

‘Helping Others and Helping Myself’: Wounded Healers as Peer Workers

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Summary: This paper explores the experiences of women engaged with a peer training reintegration programme, ‘Building Recovery Inwards and Outwards’ (BRIO), funded by the Probation Service and developed in the Dublin-based SAOL Project.¹ It draws on qualitative data generated in interviews, focus groups and participant observation during a two-year evaluation from 2016 to 2018. In recounting the experiences of women engaged with the programme, it focuses on the challenges facing them before, during and after involvement in drug use and the criminal justice system. This paper will: briefly review the literature and research evidence in relation to women’s recidivism, desistance and redemption; document the participants’ lived experiences of becoming peer workers; explore the potential challenges for such work; and discuss the importance and future development of peer support training programmes, highlighting the importance of gender-sensitive and trauma-informed responses to women. These responses recognise the enduring impact of trauma for women and its relationship with their pathways into crime and drug use. The paper concludes that peer work offers opportunities to assist others, to experience altruism and mutuality and to make choices and decisions about progression into work and education. The policy and practice implications of this approach are manifold.

Keywords: Women, offending, wounded healer, drug use, peer work, recidivism, desistance, redemption.

Introduction

When they wish to become involved in helping efforts, former offenders should be permitted to ‘reach back’ and assist others who are beginning the reintegration process. Expanding such opportunities may reduce recidivism and promote successful re-entry among the growing number of formerly incarcerated women. (Heidemann, Cederbaum, Martinez and LeBel, 2016, p. 22)

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¹ SAOL Project was established in 1995 to work with women grappling with drug use and related issues.

BRIO, a peer education and training programme for women, was envisioned, proposed, and designed by the SAOL Project in 2015. Its vision to empower and support women with experiences of addiction and recidivism is expressed through its mission statement, 'Strengthening each other's recovery, reducing each other's recidivism, creating each other's hope'.

Participants are supported on a journey of self-awareness, personal development and skills development that supports and promotes their recovery, and also facilitates their development as potential peer workers.

BRIO was originally proposed as a two-year programme in which a closed cohort of twelve women would participate in six three-month-long modules, followed by work placements. In its first two years, BRIO adapted to the demand from women on probation or leaving prison to participate, and while maintaining a similar modular structure, it developed a less linear, more inclusive approach, responsive to individual need and circumstance. As a result, BRIO made contacts with a total of 116 women. Referrals are taken from a range of addiction, homeless and criminal justice agencies. Some women self-referred. A committee of Probation and SAOL representatives periodically reviews the referral pathways and operation of the programme. BRIO participants do not receive remuneration and the peer work they carry out during and following training is voluntary. Progression pathways include involvement in peer work and further education. The evaluation on which this paper draws was inbuilt as part of the BRIO programme from its inception in early 2016 until March 2018.

Recidivism, desistance and women

Desistance research over the past decades reveals that desistance, a process of 'making good', is often a long, slow, arduous, and complex 'invisible process', during which justice-involved individuals invariably face significant challenges and barriers to change, many of which are context-based and structural (Maruna, 2001, 2017). Some recent gender-sensitive literature has focused on women's experience of such a process, highlighting the connections between drug use, offending, poverty, marginalisation, victimisation and trauma, adverse childhood experiences and lifetime re-traumatisation (Hayhurst *et al.*, 2017; Van Roeyen *et al.*, 2017; Bachmann *et al.*, 2016).

The archetype of the Wounded Healer, drawn from the figure in Greek mythology, Chiron, describes healing others with the benefits of wounds. Research suggests that those with a history of drug use or offending, as

'wounded healers', often have an acute understanding of the lived experience of their own addiction and recovery (LeBel *et al.*, 2015; Maruna, 2001; Brown, 1991; Cressey, 1955). A carer or helper who has experienced past traumas akin to another's trauma may offer that person additional insights and healing. There is a view that the act of helping itself is a healing one (Maruna, 2001; Yalom, 1997; Riesmann, 1965). It appears that women who have experienced a range of adverse childhood experiences, including bereavement and loss, can reduce the risk of recidivism through the generative and transformative activities of peer work (Heidemann, Cederbaum and Martinez, 2016, 2014). Recent research confirms that this lived experience opens up the opportunity for women to work with others who are dealing with similar issues, bringing their wisdom and experience to bear on the process of rehabilitation and integration (Heidemann, Cederbaum, Martinez and LeBel, 2016).

A recent focus on the mental health peer or professional with current or past lived experience of mental health issues has usefully identified the phenomenon of the 'prosumer', an individual with lived experience and at one stage a consumer or client of services (Richards *et al.*, 2016). Those with a history of drug use and criminal justice involvement often describe how they are drawn to work with others (Miller *et al.*, 2006; White, 2000a, 2000b; Winick, 1990). The literature suggests that identity 'shifts' or transformations are important for desistance, 'recovery' and 'exiting' a life of crime (Bachmann *et al.*, 2016; Maruna, 2017, 2001). Furthermore, desistance has been defined as a process that involves a transition from an offender identity to a more prosocial identity and the long-term refraining from reoffending.

There is now substantial research evidence to assert confidently that women's experience of drug use, the criminal justice system and the health system is qualitatively and significantly different from that of men (Covington, 2013; Ettore, 2007; Heidensohn, 1996; Carlen, 1988). Both qualitative research of women's lived experience and quantitative studies of large data sets have demonstrated differences between men and women in their drug use and associated activities. Experiences of drug treatment differ, as do experiences of criminal justice involvement and imprisonment. Recovery, relapse, recidivism and desistance experiences differ also.

Women's pathways to crime and their later experiences of drug use and offending, imprisonment, release and re-entry experiences are now accepted to be closely related to their histories of childhood and lifetime trauma and adversity, poverty and educational disadvantage. This 'pathways model' has emerged out of feminist work that has noted the different perceptions and

responses to women that are gendered or socially constructed (Gehring, 2016; Belknap, 2015; Chesney-Lind and Pasko, 2013; Salisbury and Van Voorhis, 2009). It has also questioned how women were viewed, and further explored how these perceptions then impacted on responses to women, either in drug treatment or in the criminal justice system.

Patterns of recidivism display distinct differences, with women reoffending less often than their male counterparts in almost all jurisdictions. These differences are observed across research, including several Irish studies (Gobeil *et al.*, 2016; Rodermond *et al.*, 2016; Kelly and Bogue, 2014; Irish Prison Service, 2013; Probation Service, 2013). It has also been suggested that women's desistance experiences differ and their path to 'redemption', that is total desistance, differs from that of their male counterparts. The redemption lens examines the long-term outcome where the likelihood of an individual with a history of offending committing an offence is the same as that of an individual who has never committed an offence.

The first two years post sentence or following release from prison are high-risk periods for reoffending. However, some studies have suggested higher rates of recidivism among women who have been imprisoned (Stuart and Brice-Baker, 2004), with a greater likelihood of reoffending after incarceration as opposed to being subject to probation.

Some large longitudinal quantitative research studies of recidivism and desistance among women offer valuable findings. They show varying rates of recidivism — over fifteen-year, eight-year, three-year and two-year periods (Mastrorilli *et al.*, 2015; Scott *et al.*, 2014; Huebner *et al.*, 2010; Deschenes *et al.*, 2007). These studies report that following release from prison, recidivism occurs quite quickly for many, and recidivism is also a risk for those on probation. This supports the need for early and effective interventions in their first points of contact with criminal justice that will focus on the structural risks of poverty, housing, unemployment and stigma (Morash, Kashy, Northcutt Bohmert, Cobbina and Smith, 2017; Holtfreter *et al.*, 2004).

With regard to 'redemption' research, the key question concerns the length of time that must elapse since one's last criminal offence before an individual can be regarded as 'redeemed'. Indeed, another question has been asked, namely: 'Who makes it to the redemption point?' Significantly, one recent study's findings suggested that men reach the 'redemption' point after ten years, while women on average reach it after four years (Curcio *et al.*, 2018).

The complexity of the shift from offending to desistance means that much has to be achieved along this, often staggered, pathway to desistance.

Definitions of success for women post prison or offending are broader than for men. For those leaving prison or 'coming home', release and re-entry means returning to their communities and encountering many obstacles with regard to accessing treatment and support, housing and accommodation, reunification with children and families, employment, and education. (Heidemann, Cederbaum and Martinez, 2016; Huebner *et al.*, 2010). Notwithstanding the barriers, obstacles and adverse life experiences encountered on the pathways into criminal activity, these further challenges on release often 'contribute to a staggering rate of recidivism' (Heidemann *et al.*, 2016, p. 24).

Definitions of 'success' with regard to post-release integration and non-offending programmes have been questioned, and many offer cautions and suggest rethinking in this regard (Morash, Kashy, Northcutt Bohmert, Cobbina and Smith, 2017; Carlton and Segrave, 2016; Heidemann *et al.*, 2016). In defining 'success' as addressing individual deficits, without responding to social, structural and contextual issues, this approach ignores 'state-created recidivism risks' (Morash *et al.*, 2017, p. 441).

Heidemann *et al.*'s study sought to identify how women who have been imprisoned define 'success' post incarceration. Notably, while they identified avoiding recidivism as a marker of success, participants also defined success as achieving a 'normal life', accessing accommodation, reuniting with their children and families, meeting challenges, being resilient, achieving independence from surveillance by the criminal justice system and engaging in caretaking and helping others.

Against this backdrop, involvement in generative peer work may interrupt what is often regarded as the almost inevitable recidivism/relapse outcome. Many studies suggest that such positive and desistance-enhancing relationships and activities, including participation in peer-work activities, play a crucial role in effective aftercare work.

Methodology for the evaluation

Drawing on a qualitative approach, the evaluation gathered data using methods that included semi-structured interviews, focus groups and participant observation. The evaluation aimed to explore the experiences of participants at all stages of peer work, in order to examine the impact of the programme. Throughout the two-year fieldwork period, reflexive strategies were adopted and the data generation and analysis were guided by

grounded theory principles (Glaser and Strauss, 1967; Strauss and Corbin, 1990, 1998).

This evaluation tells the BRIO story, highlighting the evolution and development, the complexities and challenges of a programme that emerged from a proposal, informed by long-term involvement in the Project and in the field of education. It also explores the lived experience of the women and offers narrative reports about their progress, development and growth on the programme.

In total, 22 semi-structured interviews were carried out with participants, management, staff of the SAOL Project, the Probation Service and other stakeholders. A total of 19 women attended in a series of group discussions that focused on the exploration, assessment and evaluation of their experiences. Of these participants, eight women volunteered to be interviewed on a one-to-one basis. Many of the women were mothers, and their ages ranged from 24 to 50 years. All had interacted with the criminal justice system and drug-treatment services.

A number of areas were explored with regard to their experiences before their participation, during the BRIO programme and in the transition to peer working. Questions to the participants sought information and accounts of their day-to-day participation; the impact of participation on their lives; their views of the content of the six modules, their experience of group work, and peer work; what worked, what was helpful, what might be done differently; and what participation meant to them.

Consultation with regard to ethical standards and practice took place with the Project Director and the Management Committee of the SAOL Project. Informed consent was sought from individuals, and their right to withdraw from discussion or participation, at any point, was constantly upheld. It was imperative that each individual's anonymity and confidentiality be respected, to the extent that pseudonyms are used throughout when talking about participants.

The evaluator adopted a trauma-informed and gender-responsive approach and purposely did not ask questions about previous life experiences, childhood, drug use, imprisonment, criminal activity or the nature of offences. However, in discussing their experiences on BRIO, the participants did connect back with many adverse life experiences. Keyworker support was available in SAOL/BRIO following these discussions.

Participants' experiences

The findings focus on the women's accounts of their experiences of participating in a peer training programme and commencing peer work with each other, in community and prison settings.

Participation in BRIO

Without prompt, the women offered accounts of their lives, some of which mirrored previous research findings referred to earlier. Several described difficult and painful childhood experiences, alluding to 'traumatising experiences': bereavement; responsibility for other siblings in their own childhood; domestic violence in their families of origin; a dislike of school; lack of educational achievement and generalised feelings of exclusion. Several talked about never feeling safe, not trusting adults and always feeling different.

They spoke too about their experiences of drug use and involvement in criminal activity. Their introduction to drug and alcohol use in teenage years and sometimes in childhood, continued involvement in acquisitive crime, public order offences and sometimes violent crime were mentioned. They all expressed feelings of guilt and remorse about involvement in crime, particularly where others may have suffered as a result of their actions. They described experiences of incarceration and experiences of inpatient and outpatient psychiatric treatment. More recent experiences prior to BRIO included drug use, drug treatment, arrest, court appearances, custodial sentences, childcare proceedings and loss of custody, homelessness, violence, both domestic and sexual, and mental health challenges.

The starting point on BRIO for some women was in the immediate aftermath of some challenging experiences. Others had spent more time in 'getting my life together' and were 'well on the road to doing something'. Some women described involvement on BRIO as 'compulsory' and not of their own volition, while others described it as a choice, a 'welcome development'.

Several women highlighted how the benefits associated with becoming involved in BRIO were 'unexpected'. Some women had attended services for upwards of 20 years and experienced BRIO as a 'breath of fresh air' despite initially not wanting to attend. Every single participant described BRIO as 'supportive' and said that they felt 'supported', one woman describing it as being 'held'. The issue of group safety and the importance of being with peers was raised.

I'd rather be with people with lived experience ... I am more confident now, drug free for the last nine months, using nothing, addressing homelessness and mental health issues and I haven't reoffended. I don't lose it like I used to ... it's welcoming, there's warmth, you have a laugh, you are not going to be turned away. You matter! The women help each other. (Jenny)

People trusted me and I trusted them. It is great to be out of prison, I felt I was just a prisoner.... It's good to be with others. In prison you don't have friends. BRIO is a different world. In prison, you have no choice. (Sally)

For some, their referral to BRIO by other agencies was the first contact they had with the SAOL Project. Others had been participants on various programmes in the past or were regular participants at other SAOL groups and activities.

I came to SAOL many years ago but it didn't work for me then. It is different now. (Trish)

I dread to think where I'd be if I didn't start here. A worker in another project referred me. I didn't know SAOL/BRIO. (Amelia)

Participants described positive experiences of their first contacts with SAOL and/or BRIO, coming through the door for the first time, and highlighted the safety of the environment, the building and the fact that it is a women-only programme. Conversely, several women expressed their early distrust of working alongside other women. Empathy and non-judgmental approaches among the staff and the other women were mentioned throughout. The 'other women' — the 'peers', the 'girls' — created a safe space and welcome. Some described how more experienced peers took them under their wings and were very protective and encouraging of their joining the group.

Change experienced

An end-of-module review of the first introductory programme gave expression to participants' views, their attendance and their experiences of the group activities. It was observed by participants and staff that attendance varied from those who attended all sessions to others who struggled to attend. However, the commitment to engage with the group and all the activities when present was highlighted. The experience of engaging with

peer education and with experiential learning, where participants' own lived experience mattered, was appreciated. The women also talked at length about motherhood. The theme of wanting to 'do it differently' emerged, and some women suggested that they wanted their children to have different experiences from the ones they had as children. Others wanted to parent differently as a result of having made changes in their lives. In the main, the participants were seen to be 'buying into change' and constantly talked about 'wanting to give or feed something back'. Being identified as a BRIO participant was important, and participants experienced a sense of belonging and pride — 'We are BRIO'. They spoke of the status achieved as peers, and the acknowledgement from families, neighbours and wider community who were surprised at the progress they had made.

I see things differently. I learn off the girls. I see. It has built me up given me more self-esteem. I now know what I want to do. I'd love to see myself facilitating a therapy group in relation to supporting family members affected by gangland stuff.... Psychology, Social Studies, Social Care, I'd like to study, go to college. (Anna)

When I came here, I didn't know how to deal with my feelings, my emotions, my behaviours. I was all over the place. I came here because I knew I had to do something. I didn't come here to be a peer, to be honest. I came here to help me and my kids. But now I know I can be a peer trainer. (Amelia)

Some described the importance of keeping active, staying involved and 'having something to do'. Others described the programme as keeping them 'off the streets', 'keeping me out of trouble' or as a 'really safe place to be'. Several have said that it is important for them to remain engaged and occupied.

I have learned that I work better when I have a more busier schedule. Chaos is good for me. (Rose)

Becoming a peer worker — the peer-to-peer worker transition — was described as 'life-changing' for many of the women, engendering confidence in their experience.

I have learned that to be a good peer worker, you need to be able to take yourself out of the situation personally, even though you may have been through the same situation. (Sally)

I work in the prison. I am getting training opportunities. I might go to Liberties College or Maynooth [University] in the future. I don't know yet. (Amelia)

They described the support they gave and received from their community of peers. They also recognised the sense of personal achievement when they can assist another person. There was evidence of their preparation for the challenges they will meet ahead as they commence peer work in co-facilitation in BRIO, SAOL, Dóchas Centre and other agencies.

I have learned that peer-working is a support through all stages of recovery with someone who can empathise with your situation. It is something that has to be experienced and learned over time. (Anne)

Many women identified how they had changed in the course of training, how they respond differently and react differently when faced with a range of situations.

It gives me a focus. The learning is important to me. Routine is important. Being with other people. Learning with the group. (Jenny)

Several women made clear decisions about the pathways they want to follow.

Doing the Peer [support] keeps me here. The range of choices and options are important, the learning in it is huge and it is voluntary, my choice, self-determination ... it does draw you in.... The process is healing and my confidence and self-esteem were enhanced.... I want to do this work after I train. Key working in a drug project is what I am going to do. (Trish)

Many of the women spoke about how the material, the course content, the modules and theories 'triggered stuff' for them. However, the 'Solas sa SAOL' module, focusing on domestic violence experiences, and 'Recover Me', focusing on feelings and emotions, brought a lot of issues to the fore.

I found it really tough. The domestic violence module, 'cause it was the reason I was in prison. It upset me. But I managed it. It was very good. (Sally)

Feelings were hard to deal with but that was when the lightbulbs went on. (Jenny)

The women's prior learning in terms of their lived experiences made their educational journeys more challenging and emotional, demanding risk-taking and 'going beyond our comfort zones'.

It is really tough to talk about alcohol and drug use and crime. I'm not proud of what I have done. I have to live with that but I am more aware now of why I ended up there. I had made the decision to change before I ever came to BRIO. Coming to BRIO was because of that decision. (Amelia)

Many women expressed hopes and aspirations for the future. Further education was mentioned by all the women interviewed and this also arose as an important issue in the group discussions. Knowing that there are pathways and progression routes to new opportunities following participation in BRIO was a huge motivator.

Some participants discussed the financial costs of participation in BRIO. However, despite their unpaid participation in BRIO, they enjoyed their status as volunteers, 'giving back' and doing something useful for themselves and others.

I have to come in by bus and it's not cheap, I don't have a pass ... but I shouldn't be giving out, I enjoy BRIO. It keeps me going, it keeps me involved with other people and I like that. (Rose)

I do get payment from it, but not just financial. I have a home now, my daughters back ... through coming in here. It is voluntary. I am here because I want to be here. (Sandra)

From time to time, participants decided that their time with BRIO had come to an end, either temporarily or permanently. Several women had taken 'time-out' for a variety of reasons, and some returned to participate at a later date. The reasons for 'time-out' are diverse and may be connected with drug

use, relapse, physical and mental health challenges, hospitalisation, imprisonment, or just needing an opportunity to rest.

Endings, 'leaving BRIO', were identified as difficult for the women to anticipate. In witnessing some of the difficulties experienced and the feelings of ambivalence expressed by several women as they moved towards completing the sixth module, one of the workers raised the question, 'What does leaving BRIO mean?'

The group suggested that it was about becoming 'a part of a peer movement' that involved 'staying with the group *and* moving to the next stage in terms of peer support service delivery and even education and training elsewhere'.

Several women have completed all the BRIO modules and at time of writing are in a co-facilitating role with staff members as they are on placements in a variety of differing contexts. Others were completing modules with a view to 'graduating' to placements in the future.

Wounded healers

The women's increased sense of self-esteem and self-worth as a result of participation in BRIO was highlighted. They assumed the identity of 'wounded healer' or 'peer' and believed that they were 'getting a lot from the programme'. Several talked about how they were received and perceived more positively in the community now and by their families and, in some cases, their children.

Many, however, spoke of the challenges of remaining engaged with others to whom they were offering peer support, being respectful, treating them with dignity and using a trauma-informed approach. The difficulties of being a peer, with the related identity shift and the responsibility to support others with their challenges, were discussed at length. Participants demonstrated their experience and understanding of how challenging this role is and how blurred the boundaries might possibly become. They spoke of 'giving back', 'making amends', 'healing through helping'. They were also acutely aware of their own limitations and made many suggestions about additional training that might enhance their skills further. The need for self-care was identified and they recognised that the work itself would now bring up these issues for them again and again.

Boundaries are very important as you need 'you time' too. (Sandra)

Several talked about their feelings of stigma and shame that 'sometimes just comes from myself and the way I feel about myself'. The media coverage of a public-speaking engagement in which two participants were identified as mothers who used drugs and were former prisoners proved to be a stressful event. The risk of speaking openly is a 'double-edged sword'; sometimes these experiences have been positive and fulfilling, while further stigmatisation and exposure have also been recounted.

The participants highlighted how changes had taken place while 'doing the BRIO' in terms of their attitudes, behaviour and knowledge base.

I have friends who are wounded healers, my brother is a wounded healer. We all experienced traumas — experiences of growing up, involvement in prostitution, drug use, gangs. I think the idea of the wounded healer is an inspirational idea. They all gave me hope — they give inspiration to other people's lives. I'd like to do that too. I had to get out, live. These are ways out. (Maggie)

They described 'lightbulb moments', new understandings and a shift in many of their attitudes. They have new friends, social networks and contacts, many of whom have similar aspirations. They have acquired skills and knowledge, that are transferable. They have started to plan for participation in future educational programmes. They are more aware of safeguarding their physical and mental health and are more aware of triggers and stressors. Their 'eyes have been opened'.

Recommendations for change made by participants focused on the programme's contact hours, additional modules and remuneration for participation. A module focusing on mental health was proposed, so that peers know how to respond to and refer on individuals who are experiencing extreme distress, suicidal ideation or self-harm. 'What do I do when this happens [in my peer work]?' was a question asked.

I would also add a mental health module 'cause I know and meet a lot of people who have mental health problems and I don't know how to properly and confidently help them. (Jenny)

Others mentioned the importance of further addiction studies inputs, experiential group work and skills-based modules. The importance of training in cultural diversity was identified, emphasising how Irish society is changing.

Modules on self-care and ongoing supervision and mentoring were recommended also.

We do the 'Reduce the Use' and that's a very good course but I think we need more about addiction, and recovery and skills for dealing with stuff about addiction. (Rose)

The programme's pace and its acceptance of individuals who have experience of relapse and recidivism is appreciated. While some participants found it useful to start the programme and be in the group with more experienced peers who had completed several modules already, others expressed some discomfort about this initially, highlighting their lack of confidence.

I kept thinking at the beginning that this group wasn't for me. I felt stupid, actually. Totally thick. (Jane)

It took me time to realise that I came into BRIO at a different time to some of the other girls, that my confidence was on the floor. (Anne)

Some participants also underlined the importance of moving from a voluntary status to the status of paid peer-worker and were concerned about how their work would be valued, recognised and acknowledged in the field. Many were anxious to explore employment prospects and opportunities for further training in the future.

The only thing I would change is to make it into a programme where we get paid. (Trish)

The women interviewed identified how they encountered many life challenges. Alongside addiction and offending, either recent or historic, these issues included poor physical health, mental health issues, relationship difficulties, low income, experiences of domestic violence, homelessness, childcare difficulties and, in a number of the women's experiences, separation from and sometimes infrequent access to their children. Unstable living conditions continued to be an issue for many. It is significant that several women engaged with the programme from the outset had addressed their homelessness situation over the period and were now living in accommodation that was more secure, suitable and appropriate to their needs.

Almost all mentioned how their range of achievements had increased their confidence, their commitment to maintaining stable and crime-free lifestyles and their optimism and motivation for further involvement with BRIO and peer work, career enhancement, and engagement in second-level, university-based access programmes and third-level education.

Discussion

As Heidemann *et al.*'s (2016) quote prefacing this paper suggests, becoming involved in wounded healer/giving-back-type activities may reduce the potential for recidivism and promote opportunities for desistance. Echoing the women in Heidemann *et al.*'s 2016 study, the BRIO participants interviewed identified how becoming a peer, helper or wounded healer benefits them: by increasing self-esteem and social status; by providing opportunities for achievement; increasing their prosocial contacts and activities; and decreasing social isolation. Yet the challenges, while not insurmountable in their view, are many.

Recidivism and relapse are pervasive risks for women with histories of drug use and offending. When women on the programme reoffend, there is an attempt to maintain the link with the Project. This includes prison visitation to prepare for return to the community and to BRIO. Women in this situation have sometimes described their interactions with systems as a form of 'recycling' (McCann James, 2001). It is crucial to develop innovative responses that do not perpetuate these experiences or reinforcement of identity as 'drug user', 'offender' or 'prisoner', but allow for a slow, measured and considered reflection on identity and transformation over time. Challenging stigma and discrimination, as described by the women, is also required (LeBel *et al.*, 2015). The parallel issues of recovery and desistance are challenging for women, staff and systems alike.

The concept of 'identity' is a complex one, not fixed, always fluid, changing, negotiated and constructed and co-constructed within different social contexts (Richards *et al.*, 2016). The challenge of shifting roles and identities is part of the peer workers' reality. They traverse different boundaries at different moments and engage with professionals both as service users and as co-helpers, and with their peers as helpers and as co-service users.

While engagement in peer work offers many opportunities to women following a history of criminal justice involvement, the structural barriers as outlined in this paper often remain. Peer work is often a voluntary endeavour.

The lack of financial remuneration, the ambiguous and often stigmatising status of openly working as a peer worker, and the intensity of the issues presented by peer service users present difficult challenges. The lack of payment or adequate payment means that not only does their economic situation remain largely unchanged; its value to society is not validated through conventional monetary acknowledgement. One of the key recommendations made by the participants is that these issues of employment and remuneration for peer support work should be considered. For some, little may change in their lives in terms of improved economic circumstances and status, other than that they are busier than ever and incurring further costs. While structured routine and engagement may reduce risks of recidivism and significantly increase possibilities of desistance, an absence of fundamental change in their social and economic circumstances may present further risks, with the additional risk of further wounding.

The risks of vicarious trauma or burnout in the course of peer working are significant, and require adequate support and supervision. This may necessitate a further exploration of the impact of peer movements — the implications of carrying out the difficult or 'dirty work' (Morriss, 2016; Hughes, 1970) of responding to highly marginalised, traumatised and stigmatised individuals as a peer worker, with attendant low status. Their visibility as justice-involved or formerly justice-involved women peers may lead to further experiences of stigmatisation.

These issues present significant ethical challenges and implications for organisations that fund, promote or engage in such work. They demand that, as providers working alongside peers, the highest standards possible are adopted, that reflexive practice is central, and that the potential for exploitation is anticipated and avoided.

This paper explored the participants' experiences of identity changes, transformation and transition to peer trainee and worker. While overwhelmingly positive, their experiences also highlight the challenges encountered in the course of their training and transitions, including maintaining change, the ever-present reality of the risk of relapse or recidivism, the impact of drug and crime-related stigma, and the struggle to achieve future progression towards further training, educational opportunities and paid work. The words of a stakeholder expressed it aptly:

BRIO is essentially about listening to the voice of the service users and the potential of BRIO peers engaging with the stakeholders as co-facilitators

and trainers. Focusing on progression routes — the different routes — and accessing opportunities and new possibilities of collaboratively working together in the future is key. (Senior Probation Officer)

In conclusion, however, it is fitting to leave the final words to a BRIO participant who offered her insights for inclusion in an information leaflet for distribution in the women's prison:

The best part of being on BRIO is being able to speak up for other women, who can't be heard. Doing peer work means that I'll be able to continue doing that in the future. Helping others and helping myself.

Postscript: The BRIO programme continues peer training with ever-increasing peer involvement in 2020. The voice of the participant has had an impact on practice and policy development within the SAOL Project and in the Probation Service. BRIO's further development reflects the increasing importance of the focus on the service user experience and voice across the criminal justice system and the addiction services. Examples of collaborative peer work with other agencies have involved co-facilitation of programmes in SAOL Project, in Dóchas (Women's Prison) and in other projects. Peers have assisted the Probation Service in carrying out service user surveys, delivered training, and participated in a range of events. They have played active roles in representation, delivery of presentations and research with the Service Users' Rights In Action Group.² The current COVID-19 public health crisis has highlighted the ongoing practical, psychosocial and harm-reduction supports offered by BRIO peers to one another and to the community to meet the challenges of restrictions to movement, social distancing and social isolation. Truly, there are always new possibilities, double edged as they may be, to expand collaboration across all sectors of the community.

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² A coalition of users of drug services, service user representatives and community activists that was formed a decade ago.

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