Systems Change in the provision of Mental Health/SUD Peer Services in Wisconsin

The adoption of recovery by behavioral health systems in recent years has signaled a dramatic shift in the expectation for positive outcomes for individuals who experience mental and/or substance use conditions. In many communities today, when individuals with mental and/or substance use disorders seek help, they are met with the knowledge and belief that anyone can recover and/or manage their conditions successfully. The value of recovery and recovery-oriented behavioral health systems is widely accepted by states, communities, health care providers, peers, families, researchers, and advocates.

SAMHSA (Substance Abuse and mental health Services Administration), has established a working definition of recovery that defines recovery as a process of change through which individuals improve their health and wellness, live self-directed lives, and strive to reach their full potential. Recovery is built on access to evidence-based clinical treatment and recovery support services for all populations.

SAMHSA has delineated four major dimensions that support a life in recovery:

**Health** - overcoming or managing one’s disease(s) or symptoms—for example, abstaining from use of alcohol, illicit drugs, and non-prescribed medications if one has an addiction problem—and, for everyone in recovery, making informed, healthy choices that support physical and emotional well-being

**Home** - having a stable and safe place to live

**Purpose -**conducting meaningful daily activities, such as a job, school volunteerism, family caretaking, or creative endeavors, and the independence, income, and resources to participate in society

**Community -** having relationships and social networks that provide support, friendship, love, and hope

**Hope**, the belief that these challenges and conditions can be overcome, is the foundation of recovery. A person’s recovery is built on his or her strengths, talents, coping abilities, resources, and inherent values. It is holistic, addresses the whole person and their community, and is supported by peers, friends, and family members. A person’s recovery is built on his or her strengths, talents, coping abilities, resources, and inherent values. It is holistic, addresses the whole person and their community, and is supported by peers, friends, and family members.

The Wisconsin Department of Health Services began looking at Recovery and Peer Support as a service component in 2006. Access to Independence has held a contract with DHS since 2007 to develop and deliver a Certification process for peer specialists in WI. ACCESS utilized the peer support community to develop the Peer Specialist Core competencies and a code of ethics. These core documents were closely connected to the development of the certification process for Peer Specialists in WI. Certification requires successfully completing the WI recognized peer specialist training and passing of a certification exam. ACCESS coordinates the certification exams, re certification and peer trainings across Wisconsin along with its partners.

The toolkit was designed to assist in assessing an agency’s readiness to successfully hire, integrate, and support a Certified Peer Specialist as part of your staff and services, and additional information about continued support needs of a peer workforce as an

organization grows and learns from experience.

Recovery and the use of peers to support others in their recovery, blends well with the Independent Living philosophy, this is a nice fit for Independent Living centers in WI. The Independent Living Centers in Wisconsin are active partners in the delivery of Peer specialist training, act as exam sights for the certification exam, and they advocate and promote of peer based services in their communities. All centers in Wisconsin employ Certified Peer Specialist and many contracts with county human services for the provision of peer specialist services in their region.

Where to start systems change:

Centers need to be aware of what is happening in their state in the provision of mental health and substance use services. Most states have a mental health/substance use council that will look at how services are delivered to this population, what might be supported as new initiative and often will make recommendation for funding new initiative. Having a seat on key committees will provide an opportunity to learn about services, where there are gaps and also increase awareness on Independent Living Philosophy and the services provided.

Becoming an advocate for the provision peer based services will only enhance and expand opportunities:

~ for individuals to receive recovery based services

~ increase opportunities for ILC’s in your state to develop fee for service programs

Many of the centers also employ peer specialist training facilitators to provide the required training for becoming a peer specialist, and coordinate peer specialist trainings in their communities.

Being at the table to learn about how things are done currently and what might be new opportunities is a way for centers to advocate for improved access and peer based services. Centers need to look for funding opportunities to develop, promote and deliver additional peer based services as well as welcoming this underserved population into their centers.

 Today, Wisconsin has 390 certified peer specialist, 140 individuals sat for the exam this week and new trainings rolling out every month.

Resources:

[www.wicps.org](http://www.wicps.org) (Toolkit)

also has core competencies for peer specialists, ethics and other information

<http://www.samsha.gov/recovery>

great information on recovery

as well as grant opportunities

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