

PEER RECOVERY COACHING: RECENT EVIDENCE REVIEWS

Bill White June 2016

Peer-based recovery support services (P-BRSS) and the broader and more distinct arena of recovery coaching are growing exponentially in the United States and other countries. Peers, generally defined as people with lived experience of addiction recovery, are providing a wide variety of support services from initial outreach and engagement to long-term personal/family recovery support and doing so within a growing variety of service settings, including recovery community organizations, harm reduction programs, addiction treatment programs, primary health care facilities, the criminal justice system, and the child welfare system. The growth of P-BRSS has triggered policy makers, planners, payors, and local service providers to question the degree to which such expansions are justified by studies of the effectiveness of such services.

Scientific evaluation of the effects of P-BRSS on long-term recovery outcomes has been plagued by widely varying role definitions, diverse service settings

and populations, small samples, short follow-up periods, lack of consensus on outcome measures, and a lack of comparison or control groups. While studies of greater methodological rigor are clearly needed, the number and quality of such studies has increased to a point to warrant recent reviews of the available scientific literature. The evolution of review findings between 2009 and 2016 are revealed in the following summary statements.

“There are independent studies of particular peer-based recovery support services that have been linked to enhanced engagement, access, treatment completion, and improved long-term recovery....Positive studies of key service elements provided by recovery coaches suggest that P-BRSS [peer-based recovery support services] is a potentially promising practice as an adjunct to addiction treatment. Any determination of the extent to which P-BRSS can elevate long-term recovery outcomes will require additional studies of such services.” (White, 2009)

“Studies [of peer recovery support for individuals with substance use disorders] demonstrate improved

relationships with providers and social supports, increased satisfaction with the treatment experience overall, reduced rates of relapse, and increased retention in treatment. It is clear that peer support services can provide a valuable approach to guiding consumers as they strive to achieve and maintain recovery.” (Rief, et al, 2014) “...the general conclusion from the body of evidence is that participation of peers in recovery support interventions appears to have a salutary effect on participants and makes a positive contribution to substance use outcomes. The individuals studied generally had complex needs in addition to substance use issues and benefitted from the support of peers across diverse types of interventions.” (Bassuk, et al, 2016)

In my [2009 monograph on P-BRSS](#), I outlined a comprehensive recovery research agenda related to the design and delivery of such services. Although evaluations to date of P-BRSS suggest great promise, most of the questions posed within that proposed 2009 research agenda have yet to be studied and answered. Lacking a federal commitment to such research, those questions will need to be answered within state and

local P-BRSS evaluation efforts. That process is underway.

References

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