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Utilizing Peer Support to Improve Health and Wellness of People with Mental Illness

Wednesday June 17, 2020

2:00-3:00pm ET



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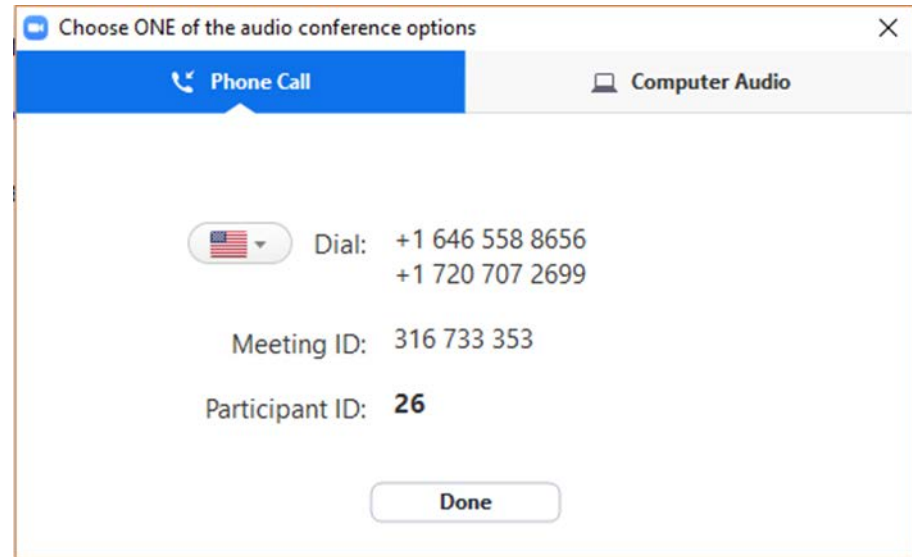
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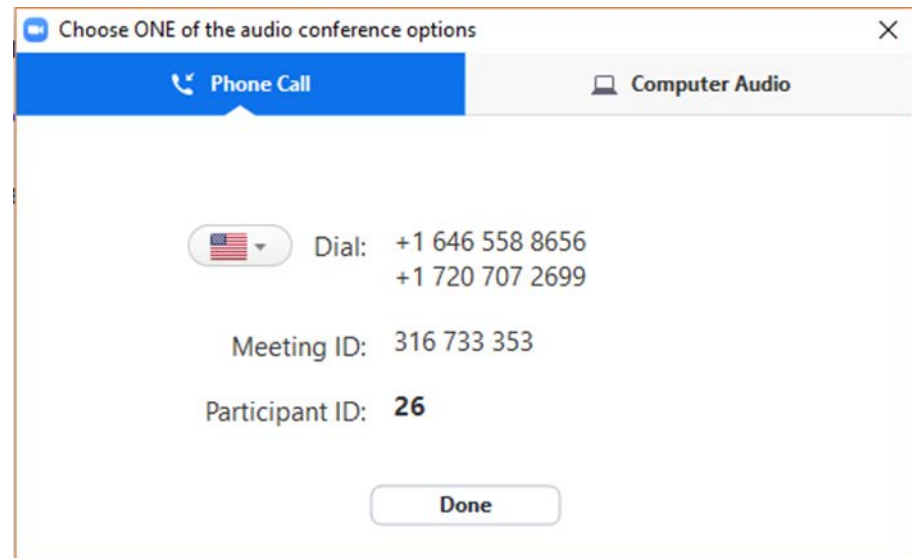
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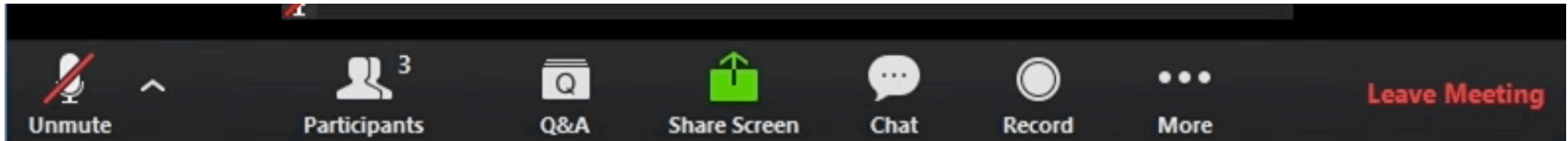
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Participant ID: **26**

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How to Ask a Question/Make a Comment



Type in a **question** in the **Q&A box**
Type in a **comment** in the **chat box**

Both are located at the bottom of your screen.
We'll answer as many questions as we can at the end of
the presentation.

Disclaimer

The views, opinions, and content expressed in this presentation do not necessarily reflect the views, opinions, or policies of the Center for Mental Health Services (CMHS), the Substance Abuse and Mental Health Services Administration (SAMHSA), or the U.S. Department of Health and Human Services (HHS).

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Poll #1: What best describes your role?

- Peer Support Worker
- Clinician
- Administrator
- Policy Maker
- Payer
- Other (specify in chat box)



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Poll #2: What best describes your organization? (check all that apply)

- Behavioral Health Provider
- Primary Care Provider
- Mental Health Provider
- Substance Use Provider
- Other (specify in chat box)



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Poll #3: Where is your organization in the process of integration?

- Learning/Exploring
- Beginning Implementation
- Advanced/Full Implementation
- Ongoing Quality Improvement
- Other (specify in chat box)



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Introduction



Martha Barbone, CPS

Interim Director of Operations, iNAPS



CHDC
Chicago Health
Disparities Center



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Objectives

1. Discuss the concern: Health and wellness of people with mental health challenges
2. Describe peer support services as an effective solution
3. Describe program development through Community Based Participatory Research (CBPR)
4. Discuss PCORI Research Findings
5. Discuss how peer support services might be implemented moving forward



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Objective 1

Health and wellness of people living with mental health challenges



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RECOVERY FOCUSED

- Long-term research has shown that hopes and dreams can be achieved, even if symptoms persist.

RECOVERY IS POSSIBLE

- Providers and programs assist people in attaining their goals with hope and empowerment.



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Sources used in this presentation include research from:

- National Institute of Mental Health (NIMH)
- Centers for Disease Control and Prevention (CDC)
- Substance Abuse and Mental Health Services Administration (SAMHSA)
- Patient Centered Outcomes Research Institute (PCORI)
- National Academies of Science (NAS)



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Physical Health Concerns

Cardiovascular Disease

Respiratory Illness

Communicable Disease

Throat Disease

Gastrointestinal
Disorders

Kidney Ailments

Orthopedic Injury

Infectious disease

Cancer

Neurological Disorder

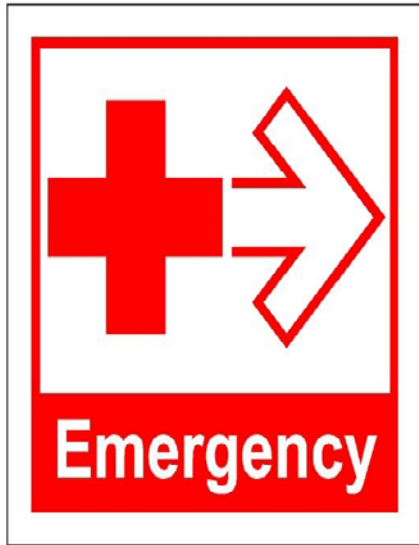
Obesity



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Those experiencing serious mental health challenges and untreated physical health issues often have adverse outcomes:



**Early Death
10-20 years**



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INSTITUTIONS



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Desired Results:

WELLNESS

Quality of Life

Inner Peace

Sense of Wholeness



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What do we mean by Serious Mental Health Challenges?

Serious mental illness is defined by someone over 18 having (within the past year) a diagnosable mental, behavior, or emotional disorder that causes serious functional impairment that substantially interferes with or limits one or more major life activities. (SAMHSA)

Difficulties to achieve specified goals:

- Education
- Employment, vocation, income
- Independent Living
- Relationships
- Health



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What Contributes to Worse Health Outcomes?

- Ethnicity
- Poverty
- Homelessness
- Crime
 - Victim
 - Justice System Involvement
- Substance Use



Six Reasons Why This Occurs



1. Lifestyle

- Diet
- Exercise
- Smoking
- Unsafe sex
- Substances

Six Reasons Why This Occurs

2. Social Determinants

- Poverty
- Homelessness
- Crime Victim
- Domestic Violence
- Jail or Prison



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Six Reasons Why This Occurs

3. Insufficient Resources



FRAGMENTED HEALTH SYSTEM

- Too few primary care clinics
- Too few specialty care clinics
- Inaccessible clinics (lack of transportation)



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Six Reasons Why This Occurs



4. Lack of Culturally Relevant Services

- Services not in ethnically diverse neighborhoods
- Providers of color largely absent from care settings
- Services fail to reflect cultural priorities including the culture of hope and recovery



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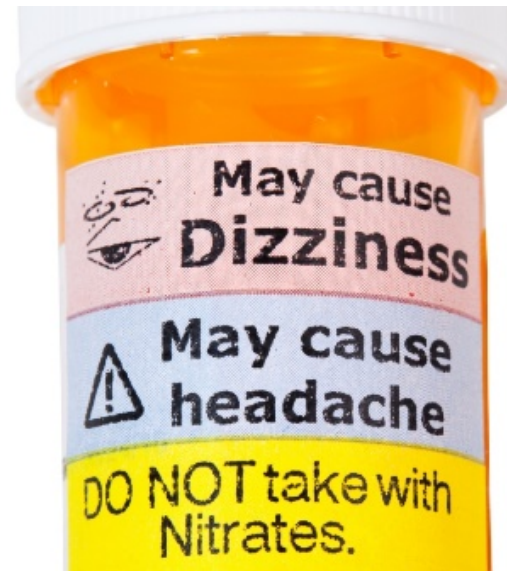
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Six Reasons Why This Occurs

5. Medication Side Effects

Significant weight gain in atypical anti-psychotic medication lead to:

- Type 2 diabetes
- High blood pressure
- Cardiovascular Disease



Six Reasons Why This Occurs



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6. Genetic Comorbidities

- Heart Arrhythmias
- Auto-immune disorders
- Diabetes



Objective 2

Peer support services as a solution



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Integrated Care

One stop health care for
Primary
Specialty
Mental health care



Reality: The Promise Has Not Been Realized

- Some care providers are reluctant.
- Funding is not available (especially for low income groups).
- Recovery services and resources are lacking.



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A Solution: Peer Support Services



Peer support workers are people who have been successful in the recovery process who help others experiencing similar situations. Through shared understanding, respect, and mutual empowerment, peer support workers help people become and stay engaged in the recovery process and reduce the likelihood of relapse. Peer support services can effectively extend the reach of treatment beyond the clinical setting into the everyday environment of those seeking a successful, sustained recovery process. (SAMHSA)

Basic Values of Peer Support Specialists

Recovery-Focused

- accepting
- empowering
- strengths-focused
- in the community



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The Key Ingredient to Peer Support – Mutuality; Mutuality Promotes Connection and Offers Hope

Disclosure

- On the way-down story (challenges)
- On the way-up story(recovery)
- What's worked for me and others

Limits to disclosure



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What do Peer Support Specialists do?



Support shared
decision making



Teach Skills



Support to Navigate
the System



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Support Shared Decision Making

- Focus:
 - Hope
 - Self-determination
 - Empowerment
- Achieved through:
 - Helping to understand health and wellness goals (everyday language)
 - Exploring the full range of options given specific goals
 - Using person-centered planning to support individual to make decisions



Teach Skills for Self-Management



Gather Information

- What are my health challenges?
- What treatments help?
- How do I access them?
- What are my wellness goals?
 - (e.g., diet and exercise)
- How do I achieve these goals?



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Teach Skills



Behaviors

(What do I do to achieve my health and wellness goals?)

- Stress management
- Medication management
- Healthy eating
- Increased physical activity





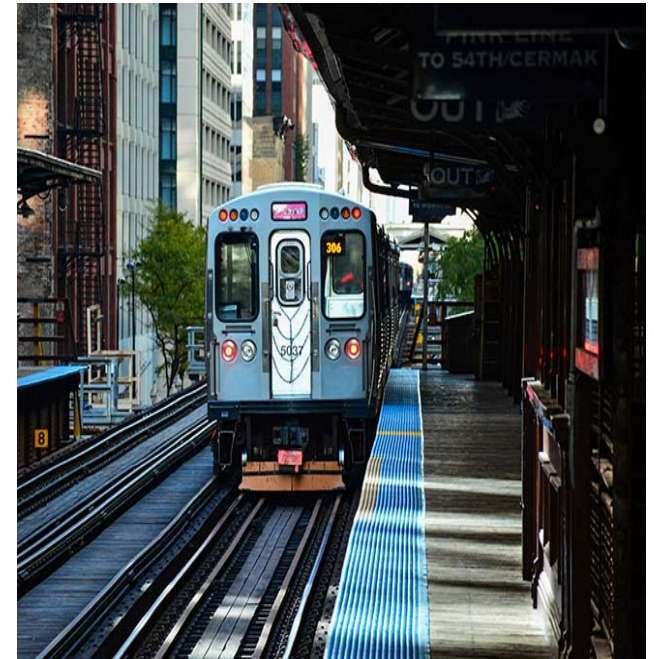
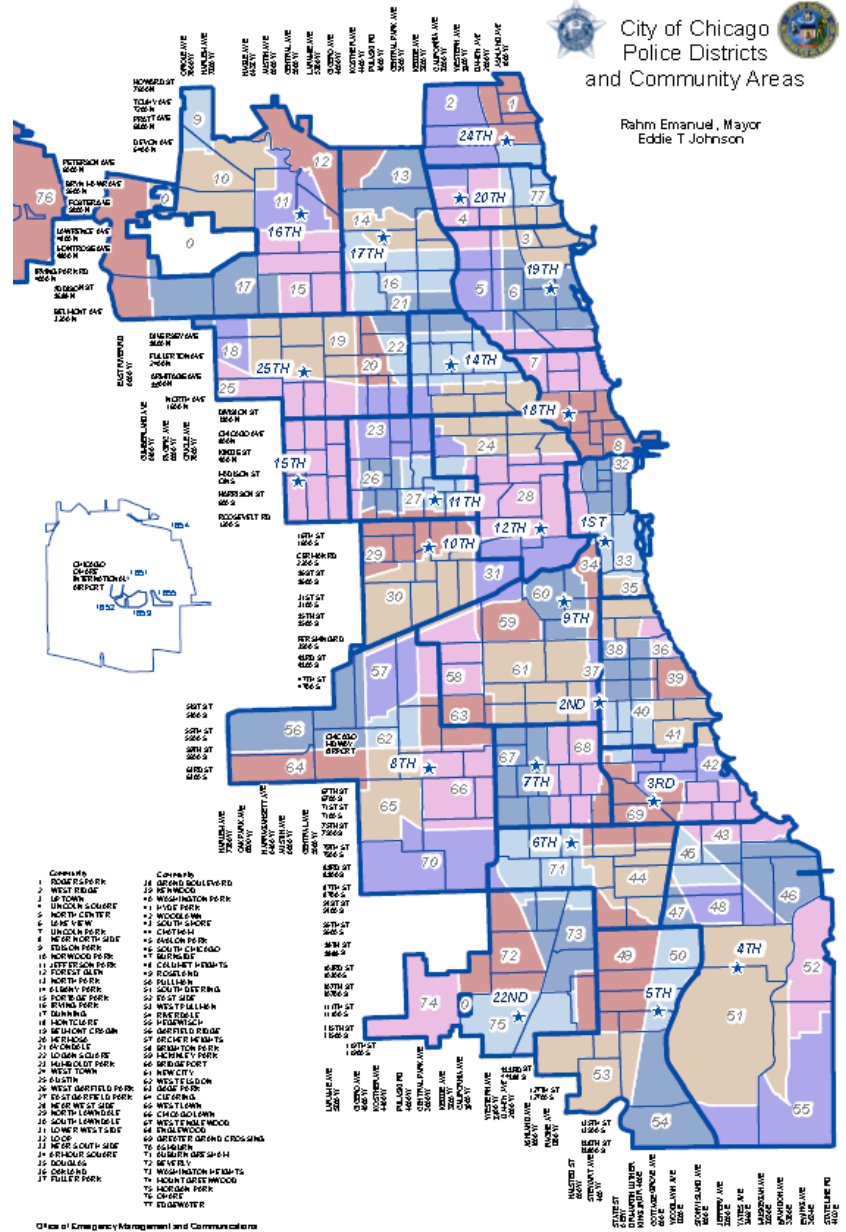
Opportunity → ***Navigate the System***

Peer supporters help people use these skills in their world.

- Go with them to appointments.
- Go shopping together
- Participate in wellness program in one's community

City of Chicago
Police Districts
and Community Areas

Rahm Emanuel, Mayor
Eddie T. Johnson



Office of Emergency Management and Communications
Bureau of Special Services
PS11 CG
November 2018

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Solutions

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Objective 3

Program development through Community-Based Participatory Research (CBPR)



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Purpose



Underrepresented individuals **should** be involved in all phases of research to help reduce unfair barriers.



This is where community-based participatory research (CBPR) can be used!



Strengths of CBPR

Collaborative - Unique strengths - Importance to the community - Improves communities - Eliminates disparities



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Inspiring Change

Workbook

A community-based participatory research workbook for involving African Americans with serious mental illness in research

Inspiring Change is a project that was created to address health care obstacles by involving African Americans with mental illness in all stages of the research process.



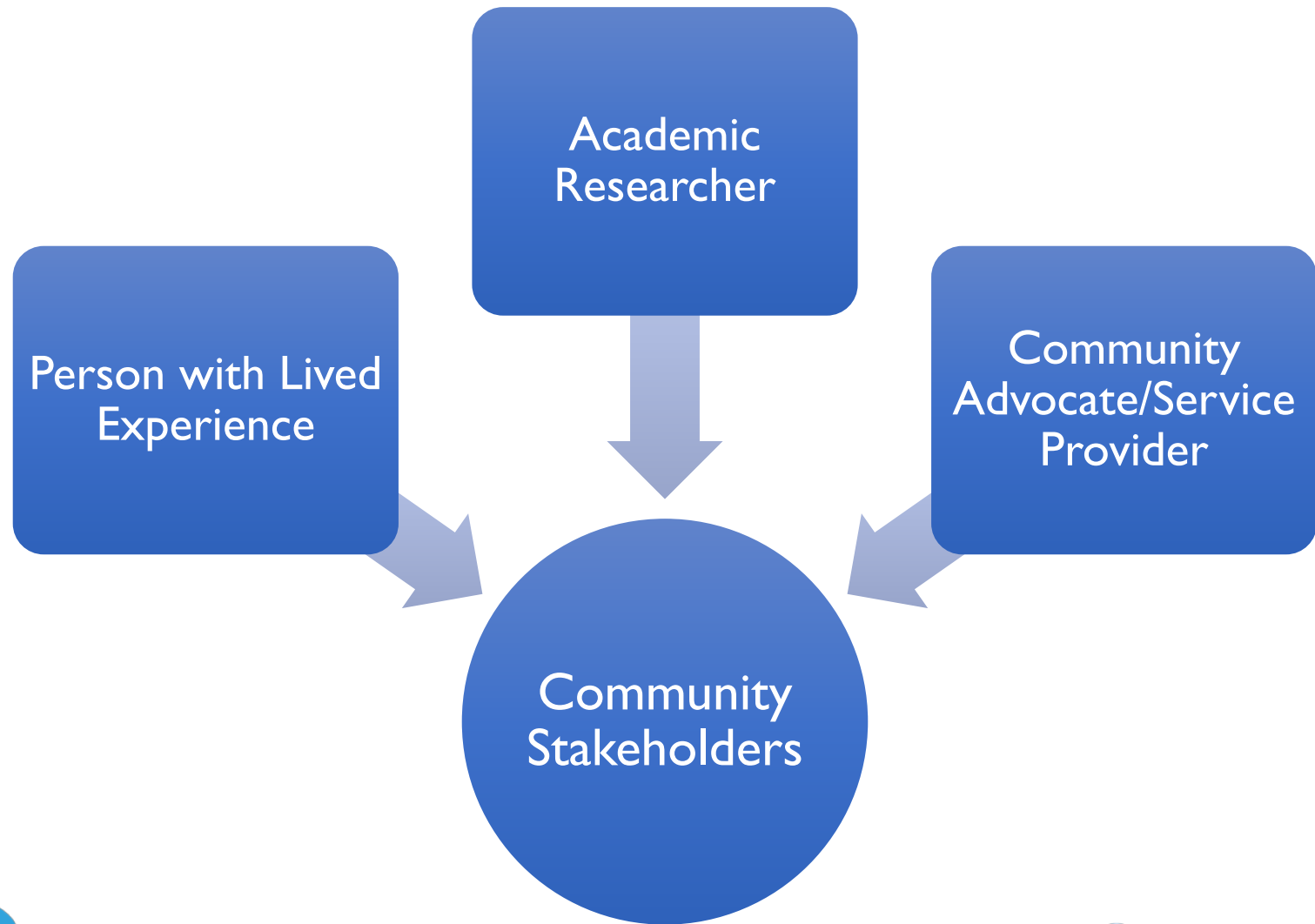
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Inspiring Change CBPR Model



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Inspiring Change Research Types

Understanding a Problem

- **Research Question:** Why is emergency room use so high in our community?
- **Method to Answer the Question:** Make a survey to give to people who use the emergency room (ER).

Designing a Solution

- **Research Question:** How can we use research to create a nurse help-line that people will use instead of the emergency room?
- **Method to Answer the Question:** Survey emergency room users to find out what they would need from a nurse help-line and develop a nurse help-line training program.

Testing a Solution

- **Research Question:** How effective is a nurse help-line for avoiding emergency room visits?
- **Method to Answer the Question:** Measure changes in emergency room visits after a help-line is started.

INSPIRING CHANGE LEADERSHIP TRAINING

A curriculum for preparing African American lived experience research leaders.



Instructors Manual



Leadership Topics

Introduction to Research and CBPR

Leadership Styles

Communication Skills

Project Management

Leading a Meeting

Professionalism

Self-Care

Mentorship

Solving Problems and Managing Conflict



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Objective 4

PCORI Research Findings



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Title & PI	Goals
<p>Peer Health Navigation: Reducing Disparities in Health Outcomes for the Seriously Mental Ill</p> <p>(PI: John Sinclair Brekke; brekke@usc.edu) https://www.pcori.org/research-results/2013/can-people-who-have-experience-serious-mental-illness-help-peers-manage-their</p>	<p>Help patients with serious mental illness to better access and use healthcare services, improve self-management of health and health care.</p> <p>(Completed)</p>
<p>Integrated Care and Patient Navigators for Latinos with Serious Mental Illness</p> <p>(PI: Patrick Corrigan; corrigan@iit.edu) https://www.pcori.org/research-results/2013/peer-navigator-support-latinx-patients-serious-mental-illness</p>	<p>Assess the effects of peer navigators to existing integrated services on enhancing primary care engagement for Latino patients with mental illness.</p> <p>(Completed)</p>
<p>Integrated Physical and Mental Health Self-management Compared to Chronic Disease Self-management</p> <p>(PI: Sarah Pratt; Sarah.I.Pratt@dartmouth.edu) https://www.pcori.org/research-results/2018/comparing-two-programs-managing-long-term-health-problems-people-lived</p>	<p>Compare the effectiveness of two programs, led by either mental health or by people with lived experience, on helping patients manage chronic medical and medical illnesses.</p> <p>(Ongoing)</p>
<p>Increasing Healthcare Choices and Improving Health Outcomes Among Persons with Serious Mental Illness</p> <p>(PI: Chyrell Bellamy; chyrell.bellamy@yale.edu) https://www.pcori.org/research-results/2013/does-peer-led-program-wellness-coaching-improve-wellness-among-people-serious</p>	<p>Examine the impact of a peer-led holistic health group curriculum and personalized wellness coaches on helping patients with serious mental illness improve their physical and mental health.</p> <p>(Completed)</p>
<p>Integrated Smoking Cessation Treatment for Smokers with Serious Mental Illness</p> <p>(PI: Eden Evins; a_eden_evins@hms.harvard.edu) https://www.pcori.org/research-results/2016/helping-people-serious-mental-illness-stop-smoking</p>	<p>The project seeks to examine evidence-based treatments on helping patients with serious mental illness stop smoking with support from community health workers.</p> <p>(Ongoing)</p>

Peer Health Navigation: Reducing Disparities in Health Outcomes for the Seriously Mental III (PI: Brekke)

- The *Bridge* Program

- Targets: health care access, utilization, and outcomes.
- Taught SKILLS to better avail health care with manualized program.
- Augmented by motivational interviewing, psychoeducation, modeling and role paraprofessionals.
- Training done *in vivo*; i.e., in the consumers' clinic.
- Peers (people in recovery) are teachers.
- It is a six-month program.
- Answers the question: **Can people who have experience with SMI help peers manage their health care?**



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Methods

- 151 people with serious mental illness were randomly assigned to one of two groups:
 - Mental health care as usual
 - The Bridge plus mental health care as usual.
- Data collected at baseline, 6, and 12 months.

Measures

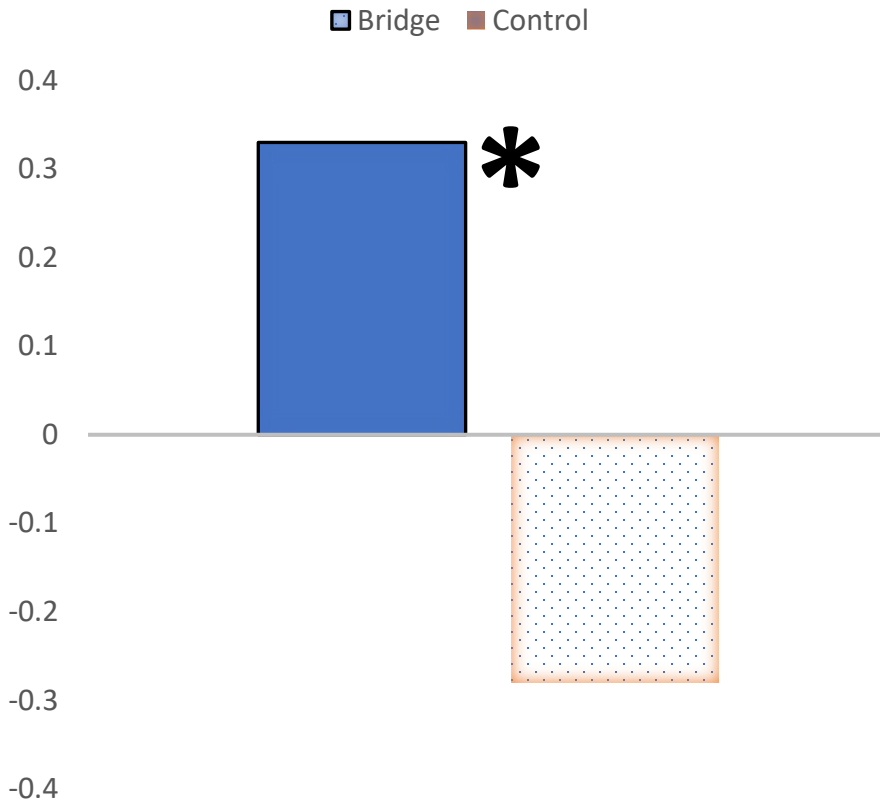
- **Health Services:**
 - N routine care visits
 - N routine health screenings
 - Quality of relationship with health care provider
- **Confidence for self-management**
- **Health concerns:**
 - Chronic disease
 - Bodily pain severity



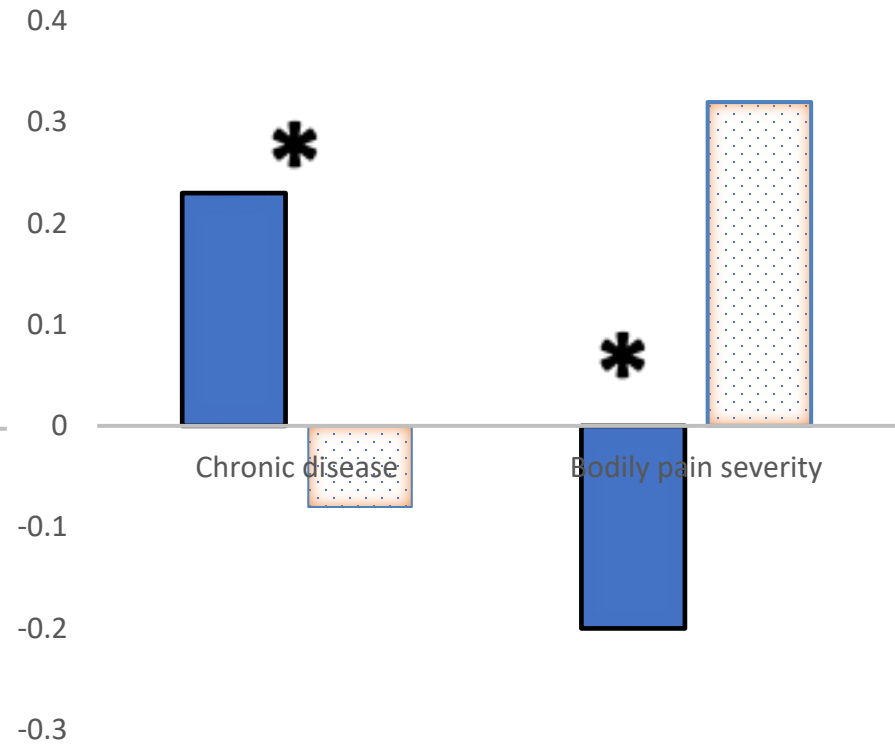
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Confidence for Self-Management (change scores)



Health Concerns (change scores)



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Peer Navigator support for Latinx Patients with Serious Mental Illness (PI: Corrigan)

- Peer Navigator Program
 - Program developed using CBPR approach
 - Trained Latinx with lived experience to become peer navigators
 - Navigators are currently in recovery from serious mental illness
 - Assisted participants to address healthcare goals
- It is a 12-month program, Data was collected at baseline, 4, 8 and 12 months
- 110 Latinx with serious mental illness and physical health concerns were randomly assigned to:
 - Peer Navigator Program (PNP) or
 - Integrated Care as Usual (ICAU)



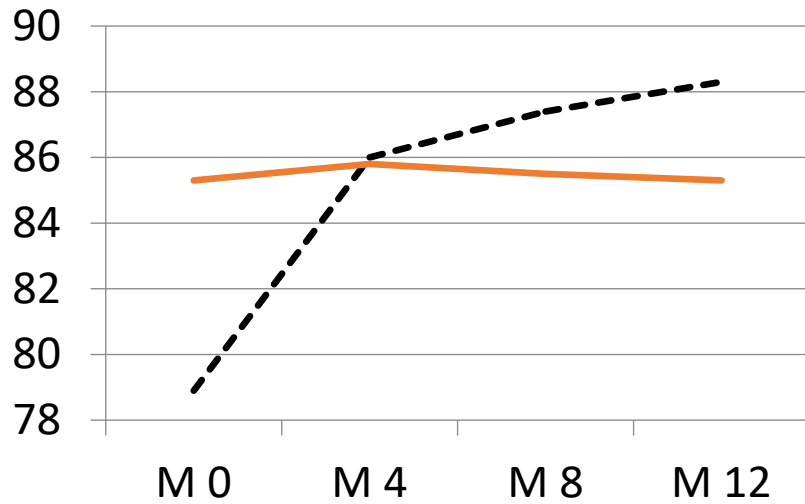
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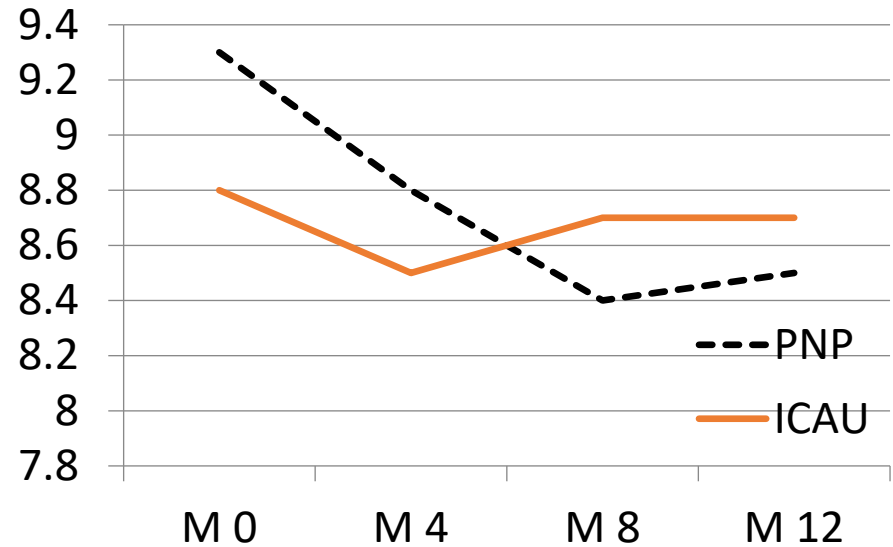
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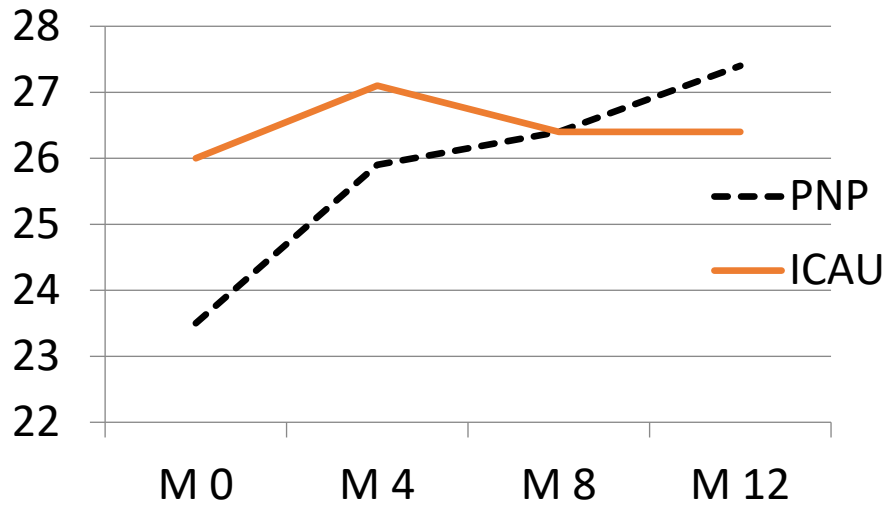
Self-Reported Recovery $p < .001$



Self-Reported Empowerment $p < .05$



Quality of Life $p < .05$





Does a Peer-Led Program with Wellness Coaching Improve Wellness among People with SMI

- Peer-Led Wellness Coaching (PLWC)
 - It is a 6-month program:
 - All six months: personal wellness coaching
 - First three months: peer-led group classes that covered:
 - personal wellness
 - mental health stigma
 - self-management strategies
 - Design was CBPR
- 74 people serious mental illness
 - quasi-randomized design
 - PWLC
 - Treatment as Usual (TAU)
 - Data collected at baseline, 4, 8, and 12 month



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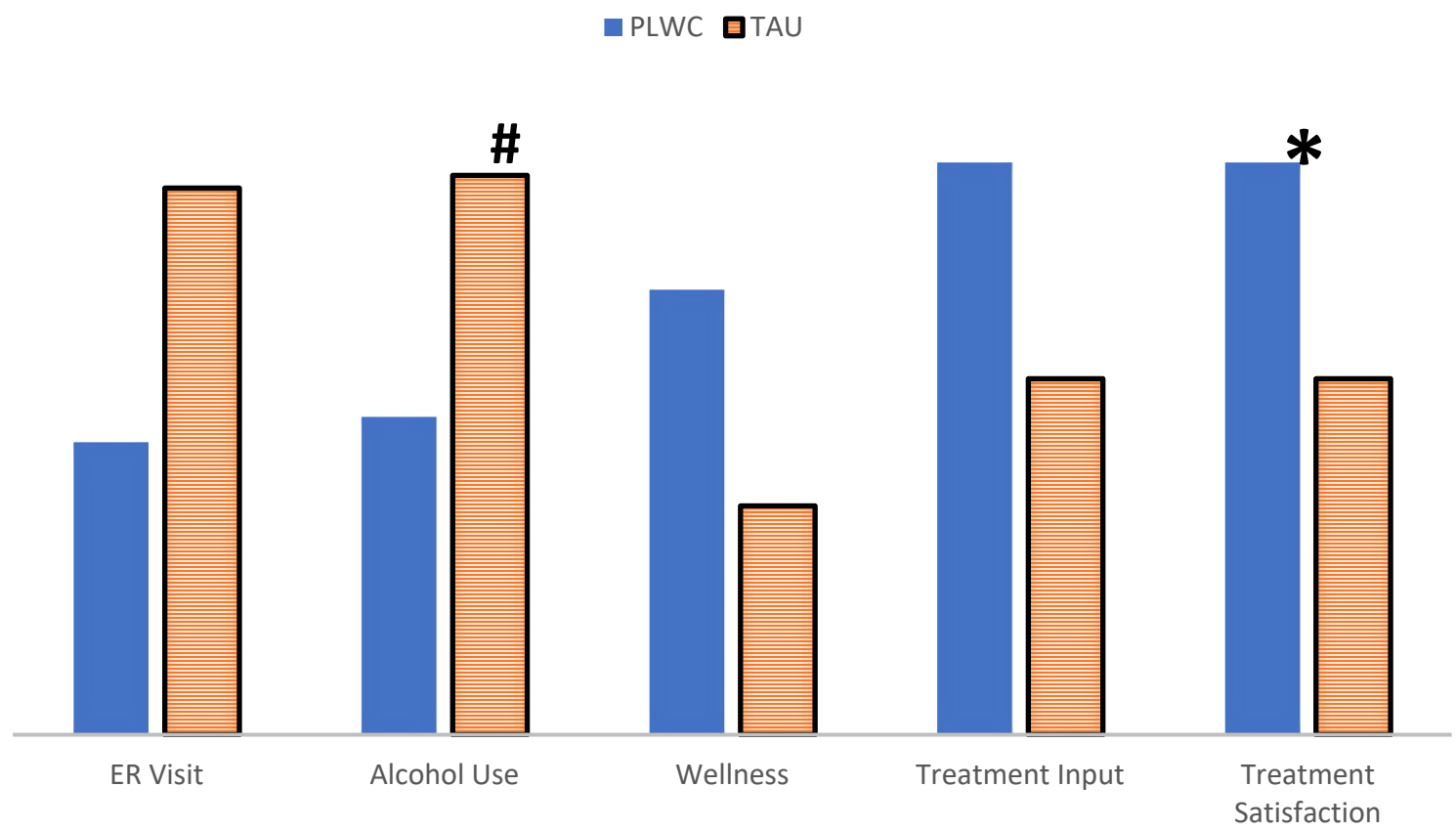
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Findings



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Objective 5

Moving forward:

A discussion of how peer support services might be implemented.



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Barriers/Opportunities to Implementation

- A shift in the practice culture
- Identification/selection of workforce
- Training and certification
- Supervision
- Program evaluation
- Reimbursement



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Questions and Comments

- For further information:
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- Martha Barbone, mbarbone@inaops.org



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Upcoming Webinars and Events

COVID-19 Office Hours – Learn more and register for events or view previous session recordings on our website here: <https://www.thenationalcouncil.org/integrated-health-coe/training-events/>

Upcoming

- **Conducting Groups via Telehealth:** June 18, 2020 at 3:00 ET
- Register: https://thenationalcouncil.org.zoom.us/webinar/register/WN_b8LFhNpoSTijSqGFrmV7WA

Learning Communities and ECHOs – Learn more on our website here: <https://www.thenationalcouncil.org/integrated-health-coe/learning-collaboratives/>

Relias Online Trainings – Learn more on our website here: <https://www.thenationalcouncil.org/integrated-health-coe/training-events/>

Recordings from previous sessions here: <https://www.thenationalcouncil.org/integrated-health-coe/training-events/>



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Thank You

Questions?

Email integration@thenationalcouncil.org

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www.samhsa.gov

1-877-SAMHSA-7 (1-877-726-4727) 1-800-487-4889 (TDD)



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