

2022 National Recovery Month: Incorporating Peers in First Responder Deflection

Announcer:

Welcome, and thank you for listening to this recording, part of the Comprehensive Opioid, Stimulant, and Substance Abuse Program (or “COSSAP”) podcast series. COSSAP provides financial and technical assistance to states and units of local and Indian tribal governments to plan, develop, and implement comprehensive efforts to identify, respond to, treat, and support those impacted by the opioid epidemic. Since 2017, BJA has supported innovative work on these COSSAP sites across the nation.

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Jacob Walls:

Hello, and welcome to our podcast for the Comprehensive Opioid, Stimulant, and Substance Abuse Program, known as COSSAP. It is an initiative by the Bureau of Justice Assistance. I’m your host, Jacob Walls, with TASC’s Center for Health and Justice. CHJ is one of the technical and training assistance providers under the COSSAP grant. We are here to celebrate National Recovery Month. This podcast series highlights the role of harm reduction, specialized case management, and peer support services play in deflection and recovery journeys. These conversations are joined by panelists from across the country who are experts in their respective fields that strive towards helping individuals suffering from a substance use disorder.

For the first responder deflection podcast three, *Incorporating Peers in First Responder Deflection*, CHJ is joined with Erin Etwaroo, Project Manager for the BJA COSSAP grant as a TTA provider, and Natasha Morales, Mobile Supervisor at Merakey USA. Hearing reflections from peer support providers, this podcast will discuss the pivotal role shared experiences can have in an individual’s recovery journey. Working with a deflection site that utilizes peers in its response, we’ll discuss how they train, use, and fund peers in deflection programs. Erin, tell us a little bit about your work and what deflection looks like in your community and how working with sites and using peers globally in big picture in that sense.

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Erin Etwaroo:

Sure. Thank you, Jacob. Very nice to be here. I am Erin Etwaroo, as you said, and I do have the privilege of serving as the project manager for the BJA COSSAP TTA Center on Peer Recovery Support Services that is operated by Altarum. Just quickly about myself: I am a licensed professional counselor by trade and I have nearly 18 years of experience in the behavioral health field, where I was very fortunate to specialize in working with justice-involved individuals and their families, and that's what really drew me to Altarum and our work at the TTA Center. What I would say over the past few years, during the COVID-19 pandemic, the majority of states that we've been working with have reported increases in opioid-related deaths and ongoing concerns about the challenges of linking individuals with substance use disorder or mental health disorders to treatment, particularly as the support systems that people turn to before the pandemic have become even more taxed for resources and less accessible.

Research does show that recovery is facilitated by social support. Peer recovery support services do provide that prosocial environment that encourages recovery within individuals and their communities, particularly by building trusting relationships through modeling the benefits and expectations of what a life in recovery looks like, facilitating the use of community resources and promoting individuals' choices and goals as they relate to navigating health and social service systems, building on recovery capital, and ultimately sustaining a life in recovery. And as we increasingly understand the value of peer recovery support services, they are subsequently increasingly being implemented in recovery programming across the sequential intercepts, which is where we come in through providing training and technical assistance throughout community, alongside law enforcement and other first responder programming and treatment court settings within jail and prison and detention settings, and upon reentry into the community from incarceration and beyond.

All of these areas are intercepts at which peer recovery support services are being implemented. And I think for the purposes of today's discussion, deflection and pre-arrest diversion programs that incorporate peer supports into their work have really found them to be an invaluable addition as they provide that individualized human connection and a sense of hope that can and really does save lives.

Jacob:

Thank you for that, Erin. Can you touch on a little bit about specific instances where you've seen the impact peers have made in these deflection programs that you work with?

Erin:

Sure. Absolutely. I would say, we do have a few different grantees that we work with right now in really different settings, some in more urban settings, some in more rural settings. But we do hear time and again

that we have grantees who are implementing peers alongside law enforcement in that they are perhaps receiving a telephone call or when a law enforcement officer makes contact with an individual in the community, they ask them if they want to be referred for some type of treatment or to be in communication with a peer. And so, we have grantees that are providing that service on a 24/7 basis.

So, at any point in time, a law enforcement officer can reach a peer provider to help an individual that they come in contact with in the community, which is really incredible. We have law enforcement officers who are incorporating and bringing peers alongside them as they respond to calls of overdose response in hotels and motels or out within the community, in people's homes. So, peer providers are actually providing on-the-ground first response alongside law enforcement and fire EMT and other first responders.

And then we're also seeing a lot of peer providers who are being incorporated into diversion and deflection training programs that actually get to have a seat at the table and talking through and helping plan with law enforcement officers what it looks like to train other staff members or other responders in how to best approach individuals in the community who they are responding to and who need their help, and what that peer recovery component looks like and how valuable that is at that first meeting.

Jacob: And Natasha, can you touch on a little bit about how the work that you do in your deflection program and what it looks like in your community?

Natasha Morales: So, right now, our deflection program, we are only in four districts. We are pre-arrest diversions, and they're more low-level crimes: retail theft, prostitution, low amount of narcotics, retail thefts, things of that nature. So, that's what it looks like in our community right now. It's pre-arrest. We are starting to get involved in the post-arrest diversions as well. But right now, it is pre-arrest. Essentially, they're picked up after the encounter, brought to the district, processed. There's criteria for it, so they have to run, make sure that they don't have any violent warrants and things like that. They call us, we pick them up, and bring them over to our office. We then provide services. Most of the time, we try to link in real time, but that does become difficult at times, like after-hours and things like that, because other service providers aren't available.

Jacob: Can you touch on that particular community that you're working in with Merakey USA?

Natasha: So, we work in Kensington. We are actually maybe two blocks off of Kensington and Allegheny. We are on F and Allegheny, actually. So,

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we're in the mix of it. So, we have the pre-arrest diversions; we also have the police social referrals. Even beat cops that are just walking the area can refer to us if there's anyone in the needs of substance abuse or behavioral health. So, pretty much anything that they may need they can connect. But we also have walk-ins and provider referrals as well.

Jacob: Thank you for that, Natasha. And how important is it to have people involved that have lived experiences, that have even been in the areas of Kensington working on your staff?

Natasha: I think it's been vital for me. About the last year and a half, we've done a lot of unorthodox things to blend in with the community and really be able to touch them where they're at. It's been amazing to have people that a lot of times they've known they've used with to be the one offering these services. I've had countless clients come and talk to me about how they used to know my employee and how inspiring it is to now be receiving services. I've had employees assist clients in just navigating and being patient and really relate in that moment of being dope sick and going into treatment, because that can be a difficult piece. You're going into treatment where you're not going to be able to use again, but you're already sick. So, the desire is to go use before you go to rehab. But my employees have definitely been vital in helping that that doesn't happen.

Jacob: Can you talk about the training process and just daily strategies for the peer support staff that's utilized?

Natasha: So, we do have an EAP program that offers counseling. We do have that; however, we also have monthly check-ins just within our team, if not daily sometimes. My employees see a lot, from overdoses to clients trying to use during transport. They see a lot that can be triggering to them. So, it's very helpful that them and I have that open line of communication to just let me know that they had a rough day and they need a break, because that's reality that happens. They're in the midst of it. We walk up on people shooting in their necks, and those things can be very hard for them. So, it has been helpful for us to have that open line of communication. I tell all of my employees to get therapy. It'll be helpful at some point. A lot of my employees go to meetings, and they have an actual program that they follow for the most part.

Not everyone is AA and NA, some are MAT, but they all have support systems outside of work. That is something that I am very diligent about asking and making sure they have in place. I've done internet searches for providers with employees just to make sure that they have the resources they need, so that they can then pour out to clients that they service on a daily basis. We do have training such as reality-based trainings because they are in the field. There's oftentimes that we're

called to scenes to assist law enforcement with mental health crises. Lower ones, not anything that is beyond our scope, but to provide services.

So, we do have reality-based trainings, motivational interviewing. All of our staff is ASAM-certified, because we do do placements. My outreach workers, we had them sit in a certified recovery specialist training, so they're pretty much all certified except for the newer ones. So those are the trainings that we provide to them. ASAM definitely will help with them placing clients into proper treatment, really how to get down in with the motivational interviewing. But those are the majority of the trainings that we do.

Jacob:

Thank you for that. And I think that's a very important message that you touched on, just having those resources available for the peer recovery specialists, that they can be open and say that, if they need a mental-break day or something like that, or they can take that time and be open with you about things that they might see things that might have been triggered with them in the field. Erin, I'll switch over to you. With the sites that you've worked with, how have you seen that they've been able to secure funding, and what does that kind of sustainability look like?

Erin:

Yeah, I will say, that is a hugely hot topic right now and something that we do receive a lot of TA requests around, just organizations wanting to know more about what program sustainability looks like. And I will say that there are many federal funding opportunities that a lot of our organizations pursue, as well as local and state funding opportunities. I do think that the majority of, or a lot of, the grantees that we're working with right now are really trying to move from grant funding to having a really permanent position for their peer providers. And a few of our grantees have been able to move into that direction and actually hire full-time peer providers, and that has really been through a lot of local and city funding opportunities.

And I do believe some of our grantees have even been able to incorporate pay raises for their peer providers as well, because another thing that we're talking a lot about is not only being able to hire full-time peers but being able to retain them as well. And just talking through what that looks like as far as not only pay but supervision structure, and as Natasha's kind of talking about having a very peer-led, recovery-oriented model that set peers up for success, as well as the staff members that they're working alongside, so that not only financial sustainability is there, but just the morale and the retainment of peer providers, I think, is also a really important focus on sustainability.

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Jacob: Yeah, that's a really good point to make, especially on it seems like every industry across the country has had that issue of trying to find and retain people. And especially with the work that you guys are all doing, trying to find and retain people with lived experiences in those peer support roles is definitely going to be vital to that sustainability. Then I'll turn the question over to you, Natasha. In that same sense, how have you been able to secure funding, and what does sustainability look like for your program?

Natasha: Right now, for the PAD program, which is what we're talking about right now under Merakey, we are grant-funded and local-funded. That's all we are right now. We're still in the process of branching out throughout the other districts in Philadelphia. So, right now, it is just grant and county funding. However, our outreach workers are full-time employees. Merakey actually wants to hire. We have plenty of opportunities right now within the PAD program but also throughout Merakey for people in recovery. Our requirements are a year of sobriety, however you do that, whether that's MAT or abstinence. If you have a felony, you have to have five years' work experience. No child abuse record. And then lower-level crimes are fine with our agency. So, that's kind of like our hiring requirements and a high school diploma or GED.

For the most part, the CRS certificate is not required. It's preferred, but it's not required. We've been able to sustain our employees pretty well. We do have competitive pay rate. We definitely take care of our people in recovery that are working with us. Benefits are good. Pay is very well for them. And then we do have this recovery-based model where we are definitely checking on them. I have family members that are currently in recovery. My director also has lived experience. So, we are invested in our employees. We care about our employees, and they know that. I think that's been one of the most crucial things to actually sustaining our employees, because we are in the thick of it. We are seeing things on a daily basis that it can be very traumatizing. So, I think that's been helpful for us to sustain our employees.

Jacob: Thank you for that answer. And I don't know, Natasha, you aren't the only provider in your area that's using peer support specialists. How is it working with other providers in the PAD program itself? What's the type of repertoire and trust and just communication that you have with other providers in the area?

Natasha: It actually works pretty well. We are four providers. Three of us are in connecting buildings. So, the three providers that are in the two connecting buildings, our relationship works actually pretty well. If one of the agencies who does more social service stuff can't accommodate or one of their diversions need treatment, they send them over to us.

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We also have New Day that's above us. They do more DV and vice diversions. So, we'll tap in for them. It's very much a collective effort. It's more of knowing what each of us do and how to service that participant as effectively as we can.

The three managers of the programs that are connected, we also have a very good relationship and can tag-team each other as well. So, that's important. We do have another provider that's kind of across the city, so we're not as close with, but they also work with us well. They are more a shelter provider, but even that relationship goes very well. And it's about meeting and just being connected, so that we can service our participants as best as possible. They are also organizations that use peers as well. So, that's another bit of it. It's not just morale between Merakey, but morale between all of the agencies is important.

Jacob: Thank you for that answer. And I'll touch on too a little bit more. How is it working with peers with other first responders like EMS, with law enforcement? How is that type of relationship that you have with those agencies?

Natasha: They're pretty good. Social service and law enforcement and things like that are always going to have their challenges, but we have an amazing group of officers who are also passionate and also invested that reach out to us constantly. And even if it's not a pre-arrest diversion and it's just a family in need, they connect us with those as well. So, it just is really beneficial that all the parties involved on the ground level, we all believe in this and we all want this to be successful. We have an amazing set of officers that help this process. Something that my outreach team is currently working on is building relationships with the beat cops that are interacting with people on a daily basis just to be like, hey, if the person needs help, just let them know that we're over on 709 East Allegheny, like send them over. And we want to be a support to them as well.

Jacob: Thank you for that. And Erin, I'll turn over to you. How have you seen, with the sites that you work with, peers interacting with other first responders like EMS, law enforcement, and just other behavioral health and social agencies as well?

Erin: I really think I've just seen this, at least with the organizations that we're working on, a complete buy-in and an increasing buy-in, if there was any hesitancy, of really just incorporating peer providers as a member of that staff of social service staff, behavioral health staff, law enforcement, first response. And, really, I think, one, once you're able to witness the miracle of the pure role and how that really does positively contribute to engagement from consumers, from individuals that we're running into in the community that are struggling with

substance use or mental health disorder, to have that engagement and that interest in being referred to treatment or talking it through longer than they might have originally, I just think that it's amazing to see the response to peer providers.

Once you're able to witness that, organizations start to think through a restructure like how do we implement these individuals with this valuable lived experience and do it in a way that's meaningful and that will encourage them to stay. We're just seeing a lot of engagement in that way and just feeling very encouraged and inspired by it and just trying to keep that momentum going.

Jacob: Thank you for that, Erin. And then also with the sites you're working with, what does expansion look like for their programs, and do they have any plans to expand to currently?

Erin: Yeah, I think the goal is part of what we do with the TA Center on Peer Recovery Support Services is help organizations that are newly implementing but also working through expansion as well. And expansion can look like a lot of different things, but I think, overall, the goal is to, again, not only recruit quality individuals with lived experience who can contribute to the work but also retain them and sustain them and expand their skill sets and get more peer providers certified and be able to bring more peer providers on staff at any given organization and then incorporate them in different aspects of the service provision that you're providing.

So, I think it's there are a lot of different aspects of expansion that you can focus on at any given time, but I just really think we want more people with lived experience to start holding valuable positions within these organizations, to receive more and more training, to have certification behind them and to be supported in that through, again, just recovery-oriented supervision structures, so expanding that as well, expanding our reach with community stakeholders and buy-in from our communities. And that can look very different depending on the organization that you're talking about or the community that you're talking about. But, again, just wanting to expand in that way as well, so that it's not just organization to organization trying to do this work, but it's community by community and just really expanding our reach there as well.

Jacob: Thank you for that, Erin. And then Natasha, I'll turn over to you. Do you have any plans for expansion in your own program?

Natasha: So, I love everything Erin just said. I will piggyback off of all of that cause she said it way better than I could ever. But yes, we are planning to expand into other districts. Right now, we're in four districts. We are

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looking in the future to go citywide. PAD itself will go citywide. In the near future, we're moving into the northeast. In that aspect, we're also recruiting as well, and we want to sustain employees as well.

One thing that I think is amazing about my staff is that 80 percent of them are peers and 60 percent of that 80 are currently in school, which I think is amazing. It's very interesting to see everyone help each other out with those challenges. It's interesting to see them having their own community and just kind of relying on each other; all of us do. So, it's an amazing process to see. But yes, we are expanding, cause that was the original question.

Jacob: Yeah, that's great. And I know you touched a little bit on it, but how is that work-school life balance for your peers?

Natasha: For some of them, it's better than others. Some of them are mothers, so they have those challenges as well. Myself, I'm a student. I have another manager at night who's also a student. So, we help as best we can. We try to accommodate. There are times where we get those "Hey, I have a final next week. I need off on Friday." We make those accommodations. I have an employee who is almost done with her undergrad, and we arrange her schedule so that she's working two 5-hour days and the rest are 10-hour days to make up her 40, but also we're able to accommodate her in that aspect.

Jacob: That's great. I know we've always preached meeting the participants where they're at. We also have to meet our workers and peers where they're at as well, especially in their lives, especially with, well, personal, work, school life going on. So that's great that you have that combination, that openness to communicate with your peers. I just want to say thank you again to our audience for listening to this podcast and to the panelists for their great discussion over this topic. We at CHJ invite you to check out the COSSAP resource page at www.cossapresources.org, which has guidance for you and your communities' overall strategy to support individuals in recovery and those that want to address substance use.

Announcer: Thank you for listening to this podcast. To learn more about how COSSAP is supporting communities across the nation, visit us at www.cossapresources.org. We also welcome your email at cossap@iir.com.