

Peer Recovery Support Services

Effective Implementation
in Specialty Courts and
Other Criminal Justice Settings

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Washington, DC

Introduction

Comprehensive Opioid Abuse Program (COAP)

- Department of Justice, Bureau of Justice Assistance initiative
 - More than 200 funded programs
 - Learn more at COAPresources.org
- Peer Recovery Support Services Training and Technical Assistance Center
 - Funded by Bureau of Justice Assistance (BJA)
 - Provides support for COAP grantees—and others interested in implementing peer supports

Food for Thought

Over the past quarter century, we have learned that people who have substance use disorders may face a recovery journey that can last a lifetime. During this journey, the person in recovery needs strong social supports that include a peer who also has undertaken the same journey (Birtel, Wood, and Kempa, 2017). Peer-based recovery support is the “process of giving and receiving nonprofessional, nonclinical assistance to achieve long-term recovery from substance use disorders” (Bassuk, Hanson, Greene, Richard, and Laudet, 2016).

Session Overview

- Defining Peer Recovery Support
- Different Models: Examples of Peer Supports at Each Intercept
 - Challenges
 - Strengths
 - Value of PRSS
- Effective Implementation: Five P's
 - Providing Supervision
- Final Thoughts

Learning Outcomes

- Define peer recovery and peer recovery support services (PRSS) for persons with substance use and co-occurring disorders.
- Compare and contrast strengths and challenges of different models of PRSS in Criminal Justice settings.
- Discuss effective practices for the implementation of PRSS, with a focus on supervision
- Describe what the Comprehensive Opioid Addiction Program is and its connection to drug courts.

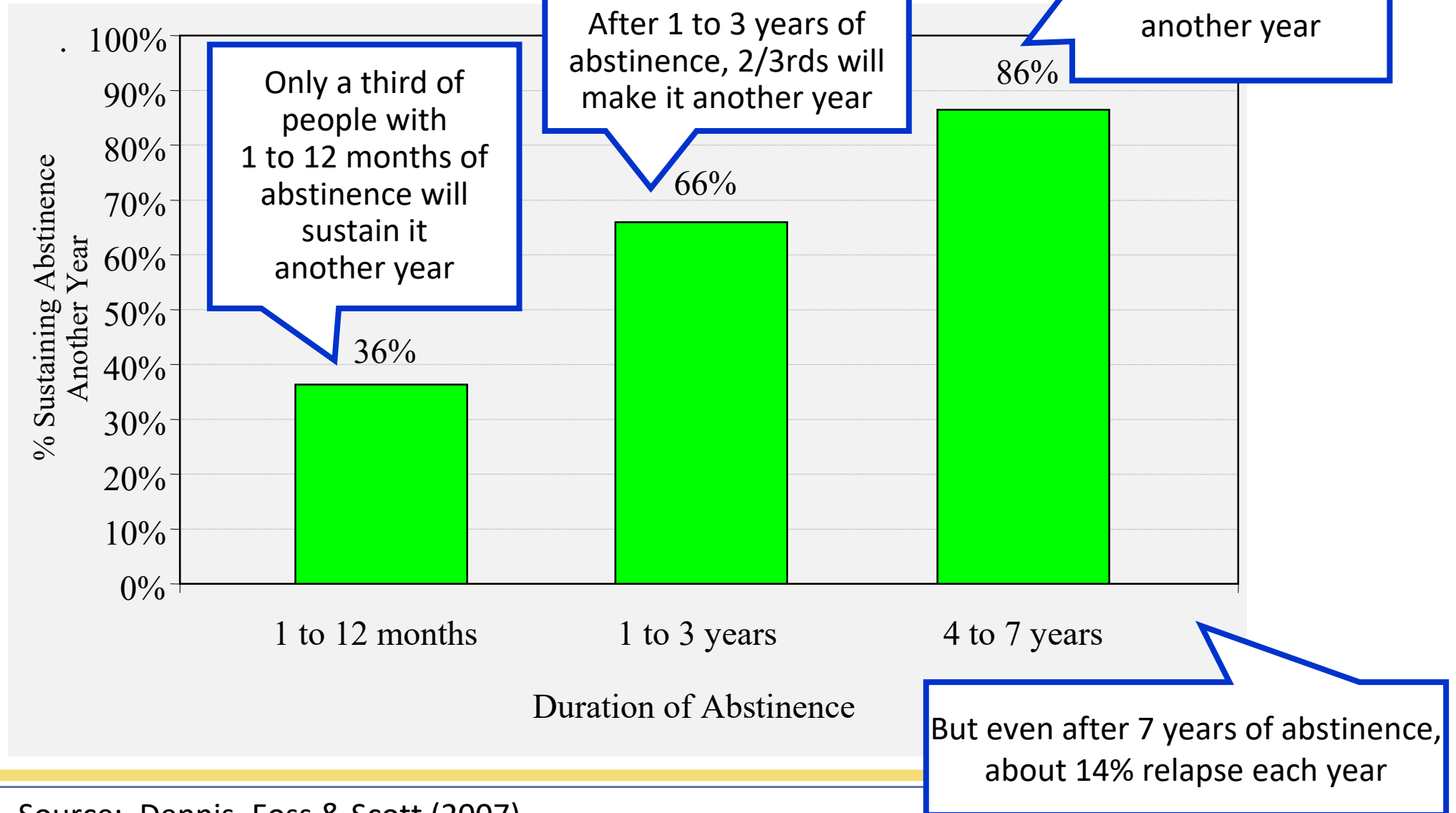
Defining Peer Recovery Support

Recovery is...

- A process of change through which individuals improve their health and wellness, live self-directed lives, and strive to reach their full potential
 - Hope
 - Respect
 - Strengths/responsibility
 - Addresses trauma
 - Culture
 - Relational
 - Peer support
 - Holistic
 - Many pathways
 - Person-driven

(SAMHSA, 2011)

Likelihood of Sustaining Abstinence Grows Over Time



Source: Dennis, Foss & Scott (2007)

Average Progression of Recovery

Duration of Abstinence

1–12 Months

- ✓ More clean and sober friends
- ✓ Less illegal activity and incarceration
- ✓ Less homelessness, violence, and victimization
- ✓ Less use by others at home, work, and by social peers

1–3 Years

- ✓ Virtual elimination of illegal activity and illegal income
- ✓ Better housing and living situations
- ✓ Increasing employment and income

4–7 Years

- ✓ More social and spiritual support
- ✓ Better mental health
- ✓ Housing and living situations continue to improve
- ✓ Dramatic rise in employment and income
- ✓ Dramatic drop in people living below the poverty line

Dennis, M.L., Foss, M.A., & Scott, C.K (2007). An eight-year perspective on the relationship between the duration of abstinence and other aspects of recovery. *Evaluation Review*, 31(6), 585-612.

Essential Ingredients for Sustained Recovery

- Safe and affordable place to love
- Steady employment and job readiness
- Education and vocational skills
- Life and recovery skills
- Health and wellness
- Recovery support networks
- Sense of belonging and purpose
- Community and civic engagement

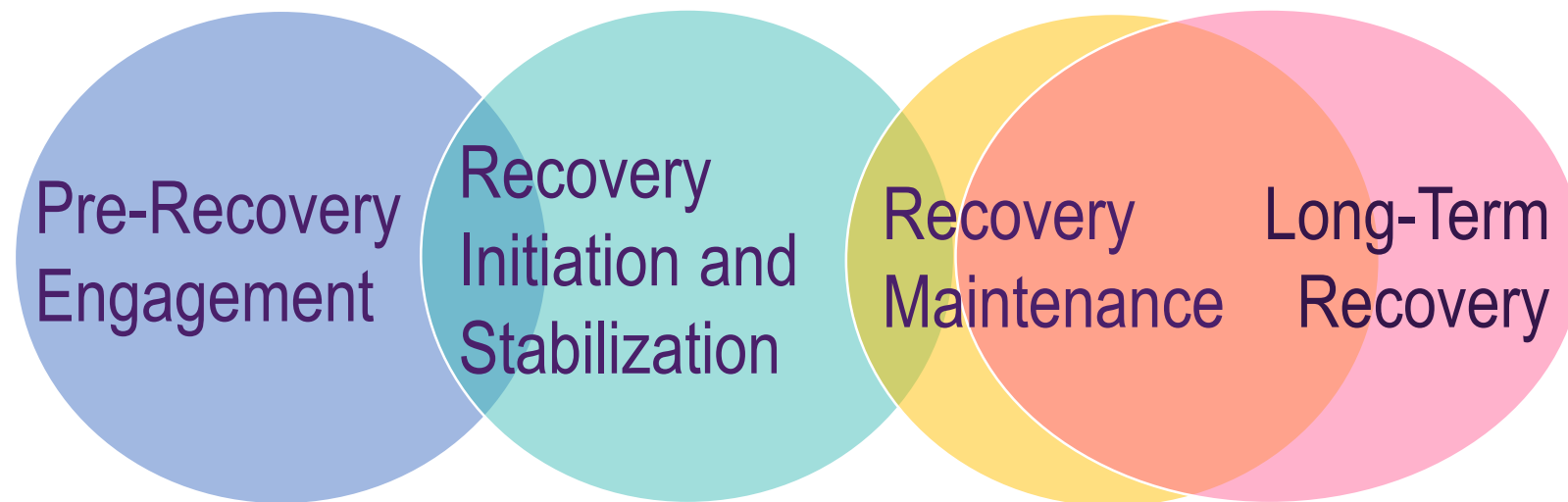
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- Often, a need to address
 - Legal issues
 - Criminal records
 - Financial status: debt, taxes, budgeting, etc.
 - Revoked licenses: professional, business, driver's
 - Child custody
 - Relationship and parenting skills
 - Recovery support networks and community connections

Peer Recovery Support Services (PRSS)

- Provided by individuals with “lived experience” of addiction and recovery
- Nonprofessional and nonclinical
- Distinct from case management and treatment
- Distinct from mutual aid support, such as 12-step groups
- Provide links to professional treatment, health and social services, and support resources in communities

What PRSS Do #1: Engage Individuals in Change

Peer supports engage individuals across the continuum of addiction recovery—and keep them engaged



Adapted from William White

-
- Focuses on building trusting relationships
 - Promotes an individual's choices and goals
 - Utilizes recovery community resources and assets
 - Provides entry and navigation to health and social service systems
 - Models the benefits and expectations of a life in recovery

What PRSS Do #2: Build Recovery Capital

- In assisting people to achieve their recovery goals, it is often useful to help them assess and build their **Recovery Capital**
- **Recovery Capital** is the sum of the strengths and supports—both internal and external—that are available to help someone initiate and sustain long-term recovery from addiction

(Granfield and Cloud, 1999, 2004; White, 2006)

Peer supports create, build, reinforce, and strengthen Recovery Capital

What PRSS Do #3: Improve Outcomes

- Decreased involvement in criminal justice system
- Reduced relapse rates
- Rapid re-engagement following relapse
- Improved psychiatric symptoms
- Decreased hospitalizations and length of stay in hospitals
- Decreased homelessness
- Increased community and civic engagement

What PRSS Do #4: Save Money

- Decreased criminal justice involvement equals savings
- Decreased emergency services use, hospitalizations, and lengths of stay in hospital equals savings
- Decreased homelessness equals savings

Peer Supports—Key Characteristics

- Mutuality and reciprocity
- Relationship built on respect and trust
- Authority and expertise of lived experience
- Transparency of strengths and weaknesses
- Appropriate sharing
- Empowerment: never do for others what they can do for themselves
- Recovery first: modeling self-care

Strengths of Peer Recovery Support Services

- Focuses on building trusting relationships
- Promotes an individual's choices and goals
- Utilizes recovery community resources and assets
- Provides entry and navigation to health and social service systems
- Models the benefits and expectations of a life in recovery

Peer Workers—Key Characteristics

- Lived experience in recovery from psychiatric diagnoses, trauma, and/or addiction
- A mixture of employed and volunteer roles
- Distinct from both clinical and mutual aid roles and practice
- Reinforced through training, skills-building, and quality supervision
- Guided by ethical framework and decision making
- Practice of boundaries and self-care

Peer Workers—Roles

firestarter **advocate** **mentor** **community**
COACH **RECOVERY** **peer** **health**
worker
interventionist **bridger** **counselor**
supporter **promotora**
specialist **helper**
navigator



PRSS: NOT Just Recovery Coaches . . .

- Peer telephone continuing support
- Peer-facilitated educational and support groups
- Peer-connected and -navigated health and community supports
- Peer-operated recovery residences
- Recovery community centers

Comprehensive Peer Supports - 1

Type	Description	Peer Roles	Supports
Emotional	Demonstrate empathy, caring, or concern to bolster the person's self-esteem and confidence	<ul style="list-style-type: none"> Recovery coach Support group leader 	Offering peer recovery coaching and varied peer-led support groups in an accessible, welcoming environment
Informational	Share knowledge and information and/or provide life or vocational skills training	<ul style="list-style-type: none"> Peer educator Peer community health worker Peer wellness coordinator 	Scheduling a complete calendar of training sessions—such as parenting classes, job readiness training, health education classes, and wellness sessions—based on participants' identified needs
Instrumental	Provide concrete assistance to help others accomplish tasks, such as connecting individuals to housing, employment support, and social services	<ul style="list-style-type: none"> Peer navigator Peer advocate Recovery residence manager 	Offering one-on-one or small-group assistance in locating providers, completing paperwork, making appointments, and negotiating barriers to accessing needed resources and services
Interpersonal (Affiliational)	Facilitate contacts with other people to promote learning of social and recreational skills, create community, and acquire a sense of belonging	<ul style="list-style-type: none"> Recovery community center staff Recovery activity coordinator Sober active guide 	Providing space for sober social gatherings (e.g., sober Super Bowl party) and assisting participants in setting up social outings and sober sports leagues

Comprehensive Peer Supports - 2

- Help build recovery capital and facilitate recovery tools
- Provide social support and help overcome obstacles
- Make introductions to recovery community
- Connect to community resources
- Facilitate informed decision making
- Advocate and promote self-advocacy
- Help navigate systems
- Work as change agent in advancing cultures of recovery

Peer Workers—Key Skills

- Listening, facilitating, guiding, encouraging
- Leveling power differentials
- Helping others to gain hope, explore recovery, and achieve life goals
- Reinforcing voice and choice
- Building on strengths (**Recovery Capital**) to develop solid recovery foundation
- Development of person-owned recovery plans
- Applying trauma-informed and culturally appropriate strategies
- Role modeling successful recovery

Peer Support Workers—MH and SUD

- Parallel systems of training, certification, funding
- Different role titles
 - SUD: Peer recovery coach
 - MH: Peer support specialist
- Also, differences in language and sometimes focus
- Peer support role is similar across disciplines
- Synergy is important, but so is distinction in practice across disciplines
- MH and SUD peer support workers often work with individuals with co-occurring issues, but not always explicitly
- Trauma is often a common denominator

Expertise in the Room - 1

- What are the roles peer specialists have in your program?
- What are the supports they provide—or link drug court participants to?
- What do you participants think/ feel about having peer support?

Different Models

Examples of Peer Supports at Each Sequential Intercept

Arrest

- Peer supports offered services in conjunction with first responders
- Behavioral health first responders working with police.
- Services may include:
 - Motivation
 - Transportation
 - Linkage to addiction treatment
 - Linkage to community recovery support groups

Detention/Arraignment

In-jail services and supports:

- Advocacy for individuals who are experiencing physical and psychological impairments related to intoxication and withdrawal
- Overdose risk education, especially for those addicted to opioids that experience a decline in tolerance while incarcerated
- Pre-release planning, goal setting, and maintaining compliance with conditions of release
- Locating and engaging with treatment services upon release, including Medication Assisted Treatment for those dependent on opioids

Courts

Conventional courts

- Education about process
- Reminders regarding appearances
- Transportation
- Advocacy for alternative sentencing, including SUD/ MH treatment

Specialty courts

- One-on-one recovery coaching
- Recovery planning
- Linkage to community services
- Linkage to recovery community

Prison

- Fostering recovery community “behind the walls”
- One-on-one and group recovery coaching
- Co-facilitate health and wellness educational sessions
- Transition planning prior to release
 - Connection to recovery community
 - Linkage to resources

Community Corrections/ Re-entry

Support and resources that help individuals meet the conditions of probation, post-prison release, or parole:

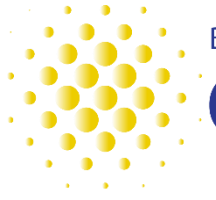
- Find and maintain employment
- Enroll in higher education
- Maintain sobriety/ relapse and overdose prevention
- Support for avoiding any behaviors that may lead to probation and/or parole violation
- Engage in pro-social activities
- Develop positive and supportive relationships
- Help individuals advocate for their own fair treatment

Challenges of Peer Recovery Support Services

- Skeptics
- Discrimination
- Misunderstanding about what it is and what it isn't
- Reviewing and discussing policies that don't support the model

Expertise in the Room - 2

- What are the challenges or barriers that you face in providing peer supports?
- What have you done/ do you do to overcome those challenges?



BJA's Comprehensive

Opioid Abuse Program

Effective Implementation

The Five Ps

Five Ps

1. **Promote a recovery orientation** among community partners and stakeholders.
2. **Prepare to integrate** peer support into the organizational culture.
3. **Plan appropriate peer supports** for the criminal justice context, with fidelity to the selected model(s).
4. **Produce policies and procedures** that are consistent with and supportive of peer practice, and processes that address barriers to peer support.
5. **Provide supervision** that is patterned on the best practices of PRSS and of working with the CJ populations.

Supervision ...

- Enhances and develops the unique knowledge and skills necessary for peer practice
- Provides a safe space to address ethical dilemmas and boundary issues
- Engages peer practitioners in strengthening the PRSS program
- Fosters an organizational culture that is conducive to recovery
- Clarifies organizational systems, structures, and processes
- Supports self care

(SAMHSA, 2016)

Strengths-based Supervision - 1

Ongoing mentoring of individuals to ensure translation of theory into good practice and to support sustainable development and implementation of skills.

The aim of strength-based supervision is to increase the capacity and confidence of peer specialists to take on specific tasks through focused observation, support, and feedback.

This is an approach that emphasizes joint problem solving, and two-way communication

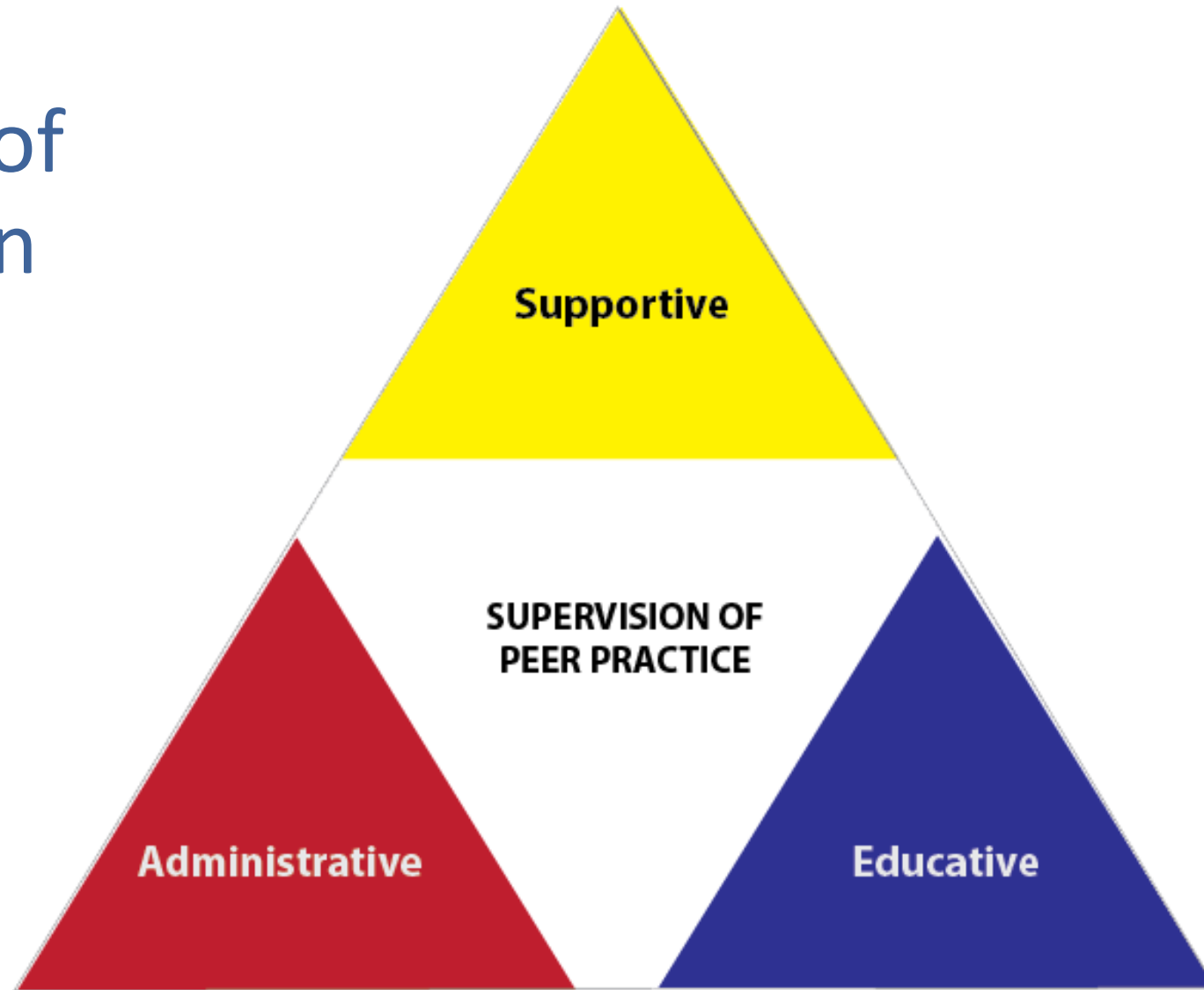
Strengths-based Supervision - 2

- Draws on individual's strengths and assets
- Collaborative process
 - Discover and amplify competencies
 - Identify and analyze successes
 - Set goals
 - Frame problems as learning opportunities
 - Self-assessment and feedback

Principles of Supervision of Peer Supports

- Supervision is an act(ion), not a role.
- Supervision is a strength-based process in which there is mutual accountability.
- Supervision enhances and develops the unique knowledge and skills necessary for successful peer practice.
- Supervision provides a safe space to address ethical dilemmas and boundary issues.
- Supervision engages peer practitioners in strengthening the PRSS program.
- Supervision fosters an organizational environment/culture that is conducive to recovery.
- Supervision clarifies organizational systems, structures, and processes.
- Supervision supports self-care

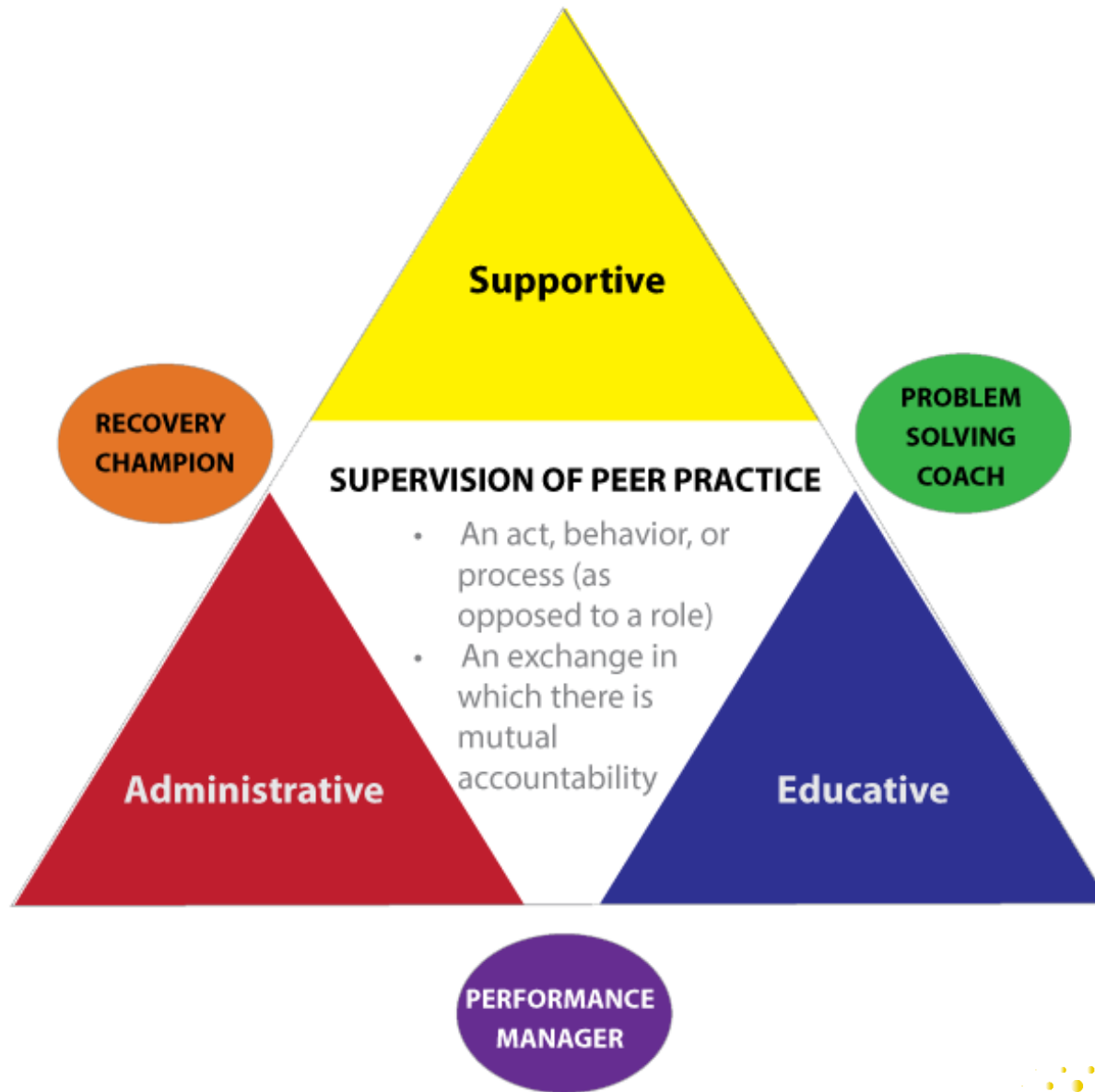
Functions of Supervision



BJA's Comprehensive

Opioid Abuse

Program



Supervision Competencies - Supportive

- Foster recovery-oriented philosophy
 - Understands peer role
 - Recovery orientation
 - Models recovery principles
 - Supports meaningful roles
 - Recognizes the importance of addressing trauma
- Facilitate quality service provision
 - Role clarity
 - Confidentiality
 - Ethics and boundaries
 - Accessibility
 - Staff safety
- Provide information, perspective, and validation on peer specialists' work

Key Areas for Supportive Supervision

- Keeping “peerness”
- Balancing peer workload
- Ongoing dialogue about ethics and boundaries
- Supporting self care
- Managing crises
- *Others?*

Supervision Competencies - Educative

- Provide regular space to reflect on content and process of peer role
- Facilitate staff development
 - Identify & evaluate peer competencies
 - Support ongoing training
 - Assist with professional system navigation

Supervision Processes for Competency Building

- Inquiry / facilitate understanding peer practice/ process
- Observation
- Feedback
- Facilitate peer worker self-assessment
- Mutual problem-solving
- Fostering knowledge and skills by instruction and modeling

Supervision Competencies - Administrative

- Ensure effective implementation of policies and procedures
 - Conformance, fidelity
 - Appropriate record keeping
- Maximize use of resources
 - Partnerships
 - Community resources
- Ensure compliance
 - Applicable laws and regulations
 - Employment practices

Supervisors Role in Preparing Organization for Peers

- How do you do this...
 - Foster recovery-oriented philosophy
 - Facilitate quality service provision
 - Provide information, perspective, and validation on peer specialists' work
 - Provide regular space to reflect on content and process of peer role
 - Facilitate staff development
 - Ensure effective implementation of policies and procedures
 - Maximize use of resources
 - Ensure compliance
- If your organization doesn't have this...
 - Recovery orientation
 - Clear, meaningful roles for all staff
 - Clear policies and procedures

Key Tasks

1. Conduct an organizational self-assessment → Recovery orientation
2. Clarify expectations and roles of peer staff → Meaningful roles
3. Orient, train, and dialogue with current staff → PRSS advocacy
4. Align policies with a recovery-oriented approach → Systems navigation

Expertise in the Room - 3

- What advice would you give to those who are thinking about or planning to add peer supports to their court?

Final Thoughts

A Renewed Vision

- ~~Recovery Works~~
- ~~Recovery is Possible~~
- **Recovery Is an Expectation!**