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CONCEPT PAPER

Bringing peer-run respites to Massachusetts

What our goals are

The National Empowerment Center (NEC) seeks to introduce innovative peer-run respites to Massachusetts, and further, to prove their efficacy in order to spread this model to other states. “Peer-run respites” are crisis services to help people manage severe emotional distress without having to go to a locked psychiatric hospital. “Peer-run” means these services employ a staff of “peers” rather than clinicians. The peers have themselves been through crisis, and now are in recovery. “Respites” means safe, warm, comfortable, home-like environments to get away from stress and learn how to recover a full life in the community. The target population for the peer respites is adults, early in psychiatric crisis, to avert the need for more intrusive crisis services.

Studying the effectiveness of peer-run respites will show they hasten recovery from crisis, and are cost-effective, because they avoid emergency room use and inpatient hospitalization. Such an evaluation study could show that recovery is strengthened for guests in peer-run respites.

What we know

Peer-services, in general, and peer-run respites, specifically, are under-researched. However, these services have been shown to be helpful (Campbell 2005) and cost effective (Ostrow 2009). In one study, a peer-run residential crisis service (formerly operating in California) was compared, in a controlled trial, to a county mental hospital. The peers in the study were at risk for civil commitment. From a county emergency department, the peers were randomly assigned to either the peer-run crisis program or the county hospital. Outcomes were better for the peer-run crisis residential program where peers had greater satisfaction with services and higher scores on mental health tests (Greenfield et al., 2008.)

Currently, twelve peer-run respites exist in the United States: in New Hampshire, Ohio, Maine, Georgia, Nebraska, and Alaska, three in New York State, and three in West Virginia. Other peer-run respites exist worldwide: in England, New Zealand, and the Netherlands. Several new programs are being created in the US.

Peer-run respites tend to be located in rural or suburban neighborhoods. Three of the best programs are Rose House in Poughkeepsie, New York; Stepping Stones, near the center of the small town of Claremont, New Hampshire; and the Peer Support and Wellness Center, in Decatur, Georgia, “a large city with a small town feel,” near public rail transportation. These programs have between 2-5 private bedrooms. Their budgets are approximately \$300,000 per year.

Peer-run respites in other states are both *alternative and complementary* to existing mental health programs. Services are usually free to consumers. Funding in Georgia and New York comes from state or county mental health departments. In New Hampshire, Stepping Stones is funded in part by SAMHSA block grants. Peer-run respites are created with conversion funds from closing state hospitals. Rose House in New York costs the county about \$250 per day for each of five individual bedrooms, compared to a mental hospital bed in the area at about \$1,000 per day. Peer-run respites are often operated by peer-run organizations that offer an umbrella of other programs as well.

What we propose to do

By partnering with recovery-oriented leaders, and tapping into the energy of the recovery movement, NEC can find the talent and funding to staff peer-run respites in Massachusetts. Funding can be found through federal, state and foundation sources. The following steps will make peer-run respites a reality in Massachusetts, and help spread this model to other states:

Draw together the peers to run it: The talent exists to staff and direct a high-quality program in Massachusetts. Since January 2009, about a dozen leaders and emerging leaders in the recovery movement have met monthly at the Cambridge home of NEC director, Dr. Daniel Fisher. These peers are well-informed, progressive-thinkers on dealing with crisis and experienced in program management. They include leaders at Recovery Learning Communities, The Transformation Center, MASS WRAP, peer-support groups, and peer specialist working in variety of mental health programs. In addition, many peers are eager to work in crisis services as this is an area of the mental health field a lot of people have strong personal feelings about, having been through difficult times with conventional crisis services.

Set up funding: The Massachusetts department of mental health has indicated willingness to partner with NEC to find funding to create peer respites, and study them. NEC is also exploring foundation and federal SAMHSA grants.

Find a location: Selecting a location for a residential house, probably in a Central or Western Massachusetts will take 6-8 months due to NIMBY issues, based on the experiences of other peer-run respites in other states.

Decide on training: There are many excellent training programs for the skills peers need to work in peer-run respites, including compassionate listening, boundary setting, and self-care. Training could come from a combination of Shery Mead’s Intentional Peer Support; Immersion Training at Rose House; Certified Peer Specialist training (CPS); emotional-CPR and Recovery

Dialogues from NEC; MASS WRAP; and Lenora Kimball's training, based on her five years of experience as director of Stepping Stones, which is "soup-to-nuts" assistance with everything from dealing with real estate brokers for finding a site to designing policies & procedures.

Design a research protocol to study effectiveness: One approach to evaluation is to survey satisfaction with services upon guests leaving the peer-run respite. Additional surveys could be collected through outreach one year later. Such an evaluation is easy and inexpensive. Another approach is to determine if guests use less services after using the peer-run respite, especially fewer hospitalizations.

Why NEC is uniquely able to be successful

The National Empowerment Center (NEC) is a leading peer-run organization, carrying forward the message that everyone diagnosed with mental illness can recover. NEC is funded by SAMHSA as a national technical assistance center for the consumer movement. For nine years, NEC has operated a crisis suite at the annual Alternatives Conference, which is a 4-day conference. Alternatives brings together about 700 peer leaders from across the country. It takes place in a conference center in a different city every year. Some peers describe the Alternatives Conference as intense. Yet, in nine years NEC has run Alternatives, no consumer has never been transferred from the crisis suite to an emergency room or inpatient psychiatric care.

References

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