

EVALUATION SUMMARY

Model of Volunteer Community Peer Navigators

Brisbane North and Moreton Bay Pilot Program (April 2022)

Background

In April 2019 Council on the Ageing (COTA) Queensland was funded by Brisbane North PHN to establish an Older Persons Action Group (OPAG) to prioritise and progress actions in [Planning for Wellbeing](#), the regional plan for North Brisbane and Moreton Bay focusing on mental health, suicide prevention and alcohol and other drug treatment services (2018-2023). OPAG identified the following priorities to focus on early intervention and prevention:

- ♦ improving community knowledge of available information and resources,
- ♦ actively engaging older people in conversations that reduce stigma and promote help-seeking behaviour,
- ♦ improving GP knowledge of available services and supports,
- ♦ supporting carers, particularly ageing carers, to sustain good mental health.

In October 2020, COTA Queensland, Moreton Bay Regional Council and Wellways Australia partnered to deliver a [wellbeing event](#) at the Caboolture hub.



Gail Price and Karen Wilson at Wellbeing Event (Oct 2020)

In January 2021, COTA Queensland, Moreton Bay Regional Council and Brisbane North PHN, together with older people with a lived experience codesigned and trialled a peer navigator program at Bribie Island Library (January — June 2021).

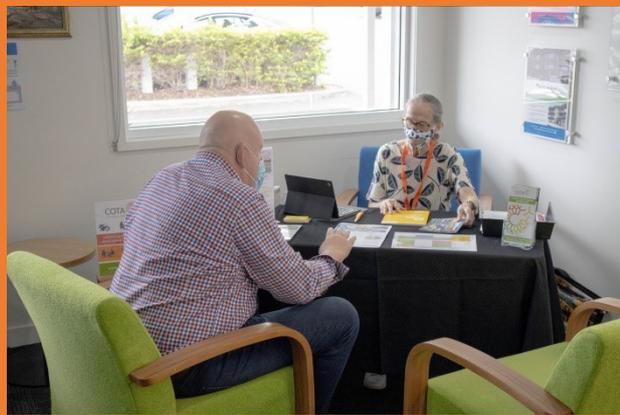


Bribie Island Library pilot launch with COTA Queensland, Moreton Bay Regional Libraries, Volunteers and Councillor Brooke Savage (front left)

In October 2021 the program was extended to 3 additional libraries (Redcliffe, Caboolture and Strathpine), the Caboolture Neighbourhood Centre, who deliver the Community Action for a Multicultural Society (CAMS) program, and Burnie Brae Chermshire (October 2021—March 2022). The program was evaluated by Campfire Co-op Ltd.



Volunteers (Linda and Arta) at Caboolture Library



Program Aims

To empower older people, their families and caregivers to access relevant services and supports and gain confidence in using digital technologies to maintain their mental and social wellbeing and adapt to changing circumstances.

Delivery

Sessions were delivered from October 2021 to March 2022, excluding school and public holidays.

Location	Day	Times
Caboolture Library	Tuesdays	10:00am – 3:30pm
Burnie Brae	Tuesdays	09:00am – 1:00pm
Strathpine Library	Wednesdays	09:30am – 3:30pm
Redcliffe Library	Thursdays	10:00am – 3:00pm
Caboolture Neighbourhood Centre #	Thursdays	10:00am – 1:00pm

Delivery at Caboolture Neighbourhood Centre was discontinued in December 2021 due to COVID restrictions but volunteers continued to deliver sessions at Caboolture Library and the program was cross promoted between sites.

External context

The COVID-19 pandemic placed considerable constraints on program delivery. In early January 2022, the Omicron variant moved quickly through the community and people from vulnerable populations were strongly advised not to leave their homes unnecessarily. There was also a significant weather event at the end of February that impacted on delivery in early March, as people didn't venture far from home.

Delivery partners

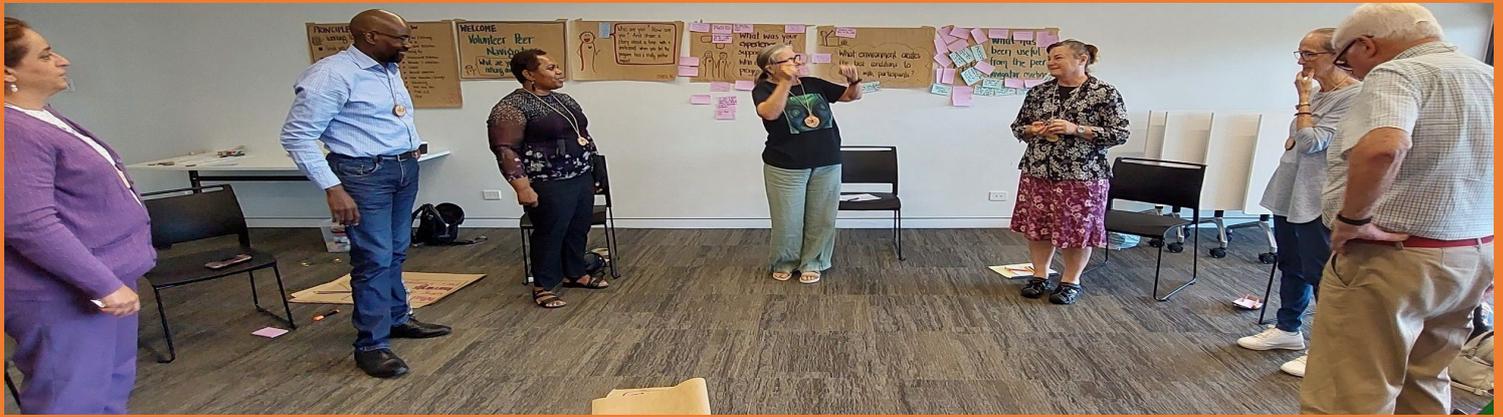
COTA Queensland was the project lead for the program and responsible for delivery, implementation, and evaluation. Moreton Bay Regional Libraries, Burnie Brae and Caboolture Neighbourhood Centre were key partners in terms of locating the services.

Volunteers

Volunteer Peer Navigators were from a range of ages and backgrounds. At commencement there were nine ($n = 9$) females and two ($n = 2$) males. From January 2022 there were six ($n = 6$) females and one ($n = 1$) male. The evaluation revealed that backgrounds included some diversity including American and Iranian. The age ranges of the volunteers were from 50-60 ($n = 3$); 60-70 ($n = 3$); 70-80 ($n = 4$) and 80-90 ($n = 1$). Volunteers were from a diversity of employment backgrounds, including peer/recovery worker, mental health support worker (CALD), singer/performer, government, counselling, manufacturing, financial and aged care. One of the volunteers came from a military family background.



Volunteers (Celsie and Alison) at Stratphine Library



Evaluation Methodology

A simple case study design of qualitative thematic analysis and quantitative data was used to collect and share evidence across two key domains:

- ◆ **Environment** (five different locations)
- ◆ **Cohorts** (Delivery Partners, Peer Navigators and Participants)

The central research evaluation questions for each domain included:

- ◆ **Environment:** What environment creates the best conditions for successful engagement?
- ◆ **Delivery Partners:** How have delivery partners experienced the program?
- ◆ **Peer Navigators:** What are their key learnings and experiences in being a peer navigator?
- ◆ **Participants:** What, why and how relating to engagement with the program?

Data Collection

A wide variety of data collection tools were used, including Peer Navigator Record Sheets, environmental observational checklists, focus groups, interviews, project officer reflections (self and volunteers), and training evaluation surveys.

Data Analysis

Raw data from record sheets, interviews, meetings, reflections and focus groups were coded against the two key domains. Additional coding was made against each cohort. Data not relevant was removed. A thematic qualitative analysis of all data was then undertaken, theming groups of concepts and ideas together. Quantifiable data, mostly collected from peer navigator record sheets, was combined to provide an overall summary.

Evaluation Findings

Domain 1: Environment

Total number of conversations at 5 different sites (environments)

Venue	Usual times of delivery	Total	AM	PM
Burnie Brae - Chermside	Tuesday (09:00am – 1:00pm)	12	5	7
Caboolture Library	Tuesday (10:00am – 3:30pm)	8	6	2
Strathpine Library	Wednesday (09:30am – 3:30pm)	9	9	0
Redcliffe Library	Thursday (10:00am – 3.00pm)	18	8	10
Caboolture NHC	Thursday (10:00am – 2:00pm)	6	2	4
TOTAL		53	30	23

Environmental case studies are available on request.

Key Learnings

- ◆ Need to create just the right conditions for successful access within the environments.
- ◆ Creating a trusted and safe space that is welcoming and friendly is vital.
- ◆ Volunteers should be seen as a helpful resource rather than an official information desk.
- ◆ Signage and set up should be casual, friendly and welcoming and messages clear and succinct.
- ◆ Resources on display should be kept to a minimum, but easily accessible if needed.
- ◆ Too much paperwork could be a deterrent.
- ◆ Public transport, transport and mobility was a real issue for access.



Key Learnings continued...

- ◆ Libraries and community centres do not necessarily attract people who are really isolated in their homes. Consider alternative venues like community cafes, markets and retirement villages. Consider co-locating where there is a passing through of foot traffic.
- ◆ If located in a busy space, may also need to consider a private space to move to for more confidential conversations.

“What are we creating here? The need for a safe space. The safe space translates into an information transition — to a deeper and more meaningful understanding of the person's needs. This won't always occur due to help seeking behaviour, avoidance and stoicism in older groups”. **[Delivery Partner]**

“Provide a more suitable space related to our mission, which is attracting people and encouraging them to chat, to open up and ask for assistance, resources and to share their issues and needs”. **[Peer Navigator]**

“The conversation is the information”
[Peer Navigator]

Domain 2—Cohorts

Volunteer Peer Navigators

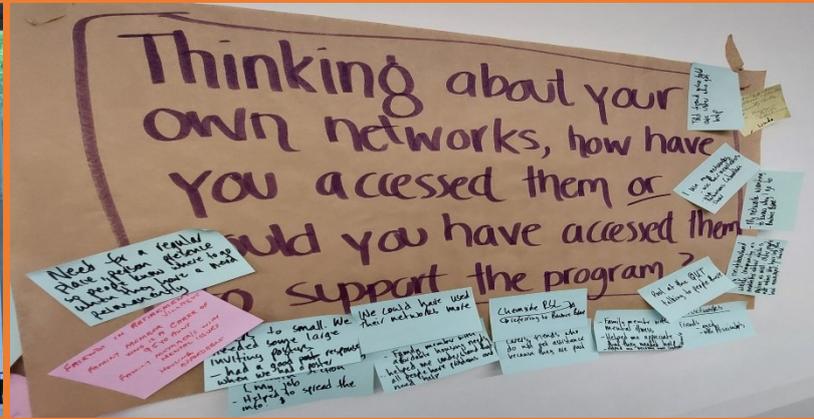
Of the seven ($n = 7$) final volunteers in the program, five were able to attend the all-day sense making workshop in March 2022. Delivery partners joined at lunchtime to connect with volunteers (photo below).



Several key themes emerged from a range of data including: volunteer reflections shared with the Project Officer, peer navigator record sheets, meetings/workshops and from the sensemaking workshops with delivery partners and volunteers.

Key Themes

- ◆ Volunteer skills required to deliver the program were deep and wide.
- ◆ Being a good listener rather than a talker, calm, confident, with tech skills and willingness to learn new skills is the key requirement.
- ◆ Listening and empathy are important skills in delivering information.
- ◆ The human touch often led to something of a flow on effect where one question led to another and eventually the heart of the matter was uncovered.
- ◆ It was complex for volunteers to get their heads around all the programs and supports on offer.
- ◆ Volunteers needed skills in maintaining role boundaries.



Key Themes continued...

Some of the reflections volunteers shared included:

- ◆ Personal rewards of learning new skills.
- ◆ Building connections and relationships.
- ◆ Personal satisfaction and making a difference.
- ◆ Coming together created a sense of belonging, learning together and personal validation.
- ◆ The training sessions were useful to learn more about services available.

Volunteers had learnings of a more self-actualizing nature such as learning more about the complexity of humanity and appreciating their own lives.

Some shared frustrations and misunderstandings around their role as “guinea pigs” and felt a sense that the program started before it was fully supported.

There was also a sense that personal connections and networks were underutilized in terms of promoting the program.

“It’s not really the information that matters but that there are humans there who one can go and just talk to”

[Peer Navigator]

“Those who volunteer are happier and healthier” **[Peer Navigator]**

A summary of key insights from the volunteer focus group was included in a 4-page newsletter, sent to all volunteers in March 2022.

Domain 2: Cohorts

Participants

A total of fifty-three ($n = 53$) participant surveys were completed by the Peer Navigators after each contact using the Peer Navigator record sheet.

Support accessed and needed

General support categories accessed by participants were identified by peer navigators from a list of pre-determined options. The table below shows the total number of conversations from Oct 2021—Mar 2022.

Category	No.
Digital Skills and Resources	18
Health and Wellbeing	16
Social and Community	16
Carer Support Services	7
Information Literacy	3
Crisis Support and Helplines	1
Specialised Support Services	2
Total	63

Note! Some participants accessed support for two or more issues. Support for “digital resources and skills”, “health and wellbeing” and “social and community” were the key presenting support needs. However, when theming the data several other key needs emerged, as follows:

Legal matters and paperwork: needing a JP to assist with completing forms/signatures, enduring powers of attorney, accessing individual advocacy.

Service literacy: understanding the language and pathways to service access was a big gap across many domains; lack of awareness of existing services, confusion around eligibility, admitting they needed help, and the complexities of My Aged Care.

mental health

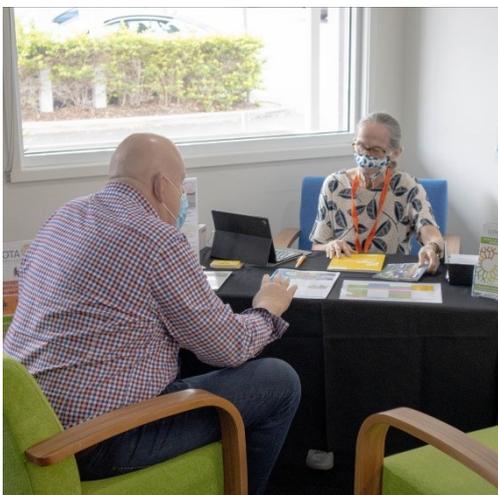


Social connection and chit chat: peer navigators played an important social/emotional support role for people who showed up, even when they did not need any specific supports.

Mental health: people experiencing existing mental health challenges and the impact as they age, compounded by cognitive decline and carer support impacts on mental and physical health. Finding themselves suddenly as carers, ageing and having to navigate systems. Some particular incidences of people experiencing mental health challenges and suicidal ideation/risk.

Technical support: access for support and confidence building around technology and use including scanning QR codes, downloading vaccination certificates, linking Medicare and MyGov; using ipads, iPhones and laptops and access to digital resources for those with vision impairment.

Caring and needing care: being homeless or at risk of homelessness and seeking support for elderly parents with complex health needs (including dementia). Feeling emotionally overwhelmed with changing carer needs for partner after discharge from hospital.



Volunteer (Barbara) at Burnie Brae

Support offered (including referrals)

Beyond listening and providing instruction on practical and/or technological issues, the Peer Navigators were able to supply flyers and information.

Further, the Peer Navigators made referrals or recommendations to participants to contact a wide variety of additional services and supports including, but not limited to:

- ◆ Hospital Social Worker
- ◆ My Aged Care (i.e., providers, website and assessments teams)
- ◆ Carers Queensland and Carer Gateway (Wellways)
- ◆ Courses and social activities at the Library and U3A
- ◆ Healthy and Active Moreton
- ◆ Real estate agent
- ◆ Different services relating to mental health and ageing (e.g. Seniors Enquiry Line, My Mental Health, Your Care Navigator, Public Trustee, Emergency Relief and library staff).

Serendipitous Service Connection

It was evident that participants accessing the services were doing so through some kind of “serendipitous connection” or “incidental encounter”. They found out about the program because they were on site and saw the desk or signage, or were referred by a staff member. Others found out through attendance at events or through the volunteers. Further, when there was some kind of other activity or workshop occurring, there was more likelihood of capturing an audience.



Serendipitous Service Connection continued...

Incidental contact provided the Peer Navigators with the opportunity to offer support and information in a very natural way. It opened up the doors for connection, shifting a conversation from the person denying they needed any help through to actually providing useful information.

There was also recognition that for the program to unfold organically, it needs time to build the trust in the space and with the people.

This is a genuine and unique challenge for a short-term pilot program. However, this type of practical support could be a safe path into accessing services.

Case Studies

Three ($n = 3$) participants consented to a follow-up conversation with the research team. These case studies were included in the final evaluation report provided by Campfire Co-op and are available on request.

“Despite the impact of the COVID-19 pandemic and engagement in the program being lower than expected, the richness of the conversations were seen as more important than the numbers and these engagements mattered and had a positive impact”.

[Evaluation Partner]

Domain 2: Cohorts

Delivery Partners

Seven ($n = 7$) participants contributed to the online focus group held on 9 Feb 2022. Participants were identified as delivery partners and key stakeholders, including the COTA Queensland Project Officer, Burnie Brae Digital Mentor Coordinator, Moreton Bay Regional Libraries Program and Engagement Leader, and Moreton Bay Regional Council Community Development Officer. Library Branch leaders ($n = 3$) sent reflections by email. Logan City Council’s Community Development Officer participated as an observer to gain insights to inform their *“Chatty Café project”* (being delivered in partnership with Wellways Australia and launching July 2022).

A summary of key insights from the focus group was included in a 4-page newsletter and sent to all delivery partners. See highlights below:

Complexities and connection on the ground: potential for volunteers to rove/approach people rather than wait for engagements or staff referrals; referrals between volunteers and staff went back-and-forth at times due to lack of tech skills; at other times, conversations were enriching as volunteers were eager to learn from staff; need flexibility and continuous adaptability to accommodate reflections of staff and volunteers on the ground; the excellent communication and planning from COTA Queensland was acknowledged.

“Libraries have a lot of staff, so it is important to make sure the staff on that shift know it’s on and what it means”. **[Delivery Partner]**



Live Well and Stay Connected

A free independent service helping seniors to find the support and information they need



COVID: it really impacted: Visitor numbers halved; government messaging for vulnerable groups, changing behaviours and fewer people hanging around libraries meant less opportunity for people to become familiar with volunteers over time. The organic nature of the program has not been able to flourish in this context.

“COVID broke the library habit routine for people”, we are hoping to draw people back”.

[Delivery Partner]

Networks and relationships matter: A key observation was the importance of good networks and building relationships to promote and build the project. However, time frames of a pilot project make it almost impossible, and sometimes projects can be ended when the networks are beginning to bring benefits.

“Often when running a project, it takes so many resources, one of the key things is developing, managing and maintaining your networks. It’s so critical”! **[Delivery Partner]**

Timing is everything: timing impacted promotions, delivery and networks; delivering during the pandemic; program break during peak time in December (when people needed help to download digital COVID certificates); balance between showing up at consistent and regular times versus being flexible enough to deliver at key busy flow times.

Promotion: engaging people and effectively reaching target audience for time-limited program is difficult; volunteer networks under-utilized; word of mouth and newsletters are key but short timelines and external factors made it complex; lack of awareness amongst staff to promote to groups that meet onsite; advertise in places other than online; consider brochures at GP clinic. Balance between establishing trust in the service, program withdrawal and managing expectations.

Trusted brand — who is COTA Queensland?: Tensions between brand and not knowing who COTA was; people accessing the service often don’t care who funds or delivers it, they just want to understand what it is; therefore simple messaging works best (*“Are you a Senior” “Do you need information?”*, *“Come and have a chat”*). Promoting benefits there and then is more important for successful engagement.

Program design—there is a need and it needs refining: integrate with centre’s other programs; always have two navigators so one can take those who need confidential conversation somewhere private; data collection should occur after the conversation to not block flow; need for continuity and permanence (regular place/person); consider adopting more creative and responsive ways to be where the need is and link to other programs such as flood recovery for more incidental access.

Program management — a massive workload: the biggest complexity was the short-term nature of the project; the biggest challenge was resourcing constraints. Keeping everyone in the loop, and training and nurturing volunteers was time-consuming and resource intensive but vital to the project’s success. Peer navigators found the support from the Project Officer invaluable.



Summary of Results

The Pilot Program was a success despite the challenges of being a short-term program and external factors (COVID-19 and floods). There was flexibility in adapting, changing and learning, including relocating volunteers to a more central area where there was more foot traffic. The Pilot provided invaluable insights for development of future services, including learnings about volunteers delivering complex information in a complex context. There was also a *Goldilocks type* situation of getting it just right in terms of length of time, emerging community needs, volunteers' skills and attributes and the environmental context. The project offered a space to learn and provide a much-needed service and was clearly a success within the scope. This was mostly due to the efforts of the Project Officer to communicate, support and nurture the Peer Navigators and maintain relationships with Delivery Partners.

Environment

- ◆ Create a trusted and safe space, ensuring people can easily locate, drop in and approach the service for support.
- ◆ Clear and warm signage, information at the entrance to a building and ways to provoke curiosity and interest in coming over for a chat.
- ◆ Transport and mobility key barriers to access.

Peer Navigators

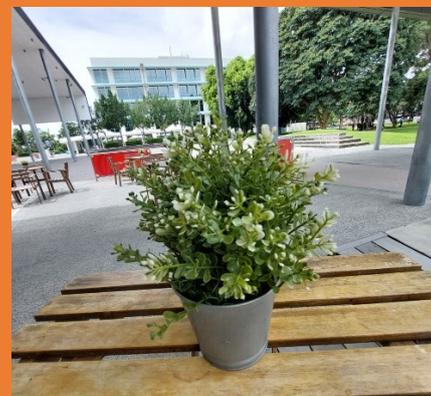
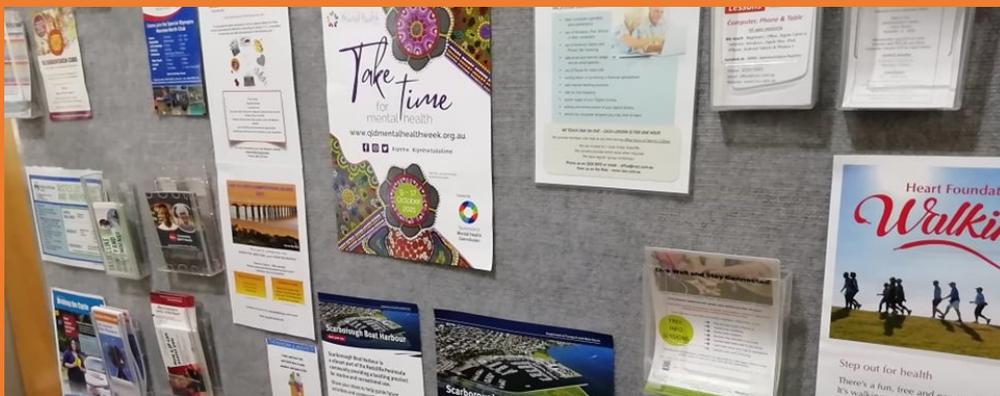
- ◆ The role of the peer navigator is deep and wide, requiring deep listening and empathy.
- ◆ Coming together to learn and share was important.
- ◆ Volunteer networks were underutilised.
- ◆ Rewards included building capacity and skills and increased personal awareness.

Participants

- ◆ Participants came with a wide variety of needs and curiosities, centred around low service literacy, particularly My Aged Care.
- ◆ Advice was sought on legal matters and paperwork.
- ◆ Participants were seeking social connections with volunteers and via other programs and activities.
- ◆ Participants benefited from receiving practical and technical support.
- ◆ Conversations provided an opportunity for participants to be listened to empathically when experiencing challenging life situations either with their own mental health or in caring for a loved one.
- ◆ Serendipitous or incidental connection was key to successful engagement.

Delivery Partners

- ◆ The partners were supportive and flexible.
- ◆ The program is needed and there are several small redesign issues to be addressed going forwards (e.g., moving location).
- ◆ COVID-19 had a significant impact.
- ◆ The relationships on the ground with volunteers and paid staff was varied, in terms of support and success, oscillating at both ends.
- ◆ Early promotions is key, both internally across all delivery partners and externally.



Key Recommendations

The evaluation provided a rich seam for recommendations, both project specific and broader in terms of service delivery, internal management or volunteer management sense.

Broader Application

Accessible language

- ◆ Avoid jargon like “*peer navigator*”. Use simple language like “*volunteer*” and “*information session*”.

Appropriate Resource Allocation

- ◆ Funding to honour building a sustainable well-run volunteer program.
- ◆ Build timelines for network development and resources that recognise costing for strategic and meaningful engagement with diverse communities (including First Nations communities).

Help Seeking Behaviours

- ◆ There was a stoicism and presentation of coping when people actually needed some support.
- ◆ Services at libraries, community centres and this program are potential segue services to address bigger, more important, hidden needs.
- ◆ Safe practices for help-seeking behaviours is the first step in a long process.
- ◆ Consider running workshops on key issues (My Aged Care, Carers supports) alongside program.

Decision-making principles that empower and enable:

- ◆ Agree decision-making principles that allow for best judgement by all to ensure project deliverables are achieved.

For Continued Program

Online access, visibility and communication

- ◆ Locate centrally and visibly with access to nearby room for privacy, with two volunteers staffing the desk and enough signage to evoke curiosity.
- ◆ Build opportunity for mutuality in information sharing between volunteers and participants.
- ◆ Daily check-in with staff and volunteers (e.g., informal walk-around, hello, introductions).
- ◆ Pre-printed card with key services and contacts, and space to record relevant info for participants.

Symbiosis Building between Staff and Volunteers

- ◆ Potential for peer navigators to support staff on site and be kept informed about upcoming activities and events.
- ◆ Training and support to develop and strengthen their role and reduce risk of duplication.

Inviting and Hosting well

- ◆ Greater flexibility around branding and signage.
- ◆ Create informal space (i.e. tablecloth on coffee table and plant) to create curiosity and warmth.
- ◆ Resources hidden but easily accessible.

Supporting Volunteers

- ◆ Clarity of space for sharing and learning, with collaborative, relatable, easy-to-use platform and evolving collection of resources and training.

Promotions and Program Delivery

- ◆ Promote the program in other ways (e.g., flyers at hairdressers, GP clinics, RSL clubs, cafes etc).
- ◆ How can this service build and add value in other spaces (e.g., men’s sheds, cafes, hospitals, shopping centres, sports and services clubs, and retirement villages).