

Exploring Peer Support

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Welcome!

- Introductions
- What do you already know about Peer Support?
- What would you like to gain from this training today?

President's New Freedom Commission Report

- The President's New Freedom Commission Report (2003) envisioned "a future when everyone with a mental illness will recover, a future when mental illnesses can be prevented or cured, a future when mental illnesses are detected early, and a future when everyone with a mental illness at any stage of life has access to effective treatment and supports—essentials for living, working, learning, and participating fully in the community."

Is this kind of future reasonable???

- <https://youtu.be/PeZ-U0pj9LI>
- Discussion

Let's talk recovery!

- What is it?
- Small group work
- Share results with group

Recovery is....

- Self-driven
- Emerges from HOPE
- Occurs via many pathways
- Holistic
- Supported by peers and allies
- Supported through relationships and social networks

Recovery is...

- Culturally-based and influenced
- Supported by addressing trauma
- Involves individual, family and community strengths and responsibility
- See *handout* - **Guiding Principles of Recovery**

What's happening in NC?

- Peer Support Specialists are people living in recovery with mental illness and / or substance use disorder and who provide support to others whom can benefit from their lived experiences. The North Carolina Certified Peer Support Specialist Program provides acknowledgment that the peer has met a set of requirements necessary to provide support to individuals with mental health or substance use disorder.
- Video: <https://vimeo.com/65166964>

What's happening in Kentucky?

- Peer support is the social and emotional support provided by persons with a mental health condition to others sharing a similar mental health condition to bring about a desired social or personal change.
- Peer support is an emerging evidence-based practice that helps people to recover from a mental illness with assistance from someone who has experienced mental illness and recovery.

Kentucky

- Is recovery-oriented and consumer driven.
- Provides significant benefits to peers receiving services, peers providing services, and the mental health systems that utilize peer services.
- Improves consumers' ability to live, work, learn and participate fully in their communities.
- Is cost effective and results in fewer hospitalizations, reduced substance abuse, increased rates of employment, and improved illness management.

Kentucky

- Creates a culture of recovery and improves the effectiveness of service outcomes.
- Provides a mechanism for outreach to individuals who have been alienated from traditional services.
- The Peer Specialist Service is a structured and scheduled therapeutic activity with an individual client or group, provided by a trained, self-identified consumer of mental health services. A Peer Specialist guides clients toward the identification and achievement of specific goals defined by the client and specified in the Treatment Plan.
- To become qualified, a Kentucky Peer Specialist (KPS) completes a five-day training program and passes both a written and oral test. The job of a KPS is not to replace current clinical mental health staff but to offer additional and/or alternative options to help people in their efforts to recover.

International Association of Peer Supporters (iNAPS)

- Founded in November 2004 by a group of avid peer supporters, the organization has quickly grown with members and supporters from every state and several countries outside the U.S.
- iNAPS is made up of a small group of dedicated volunteers who believe in the peer support movement who are always seeking new ways to spread the word about the effectiveness of education, training, hiring, and inclusion of peer supporters, advocates, and recovery coaches in all aspects of mental, behavioral, and physical health care. iNAPS publishes monthly newsletters, offers discounts on recovery-oriented materials, provides access to recovery and peer support information, conducts surveys of education, job satisfaction and salaries, reports on the current status of the profession, and hosts an annual national conference (attended by peers around the world) which brings together peer support providers and those who champion the peer support movement to share ideas, strategies, and innovative programs ideas.
- <http://inaops.org>

What is a Peer Supporter?

- The term peer supporter is an umbrella for many different peer support titles and roles, such as peer advocate, peer counselor, peer coach, peer mentor, peer educator, peer support group leader, peer wellness coach, recovery coach, recovery support specialist, and many more....
- In many states, there is an official certification process (training and test) to become a qualified “peer specialist.” Not all states certify peer support providers, but most organizations require peer support providers (who are employed) need to complete training that is specific to the expected responsibilities of the job (or volunteer work). Often, a peer supporter has extra incentive to stay well because he or she is a role model for others.
<http://inaops.org/definition-peer-specialist/>

Peer Support (verb)

- Peer support is a thoughtful process that involves observing, reflecting, taking action, and evaluating outcomes.
- Other ways to describe peer support as an action or verb?

Peer Supporter scope of practice

- **Knowledge, Skills and Abilities**
- Be able to share their own recovery story in a meaningful and hopeful way o Provide peer support that is mutual and respectful
- Be able to assist others in developing their own wellness or recovery plan o Understand the key components of the recovery process
- Be able to facilitate a peer support group
- Be able to connect others to community resources
- Have a working knowledge of the mind body connection and its relation to recovery o Provide education around wellness and recovery

Peer Supporter scope of practice

- **Mentoring**
- Act as a role model for wellness and recovery
- Assist in others in recognizing and building natural supports
- Be able to support others in planning and achieving their own goals at their own pace
- Utilize a strength based approach

Peer Supporter scope of practice

- **Professional Responsibility**
- Fulfill necessary training and continuing education requirements o Understand the role of peer support in the system
- Understand and abide by a code of ethics and standards
- Be able to work as part of a treatment team
- Understand the importance of confidentiality and HIPAA
- Understand mandatory reporting and why this is necessary o
- Participate in clinical supervision
- Understand risk factors for suicide

Peer Supporter scope of practice

- **Advocacy**
- Provide education around self- advocacy
- Assure those they work with know their rights and responsibilities o Provide referrals to other community supports
- Advocate for those we work with when necessary

<http://mtpeernetwork.org/wp-content/uploads/2012/03/Scope-of-practice-for-peer-supporter.pdf>

What is NOT peer support...

- Taxi driver?
- Medication expert?
- Case manager?
- Paid sponsor?
- What are some other ill fits for peer support... and why? Make a list...

What do peers bring?

- Lived experience
- Empathy
- Knowledge
- Compassion
- Passion
- Resources
- What else???

Where do peers work?

- Clinical Teams
- Assertive Community Treatment Teams (ACTT)
- Community Support Teams (CST)
- Mobile Crisis Units/ Crisis facilities
- Hospitals/ SA Treatment Facilities
- Day treatment/ IOP, Recovery houses, Detox
- REC/ PSR

Program benefits of peer support

- Cost effective (why?)
- Increased provider pool
- Increases accessibility/ outreach programs
- Increases agency credibility
- Demonstrates person centered thinking in services
- Demonstrates commitment to recovery and wellness

Service recipient benefits

- Feel less judged
- Feel understood
- Feel like they are one of “us”
- Feel more trusting
- Feels “real” or authentic
- Can identify

Peer Supporter benefits

- Feel a sense of worth and value
- Feel connected to a larger cause
- Opportunity to “give back”
- Serve as a role model
- “I actually get paid for doing something I love everyday”
- Responsibility

General benefits of peer inclusion in service arena

- Much evidence supports that peer support is a critical and effective strategy for ongoing health care and sustained behavior change for people with chronic diseases and other conditions, and its benefits can be extended to community, organizational and societal levels.
- Unites us as a community
- Improved overall outcomes

General benefits

- decreases morbidity and mortality rates
- increases life expectancy
- increases knowledge of a disease
- improves self-efficacy
- improves self-reported health status and self-care skills

General benefits

- Medication adherence
- Reduces use of emergency services
- Providers of social support report less depression, heightened self-esteem and self-efficacy, and improved quality of life.

Peer ethics

- Review *handout- Peer Ethical Guidelines*
- Examine differences/
similarities to licensed staff
code of ethics

Peer colleague/ co-worker ethics

- Am I my colleagues keeper?
- What you may/ may not ask
- What you may/ may not expect
- Discussion/ Role play

How much is too much...

- ...and how much is “not enough”
- How much are peers required to share...if at all?
- Encourage peers to “craft their story”
- Ya know??
- Discussion

Culture

- **Define: the total of the inherited ideas, beliefs, values, and knowledge, which constitute the shared bases of social action**
- What kind of culture or milieu is operating at your agency now?
- How is it helpful? Is it supportive?
- Does it promote wellness and hope?
- How can you imagine it differently?
- How do you get there?

Paternalism versus professional autonomy

- **Paternalism** is the usurpation of decision-making power, interfering in how they arrive at their decisions, or attempting to substitute one's judgment for theirs, expressly for the purpose of promoting their welfare.
- The moral concern is the presumption that one is right and the other is wrong.
- Do we treat peers as moral equals? Do we trust their judgment? Do we value the unique integrity and value they may bring to our treatment continuum? If not, why?

Stigma...what is it?

- A mark of disgrace associated with a particular circumstance, quality, or person.
- "the stigma of mental disorder"
- *synonyms:* shame, disgrace, dishonor, ignominy, opprobrium, humiliation, (bad)
- Group exercise- How are we keeping stigma "alive and well"
- Discussion

Stigma harms us all

- Fear of shame or further stigma can prevent many individuals from getting the treatment they need. The average time it takes in the US for an individual to engage in treatment from onset of symptoms to fully engaging in treatment is approximately 10 years.
- What can happen in those 10 years?

“Mental illness is nothing to be ashamed of, but stigma and bias shame us all”. Former US president.

Language

- Language guides everything!
- Language sets the tone
- Language becomes our truth (overt or covert)
- Group exercise

Turn it around....

- “Suzi is a borderline”
- “Suzi is an individual who has been diagnosed with borderline personality disorder”
- “Suzi is an individual who has many interests and strengths. She is in treatment for a mental health concern and is demonstrating resilience and hope. She is a champion of her own life and continues to flourish”

...a little further

- “Betsy is one of my cases”
- “Betsy is a client (patient, consumer, etc.) I serve”
- “Betsy is an individual I serve”

Turn it around...some more!

- “Bill is a drunk and and a crack head”
- “Bill is an individual who has been diagnosed with an addictive disorder”
- “Bill is a unique individual who has many talents and is self-driven. He has faced many challenges to include addiction, and continues to strive towards wellness and recovery”

Training

- NC requirements
- KY requirements
- Gaps and areas for improvement
- “Exploring Peer Support”

Why train?

- INCREASES COMFORT LEVEL
- INCREASES CONFIDENCE
- PROVIDES CONSISTENCY
- COMMUNICATES EXPECTATIONS
- COMMUNICATES HIGH STANDARDS
- PREPARES FOR REAL SITUATIONS
- REASSURES STAFF

Why some peers fail

- Lack of agency support
- Lack of communication/ inclusion
- Lack of known expectation
- Going up “against the machine”
- Boundaries
- Lack of training
- Lack of resources/ low wages

Considerations for program development

- Setting the culture
- Inclusion of peers in all agency functions
- Training non-peer staff
- Alerting community
- Look at what's working elsewhere
- Develop task forces/ groups

What can YOU do?

Strategic group meetings

Address the following:

- Culture
- Language
- Training requirements/ policy
- Peer inclusion
- ETC.....

Words of wisdom...now add your own!

- “Relate to a person’s potential and you call forth greatness.” — Ike Powell
- “At the heart of the recovery movement is the idea that instead of focusing on the illness, emphasis is placed on the potential for growth in the individual.” ____ William Anthony
- “Empowerment happens when a person who is seen as the problem begins to see him or herself as part of the solution.” — Saul Alinsky
- “The most important thing you can do for a person who is having a difficult time is to listen.” — Parker J. Palmer