

Integrating Peer Programs for People Who Use Drugs

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This work is supported by the Centers for Disease Control and Prevention (CDC) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$400,000 with 100% funding by CDC/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CDC/HHS, or the U.S. government.

INTRODUCTION

Well-designed overdose prevention and response programs recognize the complex realities of drug use and prioritize strategies that reduce harm. They focus on reducing its adverse health, social and economic consequences.

The use of peer support in overdose prevention and response can foster community engagement, promote safer drug use practices, and empower individuals through shared knowledge and experiences. This document examines how peer support can also help reduce risks associated with drug use, such as the transmission of infectious diseases, overdose and social stigmatization. Our focus is on designing and implementing peer support programs that are rooted in respect, empathy, and an understanding of the diverse experiences of people who use drugs (PWUD). By highlighting successful models and best practices, we provide a road map for communities and organizations looking to integrate peer support for risk reduction or recovery support into their programs.

The power of peer support

Peer-delivered harm reduction services (PHRS) are provided by people with living or lived experience of drug use. PHRS emerged in the 1980s as a response to the HIV/AIDS crisis among people who inject drugs. Peers play a key role in bridging the gap in health services, especially those in marginalized and underrepresented communities. Currently, peer workers engage in diverse harm reduction activities including outreach, risk reduction education, policy advocacy and community-based research. PHRS have been shown to reduce overdose risk, reduce drug use, increase access to medications for opioid use and improve service engagement (Ashford et. al, 2018; Greer et. al., 2016; Parkes et al., 2022). This reflects a shift towards recognizing living and lived experience as a crucial component of public health initiatives to improve community health.

Peer recovery support services (PRSS) include a range of activities based on the principles of empathy, shared experience and mutual respect. PRSS have proven to be effective for a range of emotional, informational and instrumental supports; improved sense of wellbeing; and linkage to services for individuals in or seeking recovery from substance use and/or mental health conditions (Bassuk et al., 2016; Bellamy et al., 2017; Reif et al., 2014). They are provided by individuals who have lived experienced of substance use challenges and recovery. Certified peers have received specialized training and certification to provide support and assistance. Certifications vary by state and by peer role or title, such as certified peer recovery specialist, certified forensic peer specialist, certified recovery peer advocate or certified recovery coach.

In this document, we use the term “peer supporters” for the individuals who provide either PHRS or PRSS. Peer supporters have found what wellness looks like for themselves; they share their experiences to assist others in that process. Peer supporters aim to build trust, reduce stigma and help individuals develop skills for managing and overcoming challenges.

Integrating peer support for PWUD can be highly beneficial in a variety of systems and settings. Peer support can be an integral part of overdose prevention and response, providing connection with PWUD based on shared experiences, practical assistance and ongoing support, all of which are essential for reducing the likelihood of future overdoses. For those who seek it, peer supporters can play a vital role as a bridge into and through recovery, assisting with accessing and navigating formal treatment and recovery support services.

PEER SUPPORT IN DIVERSE PROGRAMS

Peer support can be integrated into many kinds of programs and offered in a variety of settings.

Peer support in overdose prevention and response programs

Peer support can complement existing overdose prevention and response programs in several ways. As people with firsthand experience of substance use, peer supporters:

- **Bring unique understanding and empathy.** Their living or lived experience enables them to connect with those who are at risk of or who have experienced an overdose on a more personal and empathetic level. That connection can be vital in encouraging individuals to reduce their risk for overdose and seek care to improve their health and wellbeing.
- **Provide immediate emotional support and reassurance following an overdose event.** This can be pivotal in stabilizing the situation and helping a person take important steps for risk reduction and health promotion after overdose. By providing education, support, and resources (such as education about and access to naloxone and fentanyl test strips), peer supporters can play a significant role in preventing future overdoses.
- **Provide ongoing support after the immediate crisis of an overdose.** Peer supporters can offer continuous encouragement, help in maintaining wellbeing, and for those who desire it, assist in dealing with the challenges of recovery.
- **Assist in navigating the often complex health care system.** Peer supporters can help overdose survivors and those at risk for overdose understand their care options, connect them with necessary services and guide them through the process of getting help. They can provide practical advice on navigating the system, coping strategies and emotional support, as well as assist in connecting individuals to community resources, housing, employment and other recovery supports.
- **Create a safe space for individuals to discuss their struggles and seek help.** Peer support offers a nonjudgmental space with shared experiences that foster understanding and empathy. It builds trust, reduces stigma and provides tailored, practical advice.

- **Advocate for overdose survivors, educating them about their rights and available resources.** They can also educate those at risk for overdose and the wider community about addiction, recovery and the importance of compassionate responses to overdoses.

Peer support in treatment and recovery support service programs

The Substance Abuse and Mental Health Services Administration (SAMHSA) defines recovery as a self-directed, person-centered process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential (SAMHSA, 2012). Recovery support services (RSS) are resources that can help individuals with substance use disorders (SUDs) to achieve their self-defined recovery goals. Individuals who participate in RSS build and sustain their commitment to recovery as they define it. They do so by learning skills for becoming and being healthier, based on self-defined goals for physical, psychological and/or emotional health and wellbeing; and increase their social connectedness, sense of control, autonomy and choice, positive self-image, sense of belonging, and engagement in meaningful and enjoyable activities.

PRSS offers many benefits for individuals with SUD, starting with a nonjudgmental environment in which there is shared understanding, emotional support, knowledge/resource sharing and empowerment. PRSS create a community of individuals who understand the complexities of substance use challenges, provide empathy, encouragement and inspiration, and help participants build the recovery capital necessary for long-term success. By building trusting relationships, peer supporters can motivate and encourage individuals to engage in treatment and make positive changes in their lives.

“Recovery capital” is an important concept related to peer support. It refers to the resources and strengths individuals have that support their recovery from SUD, including social connections, financial stability, physical and mental health, education and employment. PRSS help individuals build and strengthen their recovery capital by providing access to supportive networks, knowledge and resources.

Peer support in criminal justice and public safety diversion programs

Diversion programs aim to redirect individuals with SUD away from the criminal justice system and toward treatment and support. Peer support in diversion programs can significantly improve outcomes, reduce recidivism rates, and promote long-term recovery for individuals involved in the criminal justice system (LeBel et al., 2015; SAMHSA, 2017a; SAMHSA, 2017b). There are many ways in which peer supporters can play a crucial role. Peer supporters can:

- **Assist individuals in accessing appropriate harm reduction, treatment and social services.** They help people navigate the complex treatment system, identify suitable treatment options, and connect them with resources such as detoxification facilities, residential programs, outpatient services and counseling. Peer supporters understand firsthand the challenges and barriers individuals face when seeking treatment and can offer practical guidance to overcome them.

- **Work closely with individuals to provide ongoing support.** They help people develop personalized risk reduction or recovery plans, set goals and establish connections with community resources such as health care providers, social services, housing assistance, employment agencies and support groups. Peer supporters play a critical role in ensuring individuals receive holistic support. They provide a nonjudgmental and empathetic perspective, sharing their own lived experiences of being involved with the justice system, addressing the challenges of substance use and recovery.
- **Provide education and skill-building opportunities to diversion program participants.** This may include workshops on addressing return to use, coping strategies, life skills, communication skills and self-advocacy. Peer supporters empower individuals with the knowledge and tools they need to maintain their recovery and refrain from illegal behavior.
- **Act as a bridge between criminal justice entities, treatment providers and the recovery community.** Peer supporters facilitate effective communication and collaboration among these entities, ensuring that individuals receive comprehensive and coordinated care.
- **Advocate for PWUD who encounter law enforcement.** Peer supporters advocate for more compassionate and supportive approaches by helping law enforcement agencies understand that not everyone who uses drugs has an SUD, treatment is not indicated or desired by all, and linkage options should include harm reduction services like syringe exchange programs. They also help agencies understand the challenges individuals face in seeking treatment and being in recovery.
- **Advocate for PWUD in provider settings.** PWUD in health and social service settings often face significant stigma, which can manifest in various ways and have profound impacts on their access to care and overall wellbeing. Peer supporters play a crucial role in reducing this stigma and promoting a more effective and supportive approach to services.

Peer support in other criminal justice programs

Individuals who are justice-involved have a disproportionately high rate of SUDs (often co-occurring with mental health disorders) compared to the general population (Bronson et al., 2017). Peer support can be delivered at any point of justice system-involvement to address overdose risk and substance use challenges and prevent deeper involvement in the system. Although it can be challenging, peer support can be effectively integrated into drug courts, jails and prisons to provide overdose education and naloxone distribution (OEND) as well as recovery support.

Peer support activities in courts support people in court-based programs by advocating for the individual, assisting individuals with navigating the justice system, and provide support based on lived experience (National Center for State Courts, 2022). In jails and prisons, peer support, particularly mentoring and facilitating support groups, is increasingly being made available to support individuals with mental health and substance use disorders (SAMHSA, 2017b). Peer supporters in correctional

settings support recovery from SUD and mental health conditions, prepare individuals for release, and facilitate their reentry (Bureau of Justice Assistance, 2022).

Peer support can also be an important addition to community corrections and re-entry programs. Following incarceration, many individuals face barriers to successfully reintegrating into the community and to maintaining wellbeing in the community, including inadequate access to health insurance, mental health or SUD treatment, medical care, employment opportunities, and stable housing. People recently released from incarceration face a significantly elevated risk of overdose, particularly from opioids. Research indicates that overdose is a leading cause of death after release from incarceration, with the highest risk occurring early after release (Mital et al., 2020; Ranapurwala et al., 2018, Binswanger et al., 2013), making OEND and ongoing risk reduction support vital. Adding peer recovery specialists to existing multidisciplinary teams of justice staff, behavioral health clinicians and social workers can reap both operational and fiscal benefits, including successful community integration following incarceration, connection to services, increased prosocial connections, and decreased recidivism (Bagnall et al., 2015; Taylor & Becker, 2015; Rowe et al., 2007).

INTEGRATING PEER SUPPORT INTO ESTABLISHED PROGRAMS

Integrating peer support programs requires careful planning. Initially, you may want to do a pilot project with a small scope and clear goals and expectations; make the design flexible, and continuously assess the program's effectiveness and gather lessons learned.

Strategies for implementing peer support in diverse settings

To effectively implement peer support, organizations need to plan the core components needed for a program and consider the key factors that drive success. The most important components and factors include:

1. **Training and certification for peer supporters:** Ensure that peer specialists receive appropriate training and certification to equip them with the skills and knowledge to effectively support the populations they serve. Training should cover topics such as peer support competencies, recovery-oriented approaches, ethics and cultural competency.
2. **Cross-training for all staff:** Offer cross-training opportunities for peer supporter and non-peer staff. This can enhance understanding, promote effective communication and create a more integrated approach to care.
3. **Salaries and benefits:** Provide peer supporters with adequate salaries and benefits to promote their own health and wellness. This will also help attract certified peers and those with expansive experience and expertise to create sustainable programs.

4. **Partnerships:** Collaborate with organizations and agencies that specialize in peer support services and have experience working with individuals with SUD. Building partnerships can provide valuable expertise, resources and support during the integration process.
5. **Policy and procedure development:** Develop policies and procedures that outline the roles, responsibilities and scope of practice for peer specialists within each setting. Clear guidelines will help establish expectations and ensure consistency in service delivery.
6. **Clear pathways to access the program:** Identify and establish clear pathways for individuals to access peer support services. Consider making peer supporters the first contact for participants when appropriate.
7. **Supervision and support:** Provide ongoing supervision and support for peer supporters to ensure their wellbeing, maintain quality standards, and address any challenges or concerns they may encounter. Regular one-on-one and group check-ins and access to a wider network of peer workers can be beneficial. Peer supervisors should ideally be peers themselves or have undergone training to best understand the peer role and ethics.
8. **Evaluation and quality improvement:** Set clear program outcome measures, then evaluate the effectiveness of the peer programs based on those measures. Gather feedback from individuals receiving support, focus groups, peer supporters, other staff and other stakeholders. Use this information to adjust and continuously improve the services provided.

The specific integration process may vary based on local context, resources and existing infrastructure. Engaging stakeholders, tailoring approaches to the unique needs of each setting, and ensuring ongoing communication and collaboration are key to successful integration. Appendix A lists guides for different settings.

Challenges to integrating peer support

Integrating peer programs into health and justice settings can improve outcomes for individuals with substance use challenges or SUD. However, stigma and resistance to change can create significant barriers to the integration of such programs.

“Stigma” refers to negative attitudes and beliefs directed toward PWUD or those who have an SUD. Stigma can manifest on individual, social, and structural levels. This can impede the acceptance of peer programs, as people may feel that those with SUDs do not deserve help or support. These attitudes can also influence policy and funding decisions, potentially limiting the resources available for such programs.

Stigma can be present in any setting, making it more difficult to implement peer programs. Professionals may be resistant to integrating peer supporters because of negative views about PWUD and people in recovery. Partners and collaborators may be resistant to peer programming, fearing it will lead to an increase of PWUD in their facilities.

One way to reduce the impact of stigma is to intentionally address it and to engage people with living and lived experience in planning and program design. The aims of this type of planning are to (1) ask questions about the ways that policies and practices might reproduce stigma or reinforce implicit biases; (2) discuss the structural bias that could result from policies and practices that provide access to opportunity for some but exclude others; and (3) identify ways to shape policies and procedures to interrupt stigma and implicit bias.

Additionally, individuals within organizations may be resistant to change. Change can be difficult, especially when it involves altering established procedures and practices. Staff in health departments, emergency services and justice settings may resist implementing peer programs due to concerns about efficacy, cost or disruption to existing services. There may be skepticism about the value of peer support, particularly if there is a lack of understanding or awareness about the benefits of such programs.

Creating buy-in and support from stakeholders

Creating buy-in and support from stakeholders is crucial when integrating peer support. Some of the many stakeholders involved in establishing peer support programs can include law enforcement, first responders, treatment court programs, diversion programs and the jail system. To build buy-in:

- Gather and present evidence that demonstrates the effectiveness and cost-effectiveness of PHRS and how they contribute to improved health outcomes.
- Gather and present evidence that demonstrates the effectiveness and cost-effectiveness of PRSS programs. Show how they contribute to increased engagement in treatment, improved long-term recovery and overall wellbeing of individuals with SUD.
- Provide stakeholders with comprehensive information about the benefits and effectiveness of peer support programs in your specific context. Share research studies, success stories and testimonials that demonstrate the positive impact of peer support. Emphasize the value of lived experience and the unique perspective that peer supporters bring to the table.
- Involve stakeholders from the beginning stages of planning and development. This includes representatives from health departments, health care, community organizations, law enforcement and treatment centers. Seek their input, address concerns and actively listen to their perspectives. Collaboration and involvement can foster a sense of ownership and investment in the program.
- Adapt your messaging to appeal to the specific interests and priorities of each stakeholder group. Highlight how peer support programs align with their organizational goals, missions and existing initiatives. Emphasize how peer support can enhance outcomes, reduce costs and complement existing treatment modalities.

- Anticipate and address any concerns or misconceptions that stakeholders may have regarding peer support programs. Common concerns might include the qualifications of peer specialists, confidentiality and potential liability issues. Provide clear information, guidelines, and examples of successful program implementation to alleviate any doubts.
- Highlight the potential for collaboration between peer support programs and existing services or initiatives within the stakeholder’s organization. Showcase how peer support specialists can complement the work of other professionals, such as counselors, therapists and case managers. Emphasize the value of a multidisciplinary approach.

It is essential to foster ongoing relationships and partnerships with stakeholders to ensure long-term sustainability and success. Using these strategies, you can build awareness, understanding and support for integrating peer supporters into programs for PWUD.

Finding funding and resources for peer programs

Finding funding and resources for peer programs requires persistence, strategic planning and ongoing research. There are many sources for funding peer programs:

- **Federal government grants.** Various government agencies, such as the CDC and SAMHSA, offer grant opportunities specifically focused on SUD prevention, treatment and recovery support. These funding opportunities, which provide financial support for program development and implementation, are instrumental in supporting evidence-based practices, innovative approaches and comprehensive services that contribute to the recovery ecosystem. Use the [Grants.gov](https://www.grants.gov) or [SAM.gov](https://www.samhsa.gov) to find federal funding opportunities.
- **Local and state government grants and contracts.** City, county and state government grants and contracts support a variety of programs and services. They allocate public funds to carry out specific projects or services that align with public health goals and community needs.
- **Foundation grants.** Many private foundations have funding initiatives to support overdose prevention programs and recovery services. Use resources such as [Candid’s Foundation Directory](https://www.candid.com/foundation-directory) to identify foundations that align with your program’s goals and mission. Reach out to the Candid Foundation to inquire about potential funding opportunities or grants.
- **Collaborative partnerships.** Seek partnerships with existing organizations and agencies that have resources or funding available for substance use disorder programs. Collaborating with established entities can provide access to shared resources, expertise and potential funding opportunities, such as:
 - **Conventional fundraising.** While it might be unusual for some kinds of agencies to fundraise, peer programs can partner with nonprofits to organize fundraising events such as benefit concerts, charity runs or auctions, to generate funds and promote community engagement.

- **Crowdfunding.** Use online crowdfunding platforms to raise funds for your peer program. Through these platforms, you can engage with your community, share your story and leverage social media to spread awareness and gather support.
- **Corporate sponsorship.** Explore partnerships with local businesses and corporations that prioritize community involvement and social responsibility. Some organizations may be willing to sponsor or provide financial support for peer programs.

Hints for cultivating new funding sources and successful proposal writing

Regardless of funding source, the process of cultivating and preparing to solicit support is similar. Here's a brief checklist.

- Prepare and strengthen your program.
 - Develop or refine your program description, logic model and case for support.
 - Outline your preferred mix of funding sources.
 - Ensure the necessary administrative and programmatic capacity.
 - Collect data and evidence to support your application.
- Research and identify funders and funding opportunities.
 - Use resource guides and directories to find potential funders.
 - Regularly check city, county and state government websites for funding announcements.
 - Use grant databases to find opportunities.
 - Network with local government officials, agencies, and other non-profits.
 - Subscribe to relevant newsletters or mailing lists from government agencies.
- Review the funding opportunities for fit.
 - Carefully review eligibility criteria and funding priorities.
 - Note application guidelines and deadlines for the grants.
 - Do a reality check: Does the opportunity truly align with your program objectives?
 - Successful applications clearly align their project with the funding agency's goals and priorities.
 - Successful applications demonstrate a deep understanding of the grant's purpose and articulate how the project or program directly addresses the specified needs and objectives.

- Participate in workshops, webinars or other technical assistance resources offered by the granting agency to improve your understanding of the application criteria and process
- Write a compelling proposal.
 - Adhere to the application guidelines.
 - Respond to questions in the section where they're asked.
 - Clearly articulate the impact and outcomes of your project.
 - Prepare a detailed and justified budget.
- Leverage partnerships.
 - Collaborate with other organizations to strengthen your proposal.
 - Working with people with living and lived experience, community-based partners, and communities of interest can strengthen your application and ensure your program meets the community's needs

CONCLUSION

Peer support can be a powerful tool for reducing overdose deaths and saving lives. By integrating peer supporters into overdose prevention and response programs, treatment and recovery support programs, law enforcement diversion programs and other criminal justice settings, we can expand access to quality care and support for individuals with SUD. With the right resources and support, peer programs can become an essential part of the solution to this complex public health crisis.

REFERENCES

- Ashford, R. D., Curtis, B., & Brown, A. M. (2018). Peer-delivered harm reduction and recovery support services: Initial evaluation from a hybrid recovery community drop-in center and syringe exchange program. *Harm reduction journal*, 15(1), 52. <https://doi.org/10.1186/s12954-018-0258-2>
- Bagnall, A-M., South, J., Hulme, C., Woodall, J., Vinall-Collier, K., Raine, G., Kinsella, K., Dixey, R., Harris, L., & Wright, N. M. (2015). A systematic review of the effectiveness and cost-effectiveness of peer education and peer support in prisons. *BMC Public Health*, 15(1). <https://doi.org/10.1186/s12889-015-1584-x>
- Bassuk, E. L., Hanson, J., Greene, R. N., Richard, M., & Laudet, A. (2016). Peer-delivered recovery support services for addictions in the United States: A systematic review. *Journal of Substance Abuse Treatment*, 63, 1-9. <https://doi.org/10.1016/j.jsat.2016.01.003>
- Bellamy, C., Schmutte, T., & Davidson, L. (2017). An update on the growing evidence base for peer support. *Mental Health and Social Inclusion*, 21(3), 161–167. <https://doi.org/10.1108/mhsl-03-2017-0014>
- Binswanger, I. A., Blatchford, P. J., Mueller, S. R., & Stern, M. F. (2013). Mortality after prison release: Opioid overdose and other causes of death, risk factors, and time trends from 1999 to 2009. *Annals of internal medicine*, 159(9), 592–600. <https://doi.org/10.7326/0003-4819-159-9-201311050-00005>
- Bronson, J., Stroop, J., Zimmer, S., & Berzofsky, M. (2017). *Drug use, dependence, and abuse among state prisoners and jail inmates 2007-2009*. <https://bjs.ojp.gov/content/pub/pdf/dudaspji0709.pdf>
- Bureau of Justice Assistance. (2022). *Peer recovery support services in correctional settings*. [https://www.cossapresources.org/Content/Documents/Publications/Altarum PRSS in Correctional Settings.pdf](https://www.cossapresources.org/Content/Documents/Publications/Altarum_PRSS_in_Correctional_Settings.pdf)
- LeBel, T. P., Richie, M., & Maruna, S. (2014). Helping others as a response to reconcile a criminal past: The role of the wounded healer in prisoner reentry programs. *Criminal Justice and Behavior*, 42(1), 108–120. <https://doi.org/10.1177/0093854814550029>
- Mital, S., Wolff, J., & Carroll, J. (2020). The relationship between incarceration history and overdose in North America: A scoping review of the evidence. *Drug and Alcohol Dependence*, 213, 108088. <https://doi.org/10.1016/j.drugalcdep.2020.108088>
- National Center for State Courts. (2022). *Peers in Courts*. https://www.ncsc.org/_data/assets/pdf_file/0029/77690/Peers-in-Courts.pdf

- Ranapurwala, S. I., Shanahan, M. E., Alexandridis, A. A., Proescholdbell, S. K., Naumann, R. B., Edwards, D., Jr, & Marshall, S. W. (2018). Opioid overdose mortality among former North Carolina inmates: 2000-2015. *American Journal of Public Health, 108*(9), 1207–1213.
<https://doi.org/10.2105/AJPH.2018.304514>
- Reif, S., Braude, L., Lyman, D. R., Dougherty, R. H., Daniels, A. S., Ghose, S. S., Salim, O., & Delphin-Rittmon, M. E. (2014). Peer recovery support for individuals with substance use disorders: Assessing the evidence. *Psychiatric Services, 65*(7), 853–861.
<https://doi.org/10.1176/appi.ps.201400047>
- Rowe, G., Hirsh, J. B., & Anderson, A. K. (2006). Positive affect increases the breadth of attentional selection. *Proceedings of the National Academy of Sciences, 104*(1), 383–388.
<https://doi.org/10.1073/pnas.0605198104>
- Substance Abuse and Mental Health Services Administration. (2012). *SAMHSA’s Working Definition of Recovery*. <https://store.samhsa.gov/sites/default/files/d7/priv/pep12-recdef.pdf>
- Substance Abuse and Mental Health Services Administration. (2017a). *Peers Supporting Recovery from Substance Use Disorders*.
https://www.samhsa.gov/sites/default/files/programs_campaigns/brss_tac/peers-supporting-recovery-substance-use-disorders-2017.pdf
- Substance Abuse and Mental Health Services Administration. (2017b). *Peer Support Roles in Criminal Justice Settings*. https://www.cdcr.ca.gov/ccjbh/wp-content/uploads/sites/172/2019/06/WebinarSupportingDocument_PeerRolesinCJSettings508.pdf
- Taylor, C., & Becker, P. (2015). Are your friends crucial or trivial? Peer support’s effect on recidivism. *Justice Policy Journal, 12*(1).
https://www.cjcj.org/media/import/documents/jpi_taylor_and_becker_spring_2015.pdf

APPENDIX: ADDITIONAL RESOURCES

- [Addiction Recovery Support Services and Information](#) — Recovery Research Institute
 - A guide to the major types of recovery support services, such as recovery coaching, recovery community centers and recovery residences.
- [Building the Case for Emergency Department Peer Support: Implementation Guide](#) — North Carolina Healthcare Foundation
 - Guide to integrating peer support in emergency departments (EDs) that includes key considerations, peer roles in the ED workflow, funding guidelines and infographics demonstrating the impact.
- [Establishing Peer Support Services for Overdose Response: A Toolkit for Health Departments](#) — National Council for Mental Wellbeing
 - For local and state health departments and community partners that are exploring opportunities to implement or enhance peer support services within overdose response and linkage to care initiatives.
- [Facilitating Successful Reentry Through Peer Support Services](#) — BJA COSSAP
 - How peers can positively influence reentry outcomes.
- [Peer Recovery Support Services in Correctional Settings](#) — Bureau of Justice Assistance (BJA) Comprehensive Opioid, Stimulant and Substance Abuse Program (COSSAP) Peer Recovery Support Services Technical Assistance Center
 - The ins and outs of setting up a peer program in jails, prisons and community corrections, including examples of several different kinds of programs.
- [Peer Support Roles Across the Sequential Intercept Model](#) — Policy Research Associates
 - Examples of peer support roles in each of the sequential intercepts.
- [Peer Support Services in Crisis Care](#) — SAMHSA
 - Advisory document describing the importance and role of peer support in crisis care settings, such as crisis phone lines, crisis mobile teams and crisis receiving and stabilization facilities.
- [Principles of Community-based Behavioral Health Services for Justice-involved Individuals: A Research-based Guide](#) — Substance Abuse and Mental Health Services Administration (SAMHSA)
 - Assists community-based behavioral health providers as they work with people with mental and substance use disorders who are currently involved with, or have a history of involvement in, the adult criminal justice system.