority and made every effort to be available when they could.

> *'I try my best to fit everything in. I really want to be there to do the interviews and keep my commitment.'*

Peer researchers did note however, that whilst they were keen to undertake interviews they were asked to do, they did not feel pressurised to do so. In fact, they reported learning skills in managing their schedules and being able to say 'no' when necessary. Their keenness to do interviews underlines their commitment to the project, whilst they also learnt the positive skill of managing their time realistically:

> *'The main problem for me has been time management. The interviews started when I was in a really busy phase at work and if I had to say no to an interview I felt bad, 'cause I really wanted to do it, but after a while it was good for me to learn how to manage my time, so that turned into a positive.'*

A potential solution to managing the challenges of time management posited by the research team would be to offer employment on an on-going basis to a peer researcher whose primary commitment would be to the project. Whilst this may avoid the difficulty of competing demands on peer researcher time, it would mean that fewer peer researchers could gain the experience of being involved in this kind of work and

that the project would not benefit from the diversity of experience which a group of peer researchers bring.

Peer researchers also identified the issue of travelling to and from interviews to be a practical challenged most had faced. Three of the four peer researchers not able to drive, they were often reliant on public transport for part of their journey then meeting the researcher to travel together for the remainder of the journey. Whilst this gave them time to discuss the upcoming interview and debrief on the return journey, the cost, effort and time for travel was considerable, particularly for interviews in rural areas:

> *'Travel has been a problem for me 'cause I don't drive, if it wasn't for (researcher) I wouldn't have been able to get to my interviews.'*

It was also frustrating when such efforts were made to travel and the interviewee was not available for interview or requested that it be re-scheduled without prior notice. Challenges with transport were present throughout the project.

The peer research methodology brought with it a complex management task with many and varied elements of the study to coordinate and maintain. This management task was not without challenges.

Following the recruitment process and appointment of peer researchers, there was the task for the professional research team of bringing together this group of young people, with diverse skills and different care experiences, to work effectively on the project. This required considerable careful planning, attention to detail and a nuanced approach taking into account the particular needs of the peer researchers both as a group and as individuals. Training required particular attention, as did the ongoing development of peer researchers in terms of their confidence in the tasks at hand. The additional time required for briefing and debriefing was not expected at the outset but had been a key source of informal support for peer researchers. However, the professional researchers acknowledged that the management of the peer research team was considerably aided by this particular group of young people:

> *'I think we have been very lucky with the group that we got, with a different group of peer researchers it could have been very different and very challenging. The group we have are fantastic, quite exceptional young people, both the three that we have from the start but also the one who joined who just came in the middle an' fitted in no bother at all. So quite a remarkable group of young people which is down to their personalities and their motivation to see it through.'*

There were also practical challenges in terms of the complex logistics of the project which required detailed planning and attention. For instance, the task of arranging an interview with a participant involved coordinating with peer researchers in relation to their schedules, negotiating a suitable time with participants and linking this with the

professional researcher so that all three were available at the same time on the same day. As the researcher reported:

> *'It was hard enough logistically trying to match everybody up – trying to get a peer researcher, a participant and me all in the same place at the same time'.*

Transport for peer researchers to reach the interview location was one which was solved in the course of the project as the professional researcher was willing to drive peer researchers to interview locations. In the absence of this solution, the question of how peer researchers would travel to research locations would have been a difficult one, particularly for those that were in remote rural locations. Whilst travel has been facilitated within the present project, due to flexibility and willingness on the part of the professional research team, these logistical challenges should be considered as part of planning a project involving peer researchers.

9. Benefits of Peer Research

There were a number of benefits of the peer research approach which became apparent in the course of the evaluation. Peer researchers themselves benefitted significantly through their involvement with the study both personally and professionally. There are also apparent benefits to participants themselves in terms of how their contribution was enabled through peer researchers. Finally, there is evidence of distinct benefits to the study in general through the peer researcher methodology. The benefits to each of these areas of the work are described below and illustrated using quotations drawn from the data.

9.1 Benefits for peer researchers

From the early stages of the study, peer researchers identified a range of benefits from their participation including skill development in relation to interviewing, understanding research and communication abilities. These benefits were of particular relevance to the development of their career aspirations and CV's. At a more personal level peer researchers reported a growth in their levels of confidence and self-esteem which they linked to the sense of being valued as members of the research team. They also talked of the importance of friendships made in the course of the study and how this unexpected benefit would be a lasting legacy of their involvement in the work. At a deeper personal level, peer researchers reflected on how the experience had impacted on their identity in terms of having a history as a looked after child and how their involvement in the study had a transformative impact on their understanding of their own care identity.

Broad statements of the benefits are well articulated by peer researchers, one stated:

> '*It has been more than I expected to get out of it. I can see a reflection on me, on myself, on how far I have come – I mean for the study it is an area that I am really passionate about because of my personal experience, and because of my work, but even for me it has been really set goalposts for us. It has been really up lifting, the friends I have made and it is a privilege to be part of this.'*

Whilst another said:

> '*It is helping me shape my own journey – where I came from and where I am at now, things seem to be meant to be, just falling into place.'*

9.1.1 Being valued and a growth of confidence

Peer researchers described how they had a strong sense of being valued for their contribution to the project. They felt that their unique contribution as peer researchers, was recognised and celebrated by the wider research team and, by consequence, they felt valued as individuals and colleagues. One young person reported:

> '*It is nice to be part of something, to feel kinda valued, so you know what I mean, to be thought of and treated so well, to be made to feel that you are important to the project, that has been great.'*

Another went on to talk about how they had been treated by the professional team and the difference this had made:

> *'I felt like they treated us like adults, right from the start, that makes such a difference, like we were staff, on the same level, there was no feeling like because we have care experience, like they didn't treat us any differently.'*

This sense of being valued was linked to the growth of confidence and self-esteem amongst peer researchers, as one reported:

> *'You take it for granted, the confidence one, you look back and you realise how much you have changed and taken on.'*

Whilst another said:
> *'The experience of Queens has helped me to understand even just my confidence and realising even how I am able to speak and talk about things and how I am able to help people to open up and just lots of skills that have been developed with the study with Queens, feeling more confidence and feeling more valued, like I can do something like this and I can make it work'.*

A similar sentiment was reported by another peer researcher:

> *'I would never have thought would be clever enough or able to work with an organisation like Queens, and just to have that opportunity to work with them has made me… well I come across as a quite a confidant person, but I would struggle with my confidence, and I would struggle to value myself and have good self-esteem, which probably comes from stuff which has happened in the past too.'*

Young people also described how the growth in their confidence had impacted on other areas of their lives, one reflected:

> *'I was asked to do a speech at a conference, I just said yes, didn't even ask what I had to do, then I found out I kind of had to talk about how I have developed over the years since I have been going to Voypic. I was looking back and I realised that when I first was in Voypic I would have been shy, I wouldn't really talk in case it came out all wrong, and now I would be the first on to do the talking an' that. This project has been a big part of helping me get my confidence.'*

The increased confidence which is reported by peer researchers was mirrored in the views of the professional researchers, who also talked of the growth in confidence of peer researchers. All members of the research team emphasised that they had continued to see significant developments in both the confidence and skills of the peer researchers. The development of their confidence was notable in terms of personal

growth and maturity and their self-assurance in relation to their peer research role. One team member reported:

> 'I have seen an enormous change in the group. If I think back to how they were at the beginning and how they are now it is a remarkable difference. They have grown as young people; they are brimming with confidence.'

The confidence apparent in peer researchers personally was also reported in relation to their work on the project. The researcher commented that she continually sees them growing in confidence in their approach to the work and in interaction with participants.

> 'They are transformed really in their approach to it all, they have always been very good, but you can really see their development, independence and confidence. It is great to see how much they have grown.'

The wider research team also acknowledged that these young people have been impressive as a group and have clearly grown into their role on the project as they became increasingly independent in their research role.

9.1.2. Benefits relating to career and employability

Peer researchers identified a number of benefits gained through their participation in the study to their career plans and employability. Their CVs were enhanced by their work experience on the project and the range of skills and experience they have gained. Peer researchers also acknowledged that this experience is likely to stand out as unusual and interesting to future employers or course providers. As one stated:

> 'It is great to be able to put having this work on my CV, I think it will really help when I am looking for a job, it is so unusual to have done something like this, plus I can get a reference from Queens!'

The same issue was identified by members of the researcher team:

> 'Their employability skills have just multiplied, their CVs look absolutely fantastic now when they add everything that they have taken out of this study, the interview skills, their knowledge of disability and mental health, issues affecting young people in care and leaving care, generating qualitative interviews, analysis, ethics – all those things, everything to do with research really they have all those skills now and experience.'

Peer researchers also talked about how being involved in the study had shaped their career plans. One young person talked about how their involvement in the study had further fuelled their aspirations to become a youth worker:

> 'Before I started doing that I kind of wanted to do youth work and it has kind of built my confidence of being in and actually talking to young people and getting

to know about learning difficulties kind of thing, and then it has given me the confidence to go and talk to them'.

Peer researchers also talked about how the study has had a direct impact on shaping her future careers, one stated:

'The study has been a big part of it most definitely. Whenever I received the email about applying for the YOLO study I had never thought about research before, it had never entered my head as something that I could do. And then I applied for it and went for an interview. And then the opportunity came up to work on... a research placement... so I did that... it was different to what I was doing at Queens but it was another piece of research. During that year I was thinking about my dissertation... and I thought I am going to do something about care experienced university students. I just saw the opportunity, because of my experience working with QUB, I am not sure I would have thought of doing this to be honest without the experience at QUB, and now I am hoping to apply for a PhD in the same area.'

Another reported:

'It has encouraged me, more enlightened me, to work in this sector. Working with young people who have been through similar situations. I am going to be applying for a place in [voluntary organisation for young people in care], that is because of having done this work with the project.'

A third stated:

'It [involvement in the project] has equipped me as a professional and made me even more aware of the issues which ties in very much with the work that I do. Also I didn't realise before how important research is and the issues that the study has brought up – I have learnt so much from that'.

The fourth peer researcher also talked of the impact of the study on their professional aspirations:

'I have got interested in research and would like to do more. Also I knew I wanted to be a youth worker, but now I want to do youth work with young people in care or leaving care.'

9.1.3 Understanding disability

Another benefit of participation in the project demonstrated amongst peer researchers, was an increased understanding of the disability. Through both the training which peer researchers received, and the experience of meeting young people with learning disabilities and/or mental health needs, a nuanced understanding of disabled people emerged. Peer researchers talked about how this impacted on their daily lives in

encounters with disabled people. One talked of how they were bringing the learning gained on the project into their work life:

> *'I am at work and seeing all the patients and all, it would have been if I saw someone in a wheelchair or something I would have just walked right past and not bothered with them, but now I am like chatting and getting into conversation with them and I want them to feel better and be not left out. I have learnt to include people more that I might have ignored before'.*

Another reported a greater consciousness of the experiences of disabled young people and how they would be more confident in acting in an inclusive manner towards them, dissolving barriers:

> *'I would never have avoided them before but... I wouldn't have known what to say to them if you know what I mean. Now I would have more confidence to go up and talk to them and have a chat. Learning disability and mental health it's a part of their kind of identity, it doesn't make them any different to anybody else.'*

One peer researcher picked up on this saying:
> *'I know how to approach them, to not belittle them, not feel sorry for them cause they are just normal people like me and you, so just treating them like normal people'.*

Another responded:
> *'Yes, 'cause I would have had a sense of jut tip toeing and being careful of what I was saying to them. But I think now I'm a lot more comfortable, just a lot easier, not looking at the disability, just seeing the person and that has normalised it a lot for me. Not feeling sorry for them. People don't like to be pitied, it's not their fault it is their life and you have to respect that.'*

9.1.4 Friendships and relationships
Through taking part in the project peer researchers had developed firm friendships with others in the team. This was reported to be an unexpected outcome but one which is a real benefit of having been part of the work:

> *'…. making friends has been a real highpoint of the study for me, I am really good friends with one of the peer researchers and I didn't expect that, I know I would get on with people but I didn't really expect to make outside friends.'*

Whilst another reported how important it had been to make friends with others with whom they shared the experience of having been looked after:

> *'Just making new friends – like X she is a really good friend now I wasn't expecting that. My best friends none of them would come from a care background, but it has been really good connecting with other people from a*

care experienced background... I was the only one in my class that came from a care background and you feel a bit out on your own. To actually just be with a bunch of people who have had the same experience; that was brilliant.'

The friendships formed during the project also helped peer researchers to develop a greater understanding of their contribution to the project as well as to maintain their commitment to it throughout:

'We have got to know each other and to value each other, working alongside each other like this has been a key element of it.'

Another added:
'We have bonded and if we didn't it would have been different.'

Adding to this thread of the conversation a further peer researcher stated:

'You were committed because of many things, but one of them was the relationship with each other, you couldn't just drop out, you would just feel terrible.'

Peer researchers also spoke of their relationships with the professional research team members where they report a sense of having been trusted, treated with respect and courtesy and been recognised as people with particular skills and experience which has added to the project:

'Working with the researchers at Queen's has been brilliant, it has been so professional and we have been so well looked after.'

The relationships, however brief, that young people have developed with participants in the course of the interviews, have also had an important impact on peer researchers. Their sense of empathy with participants, whilst also recognising the diversity of their care experiences was significant and peer researchers reflected on what they have learnt from meeting young people taking part in the project:

'Even though you don't get to stay in contact with the young people you interview, you have still been able to meet them and to learn from them about hope they cope in their lives and the different challenges they face, and that changes you too.'

9.1.5 Transformation in perspective on personal care history
Peer researchers talked of how the experience had helped them to develop a different perspective on their own history through learning about others experiences, one reported:

'It has helped me grow. It has helped me understand how different people's lives are. I have always been an open person, but more so now even. When you are with people and you are listening to their stories, our population is quite small, but there is a world of diversity in what people are going through or have gone through'.

This theme was further developed by the group of peer researchers who reported a heartening benefit in terms of a transformation in how they look back at their experience of being looked after:

'I can see what I can contribute to the area with my own experiences which I never thought would happen. Like I have a care background was very young but I never thought that would be valuable in helping in this way… it makes you kinda glad that, what I have come through, journeyed through that you could maybe really help young people like this.'

Another added:

'It's funny, it is like saying I have something different from a lot of people, like my friends, like when I was growing up I was always the one who was different and in my mind weird 'cause I was the one in foster care and different things, and my friends had the normal kind of families and all. Now it is like I can use that thing to be something valuable, that helps me to help other people and that makes it kinda special.'

There is a strong sense here of peer researchers, through their involvement with the project, dispensing with the stigma associated with being a child in care and adopting a new way of thinking about their experiences which took a positive view on the past and celebrated personal achievement. One peer researcher spoke of how she had reclaimed her identity as a care experienced young person and felt more capable of disclosing her care background to peers:

'I had to do a presentation at Uni, and I just stood up and talked about the project and that I was a peer researcher looking at care leavers, and I was happy to say that, I didn't mind what people thought.'

The professional research team also noted this change in perspective, happening gradually during the project:

'The sense of their own family identity, I had a sense that that was changing throughout the study. Because they were listening to these young people and some of them had made peace with the fact that their parent was never going to be the parent that they wanted them to be... I think that peer researchers, through hearing young peoples' stories were evaluating their own lives, and I could see that evolve and change. I could see a growing sense of acceptance that their parents, or whoever in their family, that is just the way that they were

– it wasn't their fault and there was nothing they could do about it. I think there was a growing sense of peace'.

Peer researchers articulated a transformation in how they view their pasts:

'It has actually made me feel that that experience is valuable, sometimes you look at it and think what happened was bad and you were in care and things, and a lot of stuff happened in my family. I would believe that all things have a purpose. Just having an experience like the study just made me realise how valuable my own experience is and how you can actually help other people through your own experience. [....] The whole experience has help me realise that I have a lot to give and a lot to be proud of and I can make a difference'.

Another stated:

I feel more empowered by it [care experience] rather than seeing it as kinda awful. Like people see it as a terrible thing even though I had a more positive experience in care I would really want to talk about it an' stuff because of the stigma. Whereas now I don't really care, it is part of my life and I can use it as a positive thing to help others.'

Another said:

'I always tried to ignore my experience and just get on with it like and think I'm no different to anyone else, but now I have embraced it and I think that has given me something, maybe developed empathy with others and stuff like that.'

Recognising the diversity of experiences of care through taking part in the project is another thing which peer researchers referenced in terms of understanding their own care experience:

'I have seen that everyone's experience is different. In a way I identify more with care in a positive way not in a negative way. Also realising how much diversity there is relating to care in general'.

9.2   Benefits for research participants

As noted above participants were overwhelmingly positive in evaluating the experience of being interviewed by a peer researcher. From the data collected from peer researchers themselves as well as the professional researchers we can posit benefits to participants of their interaction with peer researchers. The view that the relationship with participants flowed easily because of the common care history was one that peer researchers held, as one reported:

'The relationship was quite easy to build. I think me and the other peer researchers think that it was because of us having been in care. At first I didn't think that would make a huge difference whether we had care experience or

not, that they would open up or they wouldn't open up, but now we realise how significant that experience was – all the young people that I interviewed commented on that and I think they appreciated that we had been in care. Even like hearing a bit about my story and how far I had come and stuff.'

Another recalled how one participant had remarked on not feeling judged by the peer researcher which was a relief as it was an unusual experience that had enabled him to be more open in the interview. This was certainly of benefit to participants as well as to the study, as the peer researcher stated:

'One person said he could talk to me 'cause he felt I understood, like I didn't judge him. He said he couldn't usually talk to people 'cause he could tell they were thinking something, you know, like he felt people were looking down on him and he said he could talk to me and be more open because I didn't judge him, that was good to hear'.

Similar sentiments were echoed by another peer researcher who said:

'*We did an evaluation at the end with them. They had to tick boxes or whatever to say whether they were comfortable with a peer researcher and the value of it. I would ask them if it made a difference. They said 'yeah, like I would tell you a lot more than what I would have a professional'. One of them said, 'yeah with the other lady that was older I wouldn't have really said that much, but with you that comes from a similar background'. Definitely, having common ground and similar background makes it sort of a nicer experience for them'.*

Another peer researcher identified the importance to participants of meeting someone else who was care experienced:

'When I was growing up in care I literally did not know one other child who was looked after, I had no one to share it with.'

They went on to remark that not only did the project enable contact with someone with a shared experience, but that as the peer researchers were in a good place in their lives, they could act as a role model for participants:

'They could see that it is not all negative growing up in care, and that you can have a good life and be ok, in that way we were kind of role models for participants.'

Another supported this saying:

'Meeting us, you would hope that would give a sense of encouragement that things can change for them for the better.'

Participants also reflected on their experiences of having been interviewed by peers. The evaluation was given access to anonymised extracts of data which offered insight into participants' responses. One talked generally about the experience:

> *'I didn't really know what to expect or what it was about so it was sort of nice to be able to share my story of care'*

Some did express caution at the experience of being interviewed by a peer, although they attributed this to the degree to which they had opened up in the course of the interview and to some of the difficult information they had talked about, as this extract demonstrates:

> *'That first one [interview], it was a hard old struggle after it... because I never go to like, you know, because that was more the in-depth stuff... It was hard for a wee while after but then finally it was good to get it out now I must say'*

Another recognised the difficulties of talking about childhood memories, but that they could now reflect on it more easily as time had passed.

> *'You know I'm old enough now to talk about stuff like that, if it had of been whenever I was a teenager you would have had no hope you know, that kind of way, now I'm more, well I like to think I'm more mature now to actually talk about stuff like that.'*

There was also a sense in which some of the participants appeared to feel empowered by the experience of sharing their story, with the hope that it would make a difference to others:

> *'I was actually talking to one of my friends and he actually had done this with you as well so he did, I was talking to him and we were both saying to each other we really hope social workers listen to it more than anyone, that they really are trained and they use this as a training step, because at the end of the day we're the only ones that really know.'*

Participants also acknowledged the interviewing style of peer researchers and how this helped them engage in the interview:

> *'You's aren't really like, you're easy going too, you're not forceful of what you're asking'*

Others highlighted the empathy the felt from peer researchers and noted how this helped them:

> *'It's been different; it's definitely been beneficial that somebody actually cares... to talk to them and... you's actually care about what I'm saying'*

And very positively participants talked about how they had enjoyed being part of the study:

> *'I'm quite happy to tell you my story, it's been a genuine pleasure.'*

9.3 Benefits for the research study

Both peer researchers and the professional research team identified a range of benefits to the study through having adopted the peer research methodology. There was considerable coherence between the benefits identified by the peer researchers and those highlighted by the research team. Benefits included peer researchers' abilities in quickly building rapport with participants through the care connection as well as the wider peer connection in terms of their age and shared interests. The motivation of peer researcher was also highlighted as beneficial as they were more driven by interest in the young people than simply by the collection of data. Indeed, peer researchers have also taken on additional roles in the study which has been of significant benefit. The role of VOYPIC has also been of significant benefit to the project and the peer research approach.

9.3.1 Building rapport with participants

Members of the research team as well as peer researchers identified the proficiency of peers in quickly building rapport with participants. A key aspect of this was what one member of the research team termed *'the care connection'.* This common understanding placed peer researchers in a unique position to find the *'level the young person was on, very quickly'.* They were reported to be adept at making this connection with participants and *'developed their own style of communication with participants really very successfully.'* Peer researchers raise the same issue, as one reported:

> *'I think there are a lot of connotations around being in care, I think there can be feelings of embarrassment and a stigma and it can be difficult to talk about it. That would have been part of my own feelings as well, not wanting to talk to people about it, thinking they aren't really going to get this. I would have to explain too much. It is just like in every aspect of life; you can open up a lot easier 'cause you know that they kinda get it. It might not be the exact same experience but I think they know that we could empathise. I think too that coming from the same sort of background I have a real heart for people who have had that experience. I think even my facial expression and body language, like its authentic, and you can tell the difference if somebody really gets something and really empathises, and somebody who is trying to but they can't really do it 'cause they haven't been in that sort of situation'.*

Peer researchers noted that they fact that the young people knew that their interviewer was care experienced helped in building the relationship:

> *'Cause they knew that I had been in care, they knew that I would understand, simple as that really, I just knew where they were coming from and they could see that. That helped them to trust me, which is good.'*

The same point was reiterated by the professional researcher in recognising the fact that participants are involved with a large number of professionals but are often of the view that people do not understand them.

> *'We haven't walked the walk either, we haven't been in care, at least they assume that we haven't been in care… that is coming out in the data too, the barrier between professionals and young people – them complaining about social workers, "they think they know that they are the experts, well they are not, they might have read books but they haven't actually lived the experience – so who are they to put themselves up as experts and tell me how I should live my life when they haven't been in my situation"… whereas when talking to the peer researchers all that barrier between the professional and the young people just wasn't there.'*

Professional researchers identified particular aspects of peer researchers' approach to interviews which further enabled the development of rapport. For instance, being able to slightly stretch the usual boundaries, such as being able to offer a young participant a cigarette when they were becoming stressed or needed a break from the interview – a gesture which created common ground, but one that would not be used by the professional researcher. In addition, shared use of language, coming from a younger person's perspective, common interests in youth activities outside of the study (for example, cars, football or music) around which a casual conversation which built trust and a shared understanding aided the development of rapport. Professional researchers were impressed at peer researchers' abilities in this area and noted the contribution of good relationship building to the willingness with which participants recounted their care leaving experiences to peers. In this way, peer researchers enhanced the quality of data collected in the course of the study.

9.3.2 Added value of the peer research approach
Peer researchers reflected on what they brought to the project that made it different to care leaver studies that did not have a peer research approach. A number of areas were identified that demonstrated the added value brought by peer researchers:

a) Their additional insight because of care experiences with participants demonstrated in their empathic response to participants.
b) Their youth enhanced the level at which participants related to their interviewer
c) An informal approach to interviews countered common experiences amongst care leavers who had often been formally interviewed /assessed by a range of professionals and facilitated a close rapport.
d) Insight into care leaver experiences assisted the analysis of data and helped the research team to critically discuss the findings and related recommendations.
e) A high level of motivation, integrity and enthusiasm for the project grounded in a desire to effect change in care leaver policy and practice helped to maintain ongoing involvement in the study for peer researchers and participants.

Peer researchers reflected on what the study may have been like if they had not been involved. One stated:

> *'I think you would have received more formal data. Would they have been so open? ... I don't think they would have.'*

Similarly, another said:

> *'I don't think you would have got much depth to your data.'*

Another posited that recruitment may have been more difficult without potential participants knowing about the involvement of peer researchers:

> *'There might have been less uptake of taking part. Fewer people agreeing to take part I mean and then staying with the project throughout, people didn't drop out half way through.'*

Recognising the complexity of the peer research process in terms of logistics and organisation, one peer researcher stated:

> *'It would probably have been easier, but probably not as good.'*

9.3.3 Motivation of peer researchers

Professional researchers remarked that peer researchers' personal motivation at interviews led to positive, productive approach. They were not as professional researchers described it *'data driven'* but focused on *'getting to know the care leaver and giving them the time to tell their story.'* Professional researchers reported that this meant that quite often the pace of the interview was slower than it would have been if they had been conducting the interview. Whereas the peer researcher approach led to a more relaxed and unpressured interview which enhanced the quality of data gathered.

9.3.4 Additional roles in the project

In addition to their roles in interviewing participants and in working on the analysis of data, peer researchers were involved in presentations about the project to a range of audiences including the advisory group, the funder and other voluntary organisations engaged in peer research activities. This role will continue as dissemination activities about the project are planned. One of the peer researchers has also taken a role in coding data collected in the General Health Questionnaire which was a component of interviews. This is mutually beneficial, being both useful to the project and an area of skill development for this peer researcher who is interested in developing a career in research.

9.3.5 The role of VOYPIC

The voluntary organisation VOYPIC played a key role in the project in terms of supporting the work of the young people who became peer researchers. As an

organisation they were involved in recruiting young people to become peer researchers and played a major role in training. Critically, Voypic managed the portion of the budget relating to the peer researchers, processing their invoices for payment of time and expenses. Having this practical support was valuable in terms of relieving the pressure of this task from the research team. In addition, the link person at Voypic understood the nuances of the project and its importance both for the peer researchers personally, but in terms of their contribution to the project's success. As one of the research team stated:

> *'I hadn't actually thought of working so closely with Voypic when we wrote the proposal and they have played such an important part for me in terms of keeping that momentum going with peer researchers. Eithne would sometimes just come along to things and ask the right questions or give them a bit of feedback externally which was very important for them. Because she was dipping in and out she could see their progress and their confidence and she was so supportive, for instance she at the Voypic office one night at 6 o'clock to pick up a recorder for us. She managed all of the budget for their travel and their practical arrangements which was very important in terms of processing them in a timely way. The support from Voypic was very important to us.'*

Peer researchers elaborated further on the role that Voypic had played and the value of this to the study:

> *'I like the way that Voypic has been involved the whole way through, their support for the study adds a lot more to it. I think it makes it more credible. Perhaps it will mean the study will have a wider impact too. I wonder if we could have done the study without Voypic? It would have been very different.'*

10. Discussion and Conclusion

This evaluation has tracked the involvement of peer researchers in the project from their earliest engagement at the stage of recruitment until the final workshop which marked the end of their formal work on the study. Considerable learning about this methodological approach has been possible through this process. As described in the report, data has been gathered at significant junctures in the project from peer researchers themselves, from the professional research team and from those who took part in the study. This chapter will focus on the strengths and benefits of the peer research approach, as well as areas that could be improved or developed further.

10.1 Strengths and benefits

A central finding of the evaluation is that there are clear indications from all parties involved of the added value of the peer researcher methodology to the project. Reflections of both peer and professional researchers as well as the responses from participants endorse the method as of benefit to the study. Headline benefits include:

- the high level of retention of participants throughout the period of the study;
- a relaxed approach to interviewing which enabled a more open, honest and deep response from participants;
- strong rapport and empathy between peers and participants which again impacted on the quality of data collected and participant experience;
- the ability of peers to shift boundaries, such as sharing a cigarette with participants, further developed rapport and enabled participation;
- the insight and integrity that peers brought to the process of analysis enhanced the detail and quality of the coding framework and final write up of thematic findings; and
- peer researchers' contribution to dissemination through presenting the findings of the research gives a powerful message to a range of key stakeholder audiences.

Although it is impossible to say how the project would have been different had a more 'traditional' approach been adopted, with interviews conducted by professional researchers, we can posit from the available data that the peer research method brought considerable benefit to the study in terms both of the engagement with participants as well as benefits to peer researchers themselves.

The developments in the peer researchers both professionally and personally has been a striking finding of the evaluation. It has been clearly apparent both through their own self-reflection as well as the observations of professional researchers how significant the progress they have made has been. Their professionalism and skills as researchers have grown substantially to the point where they would have the potential to work in the research field, which some of them intend to do. Their personal growth in terms of overall confidence and self-esteem also features as a strong outcome for the group. Their references to personal growth in terms of the role of the project in altering their view of their care experience in a more positive light, and as a strength, is a remarkable and unanticipated outcome for peers. A further unexpected outcome was that peer researchers all report that their involvement in the study has had a direct impact on their career aspirations. It could not have been predicted that

the project would have such a role in shaping future professionals in working with looked after children and young people.

A further strength of the project and perhaps one on which the success was built both for the study and peer researchers themselves, were the formal and informal supports put in place throughout to scaffold the work and support the development of peer researchers. Training delivered at the outset of the project was detailed and intensive. Peer researchers reported that it provided them with a strong platform for commencing their interviews. Further training, workshop days and informal support that ran throughout the project allowed for continued growth in the peer researcher team both in terms of skills and confidence. The extent of the training and support given was a key strength in providing a foundation for the success of the method.

Informal supports available throughout the project were also identified as a significant strength and benefit. As discussed earlier in this report, the debriefing which happened following interviews with participants was reported to be invaluable to peer researchers in terms of their personal development as interviewers as well as in the growth of their confidence in their unique contribution to the project. Within this, peer researchers also highlighted how they were treated as team members and *'as adults'*; in other words, with respect. This was valued and impacted on their commitment to the study and to its success.

Peer researchers themselves identified a strength of the project being the peer to peer support and friendships which developed. These grew from the contact at workshop and training days and when the team came together for example when working on analysis. Their shared experiences and mutual understanding allowed for a supportive atmosphere in which people felt they could be open and which enabled mutual respect and learning. This strong team approach was also apparent as a strength of the project and, therefore, highly beneficial to the work.

The partnership with the voluntary organisation VOYPIC was of significant benefit to the project. In a practical sense VOYPIC provided support by managing the budget relating to peer researchers and processing their payments and expenses. This was highly valued by the project management and proved to be a convenient and efficient system for peer researchers. Peer researchers themselves reported that they felt the project had greater integrity because of the inclusive approach of adopting participation from VOYPIC throughout the study. They also highlighted the potential for the project to have greater impact through the ongoing engagement with VOYPIC.

10.2 Challenges and areas for development

The project was completed on a very tight time scale and, in hindsight, a four-year rather than a three-year time scale overall (including early quantitative aspects of the study) would have enabled a more measured pace. This was a challenge principally identified by the professional researchers as the peer researchers were not always aware of tight timescales. However, the time required for the additional work involved in running a peer research project, the logistics and planning, support and training as

well as routine management tasks, only became apparent with through the experience gained in running the project.

Additional financial resourcing for the project would also have eased the progress of the work. The costs involved in conducting a peer research project are considerable and again the experience gleaned from conducting the work highlights the importance of adequately costing this aspect of the project from the outset. The funder for the project later provided additional monies for this evaluation, however, future projects could ensure costs of a robust evaluation are built into the research from the outset.

Managing the logistics of the study was a challenging task. Bringing together the peer researcher, participant and professional researcher to conduct interviews required considerable co-ordination. Arranging transport, timings, pre-meetings and post interview briefings for each of the interviews conducted was an ongoing challenge throughout the project. Strong organisational skills on the part of the project researcher fellow were necessary to enable the successful execution of the peer research approach. Given these challenges, excellent organisational skills and a firm commitment to participatory practice are necessary attributes of any researcher recruited to work on a peer research study.

A challenging aspect of the project raised by peer researchers was that of 'endings'. Saying goodbye after final interviews with participants was difficult in some instances for peer researchers. There was a sense, with some participants, of being worried about them, and a desire to offer additional support. This strongly empathetic response was related to individuals own care leaving experiences and a desire to help people to find their way out of difficult situations. One development that emerged from this was the possibility of an onward role for peer researchers at the culmination of a project such as this. In this scenario the research role would transform to be one of peer mentoring. This it was posited, could help to unseat the finality of 'endings' and would be beneficial for peer researchers who would be able to remain in touch and offer additional support, and for participants who would be in receipt of support from peers who were also role models.

10.3   Recommendations for future peer research

The learning from this evaluation will be considered here in relation to future work adopting a peer research approach. Points highlighted will be in relation to planning a peer research project, training and support for peer researchers, their contribution throughout the study, the importance of considering endings and, finally, points raised by peer researchers themselves relation to what they consider to be important for those considering a peer research role.

10.3.1 Planning a peer research approach

A strong rationale for adopting a peer research approach would seem like a suitable place to begin in planning such a study. The findings suggest that a peer methodology is underpinned by ethical principles relating to inclusion and participation, alongside a

clear understanding of the benefits to the study in terms of the quality of findings and engagement of participants.

Detailed and considered planning is needed from the very outset of a peer research study. This begins with adequate costing, collaboration with organisations such as VOYPIC and recruitment of participants based on a clear definition of the peer researcher role. One of the key elements, highlighted earlier, is that young people have to some degree processed and moved on from their own leaving care story. This was found to be important in terms of young people's ability to deal with the emotional demands of the work and to make a real commitment to the study.

10.3.2 Training, support and ongoing involvement

Initial and ongoing training and support for peer researchers is also of central importance. This requires careful attention and planning as well as regular reflection to ensure that training and support needs are attended to as the project evolves.

Peer researchers should be involved at all stages of the study. This includes recruitment of participants (where appropriate), planning interview schedules, contributing to analysis and being part of the dissemination process and impact strategy. This is beneficial for the project and also adds to the credibility of the process as peer researchers' skills and perspectives are included throughout the study rather than in some discrete areas such as interviews, which is perhaps a more common approach.

10.3.3 Endings

The challenges of endings have been highlighted above and indicate a need to consider the possibility of peer researchers maintaining contact with participants informally or undertaking a new role as peer mentor following the project, if requested by the participant.

10.3.4 Top tips from peer researchers!

Based on their experience on the project, the peer researchers reflected on the personal attributes of a good peer researcher and what someone in this position should bring to a project. They recommended that peer researchers are: reliable and a good time keeper; genuine, demonstrating integrity rather than arrogance; non-judgemental and sensitive; and good communicators.

The peer researchers also identified the following key tips for any young person considering taking part in a peer research care leaver project:

o   Engage in all aspects of the training – participate and ask questions
o   Make a genuine commitment
o   Learn from other peer researchers
o   Keep in touch with the team during quiet times of the study
o   Be aware of your own limits – don't over commit yourself and prioritise self-care

- o Manage your own emotions in relation to your own care experience and seek support, if necessary
- o Be self-aware and recognise the impact of the work on own emotions/mental health
- o Avail of supports which have been put in place
- o Take part in feedback sessions to understand and recognise your own progress
- o Have confidence in your ability to interview someone
- o Be yourself during interviews, don't feel pressure to be overly formal
- o Use the opportunity to build friendships with peers
- o Recognise the challenge and impact of the endings: empathy and emotions are ok!
- o DO IT! Take the opportunity!

10.4 Conclusion

The evaluation has recorded the peer research journey from the outset of engagement with peer researchers at recruitment, through training and support during the project, interviewing and data analysis, to reflections on endings at the culmination of the project. It has sought to gather and report data from peer researchers themselves as well as from the research team and has included reflections from participants.

A clear outcome of the evaluation has been the success of implementing the peer research approach in the course of this study. The evaluation provides evidence of added value to the project through the work of peer researchers. Whilst it is impossible to make a direct comparison with a 'control' study not using a peer research approach, it is clear from the composite positive responses that the approach has been of significant benefit to the study in a number of ways.

There have been anticipated and unanticipated benefits to peer researchers themselves. It may have been expected that peer researchers would grow in skill and confidence, but the additional benefit of them altering their personal reflections on their own care experience in a more positive way, and in relation to the development of their career aspirations could not have been predicted. For participants, benefits in relation to being able to tell their story in a way in which they felt heard and valued was important. In addition, participants were able to adopt greater openness to the telling of their stories than they might have done if they were interviewed by a professional researcher alone. For the study then, the data gathered was in-depth and rich, offering significant insight into the care leaving experiences of participants.

The success of the project was also based on a number of crucial factors. Firstly, the robust training both initially and throughout the project enabled peer researchers to feel confident and able in the skills they needed to undertake the work effectively. The ongoing formal and informal support throughout the project was also critical in maintaining the wellbeing and ongoing development of peer researchers. Practical supports offered by the research team in terms of transport and organisation was also central to peer researchers successfully undertaking their work on the project. Peer relationships were a strong support to peer researchers and the sense of being valued

and respected by the research team also encouraged their commitment and confidence.

Of course, a project of this size and complexity was not without its challenges. Logistical and practical matters took considerable planning and attention to detail whilst also taking up a significant amount of researcher time. The involvement of VOYPIC was very helpful to the project in terms of contribution to training and ongoing support, alongside coordination of payment for peer researchers. In addition, the involvement of Mencap and Praxis Care helped to address peer researcher concerns about the challenge of asking interview questions related to disability and mental health issues. The emotional impact of the project on peer researchers, as a challenge, was most evident towards the end of the study when they were leaving participants for the last time. The desire to offer ongoing support and a sense of being concerned for participants' wellbeing was tangible. Many highlighted the possibility for the development of an ongoing pathway to continued support such as peer mentoring, for a future project of this nature.

It is hoped that some of the learning from this project would help to develop future work. Key recommendations include:

1. Budget for sufficient time (longer than usual) to undertake the work as logistical / practical considerations take significant additional time and add to the costs of a peer research project.
2. Provide robust recruitment and assessment processes so that everyone has clear expectations of the peer researcher role from the outset.
3. Provide significant training and ongoing formal and informal support to peer researchers.
4. Develop strong and open channels of communication to enable dialogue between the professional and peer research team.
5. Involve peer researchers in a range of stages of the project. Their participation in interviews is central as is their contribution to all stages of the analysis, bringing particular views and perspectives beyond the insight of the research team. Peer researchers can also engage significantly with dissemination activities.
6. Pay attention to endings. Peer researchers may need additional support here. Participants may benefit from ongoing contact with peer researchers, but this should be managed to take account of ethical concerns. There is a need to alter the terms of reference around the relationship which could be transformed into one of peer mentoring in collaboration with a voluntary sector agency such as, VOYPIC.
7. Collaborate with a voluntary organisation working with care experienced young people to support the peer research approach.
8. Consider the possibility of employing a peer researcher on a fixed term basis which may alleviate some of the logistical and practical challenges.
The care leaver study was built on the principles of social justice in relation both to the issue being researched and the approach taken through the peer research methodology. It engaged with co-production and participation in all areas of the work.

There seems no clear rationale for undertaking such a study without adopting a peer research approach routinely.

The value of the peer research in relation to the present study is clearly articulated through this evaluation. Research which engages with a care leaver population, in particular those with impairments or additional needs, is likely to benefit significantly through adopting a peer research approach. The trust produced through peer interviewing, the insight and understanding peer researchers brought to interviews and analysis and the integrity that they brought to the research process, made this approach invaluable in investigating the needs and experiences of care leavers with mental health and/or intellectual disabilities.