Peer Recovery in African American Communities: Lessons Learned from Federally Funded Projects

Building a Culturally Competent Peer Recovery Workforce

Jordan Peer Recovery
Lessons Learned

#1: Establishing Credibility

“Cannot just be a part of the club-establish leadership in it”
About US: JPR & Dr. Jordan

- **President & CEO of Dr. Masica Jordan, LLC** – A peer-led organization started in 2015, after losing multiple loved ones to substance use
- Licensed Clinical Professional Counselor
- Peer Recovery Specialist
- Peer Recovery Supervisor
- Doctoral and master’s degree in counseling/psychology
- Subject Matter Expert; Clinical evidenced based practices, research and program evaluation, recovery
- Commissioned minister; provides training and consultative services to churches and ministries globally
- Professor at Bowie State University
- Executive Director of Organizational Excellence at Volunteers of America Chesapeake
- Former Dean of Students at the SEED Public Charter School of Washington, DC
- Former Director of Clinical Services at Helping Up Mission
Lessons Learned

#2: Establishing a Track Record
JPR Experience
Implementing Peer Recovery Focused Federally Funded Projects in African American Communities
Previous Projects

Baltimore Population Health Workforce Collaborative & Baltimore Alliance for Careers in Healthcare (BACH)

Bowie State University
U.S. Department of Health and Human Services, Health Resources & Services Administration (HRSA)

The Mayor’s Office of Employment Development in partnership with Maryland’s Department of Labor, Licensing and Regulation (DLLR)

Volunteers of America Chesapeake
Federal Bureau of Prisons (FBOP)
SAMSHA

Houston Texas Sobriety Center

MD DLLR
• Project 1
• Project 2 (GROUND Work for Peers)

Washington DC, Maryland, Virginia

New York, Oregon, Texas, North Carolina, Colorado, Nevada, New Jersey
Lessons Learned

#3: The Benefit of Solid Partnerships
JPR Partnering Organizations

- ApexxAdams
- Volunteers of America Chesapeake (VOAC)
- Houston Recovery Center
- Friends of Recovery-NY
- Prince George’s County Health Department
- Prince George’s County State’s Attorney’s Office
- Prince George’s County Health Department
- American Prison Data Systems (APDS)
- Charm City Community Development

**COLLEGES & UNIVERSITIES:**

- Bowie State University
- Community College of Baltimore County
- University of the District of Columbia
- Asheville-Buncombe Technical Community College
Lessons Learned

#4: Essential Elements of Project Design
Essential Elements of Project Design

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JPR’s Culturally Responsive Training
JPR Training Portfolio

- 60-hour Core Curriculum
- NAADAC-approved training
- Offered in all 50 states
- National, IC&RC and State Certified
- In person, online, and hybrid training methods
JPR Specialty Trainings

- Essential Skills Training for the Peer Recovery Workforce
- Family Peer Recovery
- Peer Recovery for the LGBTQIA Community
- Peer Recovery & Serious Mental Illness
- Cultural Competency for the Peer Recovery Workforce
- Culturally Responsive Peer Recovery for Inner City Youth
- Culturally Responsive Peer Recovery for African American Males
- Culturally Responsive Peer Recovery for Minorities
- Trauma Informed Care
- Clinical Documentation Training
- Case Management for Peers
- Hospital-Based Peer Recovery
- Advanced Ethics for Peers
- Advanced Ethics for Peer Supervisors
JPR Specialty Trainings

- Opioid Recovery Support
- Forensic Peer Recovery
- Peer Recovery for College Students
- Peer Recovery for Executives
- Peer Recovery for Veterans
- Gambling Peer Recovery
- Peer Recovery Tools for Survivors of Sexual Assault
- Peer Recovery Tools for Survivors of Domestic Violence
- Supporting the Development of Effective Recovery Plans
- HOPE (HIV and other Blood borne Pathogens)
- Intro to Pharmacology for the Peer Recovery Workforce
- Emotional Alignment Training (for corporate groups)
- Peer Recovery Internship Course
JPR A-S-K Model

Jordan Peer Recovery's Cultural Development Model for Building a Culturally Responsive Peer Recovery Workforce
Developing Cultural Competence

Developing cultural competence is a process rather than an end point. The ASK-Jordan Peer Recovery model includes 3 components. The first includes a set of questions you will ASK yourself; the second includes ASK activities and the third includes questions you will ASK your peers to better deliver culturally responsive peer supports.

**WHO** - Who are you? Know who you are “culturally” to strengthen your capacity to deliver culturally responsive supports.

**WHAT** - What biases do you have? Be honest with yourself.

**WHEN** - When did you develop those biases? When is your earliest recollection of those biases being learned and/or expressed?

**WHERE** - Where did you learn those biases?

**WHY** - Why should you work to deconstruct those biases?

**HOW** - How have you benefited from those biases in the past? How can you move beyond those biases? How do you challenge others who express these biases?
Peer Recovery as an Evidence-Based Practice
1. Convert information need into an answerable clinical question
2. Track down best evidence for answering the question
3. Critically appraise the evidence for validity, impact & applicability
4. Integrate the evidence into your clinical decision making
5. Evaluate steps 1-4 and seek ways to improve next time

5 Steps of Evidence-Based Practice:

- **Assessment**: Clinical decision required
- **Ask**: Convert information need into an answerable clinical question
- **Acquire**: Track down best evidence for answering the question
- **Appraise**: Critically appraise the evidence for validity, impact & applicability
- **Apply**: Integrate the evidence into your clinical decision making
- **Audit**: Evaluate steps 1-4 and seek ways to improve next time

Adapted from Sackett et al 2011, Evidence-based medicine: how to practice and teach EBM
(RSES) is composed using domains that align with nationally recognized peer recovery workforce competencies as identified by SAMHSA, NAADAC, & IC & RC

The RSES has been used in projects funded by the Health Resources and Services Administration and Department of Labor
JPR Peer Recovery Workforce Assessments

PARS – Peer Advocate Readiness Screening
The PARS assesses peers using some of the RSES Domains prior to completing the core curriculum

J-FRAT – Family Readiness and Recovery Assessment Tool
Assists families in the recovery process by addressing the needs of those impacted by individuals affected by alcohol and substance use (siblings, parents, family members, community)

PAWER – Peer Advocate Wellness Evaluation & Rating
Both a quantitative (Rating) and qualitative (Evaluation) tool to assess peers in their own recovery process
Lessons Learned

#5: Tips for Implementing
# Essential Elements of Project Implementation

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