Workforce: Peer Support Workers NAMI Public Policy Position



Where We Stand:

NAMI believes that the mental health and substance use workforce must be sufficient in supply, diversity and cultural competency to meet the needs of people with mental health conditions. NAMI supports public policies and laws that build, promote, expand, and sustain the role of peer support workers throughout the mental health and substance use workforce.

Why We Care:

Across the U.S., there is a growing demand for mental health and substance use disorder care. At the same time, there is a significant <u>shortage</u> of mental health providers. In <u>55%</u> of U.S. counties, there is not a single practicing psychiatrist, and over <u>150</u> million people live in a designated Mental Health Professional Shortage Area. The lack of providers exacerbates unmet needs and leaves more people without options for mental health care. Peer support workers are an important option that can help address this shortage.

Peer support workers (PSWs, or Peer Support Specialists) are generally <u>defined</u> as individuals with lived experience of recovery from a mental health condition, substance use disorder (SUD), or both, and are trained to support other individuals and their families in recovery. Complementary to the work of other health care providers, PSWs help individuals engage in their treatment, access important resources, like housing or employment, encourage hope and resilience for recovery, and advocate for an individual's needs.

PSWs understand firsthand how patients live, and can work in a variety of settings, including homeless shelters, primary care, jails and prisons or emergency rooms. By sharing their own personal experiences, PSWs build trust, connection and understanding that can help people become more engaged in their recovery.

Peer support is an <u>evidence-based</u> mental health model of care. Considerable research demonstrates that PSWs help improve patient outcomes, including reducing the need for <u>inpatient and emergency services</u> and the frequency of <u>recurrent psychiatric hospitalizations</u>. PSWs can help improve an individual's sense of <u>recovery and hopefulness</u>, and they can help people improve their skills and <u>abilities</u> in desired areas.

Peer support services are more frequently being <u>integrated</u> into mental health, substance use and physical health services as a meaningful part of multidisciplinary health care teams, due to an increased recognition of their value. Encouragingly, peer support services are

reimbursed within many <u>state Medicaid programs</u>, and the <u>vast majority</u> of states have adopted statewide certification and training for peer providers.

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However, many barriers prevent greater expansion of the PSW workforce. Not all forms of health insurance cover the work of PSWs. Additionally, wages for PSWs are often low, and those in the field may experience limited career mobility and discrimination due to their past experiences — state laws can have unintended consequences that limit otherwise qualified people from becoming a PSW. For example, state laws regarding who can be a provider under Medicaid or who can provide services in jails and prisons often bar people with arrest and conviction records. Such policies curtail PSW employment opportunities for some individuals who may otherwise be best suited for the job.

NAMI supports public policies and laws that expand and support the PSW workforce, including increased payment and reimbursement opportunities, improved career satisfaction and mobility and state employment law flexibility. By training and hiring persons in recovery, peer support work creates an opportunity for those with lived experiences to have meaningful employment that supports and affirms their own recovery. It also helps address limitations in the health care workforce to better help individuals with mental health and substance use conditions.

To learn more about NAMI's work on this issue, visit www.nami.org/Advocacy/Policy-Priorities









