DIMENSIONS:
Building Community Trust
Through Peers and Lay Providers
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Webinar Objectives

This specialized webinar is designed to:

- Provide a brief overview of the recovery movement and peer-driven programming
- Describe three diverse peer programs, sharing practical guidance for sustainable peer services
- Consider the challenges and rewards of peer work and how to successfully implement peer services
Overview of Peer-Driven Programming
Peer Support

A peer provider is a person who uses his or her lived experience, plus skills learned in formal training, to deliver services in health and public health settings to promote mind-body recovery and resiliency.

http://www.bhwellness.org/resources/toolkits/
Recovery and Peer Specialists

**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

**Peer Specialists:** People who are trained to use their personal recovery experiences to help guide, inspire, advocate for, and empower others who are not as far along in their own recovery
Why Hire Peer Specialists?

Benefits of working WITH a Peer Specialist:

• Increased engagement and activation in treatment
• Increased empowerment and hope
• Increased life satisfaction and quality
• Decreased self-stigma
• Reduced use of inpatient services
• Increased social functioning
• Increased community engagement
• Decreased hospitalization

Benefits of working AS a Peer Specialist:

• Increased knowledge
• Increased sense of empowerment and self-worth
• General improved quality of life
• Increased stabilization and resilience
• Increased financial independence and less reliance on benefits
Building Community Trust

Peers who serve within their own community may be more effective at building trust by:

- Understanding unique community challenges
- Identifying relevant, local resources
- Using relatable language and expressions
- Sharing a common physical appearance

When serving their community, peers are stakeholders in the outcomes they seek to achieve.
Peer Specialists in Non-Traditional Settings

The Patient Centered Medical Neighborhood model can be expanded and applied to include community hubs of care outside the medical context.
The Health Neighborhood

Any point of service can become the hub of care.
Peer Program I: It Takes a Library
Project Rationale and Background

• Increases in homelessness and opioid overdoses led to a need for social service support at DPL
• By the time this project began, DPL had already hired 2 social workers and additional security personnel
• Two grants allowed the library to hire 4 Peers and evaluate the program

“Librarians really want to help people, but when the questions are, ‘How do I get to substance treatment?’ and [the librarians] don’t have that information? It’s hard.”

-Social Worker at DPL
**Program Design**

“I got to be the person I needed years ago”  
-Peer Support Specialist at DPL

“The way we can help people really adds to my self-esteem and my self-worth and gives me fulfillment and makes me happy”  
-Peer Support Specialist at DPL

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**Figure 1: Program 3-Tier System**

1. **Lead Social Worker/CMWN**
   - Program Oversight
   - Administrative
   - Organizing Staff and PSS Training
   - Other Programmatic Efforts

2. **Social Workers**
   - Crisis Work
   - Peer Supervision Activities
   - Conducting Staff Trainings

3. **Peer Support Specialists**
   - Direct Service
   - Outreach Efforts
   - Drop-in Hours
Professional Support

- PSS’s attended an 80-hour training program prior to placement
- Ongoing training provided (e.g., “trauma informed care”)
- Part-time positions prevented burnout and allowed time for self-care
- PSS’s received extensive supervision from LCSWs and CWMN staff

“I don’t think you could do this job for more than 3 months if you didn’t have supervision – like support and debriefing”

-Peer Support Specialist at DPL
Customer Connections

- Over an 11-month period of the project, peers made 2,864 contacts with customers
- Approximately 1,600 unique individuals were served during the evaluation period

28% of individuals PSSs contacted accounted for 60% of total customer contacts.
Evaluation Results: Library Impact

- Changing library dynamics
- Increasing staff capacity
- Modeling recovery

“It was kind of like the Wild West... we were handcuffing people 4 or 5 times per week. We set out to change a culture”

- Security Manager on the culture at DPL when he was hired 5 years earlier

“The level of work we’re able to do here is so much higher because we have this resource”

- Technology Manager at DPL

“The Peers role-model for the rest of the staff that it’s OK to get to know somebody, to humanize people, and that’s huge”

- Social Worker at DPL
Peer Program II:
Criminal Justice Tobacco Cessation Equity Project
**Project Rationale and Overview**

- **Project Rationale:** Most individuals who are incarcerated and use tobacco desire to quit.
- **Project Goal:** Implement and evaluate peer-led cessation services for an extremely underserved population of incarcerated individuals.
- **Project Setting:** Eagle Point Second Chance Center, DOC, Arizona
  - Pre-release program which provides skills and resources necessary for re-entry into society.
  - Inmates selected for this program have 12 weeks remaining on their sentence.
DIMENSIONS Tobacco-Free Program

- Evidence-based tobacco cessation
- Tailored to a justice-involved population
- Facilitated by Peer Support Specialists
- Train-the-trainer model
- NRT provided by Arizona Department of Health Services
- Six, 60-90 minute sessions, flexible format
- Three groups run from December 2019 – March 2020
- Groups run either 2x per week for 3 weeks or 1x per week for 6 weeks
- ‘Personal Progress Form’ completed during each session to track outcomes
Results: Quit Rates

37 Participants
9 Individuals Quit
24% Quit Rate
Results: Tobacco Use Frequency

Participants reduced the frequency of their tobacco use after only 2 sessions

(Z = -4.7, p < .001)
Readiness to Live Tobacco-Free

Change in "Readiness to Live a Tobacco-Free Life" across 6 sessions (N = 31)

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<th>“Strongly Agree”</th>
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<td>“Confident in my Ability”</td>
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<tr>
<td>“I Will Have Support”</td>
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Session 1 & Session 6
Peer Program III: The Collective Impact Project
Collective Impact Project

• Three-year grant project, including start-up period
• Created a coalition of community stakeholders
  – Objectives, roles, and community sites were identified
  – Coalition-led trainings and oversight
  – Peer Liaison role created
• Community sites engaged for Peer Navigator placement
  – Primary health care provider
  – Community service and outreach centers
Role of the Peer Navigators (PNs)

• PNs were placed under Site Supervisors
• Coalition identified four key PN job activities
  - Education
  - Role Modeling
  - Advocacy
  - Navigation
• Clients screened for four key chronic diseases
  - Cancer
  - Heart Disease
  - Diabetes
  - COPD/Emphysema
• Clients also screened to assess housing status
Project Outcomes

- PNs were extremely effective serving clients
  - 1,071 clients supported by the PNs
  - Of these, 823 screened for chronic diseases
  - And 429 referred to health care services
- Ultimately, the sites and PNs successfully demonstrated value of peer-based work
- Several PNs continue to succeed in the field
Challenges and Rewards of Peer Specialist Work
Challenges of Peer Work

• Boundaries are critical to successful peer work
  – Agencies and staff must understand what the peer role entails—and what it does not
  – Client boundaries are critical

• Peer work needs support and structure
  – Planning and meetings to focus on role, challenges, and self-care
  – Peers need time allotted for these practices
Rewards of Peer Work

• Helping clients to succeed is the ultimate reward
  – Opportunity to give back – Peers have been supported in their own recovery and can return this favor
  – Ability to support and see real change in peoples’ lives

• Personal and professional development
  – Peer role and structure is helpful in maintaining recovery
  – Opens doors to new trainings, skills, and education
Peer Work Takeaways

• Organizations must be ready for peer specialists and provide the appropriate support
  – Clearly establish peer role and offer structured support

• Effective peer specialists are those who:
  – Leverage their own experiences to help others
  – Celebrate clients’ strengths and resourcefulness
  – Take the time to maintain their own wellness and self-care to avoid relapse and/or burnout
Practical Guidance for Sustainable Peer Services
Guidelines for Sustainability

- Allow time to train healthcare and social service providers on peer-led services and recovery-oriented perspectives
- Establish a “culture of data” early in the process
- Implement flexible programs and workflows
- Plan a professionally supportive infrastructure
- Strive to create permanently funded peer positions or other pathways to permanent employment
Guidelines for Sustainability

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Next Steps: Implementing Peer Services
What role could peer specialists or lay providers play in addressing tobacco use/cessation disparities at your agency?
Preparing for Peer-Led Services

• Prior to initiating peer-led tobacco services, agencies should:
  – State their rationale for the program
  – Carefully define the scope of the peer role(s)
  – Identify (sustainable) funding for the program
  – Structure the peer role(s) within workflows

• Peer support champions further peer services via advocacy, resources, and direct support
Training Peers for Success

• Strategies for training peers for their role:
  – Shadow several team members
  – Attend organization-wide and specialized meetings
  – Provide specialized training—including on tobacco cessation
  – Offer continuing education opportunities

• Training increases the effectiveness of peer-led interventions, adds legitimacy to the profession, and increases staff retention rates
Sustaining Peer Success

• Peer roles often require additional support and oversight to sustain peer success, including:
  – Close supervision and guidance
  – Full benefits and livable wages
  – Professional development opportunities

• Maintaining boundaries and being mindful of “role drift” is necessary
Get Started

Download the DIMENSIONS: Peer Support Program Toolkit for free to learn more:

bhwellness.org/resources-2/toolkits/peer/
Behavioral Health & Wellness Program

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