Peer Support: The Power of Connection

Topher Jerome, Project Director

Emergency Response for Suicide Prevention Program (ERSP)

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Learning Objectives

Participants of this presentation will be able to:

| Identify | Identify the major reasons why peer staff can develop trusting relationships that inspire hope and recovery with people who are suicidal. |
|----------|---|
| Describe | Describe how digital technology combined with peer support in crisis settings supports recovery and can save lives of people who are struggling with suicide. |
| Explain | Explain the challenges of implementing peer support programs including program adoption issues and funding challenges. |



My Story in Brief: A Journey into Recovery

- Early background
- Substance use and mental health recovery
- Accidentally learned how my story impacted another – led me to peer support work
- Stigma I encountered as a peer supporter
- My work to expand peer support in WA State
- Staying well in this work





Peer Support: The Power of Connection

Peer Support Specialists are people who have lived experience with behavioral health challenges, including those who have made suicide attempts or considered suicide

- Trust happens quickly when people have the experience of "You get me." The sense of hope, connection and the belief they can recover happens in a way that some people may never have experienced
- Shared experiences support open and honest communication. The phenomenon of "telling them what they want to hear" fades
- Peer Support Specialists have learned to manage many of the same challenges those they are helping may be living with, making them uniquely qualified to assist others in their recovery journey





Needs to Recovery: The Intersection of Support

Basic Needs

- Consistent shelter
- Basic food
- · Basic clothing
- Basic hygiene
- Attend to life threatening/severe medical issues
- Reduce psych hospitalizations
- Reduce incarcerations
- Stabilize income-budget for basic needs
- Stabilize symptoms
- Harm reduction of substance abuse so that acquiring, and retention of basic needs are not interrupted



Quality of Life

- Higher level of basic needs (i.e. keep apt. clean, clothes washed and neat, starting to make better food choices, always attend to grooming and hygiene, physical fitness, etc.)
- 0 psych Hospitalizations
- 0 Incarcerations
- Improved Interpersonal Relationships
- Incorporation of "Normative Activities" (volunteer, work, school, etc.)
- Movement from solely objective reasons to more subjective reasons for doing things



Clinical Support

Life Satisfaction

- Basic need secure with confidence that any problems can be problem solved
- Meanings and purposes in life
- "Normative Activities" producing a source of well being beyond just distraction from symptoms
- Community Involvement (Social networking, spiritual communities, etc.)
- Interpersonal effectiveness and satisfaction
- Having a life worth living

HARBORVIEW

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peer Support



Technology @ Point of Care + Peer Support

Tablet Based App, Jaspr Health

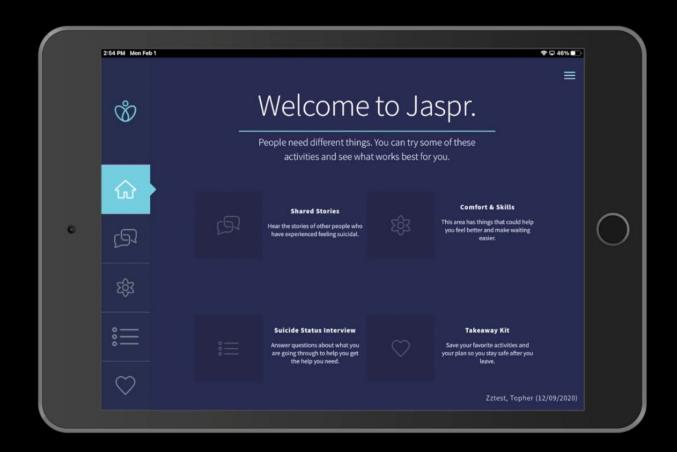
- Suicide status interview based on CAMS
- Lethal means counseling
- Suicide safety planning (Stability Plan)
- Shared stories videos from people with lived experience
- Psychoeducational skill building to reduce distress and teach coping skills
- Companion Smart Phone App

Post Crisis Follow-up Support by Peers

- Provide caring support while in crisis care setting and post discharge
- Assistance in connecting and following-up with behavioral health programs
- Connecting with natural supports and recovery support programs



Jaspr Demo





"I had a conversation with my social worker some time back that was difficult to handle, and it triggered a lot of anger and I wasn't going to my appointments after that. I thought of one of the videos we watched together last week and I just had it on the back of my mind, and I was able to stay calm when I met with my social worker this time. I felt happy. I shared this with my social worker and she said I had made her day. I am eager to watch the videos you are going to show me today."

"You saved my life on multiple occasions, and I wouldn't be where I am without you. Please keep doing what you're doing because you're really helping people."

"This is one of the best experiences I've ever had in a hospital."

"Your compassion and caring which touches my heart. I'm not doing it alone this time. I feel that way for sure"

"I watched a video of Ashley on my phone. She was talking about feeling your feelings but then to move on or something. I get a lot of emotions that I don't think I can stand, but her story reminded me that I can get through it."



"So this coming out of the psych ward this time with the Jaspr program gave me a lifeline I never had before."

I wish we could clone you like 1 million times and have you go out into the USA and make it a wonderful world with your beautiful spirit. A Namaste'



"I was and now with the start of my journey I have Jaspr. 🏺 I'm blooming I'm alive. Thank you! Thank you!"

"Honestly thank you so much for all your help. You came into my life at the right time when I needed it most. My mom even knows how much you helped me and would tell me to call you when I was having a really bad panic attack. Thank you so much-you really helped me a lot."



Developing Peer Support Programs

Implementation

- Develop clear plan, anticipate barriers, don't start from scratch. Plug & play doesn't work.
- Leadership buyoff (top down, bottom up)
- Address stigma
- Understand, teach and adhere to recovery values
- Listen to concerns from all disciplines
- Deal with, don't ignore, resistance to change
- Balancing act: Not pushing too hard while also insisting
- If you build it, they will come
- Supervising peers
- Celebrate successes publicly

Funding

- Strategies widely vary get creative and look for examples from other regions/states
- Peer support is Medicaid reimbursable
- Increasingly grants and programs include a mandatory peer element
- Low cost, high impact (nevertheless, peers are not paid nearly enough for the work they do)



Stigma – We Need to Change

Us vs. Them Bias

Even though there is substantial evidence that peer support is effective in ways traditional therapies are not, adoption has many challenges, often rooted in biases

- •Stigma at all levels: From system to individual
- Wage inequities
- Language use
- Appeasing, but not believing
- Peer staff often work in stigmatizing environments

- Staff experience burnout and don't hold hope that people can, and do, recover with the appropriate support
- Staff can be unkind to people who are there for help
- Not addressing, says it's okay

Take Action

We need you to be an advocate for change

- Contact your legislators
- Urge leadership
- Include people with lived experience at all levels of decision making
- Address stigma
- Become a recovery champion
- Think about your words
- Celebrate resiliency





QUESTIONS?

Topher Jerome

Project Director

Harborview Medical Center - Behavioral Health Institute

Behavioral Health Training, Workforce and Policy Innovation Center 325 9th Ave, Box 359797 Seattle, WA 98104

Email: jerchris@uw.edu
Desk: (206) 744-9795

