

Research Update is published by the Butler Center for Research to share significant scientific findings from the field of addiction treatment research.

Peer Recovery Support: Walking the Path Together

Introduction

Friends and family members have long provided informal support for people with substance use disorders (SUDs). Peer-based recovery support places an ancillary approach to addiction treatment into the hands of those who know it best: people with “unique ways of knowing” because they have lived experience of SUD.¹ The recent growth in peer support services is aligned with the recognition that, for many people, addiction is a chronic condition, requiring a shift in treatment from an acute care model to one that provides a continuum of care.² Peer recovery support services are delivered across the diversity of locations where people with SUD are served, typically incorporated into the continuum of services offered. They may be available before, during, and in lieu of treatment.³ As a result, peer recovery support specialists work in community centers, recovery residences, drug courts, hospital emergency departments, homeless shelters, child welfare agencies, behavioral health facilities, and primary care offices.⁴ In 2019, 61.3% of 9,779 nonprofit, for-profit, and government facilities utilized peer support services according to the National Survey of Substance Abuse Treatment Services.⁵ As of 2018, 38 states reimburse for peer support services for SUDs, primarily as part of rehabilitative care.⁶

What is a Peer Recovery Support Specialist?

In addiction treatment settings, a peer recovery specialist is someone who is in recovery and uses their lived experience to help others in their recovery.⁷ Variations of the name include peer advocate, peer counselor, peer coach, peer mentor, peer wellness coach, and recovery coach.⁸ All refer to a one-on-one relationship in which someone with more recovery experience encourages, motivates, and supports a peer in establishing or strengthening his or her recovery.⁹

SAMHSA describes a dozen categories of core competencies to guide delivery and best practices in peer support, ranging from sharing lived experiences of recovery, engaging in recovery planning, providing links to resources and services, and help in managing a crisis.¹⁰

Table 1 describes the substance of what peer support specialists do.

Table 1

Peer Support Specialists:
Inspire hope that people can and do recover
Walk with people on their recovery journeys
Dispel myths about what it means to have a mental health condition or substance use disorder
Provide self-help education and link people to tools and resources
Support people in identifying their goals, hopes, and dreams, and help create a roadmap for getting there

Source: SAMHSA. Value of Peers. 2017.⁴

Certification is needed in order to work as a peer recovery support specialist. The National Association for Addiction Professionals requires candidates for certification to have:¹¹

- A GED, high school diploma, or higher diploma
- A minimum of two years of recovery from substance abuse or co-occurring mental health disorders
- A minimum of 200 hours as a volunteer or staff in a peer support recovery setting
- Sixty hours of peer-recovery focused training

According to a national peer specialist database, 47 states and the District of Columbia had peer specialist certification programs, which vary from state to state.¹²

THE HAZELDEN BETTY FORD FOUNDATION EXPERIENCE

Our peer recovery support team includes licensed professionals, who are trained addiction counselors, and peer specialists, who can provide virtual relapse prevention support. Our recovery coaches utilize Hazelden Betty Ford's MORE™ (My Ongoing Recovery Experience) program of recovery support. They can help patients find specific tools and resources within the MORE online platform as well as opportunities for face-to-face support with our alumni relations network of contacts, meetings and events. Our recovery coaches are a steady source of guidance and provide:

- Three dedicated phone coaching sessions
- Encouragement to set and reach personal goals
- Information on recovery contacts near the client
- Twelve Step and alumni chapter meeting schedules for the area
- Shared experience insights and inspiration
- Essential relapse-prevention strategies when sobriety is in jeopardy
- Activities and resources found in our online library
- Community resources to help with other life needs, including employment, housing, etc.

Peer Recovery Support: Walking the Path Together

Peer support in substance use recovery: What the research shows

Several literature reviews have assessed and demonstrated the benefits of peer recovery support in SUD populations. A systematic review of recovery-oriented approaches for people with alcohol and SUD identified nine studies for inclusion. The goal of recovery-oriented approaches is the promotion of abstinence and improved quality of life through use of a person-centered, individualized, multisystem continuum of care. Interventions ranged from a one-time motivational meeting with a substance use outreach worker who was in recovery to home visits by a trained peer support worker who accompanied the person to community aid groups. The reviewers concluded that in the majority of studies, participation of peers in recovery services had a positive effect on substance use outcomes (abstinence and decreased drug and/or alcohol use).²

Another literature review assessed the use of peer support groups, one aspect of peer recovery support services, in community settings for the treatment of addiction. Ten studies in the U.S. demonstrated benefits of peer support groups for patients with SUD in the following areas:¹³

- **Substance use:** Alcohol and drug users residing in recovery living housing had reductions in relapse rates and homelessness.
- **Treatment engagement:** Inpatients in a VA hospital showed lower rates of recidivism and increased adherence to post-discharge treatment appointments.
- **HIV/HCV risk behaviors:** HIV injection drug users showed significant reduction in injection practices that could transmit HIV to other users.
- **Secondary substance use behaviors (craving and self-efficacy):** Patients with SUD histories and criminality involved in the Peers Reach Out Supporting Peers Recovery (PROSPER) program demonstrated positive changes in self-efficacy, social support perceptions, quality of life, and decreased feelings of guilt and shame at 12 months.

To explore the role and efficacy of peer support workers in filling the gaps in existing treatment models for SUD to facilitate long-term remission, a systematic review of the literature identified 24 studies. The findings pointed to positive results related to reduced substance use and SUD relapse rates, improved relationships with treatment providers and social supports, increased treatment retention, and greater treatment satisfaction.¹⁴

While these research reviews demonstrate benefits gained from peer recovery support services, they also reveal the work still needed to be done to establish efficacy, effectiveness, and cost benefit of these services.¹⁴ Some of these investigators pointed out that self-selection into peer support groups and recovery homes may affect the results and make it difficult to generalize the outcomes¹³ and suggested the need for additional research to determine the effectiveness of different peer recovery support approaches in terms of amount, intensity (frequency), skill level of the peer worker, context of the service, and use in different target populations. Other areas to be explored include discerning for whom peer support is most useful, what training and certification is needed for peer support workers, and best practice models for the implementation of peer support.¹⁴

Conclusion

Peer recovery support specialists are filling gaps in the continuum of care for people with SUDs that is backed by evidence of the benefit of these services, although areas still in need of research remain. Numerous studies exist that evaluate a diversity of strategies for the treatment of drug and alcohol use, but at present, very few consider the utility of implementation science in this regard. More research is needed in the context of SUDs to identify best practices for peer recovery support workers and fill gaps in the promotion into practice of the most-effective treatment strategies for people seeking recovery.

References

1. Schwenk, E. B., Brusilovskiy, E., & Salzer, M. S. (2009). *Results from a national survey of certified peer specialist job titles and job descriptions: Evidence of a versatile behavioral health workforce*. The Temple University Collaborative on Community Inclusion. Philadelphia, PA. tucollaborative.org/wp-content/uploads/CPS-Survey.pdf
2. Bassuk, E. L., Hanson, J., Greene, R. N., Richard, M., & Laudet, A. (2016). Peer-delivered recovery support services for addictions in the United States: A systematic review. *Journal of Substance Abuse Treatment, 63*, 1–9. doi.org/10.1016/j.jsat.2016.01.003
3. Reif, S., Braude, L., Lyman, D. R., Dougherty, R. H., Daniels, A. S., Ghose, S. S., Salim, O., & Delphin-Rittmon, M. E. (2014). Peer recovery support for individuals with substance use disorders: Assessing the evidence. *Psychiatric Services, 65*(7), 853–861. doi:10.1176/appi.ps.201400047
4. Substance Abuse and Mental Health Services Administration. (2017). *Value of Peers*. samhsa.gov/sites/default/files/programs_campaigns/brss_tac/value-of-peers-2017.pdf
5. Substance Abuse and Mental Health Services Administration. (2020). *National Survey of Substance Abuse Treatment Services (N-SSATS): 2019. Data on Substance Abuse Treatment Facilities*. samhsa.gov/data/data-we-collect/n-ssats-national-survey-substance-abuse-treatment-services
6. Medicaid and CHIP Payment and Access Commission (MACPAC). (2019). *Recovery Support Services for Medicaid Beneficiaries with a Substance Use Disorder*. macpac.gov/wp-content/uploads/2019/07/Recovery-Support-Services-for-Medicaid-Beneficiaries-with-a-Substance-Use-Disorder.pdf
7. Hazelden Betty Ford Foundation. (2021). *How does a peer recovery specialist compare to an addiction counselor?* Retrieved July 12, 2021, from hazeldenbettyford.org/articles/graduate-school/recovery-specialist-vs-addiction-counselor
8. International Association of Peer Supporters (INAPS). (n.d.). *What is a peer supporter?* Retrieved July 12, 2021, from na4ps.wordpress.com/definition-peer-specialist/
9. Center for Substance Abuse Treatment. (2009). *What are Peer Recovery Support Services?* (HHS Publication No. SMA09-4454). U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration. store.samhsa.gov/product/What-Are-Peer-Recovery-Support-Services-/SMA09-4454
10. Substance Abuse and Mental Health Services Administration. (2015). *Core competencies for peer workers in behavioral health sciences*. samhsa.gov/sites/default/files/programs_campaigns/brss_tac/core-competencies_508_12_13_18.pdf
11. NAADAC, the Association for Addiction Professionals. (n.d.). *National Certified Peer Recovery Support Specialist (NCPRSS)*. Retrieved July 12, 2021, from naadac.org/ncprss
12. Copeland Center for Wellness and Recovery, Inc. (n.d.). *Is there a state-endorsed certification process?* In *Peer Specialist Database*. Retrieved July 12, 2021, from copelandcenter.com/peer-specialists
13. Tracy, K., & Wallace, S. P. (2016). Benefits of peer support groups in the treatment of addiction. *Substance Abuse and Rehabilitation, 2016*:7, 143–154. doi.org/10.2147/SAR.S81535
14. Eddie, D., Hoffman, L., Vilsaint, C., Abry, A., Bergman, B., Hoepfner, B., Weinstein, C., & Kelly, J. F. (2019). Lived experience in new models of care for substance use disorder: A systematic review of peer recovery support services and recovery coaching. *Frontiers in Psychology, 10*:1052. doi.org/10.3389/fpsyg.2019.01052