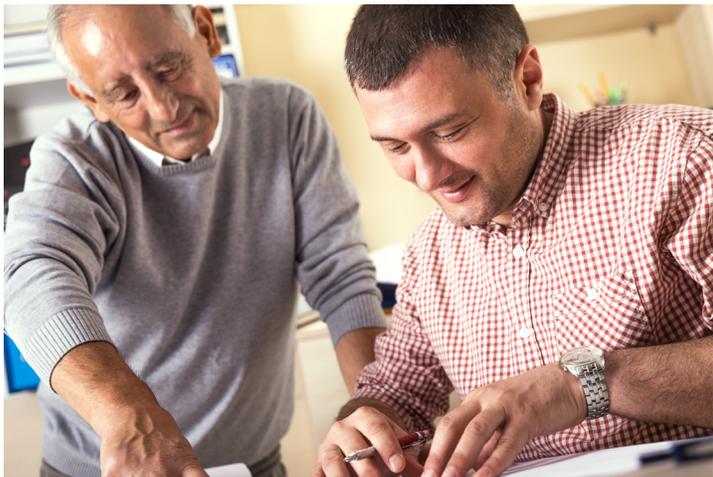


Facilitating Successful Reentry Through Peer Recovery Support Services

Catching Up With COSSAP, October 2020

In 2018, there were approximately 738,000 individuals incarcerated in jails nationwide; in 2016, there were nearly 1.5 million people in state or federal prisons (Bureau of Justice Statistics [BJS], 2020; BJS, 2019). In addition, each year a significant number of individuals cycle in and out of jails: in 2018 there were a total of 10.7 million jail admissions in the United States. (BJS, 2020).

Most individuals who are incarcerated return to their communities after serving their time. Individuals with substance use disorders (SUDs) returning after incarceration face significant challenges in trying to successfully integrate back into society, comply with community corrections requirements, and maintain recovery. Research on reentry policies and practices has identified many factors that impact reentry, including family support, stable housing, education and employment, and access to behavioral health and other health services (Bales and Mears, 2008; Berg and Huebner, 2011; Spjeldnes et al. 2012).



There is also a growing body of research on how peers can influence reentry outcomes—either negatively or positively. Peer recovery support services (PRSS) programs use the power of peers—persons with the lived experience of addiction, recovery, and successful reentry—to help individuals successfully transition back to the community and prevent recidivism. PRSS have been shown to be a promising, positive approach to reentry. Empirical studies suggest that peers can provide crucial social support to returning individuals, reduce substance use and recidivism, and increase desistance (abstention from criminal behavior) and prosocial behavior (LaBel, Richie, and Maruna, 2015).

Research has also shown that many formerly incarcerated persons prefer to receive mentoring from others who have been successful in their own reentry efforts (Richie, 2001). Peers with lived experience of recovery can share strategies for overcoming stigma, strengthening prosocial attitudes and beliefs, and enhancing active coping strategies—all of which can lead to increased life satisfaction and psychological well-being for people reentering society (LeBel, Ritchie, and Maruna, 2015).

Recovery coaching and mentoring are two key processes that persons with lived experience engage in to facilitate successful re-entry. The coaching process involves a strengths-based approach to one-on-one support over an extended period: The coach supports a recoveree's chosen pathway to recovery, including navigating the SUD treatment

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system (White, 2004; Eddie et al., 2019). Key coaching tools include a recovery capital assessment, recovery planning, and recovery check-ins. The mentoring process features one-on-one interactions across an extended period of time; a mentor who has experience or knowledge in reentry navigation; a mentee who is in a position to benefit from the transfer of knowledge, skill, or experience; and role equality (Tolan et al., 2008).

Both peer recovery coaching and peer mentoring are processes that help recoverees/mentees to (1) explore the prospect of leading “good lives” (Wincup, 2019) in which they are “better than well” (Best, Broderick, and Smooth, 2019); (2) use practical approaches to setting and achieving goals; and (3) instill hope and increase motivation to continue when inevitable challenges arise. Both processes enhance [recovery capital](#), which is essential for both the recovery process (Best and Laudet, 2010) and desistance (McNeill et al., 2012). And both establish a relationship with a peer supporter who can introduce the reentering person to a wider and more diverse prosocial network.

An increasing number of communities are implementing peer coaching and peer mentoring programs to address the specific needs of individuals with SUD who are returning from incarceration. In West Virginia, two COSSAP grantees operate day report centers that employ peer specialists to smooth the transition back to the community for formerly

incarcerated individuals, offering comprehensive clinical, case management, and support services:

- The Southwestern Regional Day Report Center (SWRDC) operates in Logan, Lincoln, and Mingo counties. In addition to working with crisis teams out in the community, the SWRDC utilizes peer recovery specialists to provide recovery coaching and other peer supports to reentering individuals.
- The Berkeley (County) Regional Day Report Center also employs peer recovery specialists, who are the first contact that new day reporters have with the program. Along with sharing their recovery stories, the specialists explain the program and what participants can expect, setting a positive, recovery-oriented tone for their engagement.

In both programs, peer recovery specialists have proven to be invaluable to both participants and their colleagues on multidisciplinary teams. They work with participants throughout the entire duration of their time at the centers, providing coaching, introducing them to a variety of community recovery groups, and bridging gaps in supports.

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