

Peer Support: All That Evidence, Oh My!

Missouri Coalition
For Community Behavioral Healthcare
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Overview

- Why Peer Support?
- Name that Role...
- Your Experience: The Best and the Not So Great
- The Evidence
 - ✓ Historical Evidence
 - ✓ Current Evidence
- Now What?



Say You Want a Revolution...

“Revolutions begin when people who are defined as the problem achieve the power to redefine the problem.”

- John McKnight. *A Careless Society: Community and its Counterfeits*



#1 Why Do You Want a Peer Workforce?

Lived experience of recovery inspires hope and promotes trust in both staff and those receiving services

Enhanced ability to connect with those served and role model recovery in intentional and mutual relationships

Operationalize nothing about us without us

Knowledge of the community and community connections

Insight into stigmatizing language and practices, i.e., segregated bathrooms, coercion or punishment



Name that Role - Brainstorm

As quickly as you can at your table or with a partner, list all of the roles that you are aware of that peer supporters currently play in your organization or you would like to see them play in your agency/community.



Qualitative – Pros and Cons

- 1) Your experience of peer support; where has it worked well?
- 2) Your experience of peer support; what have been some of the drawbacks?
- 3) If you could see one thing happen differently in Missouri as it relates to peer support, what would that be?



Evidence

“Peer support services are an *evidence-based mental health model of care* which consists of a qualified peer support provider who assists individuals with their recovery from mental illness and substance use disorders. CMS recognizes that the experiences of peer support providers, as consumers of mental health and substance use services, can be an important component in a State’s delivery of effective treatment.”

(Letter to State Medicaid Directors, (n.d) from CMS)

Evidence

Impact of Wellness Recovery Action Planning on Service Utilization and Need in a Randomized Controlled Trial

Objective: The purpose of this study was to assess the impact of a mental illness self-management intervention, called Wellness Recovery Action Planning (WRAP), on the use of and need for mental health services over time compared with nutrition and wellness education.

Results: Results of mixed-effects random regression analysis indicated that, compared with controls, WRAP participants reported significantly greater reduction over time in service utilization (total, individual, and group), and service need (total and group services). Participants in both interventions improved significantly over time in symptoms and recovery outcomes

(Cook, Copeland, et al, 2013. Psych Rehab Services.)



Evidence

Peer Support Services for Individuals With Serious Mental Illnesses: Assessing the Evidence

Objective

This review assessed the level of evidence and effectiveness of peer support services delivered by individuals in recovery to those with serious mental illnesses or co-occurring mental and substance use disorders.

Conclusions

Peer support services have demonstrated many notable outcomes. However, studies that better differentiate the contributions of the peer role and are conducted with greater specificity, consistency, and rigor would strengthen the evidence.

(Chinman, George, et al. 2014. Psych Services

Evidence

- [Randomized Control Comparing Peers and Other Professionals – NIH \(2012\)](#)
 - Objectives: Compare mental health outcomes of a peer-led recovery group, a clinician-led recovery group, and usual treatment and to examine the effect of group attendance on outcomes.
 - Conclusions: This study adds to the evidence suggesting no short-term incremental benefit **(or harm)** from peer services beyond usual care.



Evidence

Cost effectiveness of using peer providers.

Conclusion: Prestigious and important organizations such as CMS, SAMSHA, the Institute of Medicine, among many others, have identified peer delivered services offered through a certified peer specialists as being valuable services. In addition, research is showing that while increasing consumer wellness, the use of peer specialists is decreasing costs.

(Bergeson, S. (n.d.)



Resources

- [Colorado's BH Wellness Toolkit](#)
- [Sample CQT Job Description](#)
- [NCMHR Resources on Peer Support](#)
- [TTIPS - Training Trauma-Informed Peers](#)
- [WHAM - Whole Health Action Management](#)



Questions

“Support the strong, give courage to the timid,
remind the indifferent, and warn the opposed”

-Whitney Moore Young



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