

# PEER SUPPORT ACROSS SETTINGS

*A "No Wrong Door" Approach to Recovery*





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This publication, along with other research and reports on peer support, is available through Mental Health America's Center for Peer Support website at [www.CenterforPeerSupport.org](http://www.CenterforPeerSupport.org).

# WHY PEER SUPPORT?

**Evidence-based practice**

Peer support services are rapidly expanding across the U.S. and for good reason. The evidence-based practice has been shown to **improve quality of life, overall health, and engagement** with services, all while **reducing the use of expensive and disruptive high levels of care.**

**SAMHSA best practice**

Peer support specialists are able to connect with individuals because they have been there themselves. They combine their lived experience with skills strengthened by training and knowledge of systems and resources. Their focus on recovery, resilience, wellness, and connection has been changing lives for decades and continues to transform a system that too often fails consumers.

**Cost-effective**

The research shows that peers are an essential component of recovery-oriented services across the continuum of care. From inpatient psychiatric units to emergency departments to drop-in centers, peers are a crucial part of the growing focus on services that engage people, promote recovery, and aim to support people in living full lives in the community.

**Person-centered**

**Recovery focused**

As demand for peer support services grows throughout health care, it is important to discuss the role and work of peers across settings. This toolkit provides an overview of problems in each level of care and the solutions offered by peer support specialists.

**Whole Health focused**



## PEER SUPPORT IN PRIMARY CARE

People are most likely to interact with the healthcare system through their Primary Care Physicians (PCPs). In fact, about half of all behavioral health services occur in primary care.<sup>1</sup>

Although they are largely involved in providing services, many PCPs have limited time to spend with their patients and may have limited knowledge and understanding of mental health, trauma, and community resources. Even when they do make recommendations, less than half of those referred from their PCPs for specialty mental health services make an initial appointment.<sup>3</sup>

For people with mental health conditions, PCPs also play an important role in addressing other conditions. More than two-thirds of individuals with mental health conditions have additional health problems.<sup>4</sup> The challenges of dealing with chronic physical health conditions, especially combined with inadequate supports and services around mental health and trauma, can create a vicious cycle of worsening mental and physical health.

Including peer support in primary care can turn this intimidating and often missed interaction into an opportunity to meet people where they are looking for help and to connect them with resources before their concerns worsen or reach a point of crisis.

From the start, peers provide hope through their own lived experience and their ability to connect with those they support. Beyond just giving individuals a list of resources they must sort through, peers take the time to help people explore options based on their wants and concerns. They answer questions, share resources, and support people in overcoming what might prevent them from reaching their health and wellness goals.

With knowledge of what is available and support in getting there, whether that is help making a phone call or understanding insurance benefits, individuals receiving peer support can make the best decisions for their health and wellbeing.

In addition to addressing mental health concerns, peers also offer support to prevent or manage many of the chronic health conditions common among people with mental health conditions. The result is improved health and quality of life with reductions in the costs and life disruption that comes with more intensive health services.<sup>5</sup>



## PEER SUPPORT IN OUTPATIENT SETTINGS

Living with a mental health condition is often isolating and people may feel like they cannot connect with anyone about their experiences. It can also be challenging to find or access even the most basic services.

When people do have access to services, they may lack comprehensive supports around their wants and needs, as mental health professionals are often narrowly focused around diagnostic criteria and “symptom” reduction.

What’s more, the mental health system often teaches individuals that all they can hope for is stability and that many of the things they once wanted for themselves will be replaced with a life dominated exclusively by treatment and management. Instead of promoting holistic recovery and choice, many receive the message that their only options are to follow directions and to try not to stress themselves out too much.

Peer support specialists challenge this narrative first and foremost by modeling recovery themselves. Working with someone with similar experiences who is living a meaningful life in the community provides hope that person can not only move beyond their current circumstances but can also go on to achieve what is important to them. Peers focus not just on “symptoms” but on connecting people to supports around work, relationships, spirituality, education, physical health, and daily life that make life worth living. People learn to set goals for themselves and to manage their lives in the ways that work best for them.

People working with peers have better relationships with service providers, improved self-advocacy skills, and higher engagement with services and supports, keeping them in the community and pursuing the things that are important to them.<sup>6 7 8</sup> Peer support has been shown to be more effective than treatment as usual in reducing depression, a leading cause of seeking outpatient services and of disability.<sup>9 10</sup> By focusing on the things that matter most to the person, peers promote overall wellbeing and are a critical part of avoiding more restrictive services like hospitalization.



# PEER SUPPORT IN PEER-RUN RESPITES

Individuals experiencing a mental health crisis or serious distress often have nowhere to go. They may find themselves in emergency departments, even when they know it is not what they need. In these scenarios, people end up using expensive services and may risk unnecessary hospitalization. Instead of support, people can end up with high medical bills, serious life disruption, restriction of liberty, and potentially traumatic experiences.

Peer-run respites fill the widespread gap in crisis support by creating a safe, home-like place for people to go voluntarily during times of distress. They are houses in the community where people can take time away from what is happening in their lives.

Operated by peers, respites are non-clinical and do not offer medical services like medication management. Instead they provide welcoming, healing environments for people whose only other option may be a hospital or emergency room. People stay for short periods of time and are given peer support and space to heal. They often leave with a recovery plan, connections to resources, and a renewed hope in their own abilities.

Research shows peer-run respites are cost-effective, saving the high costs for individuals and payers that come with the most restrictive levels of care.<sup>11</sup> Respites also improve short- and long-term outcomes, keep people in the community, and offer healing, supportive spaces for people to go when they are struggling.<sup>12</sup>



# PEER SUPPORT IN EMERGENCY DEPARTMENTS

For many Americans, emergency departments are the only place for them to go in times of mental health crises. 1 in 8 visits to the emergency room involves a mental health or substance use disorder.<sup>13</sup>

For those in crisis, emergency departments tend to come with long wait times, unprepared staff, and high costs. At the very least, these factors contribute to poorer outcomes. For many, it results in unnecessary hospitalizations and traumatic experiences.

Ending up in the emergency department might be the worst day of a person's life. People often report feeling confused, isolated, hopeless, or out of control. Poor responses from staff and boarding in emergency departments can exacerbate an already intense and challenging time.

Peer specialists understand this in a way that most in the hospital will not. They take the time build rapport, listen, and share parts of their own story when appropriate. The simple act of sitting with someone and listening can make a huge difference.

Beyond this, peers can help explain potential next steps and what people can expect with each option. Their knowledge of the system and services makes it easier to support people in determining what is best for them and gives those they support a sense of security and confidence moving forward.

By offering support, talking through potential options, and providing information, peers can help people avoid hospitalization, interrupt cycles of repeated hospitalization, connect people to appropriate community resources, and instill hope that recovery is possible. Over time, this helps shift emergency department culture and models for staff how to best interact with people in crisis as well.



# PEER SUPPORT IN INPATIENT SERVICES

Inpatient services can be scary. Voluntarily or involuntarily, individuals are removed from their lives and placed into a highly restrictive environment where most of their decisions are now made for them. Whether it is a person's first time being hospitalized or they have been there before, the events leading up to hospitalization, the change in environment, and hospital culture can be difficult and even traumatic. People often feel alone, out of control, and unsure about their future.



Whether people are hospitalized for a few days or months, many find that their needs as a whole person are not met. Cultures that are focused only on symptom management or crisis stabilization may miss much of what the person receiving services feels they need.

In addition to modeling that life can get better beyond hospitalization and countering damaging messages people hospitalized may receive about what it means to be hospitalized or given a specific diagnosis, peer support specialists in inpatient services provide a much needed holistic, person-focused perspective. They provide a human connection who understands the treatment issues, the experience of being hospitalized, and paths moving forward. They spend time listening to the what contributed to a person's hospitalization and engaging them around what they want and feel is necessary for their recovery in the community.

In addition to advocating for individuals to the appropriate authorities in cases of abuse or misconduct, peer specialists help people advocate for themselves. Self-advocacy tools can ensure people get access to what they do want and avoid what they do not want, creating plans that are more responsive to people's needs and avoid unwanted consequences.

Through their work and investment from staff and administrators, peer support specialists can shift attitudes about and treatment of individuals who are hospitalized. The resulting changes can create atmospheres that better serve people and decrease the likelihood of individuals being hospitalized in the future.



## PEER SUPPORT IN TRANSITIONAL SERVICES



People transitioning out of inpatient services face a number of issues. They may be unsure of where they will get continued support, where they will live, what will happen with their jobs or education, who they can talk to, or how they can explain what happened to people in their lives. They often have to return to the same situations that may have contributed to their hospitalization. Even for those who receive support in creating a discharge plan to address some of these concerns, many are left to figure out a complicated, disjointed system on their own.

Lack of continued support can lead to a gap or complete stop in supports and services, continued disruption in one's life, and future hospital readmissions-- more than 1 in 10 people discharged from inpatient psychiatric services is re-hospitalized within 30 days.<sup>14</sup>

Peer services are especially effective at this stressful, confusing time. Peer specialists are familiar with the emotional, interpersonal, work- and school-related, and logistical issues people face as they return to their communities. They support people through these issues, connect them with a variety of community-based resources, and continue to engage and meet with those they support to make sure they are able to meet all of their needs. More than just a plan for receiving services, peers help people create a plan for living.

Research shows that peer support at this time reduces future rates of hospitalization.<sup>15</sup> Those who receive peer support and are hospitalized again spend fewer days in the hospital than those who did not receive peer support.<sup>16</sup> They report higher levels of hope and improved quality of life.<sup>17</sup>

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