

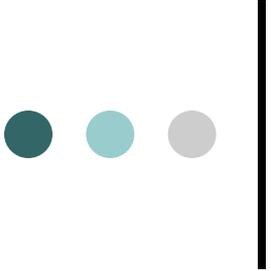


# The Power of Peers

County of Los Angeles  
Department of Mental Health

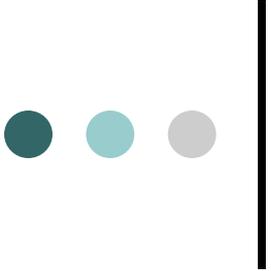
John Sheehe, MSW  
Office of the Medical Director

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Adult System of Care



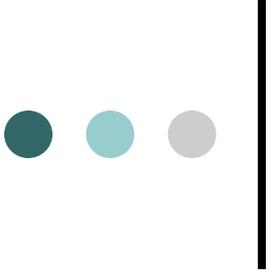
# History of Peer Support

- Recovery
  - “A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.” (SAMHSA 12/22/11)
- Movement found traction in the 1970’s
- Substance Abuse Recovery Community
  - AA & NA and Social Model treatments
- Project Return, DBSA, Emotional Health Anonymous, SHARE!
- Mental Health Services Act (MHSA) - 2004



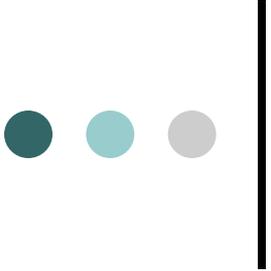
# MHSA in Los Angeles County

- Ensured the inclusion of peers and family members in program planning and implementation thru stakeholder process
- Ensured the inclusion of peer support in Full Service Partnership (FSP) programs and non-FSP outpatient levels of care in Los Angeles County including Wellness/Client Run Centers and Field Capable Clinical Services (FCCS)



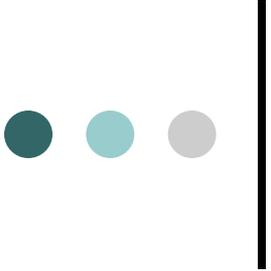
# Peer Roles in Treatment

- Providing peer counseling and support
- Assisting participants in crisis and offering alternatives to traditional crisis supports (Warm lines, etc.)
- Serving as members of the treatment team to ensure a peer perspective
- Assisting with locating and accessing resources including housing, employment, benefits, and other basic needs
- Accompanying participants to appointments
- Serving as a community connection



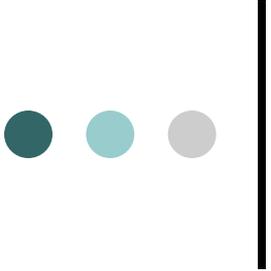
# Peer Inclusion on Treatment Teams

- Peer relationships with participants
- Definition of “Peer” for your program
- Peer perspective on strength based treatment strategies
- Peer ability to spend time with a participant
- Linkage with community self-help groups



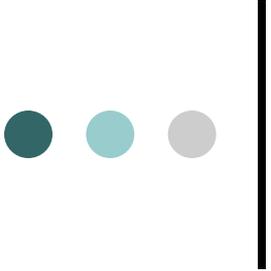
# Support and Supervision

- Peers function as any other team member
- Supervision focused on supporting the unique relationship between peer staff and consumers
- Accommodations – same as for all other employees



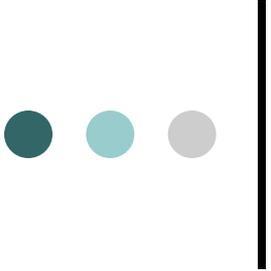
# Peer Volunteer and Employee Projects

- Service Extenders - Older Adult Programs
- Wellness Outreach Workers (WOW) – Adult Programs
- Co-Occurring Disorder (COD) Peer Advocates
- Client Leadership
- Security Ambassadors
- Peer Health Navigators
- Peer to Peer Tobacco Cessation Support



# Challenges

- Ensuring a clear role for peer workers and staff
- Preparing the workplace and workforce for peer workers
- Ensuring an equal role as part of a team



# Next Steps -

- Career Ladder
- Building Peer Support Networks
- Training Needs
  - Peer Staff
  - Supervisors
- Promotion of Leaders

Peers' role in integrated health services



# So Why Target Tobacco Use among Consumers?

Persons with Mental Illnesses & Addictions are:

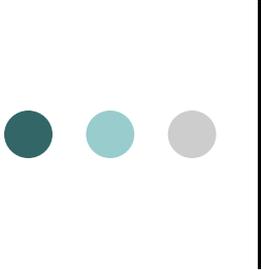
- Nicotine dependent at rates 2-3 times higher
- Represent over **44%** of the U.S. tobacco market
- Consume over **34%** of all cigarettes smoked

(Lasser K et al: JAMA 284:2606-10, 200)

Persons with behavioral health disorders die up to **25 years** earlier than the general population

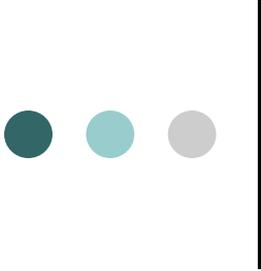
(NASMHPD, 2006)

Most smokers want to stop and half try to stop annually



# Smoking Cessation Movement

- 2008 Statewide public health efforts begins
  - Grant money became available for public health efforts to mental health consumers in LA County
  - Coincides with the MHSA peer movement
- December 2008-Initiate collaboration between Dept. of Public Health and Dept. of Mental Health
  - Establish an online survey to assess attitudes
  - Developed a 3-Part Action Plan
    - Train peer advocates and substance abuse counselors
    - Train mental health front line staff with a brief intervention
    - Provide Educational training to mental health clinicians on effective tobacco cessation modules



# Kickoff: Online Survey of Attitudes

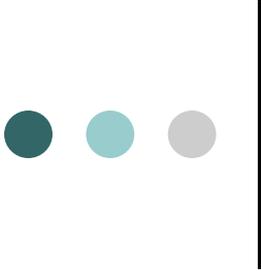
- Measured attitudes and knowledge about tobacco cessation
  - Including: readiness to integrate interventions and receptivity to smoke-free policies
- Approximately 1,000 mental health and substance abuse providers in LA County were administered this online survey
  - 554 providers completed survey

# Gained Consumer Support through Contest

- Consumers participated in an art competition
- Winning designs were used for various marketing purposes
- 16 entrants were honored at a reception

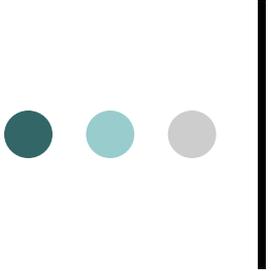


Artwork by Brenda Settles,  
Mental Health/Tobacco Control  
Art Contest Winner



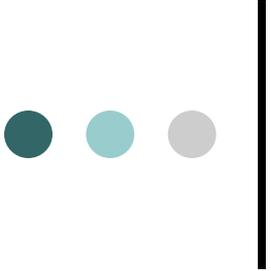
# Part 1: Peer to Peer Quit Smoking Program

- The University of Colorado at Denver and Health Sciences Center.
- Targeted to Peer Advocates or Counselors currently working with mental health consumers or people with substance abuse issues
- Why Peers?
  - “a Peer Advocate, may be somebody that’s smoked and quit smoking and they have ideas of how they dealt with stress at times and how they deal with it now...” (consumer participant from Colorado group, 2006)
- The Peer Support Network keeps growing!
  - 2009- 82 attendees
  - 2011- 116 attendees
  - 14 Peer to Peer Quit Tobacco Wellness programs up and running



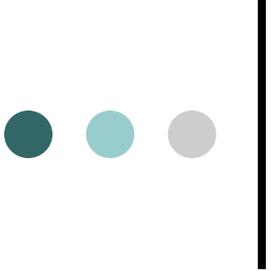
# Part 1: Peer to Peer Quit Smoking Program, cont.

- What did they learn in the 2 day training?
  - How to run tobacco cessation support groups
  - How to conduct one-on-one motivational interviews
  - How to provide referrals to tobacco cessation services
  - How to raise awareness of tobacco dependence through educational in-service and community training
- Receive ongoing supervision
- Web forum so peers can communicate on discussions boards



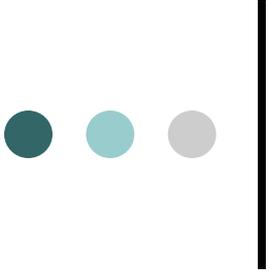
## Part 2: Ask, Advice, and Refer

- Brief Intervention training program for our front line staff
- As a clinician, in 30 seconds or less you can save a life:
  - *Ask*- all consumers about tobacco use at every visit
  - *Advise*- consumers that all tobacco users to stop
  - *Refer*- all consumers using tobacco to treatment responses



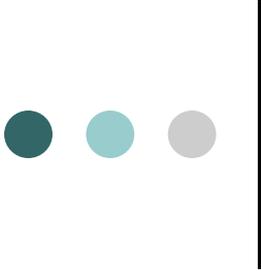
# Part 3: Educational Training for Clinicians

- Two-day training
  - Equipped providers with the tools to talk to their patients about quitting smoking
  - Providers trained on intervention models
  - Providers obtained available resources such as the California Smokers' Helpline and the peer-to-peer support groups



# Where do we go from here:

- Dept. of Public Health and California Center for Tobacco Cessation project
  - Behavioral health online clinician training, to include:
    - Ask, Advice, Refer
    - Contraindications of psychotropic drugs with various NRTs
    - De-bunking myths of tobacco use among people with behavioral health conditions
  - Target date: early summer 2012
- Train the next generation of Peer staff
- Extending tobacco cessation program to under-represented ethnic populations
- University of Colorado Denver Behavioral Health and Wellness Program to develop evaluation research study



# Quit Lighting Up One Peer at a Time

- Smoking Cessation Peer Support via Warm Line

- Project Return Peer Support Network (SA7)
  - Angelica Garcia

- Consumer/Peer Support Panel

- Pacific Clinics Client Run Center (SA 7)
  - Diana (Dee Dee) E. (Consumer)
  - Armando Mendoza (Peer Support and Peer Partner staff)
- San Fernando Mental Health Center Wellness Program (SA 2)
  - Laura D. (Consumer)
  - Shannon Hamilton (Peer Support and Community Worker)
- Social Model Recovery Systems, Inc. Wellness Program (SA 3)
  - Sylvia A. (Consumer)
  - Vanessa McClenney (Peer Support and Substance Abuse Counselor)