What is Peer Support?

Peer support encompasses a range of activities and interactions between people who share similar experiences of being diagnosed with mental health conditions, substance use disorders, or both. This mutuality—often called "peerness"—between a peer support worker and person in or seeking recovery promotes connection and inspires hope. Peer support offers a level of acceptance, understanding, and validation not found in many other professional relationships (Mead & McNeil, 2006). By sharing their own lived experience and practical guidance, peer support workers help people to develop their own goals, create strategies for self-empowerment, and take concrete steps towards building fulfilling, self-determined lives for themselves.

What do Peer Support Workers do?

A peer support worker is someone with the lived experience of recovery from a mental health condition, substance use disorder, or both. They provide support to others experiencing similar challenges. They provide non-clinical, strengths-based support and are "experientially credentialed" by their own recovery journey (Davidson, et al., 1999). Peer support workers may be referred to by different names depending upon the setting in which they practice. Common titles include: peer specialists, peer recovery mentors and peer recovery support specialists.

Peer Support Workers:



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 creating a roadmap for getting there

Where to find PSWs?

Peer support workers practice in a range of settings, including peer-run organizations, recovery community centers, recovery residences, drug courts and other criminal justice settings, hospital emergency departments, child welfare agencies, homeless shelters, and behavioral health and primary care settings. In addition to providing the many types of assistance encompassed in the peer support role, they conduct a variety of outreach and engagement activities.

mental health and addictions

PEER SUPPORT

Peer Support allowed me to feel « normal ».

-John

When I saw that other people recovered, it gave me hope that I could too.

Peer Support has been there for me no matter what, and now I am able to help others...

-Kelly

-Daniel

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Does Peer Support make a difference?

Emerging research shows that Peer Support is effective for supporting recovery from behavioral health conditions.

Benefits of Peer Support may include:

How does Peer Support help?

The role of a Peer Support Worker complements, but does not duplicate or replace the roles of therapists, case managers, and other members of a treatment team. Peer Support Workers bring their own personal knowledge of what it is like to live and thrive with mental health conditions and substance use disorders. They support people's progress towards recovery and selfdetermined lives by sharing vital experiential information and examples of the power of recovery. The sense of mutuality created through thoughtful sharing of experience is influential in modeling recovery and offering hope (Davidson, Bellamy, Guy, & Miller, 2012).

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Increased sense of hope and inspiration (Davidson et al., 2006; Ratzlaff, McDiarmid, Marty, & Rapp, 2006)

Increased sense that treatment is responsive and inclusive of needs (Davidson et al., 2012)

Increased empathy and acceptance (camaraderie) (Coatsworth-Puspokey, Forchuk, & Ward-Griffin, 2006; Davidson et al., 2006)

Increased social support and social functioning (Kurtz, 1990; Nelson, Ochocka Janzen, & Trainor, 2006; Ochoka et al., 2006; Trainor, Shepherd, Boydell, Leff, & Crawford, 1997; Yanos, Primavera, & Knoght, 2001)

Raised empowerment scores (Davidson et al., 1999; Dumont & Jones, 2002; Ochoka, Nelson, Janzen, & Trainor, 2006; Resnick & Rosenheck, 2008)

Increased sense of control and ability to bring about changes in their lives (Davidson et al., 2012)

Increased self-esteem and confidence (Davidson et al., 1999; Salzer, 2002)

Increased engagement in self-care and wellness (Davidson et al., 2012)



Decreased psychotic symptoms (Davidson, et al., 2012)

Decreased substance use and depression (Davidson, et al., 2012)

Reduced hospital admission rates and longer community tenure (Chinman, Weingarten, Stayner, & Davidson, 2001; Davidson et al. 2012; Forchuk, Martin, Chan & Jenson, 2005; Min, Whitecraft, Rothbald & Salzer, 2007)

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