

Breaking Down Barriers and Implementing Effective Strategies for Peer Workforce Integration

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BACKGROUND

With the rise of self-reported substance use disorder reaching 1 in 7 Americans and overdoses in 2021 surpassing 100,000 deaths, there is a pressing need for substance use care and action¹. Maryland has the second highest opioid-death rate in the United States², with black citizens and the city of Baltimore disparately impacted^{3,4}. As a vital part of the recovery care system, peers are beneficial to improving the lives of substance use patients. Not only do they provide empathetic and non-judgmental support⁵ peers link clients community resources and act as a bridge between clinicians and those in recovery⁶. As the Maryland peer support workforce has grown in the past twenty years, many barriers to peer workforce integration have arisen, impeding the success of peer support workers and their care to their patients. This position paper aims to examine the components to effective peer workforce integration (PWI), barriers that inhibit effective PWI, and current and prospective strategies for more effective PWI.

METHODS

This study was conducted by both IRIS staff and IRIS Recovery Research Fellowship (RRF) Members over the span of 10-months. The IRIS RRF (n=17) consists of peers, clinicians, managers, trainers, advocates, and academics who engage with each other on the topics of opioid use and peer recovery systems. The content of this paper was drawn from academic and grey literature; interviews with key peer recovery stakeholders and input from the RRF participants. The stakeholders (n=9) and leaders interviewed held positions in hospitals, grassroots organizations, peer advocacy initiatives, and within the criminal justice system as either directors, peer advocates, or CEOs.

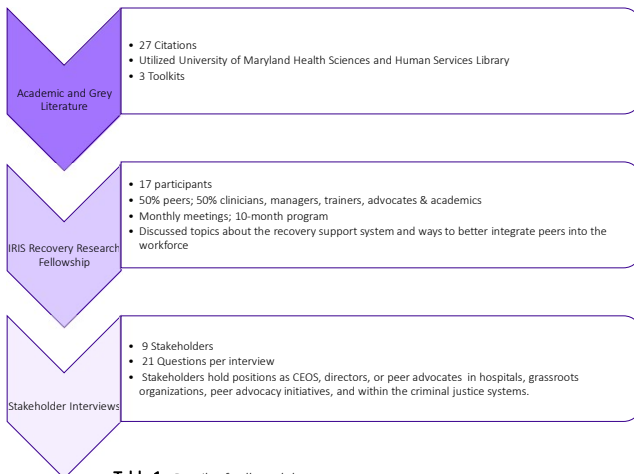


Table 1. Details of collected data.

Reinforcing the value and benefit of peers through open communication, improved financial compensation and the development of systematic and educational trainings are some of the most effective ways to implement peers into the workforce; continuous advocacy and educational awareness are imperative to further effectively incorporate peers into the workforce.

BARRIERS	STRATEGIES
Unrecognized benefits of peer services	Create mechanisms for interdisciplinary dialogue and collaboration
Lack of clarity on the peer role	Prepare both peers and organizations for PWI in newer work settings
Stigma towards peers	Enhance education and advocacy on peer role and approach
	Support for peers through peer-delivered supervision
Poor unsustainable funding	Spur greater financial security for peer positions
Lack of centralized coordination for the peer profession	Develop entities and initiative to provide unified support for PWI

Table 2. Barriers and strategies gathered from literature, stakeholder interviews, and RRF Fellows' input.

RESULTS

Effective PWI may be defined as fostering a culture of mutual respect, creating clarity around peer roles, and providing wages and benefits aligned with peers' value. Identified barriers were: 1) under-recognized benefits of peer services, 2) lack of clarity of the peer role, 3) stigma towards peers, 4) poor and unsustainable peer financing and 5) lack of centralized entity for PWI coordination. Strategies for effective PWI were: 1) build on evidence base for peer services, 2) better prepare peers and organizations for PWI, 3) create spaces for interdisciplinary dialogue and collaboration, 4) provide greater financial security for peers, 5) expand peer-delivered peer supervision, and 6) develop centralized coordination for PWI. Multiple strategies can be applied to singular barriers (see Table 2).

DISCUSSION

As defined in the results, a definition for effective PWI was pulled from collected data. By developing a definition for PWI this allows for operative direction when attempting to integrate peers. To help maintain clarity of the peer role between clinicians and other colleagues, consistent communication channels and collaborations where all contributions are valued is essential. As a large portion of peer funding originates from federally or state funded grants, establishing secure and sustainable funding is important in maintaining peer employment. Advocates and policymakers should continue to push an expansion of Medicaid reimbursement, making sure it truly benefits peers. To lessen confusion and stigma surrounding the peer role, organizations should provide training and ongoing support for peers and non-peer staff. While there is much evidence supporting the strategies to achieve effective PWI, further methodological research on peer-delivered services, can further validate the unique value peers bring to the recovery workforce.

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