

IRIS Fellowship Research Project Write Up

Research project title: A Review of Literature on the Benefits of Peer Support Specialists in Treatment Settings Serving Women with Substance Use Disorder

Researcher/Fellow name: Carressa Christian

Introduction

Studies have consistently shown a greater prevalence of substance use disorder (SUD) among males relative to females. For example, data from the National Survey on Drug Use and Health (2019) among American individuals 12 years of age and older indicate that males use more tobacco, alcohol, and illicit substances compared to females. Yet, females are exposed to different experiences and challenges when using substances. For example, females face specific types of stigmatization related to substance use that males do not, due to societal conceptions of gender roles. Females are sometimes perceived as lacking morals, being promiscuous in their sexual lives, and being neglectful in their roles as mothers (SAMHSA, 2013). These experiences impact the likelihood of recovery among women.

As a long-time provider, of recovery support services and agency manager, I have seen so many women entering residential treatment with so much fear of the unknown. I feel a peer support specialist would be a great asset in relieving some fear and questions of the unknown for these women. Many women come into residential treatment and do not want to attend twelve-step support groups. So, where do they go to get this support? Do they just get it from their clinician whom they must take the time to build a rapport with, or would it be beneficial for them to also get the support entering treatment with someone they feel they can relate to like a peer support specialist?

In the article "Peer Recovery Support Specialist: Enhancing Recovery one life at a Time," Bridge the Gap (n.d.) describes the benefits of these services:

"The relationship with the Peer Support Specialist is critical to the counseling dynamic. A Peer Recovery Specialist (PRRS) can effectively interact with clients at a level that a clinician cannot. The empathy that can flow from these individuals is rooted in real-life experiences. They know first-hand the pain, the struggles, the growth, and the reward of hard work. They can cultivate a rapid and deep level of rapport by utilizing their "experience, strength, and hope" and meeting the client exactly where he or she is struggling the most.

I feel the missing link in residential treatment for women is a safe person to whom they can relate as soon as they arrive at treatment. There should be a peer support specialist assigned to every new woman entering residential treatment. I feel this would help with the retention rate of women remaining in residential treatment. The present

project aimed at gathering information from the literature to shed light on the possible advantages and disadvantages of this approach.

Methods

The method I used to conduct this research is a literature review that covers three articles relevant to peer support services with women in residential recovery programs. I searched academic databases and the internet, as well as drawing from my professional experience and that of colleagues in the sector. Terms used for the search included women, residential treatment, women with children, and pregnant women, as well as peer specialists,

Results

The three studies covered in this paper used qualitative research methods designed through semi-structured interviews and focus groups. The participants selected had certain criteria they had to meet to be a part of the study. The analysis of data was performed using thematic analysis. Thematic analysis is a method for analyzing qualitative data that involves reading through a set of data and looking for patterns in the meaning to find common themes. It is an active process of reflexivity in which the researcher's subjective experience is at the center of making sense of the data. With this analysis, you can look at qualitative data in a certain way. It is usually used to describe a group of texts, like an interview or a set of transcripts. The researcher looks closely at the data to find common themes, repeated ideas, unique but important topics, or interesting ways of putting things that can become direct quotes, or *in vivo* data.

Article summaries: Table 1 provides a summary of the three articles covered in this review, with the paragraphs below also providing valuable insights. Here is a brief description of each paper.

1. Olding et al. (2022): Three one-hour focus groups were held with mothers enrolled in perinatal programs in Vancouver. All three programs included in the study support pregnant women and new mothers that used illicit substances and alcohol. One was in a maternity unit and the other two were in community programs. Focus groups used a semi-structured guide that asked about the mothers' experience with peer support workers. This qualitative study identified four major themes, based on participant's perspectives 1) "It's good to have peer support, but they should offer them jobs," 2) "There is a different sort of relationship," 3) "You know if they can do it, I can as well," and 4) "Anything to keep you connected to moms."
2. Gruß et al., (2021): At the time of the research, 14 women were enrolled in the group. At the time of publication, 54 women were enrolled with 13 participants

participating virtually in a group. All patients' interviews were conducted after their pregnancy. Three themes emerged following data analysis. The themes represented benefits the women experienced by having peer support: 1) "Sustained engagement in and accountability for participation in SUD treatment, 2) Access to well-coordinated medical and social support resources; 3) Establishing a community around motherhood to learn self-acceptance and experience validation"

3. Scannel (2021): The participants for the study were ten peer support workers from Massachusetts. Four were in an emergency care setting and six were in a community-based setting. Four themes emerged. They are "1) establishing credibility, 2) managing systematic barriers, 3) the scope of practice, and 4) the importance of ongoing supervision"

One common theme with the results of these papers is the benefits that women experienced from working with peer support specialists. Active participation with peer support specialists was key in the recovery process and in sustaining abstinence from alcohol/drugs for study participants. There was a mutual benefit between peer support specialists, clinicians, and patients. Peer workers are in long-term recovery and benefit positively from positive feedback from supervisors. It increases peer support specialists' self-esteem, confidence, and positive feelings of accomplishment. For the women who participated with peer support specialists in these three studies, they spoke about increased treatment retention, improved relationships with treatment providers, social support, increased satisfaction, and reduced relapse rates. These are just some of the benefits reported.

Discussion

I believe that further research is needed to investigate the effectiveness of peer support with women in residential recovery programs. Future studies could also explore other avenues to integrate peer support specialists and provide a greater awareness of the advantages of using peer support specialists in various workforce settings.

A key limitation of this literature review is the small number of articles included and the selection of articles was not done systematically. As there were no literature reviews of any type on this topic identified in my searches, it is recommended that future research include a greater number of studies and that the review be done systematically. This will help us get a better sense of what is known, and what is still left to be studied.

In conclusion, peer support specialists do not replace the formal treatment individuals need to manage their SUD, psychiatric condition, or high-risk situation, but they do add an extra layer to treatment that has clear benefits. Integrating more peer

support specialists into the workforce, across various settings including residential programs for women, would be beneficial to clients in recovery.

Table 1. Summary of Three Included Studies

Authors, date	Study population, sample size	Primary aims	Research design	Measures	Primary outcomes
Grub, et al. (2021)	Conducted 16 semi-structured interviews with women and staff who participated in an integrated care initiative for pregnant and postpartum women with SUD focusing on participants' experiences with the support group. The data were analyzed following a thematic analysis approach.	This study demonstrates the important role a peer support group within an integrated treatment program can play in supporting mothers in their recovery.	A qualitative design with thematic analysis	Semi-structured interviews	Three themes emerged that captured the benefits women felt they received from the peer support group: 1) sustained engagement in, and accountability for, participation in SUD treatment, 2) well-coordinated access to medical and social support resources, and 3) establishing a community around motherhood to learn self-acceptance and experience validation.
Olding et al. (2022)	Conducted focus groups	This study is about perinatal	A qualitative design with a	Focus groups	Participants characterized

	<p>with 20 mothers enrolled in three perinatal substance use programs serving the greater Vancouver area, including two community-based programs that employed peer workers and an acute care maternity ward that did not.</p>	<p>substance use programs that employ multidisciplinary teams to support women who use drugs through pregnancies and parenting, with some programs expanding to include peer support workers with lived experience of parenting and substance use. Research has shown peer support to enhance care in substance use treatment; however, little research exists that examines this model of support within perinatal substance use programs.</p>	<p>thematic analysis</p>		<p>peer support workers as extending and complementing informal care practices already occurring within programs, including mother-to-mother support with breastfeeding, childcare, and system navigation. Integrating peer workers shifted care relations and practices in ways that participants found beneficial. Participants emphasized how support workers with similar social locations and life experiences-beyond just their substance use-helped to foster trust and safety for mothers in the program.</p>
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Scannell, C. (2021)	10 PSWs from MA (7 male, 3 female) all working in programs through a ROSC with 4 in emergency care settings and 6 in community-based settings.	This study concentrated on PSWs who were paid to deliver nonclinical support to people in recovery in emergency care and community-based settings.	A qualitative design with a thematic analysis	Semi-structured interviews	From the transcripts, four distinct themes were apparent: establishing credibility, managing systemic barriers, the scope of practice, and the importance of ongoing supervision.
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References

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