

Personal and Societal Benefits of Providing Peer Support: A Survey of Peer Support Specialists

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Objective: Peer-delivered services have burgeoned, and evidence of the effectiveness of peer support is increasing. However, the potential benefits to peer support specialists (PSSs) themselves are not as well understood. The authors conducted a survey of PSSs to examine potential benefits. **Methods:**

A survey instrument was developed and refined and sent anonymously via the Internet to PSSs who had been employed for a minimum of two months by an agency that employs a large number of PSSs.

Results: A total of 253 respondents completed the survey (70% response rate). Respondents reported a variety of benefits in the intrapersonal, social, mental health, recovery, spiritual, and professional domains. Forty percent of respondents reported discontinuing at least one type of disability or social benefit. **Conclusions:** Results suggest that employment as a PSS is a potent vehicle for improving recovery and quality of life. Results accrue to society in reduction of public benefits. (*Psychiatric Services* 65:678–680, 2014; doi: 10.1176/appi.ps.201300113)

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Peer-delivered services have burgeoned and are now available in many states and in a variety of mental health programs and settings. Peer-delivered services are delivered through numerous program types, service structures, and funding streams (1,2). The diverse service models share common characteristics (2). Studies of the effects of peer support are increasing, but results are equivocal (3). Several studies suggest that when added to traditional services, peer support may be helpful in terms of engagement and empowerment (4–6); however, other studies have not demonstrated superior outcomes (7,8). In contrast, recent evidence of the effectiveness of structured peer-led interventions, such as Wellness Recovery Action Planning (9), Building Recovery of Individual Dreams and Goals through Education and Support (10), and others (11), has been encouraging.

Attention has recently turned to the benefits of being a peer support specialist (PSS). Moran and colleagues (12) found increased personal growth, and there is evidence that helping others confers a host of psychological and physical benefits (13). This study explored those benefits further and examined the hypothesis that longer job tenure as a peer specialist would lead to discontinuation of disability benefits.

Methods

All survey methods and procedures were approved by the Institutional Review Board of Boston University.

This study was considered exempt; however, respondents assented to the survey before participation. Conducting an anonymous survey was important to ensure respondents that the information they provided would be confidential and not shared with their employer, but this approach also prevented us from obtaining detailed demographic data.

We queried all employees of a large organization whose mission includes the provision of one-on-one and group-delivered peer support. PSSs complete an 80-hour training course and work in dedicated roles alongside other professionals providing crisis services, case management, recovery education, and peer support, as well as supported housing and employment. According to the mission statement of the organization, PSSs are in a unique position to inspire hope by sharing their personal recovery experience and offering encouragement and support. The organization has offices in several states (two on the east coast, two on the west coast, and one in the southwest) and one country outside the United States.

We targeted all individuals who had been employed by the agency for a minimum of two months and who at some time had worked as a PSS, even if they now held an administrative role. We excluded those who did not have lived experience of a psychiatric disability. These procedures resulted in a group of 362 PSSs.

We constructed and refined the survey on the basis of the literature

that describes benefits of being a PSS. We used the Dillman (14) approach for the survey design and implementation. The final survey contained 16 closed-ended items, including items about demographic characteristics, employment and tenure, and receipt of Social Security (SS) cash and insurance coverage as well as other public benefits. We also queried about the ways in which being a PSS was beneficial to the individual, mainly with closed-ended questions but also with one open-ended question to solicit this information in respondents' own words. All employees meeting the inclusion criteria (N=362) were invited to participate in the survey via an e-mail letter. We timed several prompts to increase the response rate, beginning the survey in August 2011 and concluding in November 2011.

After examining the initial responses, we were uncertain about whether the questions on SS benefits were clear. Therefore, a brief follow-up survey was conducted that we believed would ensure a more accurate, chronological picture of the receipt of, changes in, or discontinuation of SS benefits. We field-tested this second survey, made refinements, obtained IRB approval, and conducted the survey from June to August of 2012 (an invitation letter and three reminders) with a subset of individuals from the first sample who were still employed by the agency (N=238). A total of 139 (58%) individuals responded to the second survey. The findings on disability benefits are based on results from the second survey only.

Survey responses were downloaded, cleaned, and analyzed by using SPSS, version 18.0. We computed descriptive statistics and used t tests and chi square tests to examine associations between length of employment and benefits questions. (Numbers vary slightly because of small amounts of missing data.)

Results

We obtained a 70% response rate for the main survey (N=253 respondents of 362 invited to participate). Most respondents were women (N=157, 62%) and Caucasian (N=182, 72%). Approximately 21% (N=52) were under age 35, 60% (N=151) were in the 36–55 age group, and 19% (N=47) were over 55. A total of 53 (21%)

Table 1

Personal benefits of being a peer support specialist (PSS) endorsed in a survey of 253 PSSs

Benefit	N	%
Helping others as a PSS has helped me in my own recovery	219	87
I feel more self-confident	198	78
I feel more emotionally stable	183	72
I am more satisfied with my life in general	182	72
I am more interested in my future career opportunities now	173	68
I am more financially stable	169	67
I have been able to connect more with family	112	44
I am able to do more recreational and leisure-time things	108	43
I have been able to socialize more with friends	101	40
I have been able to begin saving money	96	38
I have taken a paid vacation	88	35
I have a nicer place to live	81	32
I now have company benefits like medical or dental coverage	78	31
I purchased my own vehicle	66	26
I have been able to reduce the medication I am taking for my psychiatric symptoms	52	21
I now have a retirement account, like a 401K	46	18
I have been able to stop all medication I was taking for my psychiatric symptoms	20	8
I have purchased a house or a condo	19	8

reported being currently married; 93 (37%) were divorced, separated, or widowed; 78 (31%) reported never being married; and 26 (11%) reported living with a significant other. Before working for the agency, a large proportion of respondents reported being unemployed (N=164, 65%). Of the 164 individuals reporting prior unemployment, 159 answered our next question about the length of that unemployment. Of those, 56 (35%) had not worked for up to a year, 68 (42%) had not worked from one to five years, and 35 (22%) had not worked for more than five years (or had never worked for pay).

The mean±SD number of hours currently worked per week reported by respondents was 30.57±11.59 hours, and the mean reported amount earned per week was \$527±\$400. In terms of job tenure, 70 respondents (28%) had been working for the agency for less than six months, 31 (12%) from seven months up to one year, and 62 (25%) for one to two years; the other 88 (35%) had been working for the agency for more than two years. A positive trajectory of hours worked was evident, with reported work hours increasing significantly over time ($\chi^2=132.75$, $df=9$, $p<.001$).

Whether a person continued to receive disability benefits was not related to length of employment at

the agency. We compared respondents with less than six months of employment and those with more than six months and found no significant difference in the proportions receiving disability benefits; however, receipt of benefits was, not surprisingly, strongly and inversely related to hours worked ($\chi^2=60.51$, $df=3$, $p<.001$). Of the 14 respondents who reported working fewer than 12 hours per week, six (43%) were receiving SS disability benefits. Among the 134 who were working full time, 125 (93%) were not receiving benefits.

Of the 139 respondents to the first survey, 44 (32%) reported receiving SS benefits when they began their employment at the agency, and 26 of these individuals (59%) reported discontinuation of benefits as a result of their employment. Unexpectedly, a small number of individuals reported an increase in or initiation of disability benefits after they began employment. Those respondents may have been counseled to pursue benefits because they were able to work only part-time. The mean amount of reported SS benefits per month before employment was approximately \$816±\$322. Of the 253 respondents to the first survey, 102 (40%) reported discontinuing other public benefits. These included Medicaid or Medicare (N=50, 20%), housing

assistance (N=18, 7%), food stamps (N=74, 29%), and other public benefits (N=13, 5%).

Table 1 presents data on responses to the item about personal, social, and professional benefits. Notably, 87% (N=218) reported that being a PSS helped their own recovery. Others reported greater stability and increased self-esteem, as well as other benefits.

Two authors (KF-N and ESR) thematically analyzed the open-ended item ("If there are any other ways in which your life has gotten better because of your work at [the agency], please feel free to tell us how."), which yielded themes similar to those listed in Table 1. Benefits were evident in the intra-personal, social, mental health, spiritual, and professional domains. There were many references to increased self-efficacy and self-esteem as a result of employment and "positive changes in my personality" and feeling "more emotionally stable." One individual stated that employment "completely changed (positively) what I thought was possible for me," and another stated that "my self-esteem has never been better." Individuals stated that their employment had a "positive effect on my recovery" and that they "had better communication with others" and felt a greater sense of "belonging" and support. Several individuals described having better relations with family members and feeling less stigmatized. Spiritual benefits were also mentioned, including having a sense of "meaning in life" and "giving back." Professionally, individuals reported having more knowledge about recovery, refocusing on their education and career, and feeling more confident as an employee. There were also a small number of negative comments, almost exclusively about the low salary and benefits. [Additional analyses about the relationship between length of employment and benefits of being a PSS are presented in an online data supplement to this report.]

Discussion

The respondents reported a variety of benefits, including greater confidence as workers and improved perceptions of their health and recovery. Some reported that the benefits were profound. Many respondents had been

unemployed for a long time and had received a variety of public benefits before their employment at the agency. Taken together, the results point to significant cessation of public benefits when one considers how few individuals with psychiatric disabilities nationwide leave the SS disability benefit rolls (15). Administrative data from the agency suggest that approximately \$7.8 million was paid in wages to PSSs during this period (the 2011 calendar year), with an estimated \$1.1 million paid by these employees in federal taxes for one year.

Several limitations should be noted. First, these data were obtained from one agency at one point in time; polling other such agencies might have resulted in different findings. Second, the survey items were constructed to solicit the benefits of being a PSS and were positively worded, although there was an opportunity for respondents to express negative comments in the open-ended question. The overwhelming proportion of individuals who endorsed improved recovery from their employment suggests that the positive valence of these items did not invalidate the benefits. Finally, we conducted a follow-up survey with a subset of the original sample to more accurately describe changes in disability benefits.

Conclusions

There is growing interest in better understanding the peer workforce, including work roles (2), effectiveness (3), and the benefits of being a PSS (12). Such employment may be a potent vehicle for improving recovery, interpersonal relations, quality of life, and career development. At the same time, benefits accrue to society through this growing workforce because of the large numbers who are gainfully employed and the subsequent reduction in public benefits.

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