Power of Peers in Mental Health Services

Jean LaCour, PhD, CPP
"There is one thing stronger than all the armies in the world, and that is an idea whose time has come."

Victor Hugo
Peer Support Practitioner

A person with a current or past mental illness experience who helps others diagnosed with mental illnesses.

(Salzer, 2002)

Substance Use Disorder/
Trauma

Volunteer or Paid Employee
Peer Support Practitioner

Titles:
Consumer Advocate                      Recovery Specialist
Peer Counselor                          Peer Supporter

Dept. of Veteran Affairs:
Peer Support Technician & Peer Specialist

Florida Certification Board:
Recovery Peer Specialist – Adult/ Family/ Veteran
Recovery as System Transformation

• Pre 1970’s: any job considered too stressful

• Post 1970’s: community based mental health/AA

• Community Support Program: fostered case management & other services

• PACT: Program for Assertive Comm. Treatment helped people w serious mental illness to live in community/ vocational rehabilitation programs helped people to maintain jobs
“Nothing About Us, Without Us”

- Consumers advocating for civil rights, economic security, employment & housing

- 1989- National Asso. of State Mental Health Program Directors acknowledged “consumers have unique contribution to make to improvement of quality MH services.”

- 2003- New Freedom Commission on Mental Health endorsed Recovery as a means to transform a fragmented MH system
Recovery to Practice Initiative
2010
- NAADAC - Situational Analysis of recovery concepts, recovery orientated systems of care, SAMHSA’s 10 recovery components & recovery training. NET Institute on committee

Completed Analysis:
- National Association of Peer Specialists
- American Psychiatric Nurses
- American Psychiatric Association
- Council on Social Work Education.
Benefits: Recipients/Peer Specialists

- Reduced symptoms, enlarged social networks, enhanced quality of life, especially when peer services offered with traditional MH services. (Campbell, J. et al., 2004)

- Reduced hospitalizations (Solomon and Draine, 1995)

- Employment - now intricate part of recovery process & a primary tool for empowering consumers
Consumers in the Mental Health Workforce: A Handbook for Providers

By Townsend and Griffin

Providers are employing more consumers to:
• improve clinical & business outcomes
• deliver service, reduce stigma &
• increase the credibility of their agency

Provider Handbook: effectively hire/retain consumer employees
• recruit, manage & integrate with staff, code of ethics
• sample job descriptions, evaluations & successful policies,
• conducting an interview & supervising consumer employees

• Published by The National Council for Community Behavioral Healthcare (2003)
Certified Recovery Peer Specialist / FCB

- Adult / Family
- Veteran

- High School or GED
- 1,000 hrs. formal or voluntary experience related to mental health issues
- Veteran - 500 hrs. mental health, sub abuse, or trauma services (public or private)
- 40 hrs. training in 9-11 content areas
- 3 letters of recommendation
- Sign Code of Ethics - FL Certification Board
- Exam Written; then 10 CEUs annually
Training Opportunities

• 2004 National Asso. of Peer Specialists
  Members in every state & globally; training

NET Institute- collaboration w/ NAPS
40 hour training ONLINE to increase access
2 – 6 hr. courses- self paced, affordable
meets Training requirement for FCB
NO hotels, travel, high fees, lost time
NET Study Groups for New Skills

Blended Learning:

- combines online courses w/ live classroom interaction

Peer Specialists to meet together to:

- Build relationships
- Learn new attitudes, knowledge and skills for new tasks
- Process new materials with others
- Understand rather than memorize
- Link new knowledge to life experience
- Enrich personal Recovery
NET Study Groups for New Skills

WHY: Multiply Quality Peer Specialists

WHO: Professional clinicians passionate to train & mentor (for your organization or independently)

WHAT: Facilitate 6-8 weekly meetings- interactive

WHEN: Contact us NOW to beta test a Study Group
       Students take Online courses before or during Study Group

HOW: Facilitator Guide; admin support for your participants
       CEU’s provided to Students in Study Group

Group Pricing available / Affiliate income from student referrals
Recovery Defined – Betty Ford

• Recovery from substance dependence is a voluntarily maintained lifestyle characterized by sobriety, personal health, and citizenship.

(Betty Ford Institute Consensus Panel, 2007)
William (Bill) White

• Recovery is the experience (a process and a sustained status) through which individuals, families, and communities impacted by severe alcohol and other drug (AOD) problems utilize internal and external resources to voluntarily resolve these problems, heal the wounds inflicted by AOD-related problems, actively manage their continued vulnerability to such problems, and develop a healthy, productive, and meaningful life. (White W., 2007)
SAMHSA- Recovery

• A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential. (SAMHSA 2011)
SAMHSA: 4 Areas of Recovery

• Four major dimensions that support a life in recovery:

  • **Health**: overcoming or managing one’s disease(s) as well as living in a physically and emotionally healthy way;

  • **Home**: a stable and safe place to live;

  • **Purpose**: meaningful daily activities, such as a job, school, volunteerism, family caretaking, or creative endeavors, and the independence, income and resources to participate in society; and

  • **Community**: relationships and social networks that provide support, friendship, love, and hope.
Old Medical Model Approach

Alleviates the pain of mental illness:

• Diagnoses, symptoms, treatment plan
• Psychotropic medications
• Highly educated clinical professionals
• Top down- patient is directed at all times
• Benefactor “you need to...”

Ex. Clinician provides all solutions w/out consumer’s involvement in best course of action
New Recovery Model - Holistic

Alleviate the pain of mental illness:

• Strength based attitude
• Hope – presence of aspirations
• Individual courage
• Self-esteem
• Problem-solving skills
• Recovery Plan created together with team
• Coping mechanisms
• Therapy
• Peer support- validation, empathy, modeling
Strength Based Care

• **Attitude** founded in personal values that respects others’ special gifts, talents, skills and gifts.

• Overcomes internalized Self-Stigma about illness

• Communicates a belief a person can recover

• Conversations about dreams, goals, wishes & how to support a person to get there
Peer Specialist Roles

• Inspire Hope
• Role Model Possibilities
• Provide support & understanding
• Provide information to their peers
• Identify community resources to peers & Tx team
• Help peers in problem solving, decision making & goal setting as peer, not benefactor
• Assist Peer w/ attaining full integration in the community
Roles & Success

- One-on-one or group setting
- Part of treatment team
- Various tasks - intake to counseling to driving

**Success:**
- Clear written job description
- **Training**
- Good channel of communication w/ peers, coworkers, supervisors
Guiding Principles SAMHSA 2011

• **Recovery emerges from hope:** The belief that recovery is real provides the essential and motivating message of a better future – that people can and do overcome the internal and external challenges, barriers, and obstacles that confront them.

• **Recovery is person-driven:** Self-determination and self-direction are the foundations for recovery as individuals define their own life goals and design their unique path(s).

• **Recovery occurs via many pathways:** Individuals are unique with distinct needs, strengths, preferences, goals, culture, and backgrounds, including trauma experiences that affect and determine their pathway(s) to recovery. Abstinence is the safest approach for those with substance use disorders.
• **Recovery is holistic:** Recovery encompasses an individual’s whole life, including mind, body, spirit, and community. The array of services and supports available should be integrated and coordinated.

• **Recovery is supported by peers and allies:** Mutual support and mutual aid groups, including the sharing of experiential knowledge and skills, as well as social learning, play an invaluable role in recovery.

• **Recovery is supported through relationship and social networks:** An important factor in the recovery process is the presence and involvement of people who believe in the person’s ability to recover; who offer hope, support, and encouragement; and who also suggest strategies and resources for change.
• **Recovery is culturally based and influenced:** Culture and cultural background in all of its diverse representations, including values, traditions, and beliefs, are keys in determining a person’s journey and unique pathway to recovery.

• **Recovery is supported by addressing trauma:** Services and supports should be trauma-informed to foster safety (physical and emotional) and trust, as well as promote choice, empowerment, and collaboration.

• **Recovery involves individual, family and community strengths, and responsibility:** Individuals, families, and communities have strengths and resources that serve as a foundation for recovery.

• **Recovery is based on respect:** Community, systems, and societal acceptance and appreciation for people affected by mental health and substance use problems – including protecting their rights and eliminating discrimination – are crucial in achieving recovery.
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Victor Hugo
Join Us at The NET!

• Let’s Nurture, Equip and Train 500 Peers who will Strengthen 500,000 Lives!!

• Together, we can Extend the Safety NET of Recovery World wide!!
You can change the world!

1) Individual Students:
   - Online Peer Training - 40 hrs.
   $395.00

2) Licensed Counselors & Addiction Professionals:
   - Facilitate Skills Study Group /CEUs
Let’s Connect!

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