

*Excerpt from Chapter 2, On Our Own, Together*

**The Historical and Philosophical Development  
of Peer-Run Support Programs**

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This chapter traces the remarkable development of peer-run support programs as they emerged from a legacy of abuse, dehumanization, and coercion that was found in traditional mental health service systems. It illuminates the beliefs, values, and customs that bind consumers in an evolving “empowerment culture of recovery” (Ahern and Fisher 2001) by examining the operating principles of peer-run support services and the unique forms of mutual support that have arisen as alternatives to professional mental health programs. It shows how the early alternative programs are linked to contemporary peer support program goals of empowerment, personhood, and recovery and provides studies of the effectiveness of peer support approaches.

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Over the past two decades, mental health consumer/survivors have built a national presence within the public mental health sector, with growing numbers now participating in research and evaluation (Van Tosh, Ralph, and Campbell 2000) and taking leadership roles in policy and administration of public mental health services (McCabe and Unzicker 1995). They have led efforts to determine housing preferences (Tanzman 1993), to define outcome measures (Campbell 1997; Trochim, Dumont, and Campbell 1993), and to develop partnership models with public mental health professionals (Campbell 1996). Some professionals and policymakers responded to consumer inclusion by redesigning professional roles and creating opportunities for people who receive services to provide input and perspective. Consumer/survivors carved out an expanding role in lecturing, conducting grand rounds, teaching continuing education classes, and offering workshops at national professional conferences.

In 1993 consumer-practitioners and psychiatrists engaged in a dialogue in New York regarding coping strategies and recovery from mental illness (Blanch et al. 1993). The proliferation of offices of consumer affairs in state mental health agencies, statewide consumer conferences, consumer-directed technical assistance centers, and peer-run support services, and the growing respect for consumer/survivor research and policy professionals are indicators of a vibrant culture of collaboration today among consumer/survivors and professionals.