
Presented by: Matt DeMasi, MA

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Peer-led Support for Behavioral Health and Substance Misuse

Presented by: Matt DeMasi, MA

Chat
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Q&A

Chat:
Allows you to send chat messages to the host, panelists, and attendees (if permitted)

Question & Answer:
Open the Q&A window and you can ask questions to the host and panelists. They will either reply to you in the Q&A window or answer your question live.

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Webinar
Presenter
Matt DeMasi, MA

Presented by: Matt DeMasi, MA
The Power of Peers in Virtual Addiction Recovery Support

Matt DeMasi, M.A. (he/they)
Director of Care Delivery at Halcyon Health

Content to Cover

• Defining Recovery
• Peers throughout history
• Who Peer Recovery Coaches are
• What Peer Recovery Coaches do
• The Impact of Peer Recovery Coaches
• The Impact of COVID on Addiction Treatment
• Peer Recovery Coaches and Virtual Support

Defining Recovery

Presentation Check In

Check In Question 1:
Rate the extent to which you agree that Peer Support is vital to helping people achieve long-term recovery.

A. Strongly Agree
B. Agree
C. Neither agree nor Disagree
D. Disagree
E. Strongly Disagree

Defining Recovery

- Recovery as defined by SAMHSA
  "...a process of change through which individuals improve their health and wellness, live self-directed lives, and strive to reach their full potential."
- Four Components
  - Health - effective management of symptoms and achieving wellness in physical, mental spiritual, and other elements of health
  - Home - safe, stable, & secure living environment
  - Purpose - meaningful engagement in life as defined by the person and their cultural values
  - Community - supportive social environment and meaningful relationships

Defining Recovery - 10 Fundamental Principles

- Self-Direction
- Individualized and Person-Centered
- Empowerment
- Holistic
- Non-Linear
- Strengths-Based
- Peer Support
- Respect
- Responsibility
- Hope

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A Brief History of Peer Support

A Brief History of Substance Use in Colonized America
- 1830's - The Alcohol Republic
  - Americans aged 15+ drank an average of 7 gallons of alcohol per year.
  - Rise in drinking rates correlated with waves of immigrants from Germany and Ireland
  - Affected the labor force which was becoming increasingly unreliable
- 1840's - The Reaction
  - Temperance Societies began to form
  - They organized and began amassing 400,000 pledges of abstinence

A Brief History of Recovery Support Groups
- 18th - 19th Century - Native American Healing Circles
- 1840's - The Washingtonians
- 1840's - 1870's - Fraternal Temperance Societies
- 1870's - 1890's - Ribbon Reform Clubs
- 1870's - Drunkards Clubs
- 1914 - United Order of Ex-Boozers
- 1935 - Alcoholics Anonymous
- 1948 - Alcoholics Victorious
- 1953 - Narcotics Anonymous
A Closer Look At...

• 1840's - The Washingtonians
  - Secular in their approach, appealed to non-religious people
  - No prayer or preaching
  - "Experience Speech" delivered by a person in recovery
  - Emphasized on helping the person with the substance use concern
  - Provided financial support for families
  - Dance, singing and comedy shows: “taverns without alcohol”
  - Sponsored picnics, parades: “a popular culture of temperance for working class people”

A Closer Look At…(cont.)

• 1906 - The Emmanuel Clinics
  - Religious based support with emphasis on peer support
  - Sober social clubs
  - "Friendly Visitors" - Early sober companions for new members who made home visits

• 1908 - Jacoby Clubs
  - Their slogan: "A Club for Men to Help Themselves by Helping Others."
  - Emphasized fellowship and support of new members
  - "Special Brothers"

A Closer Look At…(cont.)

• 1935 - Alcoholics Anonymous (AA)
  - One the most influential developments in peer support for recovery
  - By 1940, there were paid positions offered
  - Heightened tensions between traditional healthcare providers and peer support professionals
  - Highlighted the needed connection between addiction treatment and ongoing recovery support

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Key Takeaways from Early Recovery Support

1. Hope and Motivation are key drivers of recovery success
   - Evidence continues to that that peer support helps with
     - reduced relapse rates
     - improved relationships with treatment providers
     - greater housing stability

2. Having a sense of belonging to a community is vital
   - One of the most common struggles is isolation
     - Isolation is a common trigger for relapse
     - Weak sense of community is associated with poorer stress management and isolation
     - The shared experiences between peer and those they support can support the development of a positive sense of community
     - Early peers set the stage for acting as advocates and helping connect those they supported to needed resources

Peer Recovery Support Today

Who Are Peer Recovery Support Professionals?
- A person with lived experience of addiction and recovery
- Can include family members
- Motivators
- Advocates
- Problem Solvers
- Community Resource Navigators
- Mentors/Role Models
- Sounding Boards

Who Are Not Peer Recovery Support Professionals
- AA Sponsors
- Therapists
- Psychiatrists
- Nurses
- Physicians
- Priests/Clergy

Qualifications
- There is no nationally recognized licensure for Peer Recovery Support Professionals
- There are certifications available:
  - NAADAC
  - CCAR
  - MHA - NCPS
  - RWJ Barnabas Health - Peer Recovery Program (Formerly OORP)
  - Massachusetts - CPS
- Certifications requirements vary but usually entail:
  - Coursework
  - Training hours of providing support
  - Supervision
  - Examination
  - Continuing Education
Peer Core Values and Principles

- **RECOVERY-ORIENTED**: hold hope, partner with, and guide towards achieving a meaningful life. Understanding that there are multiple pathways to recovery.
- **PERSON-CENTERED**: peer support is directed by the person receiving the support. Support is personalized based on the hopes, goals, preferences, and cultural needs of the individual being supported.
- **VOLUNTARY**: individuals should not be forced into peer support. Peer Support Professionals are partners or consultants to those they serve, not enforcers of programmatic adherence.
- **RELATIONSHIP-FOCUSED**: the peer-to-peer relationship serves as the foundation of the work. The relationship is built on respect, trust, empathy, collaboration, and shared responsibility.
- **TRAUMA-INFORMED**: peer support is strengths-based. Physical, psychological, and emotional safety are vital in order to allow those being supported to feel in control and empowered.

Peer Core Competencies

1. Engages peers in collaborative and caring relationships
2. Provides support
3. Shares lived experiences of recovery
4. Personalizes support
5. Supports recovery planning
6. Links to resources, services, and supports
7. Provides information about skills related to health, wellness, and recovery
8. Helps to manage crises
9. Values communication
10. Supports collaboration and teamwork
11. Promotes leadership and advocacy
12. Promotes growth and development

Benefits of Adding Peer Support

1. Sharing of their lived experience can be life-changing
2. Early intervention and recurrence/relapse prevention
3. Personalized support
4. Family support
5. Long-term support and outcomes tracking
6. Cost reductions in healthcare
Evidence for the Benefits of Peer Recovery Support

  - Literature review looked at a number of studies and found “peer recovery support demonstrated reduced relapse rates, increased treatment retention, improved relationships with treatment providers and social supports, and increased satisfaction with the overall treatment experience.”

  - “Peer support services have the potential to increase access to recovery-oriented services for people with mental and substance use disorders served by the public behavioral health care system.”

  - Interesting qualitative study with interviews from PSS, clients, and agency staff. They examined the social support that PSS provide during three different treatment phases: treatment, transitions in treatment, and recovery management.

  - Highlighted how peer services can provide an alternative to inpatient care and may also contribute to decreasing costs associated with hospitalization or incarceration. Also looked at recovery capital, life satisfaction and general well-being and saw moderate increases in recovery capital when working with peers.

  - This study has positive implications for peers’ ability to work with people with all different kinds of substance use disorders. It also highlights how ED’s in rural areas can benefit from having referral relationships with clinical and community-based support as both can be appropriate discharge resources based on the level of need of the person with the substance use concern.

Presentation Check In

Check In Question 2:
A major role of the Peer Recovery Support Professional is to give advice.
A. True
B. False

The Challenges for Peer Recovery Support

Challenges for Incorporating Peers
- Ambiguity and misunderstanding of the role
- Tension between clinical and peer support professionals
- Lack of funding
- Lack of reimbursement from health plans for peer support related services
- Lack of national licensure/accrediting body

Challenges for Peers in their Role
- Other professionals not understanding their role
- Lack of recognition for their work/role
- Wages tend to be low
- Lots of demand put on them
- Hard to maintain work-life balance
- Lack of appropriate training/ supervision at work
- Support sessions can be emotionally and mentally draining/triggering
Challenges for Accessing Peers

- People are not aware of the role
- People are wary of their credentials
- While increasing in number, programs with peer support available are limited
- Higher amounts of peers in urban vs. rural areas
- Stigma against seeking care for substance use
- COVID restrictions (…)

COVID and the push to Virtual Treatment

Presentation Check In

Check In Question 3:
What is your level of comfort in providing virtual support and/or healthcare services?

A. Very comfortable
B. Comfortable
C. Neutral
D. Uncomfortable
E. Very uncomfortable

Presentation Check In

Check In Question 2:
As compared to in person services & treatment, I feel digital/virtual support & treatment is:

A. More effective
B. About the same effectiveness
C. Less effective
D. No opinion

A New Wave of Treatment Options

- The pandemic has resulted in a number of relaxed government regulations that allow for expanded care
- Digital Therapeutics for the mental health space are BOOMING
- Mental health has had more innovation in this field than Substance Use order to date
  - But this is changing
- New care offerings include
  - Online MAT assistance
  - Online recovery groups (AA, NA, SMART, Refuge all made the switch)
  - Virtual IOP and OP
  - Virtual Recovery Coaching / Peer Support

Features of Digital Recovery Support Apps

- Dedicated Multi-Faceted Care Teams
- Care Navigators, Recovery Coaches, Medical Professionals, Therapists/Counselors
- Asynchronous chat capabilities
  - Some apps use AI / computer generated messaging
  - Others use real care team members to address issues in real time
- Video/Virtual Visits
- Individual/HIPAA compliant video visits with Care Team Members
- Virtual Group Support
- Medication Management/ Assistance
- Personalized Care Plans
**Benefits of Virtual Peer Support**

- Increased access for people in geographically challenging areas of the country
- Increased access for people who are unable to travel due to differences in mobility
- Ability to dedicate more time to focus on recovery without the pressures of travel or using public transportation
- More flexibility in work schedules to accommodate people's work and personal lives
- For families who move a great deal (i.e. military families) they may be able to keep their peer recovery support as they move from location to location
- Greater feelings of privacy and security
- Ability to be helped in real time and around the clock

**Challenges for Digital Peer Recovery Support**

- Competitive Landscape
- Focus, Funding, & Investment - how long will it last?
- Contracting and Reimbursement from Health Plans
- Challenges for addressing crisis situations
- MAT injectables, will need to find creative strategies for offering these medications
- Potential missed nuances of body language
- Technological divide

**Initial Findings of Digital Peer Recovery Support**

- Personalizing the intake process and allow for as much feedback about what the person seeking support is looking for in their recovery experience allows for strong peer to peer relationships
- When assessments are developed to include the direct experiences of those being supported, they are more likely to answer honestly
- When Peer Recovery Specialists are positioned as the primary point of contact in an app, it may decrease feelings of fear and increase engagement
- Wrap around virtual support which allows for more interactions on a weekly basis may reduce the amount of time it takes to build trust
- People who are engaged quickly, and do not encounter delays between sign up and intake may be more likely to stay engaged
- Increased engagement through app based support may lead to reductions in drinking severity and increased likelihood of long-term recovery
Initial Findings of Digital PRS (cont.)

- Virtual support can be an important link to reduce gaps in care and minimize the impact of transitioning from higher levels of care back to a person's community
- Asynchronous chat abilities allow for members to reach out when triggered and in crisis.
- Live and immediate responses by Peer Support may play a role in reducing avoidable ED utilization and quicker mitigation of crisis situations.
- We have seen people rate their levels of trust in their peer highly despite only engaging through the app and not meeting in person.
- We have also seen people rate the level of support they have received as the same or better than their traditional / in person supports.
- Reported increases in levels of hope for the future.

The Future Role of Peer Support

- More utilization, more recognition, more acceptance.
- Digital Therapeutics are primed to help this role explode.
- Peer support has proven that it is invaluable to recovery because of that shared experience.
- The relationships are key to helping people overcome barriers to long-term recovery.
- The use of apps to expand their reach and ability to provide services will help the community at large and the healthcare community better manage this condition.
- Therapists, Primary Care Physicians, Hospitals, Detoxes/Rehabs, IOPs and so many other levels of care could benefit greatly from linking with a digital recovery support program as it will enhance the experience for everyone.

Thank you!
Questions?

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UPCOMING WEBINARS

July 16th, 2021
Advances in Technology in the Addiction Profession, Part I: Digital Therapeutics - Clinically Validated Behavioral Treatments for Substance Use Disorders
By: Will M. Aklin, PhD
July 23rd, 2021
By: Matt DeMasi, MA
August 4th, 2021
Advances in Technology in the Addiction Profession, Part III: Engaging the Black Community - Keeping Focus
By: Matt DeMasi, MA

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OCTOBER 8, 2021, 11:00 AM – 6:00 PM ET
• Basics of Addiction Counseling Theories, Practices, and Skills
• Engagement in the Black Community: Keeping Focus

OCTOBER 15, 2021, 11:00 AM – 6:00 PM ET
• Addiction, Stigma, and Trauma: An ethical and treatment ambivalence (Spanish)
• Nicotine Use Disorders and Effective Treatment

OCTOBER 22, 2021, 11:00 AM – 6:00 PM ET
• Clearing the Smoke: Cannabis Update for Addictions Professionals
• The Criminal Justice System and Recovery

www.naadac.org/ac21-pre-conference-sessions

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**Advancing Awareness in LGBTQ Care Series**

www.naadac.org/advancing-awareness-in-lgbtq-care

<table>
<thead>
<tr>
<th>Part 1: History of Specialized Treatment for LGBTQ+ Clients</th>
<th>Part 2: LGBTQ Youth, Community &amp; Structural Issues</th>
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<tbody>
<tr>
<td>Presented by: Marci M. Curry, CCC, MA, CDA, NCC, PCC; Daniela M. Pinto, MA, CCC, NCC</td>
<td>Presented by: Mike Fricano, PsyD, and Jennifer Cross, LCSW, MSW, CAC-III</td>
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<tr>
<td>Friday, June 26, 2020, 8:30am - 11:30am ET</td>
<td>Friday, July 10, 2020, 8:30am - 11:30am ET</td>
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<th>Part 3: Working with LGBTQ2+ Patients and Clients</th>
<th>Part 4: Shaping Affirming Responses for the transgender “Invisible” LGBTQ2+ Populations</th>
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<tr>
<td>Presented by: Tom Robinson, LMSW, LMFT, ASAM, CAC-I; Jennifer Nolan, LGSW, ASAM, CAC-III</td>
<td>Presented by: Robert T. Tinterow, LCSW, CRP</td>
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<td>Friday, August 28, 2020, 8:30am - 11:30am ET</td>
<td>Friday, September 11, 2020, 8:30am - 11:30am ET</td>
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**NEW! NAADAC Specialty Online Training Series**

Advances in Technology in the Addiction Profession

www.naadac.org/advances-in-technology-online-training-series

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<th>Wellness and Recovery in the Addiction Profession Specialty Online Training Series</th>
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<td>NAADAC is proud to present its specialty online learning series Wellness and Recovery in the Addiction Profession. Upon completion of the six-part training series, participants may apply for the Certificate of Achievement for Wellness and Recovery in the Addiction Profession.</td>
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References

- Actionable items to address challenges incorporating peer support specialists within an integrated mental health and substance use disorder treatment system: Co-designed qualitative study. Journal of Participatory Medicine, 12(4), e17053–. https://doi.org/10.1080/07347324.2016.1182815

Thank You

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