

RESEARCH COMMUNITY SPOTLIGHT

Meet **Jonathan John**, Manager of Peer Support Leaders at COVID-19 Recovery/Isolation Sites, and a MARCO Community Partner

Jonathan works with the Inner City Health Associates (ICHA) and The Neighborhood Group. The Neighborhood Group is one of MARCO's Community Agency Partners.

COVID-19 Isolation sites are places where people who are homeless can isolate if they receive a positive COVID-19 diagnosis, are waiting for test results, or come in contact with a positive case.

Can you tell us a little about what the Inner City Health Associates do, and the how the COVID-19 recovery/isolation sites work?

ICHA provides medical care at the COVID-19 isolation sites, including physicians, nurses, psychiatrists, and addiction doctors. ICHA strives to provide medical care using a social medicine lens, looking at the client holistically. One way they are trying to do that is through incorporating peer workers in service delivery. The peer workers at the COVID-19 isolation Sites are officially employees of The Neighborhood Group, which has a very unique definition of peer workers. Peer workers are individuals who have recently or are currently using some sort of service, specifically for mental health, homelessness, or addiction, and undergo training that will help them contribute towards providing care for others. These are not individuals who have lived experience from 10 or 20 years ago, these are individuals who are currently using services or have recently used services. I manage peer workers at two different sites— one COVID positive site (so everyone at that location either has a positive COVID-19 test or is a close contact of someone with a positive COVID-19 test), and one site for ‘person’s under investigation’, meaning people who are waiting for COVID-19 test results. At both sites, the peers provide psycho-social supports to the clients. Peers do pretty much everything outside of providing medical services, including regular wellness checks, building rapport with clients, talking to clients about their stay in the COVID-19 isolation site, and helping clients deal with anxiety or other emotions that may arise from being in isolation. Peer workers also bridge any gaps between different teams that are involved, including shelter staff, medical staff, and community agency staff. Peer workers are taking this incredibly equal and empathetic approach to connecting with clients because the vast majority (though not all of them) have had experience living in shelters or being a part of harm reduction and substance use programs either currently, or in the recent past. It can be nerve-wracking for people when they enter the isolation site, so the peers are there to offer support. Support includes providing harm reduction supplies, and connecting with clients in an empathetic manner should they choose to use substances while on site. Really, peer workers provide psycho-social support to the clients and work alongside the medical team.

What would you say was the biggest challenge of providing this service during COVID-19?

Maybe this sounds a little cliché, but the fact that we've never done this before. We had to move so rapidly to provide an urgent response, and we didn't have any fundamentals to fall back on because there weren't any pre-existing policies in this area. We had to incorporate new styles of housing and infection prevention. The lack of precedent was a big challenge, as well as working in a multi-agency environment where you have city staff, community workers, and medical staff. I think each of these different groups have their own lens for looking at homelessness, and it's not that any of one of those lenses is wrong, but they are unique perspectives and we're bringing them all together. I'm not framing that challenge in a negative way, I think the COVID-19 response was a great learning opportunity for everyone to see how this type of multi-agency work is possible. But in the very beginning, it was a little bit challenging for sure.

What do you see as the value of doing evaluations or studies of programs that were rolled out during COVID-19, like the isolation site?

I think prior to the pandemic peer workers were not really fully understood, and maybe also not fully appreciated. We've seen now in the COVID-19 isolation sites that peer workers are such an integral force when it comes to service delivery. Peer workers are leading to some of the most significant impacts on clients – the isolation sites put out client satisfaction reports, and there were numerous comments about the peer workers and how valuable they were to these clients' stays. Clients said things like, "you know, if it wasn't for the peer workers I don't know if I would have felt comfortable staying here." So I think that researching the value of incorporating people who are current or recent service users into service delivery would be so important, and also elevate service user's voices. There's this phrase you might have heard of, "nothing about us without us." It's easy for different community agencies and governments to create and deliver services without really considering the voices of people who are using those services. Sometimes prior to the pandemic peers were just attached onto a bigger project. I think in this particular case peers are so, so integral—they are a significant component of the entire operation. I don't think the COVID-19 isolation sites would have been successful if it wasn't for peers, and this set a precedent hopefully for future initiatives. Even prior to the pandemic we talked about getting peer workers into the emergency department to provide support to people who are experiencing homelessness there, and I think maybe research to work out the value that peers bring that a social worker or physician can't bring is needed. Even now, getting peers involved in service delivery is an uphill battle.

What inspires you about your community's response to COVID-19?

The peer workers themselves are actually what inspires me. Peer workers weren't part of the initial COVID-19 response, but they are the ones carrying it forward, and they are the ones that have inspired me the whole way through. To see someone who might be in a precarious living environment, or have precarious employment, or experiencing homelessness, or dealing with their own personal challenges, mobilize so quickly and offer such incredible quality service with such limited resources in an environment that they have never worked in before is incredible. The rules that come with infection prevention, like only being able to move in a certain area of the building, are very new for peer workers. Peer workers also had minimal direction and structure, because everything is changing on a daily basis. That's already not an easy environment for people to work in, but to ask someone with precarious living conditions to work in that environment and still have them do such an incredible job is really moving. This whole experience with COVID-19 isolation sites reinforced the value of peer workers and how

incredible they are in service delivery. So I would say peer workers, and their willingness to work in such challenging environments and still put forth really good quality work is what keeps me going. I want to highlight the value of service users in program delivery.

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