



STATE OF THE ART

RECO-PEERS

RECOvery and PEER Support in substance use treatment

Promotors

Stijn Vandavelde, Louis Favril Wouter Vanderplasschen (UGent)

Jessica De Maeyer, Clara De Ruysscher (HOGENT)

Elodie Schils, Luc Robert (NICC/INCC)

Keywords

Peer support, Recovery, Substance abuse treatment, Prison, Experts by Experience, Peer support workers

1. Introduction

Despite the general and evidence-informed recognition of the value of peer work in recovery-oriented addiction support, the structural integration of peer work in the addiction field remains challenging. The overall goal of the RECO-PEERS project is to address these challenges to enhance and expand the embedment of peer workers in the broad field of addiction support services as well as prison contexts in Belgium. More specifically, the objectives of this project are fourfold as we intend to:

1. Gain insight into the evidence base and inspiring practices on implementing peer work in mental health care, addiction treatment and prison settings (WP1)
2. Map the current implementation of peer workers in addiction services and prison contexts (WP2)
3. Evaluate the implementation and service delivery of the ten D&D projects in Belgian prisons (WP3)
4. Develop a comprehensive policy framework for the structural embedment of peer workers in addiction services and prison contexts (WP4)

This study will provide a scientifically grounded overview of the factors that facilitate or obstruct the implementation of peer workers within various addiction recovery settings. It will explore how peer support is perceived by those who benefit from it, as well as by other stakeholders. Additionally, the study will offer a set of evidence-informed policy recommendations and guidelines concerning the institutional role of peer workers in addiction recovery, also in prison settings.

2. State of the art

Current state of the art

The following narrative aims to synthesize main findings from previous research, with a focus on current knowledge gaps and how this study aims to tackle these.

In recent years, the integration of peer workers into mental health care and addiction treatment has increasingly been recommended across international policy frameworks and guidelines (Mirbahaeddin & Chreim, 2022). Drawing on their own ongoing or previous experiences of mental health and/or substance use recovery, peer workers play an important role in recovery-oriented service delivery at different levels: (1) providing individualized care and support to those in recovery; (2) enhancing the accessibility of services; and (3) promoting de-stigmatization and inclusive citizenship (Van Steenberghe, 2020). While there is a long-standing tradition of employing people with lived experience in certain areas of addiction support, such as therapeutic communities (TCs) and harm reduction services, the use of peer workers in other settings remains a relatively new and evolving practice. In Belgium, this expansion is largely driven by reforms like Article 107 and the ongoing transition towards recovery-oriented addiction services. Additionally, the involvement of peer workers with lived experience of incarceration and substance use in mental health services within prisons has become a growing focus of international research in recent years (Best et al., 2024; DeHart & Mason, 2022; Lindström & Rantanen, 2021; Lindström et al., 2024; McCrary et al., 2022; Ray et al., 2021; Stack et al., 2022; Walton et al., 2024).

Generally, the involvement of peer workers is considered an important strength in realizing recovery-oriented addiction support. For example, their involvement can promote long-term recovery, reduce stigma by offering hope, and bridge the gap between treatment services and the lived realities of those struggling with addiction (Åkerblom & Ness, 2023). Specifically related to prison contexts, a recent systematic scoping review reported positive effects of peer work in terms of "disease detection, mental health, pre-release and post-release behavior and improved knowledge and skills, but findings cannot be generalized due to small samples sizes and broad implementation" (Walton et al., 2024). In the same vein, McCrary et al. (2022) and Stack et al. (2022) identified positive outcomes of the implementation of peer workers

in prison contexts such as reduced recidivism and substance use (Bellamy et al., 2019; Mowen & Boman IV, 2018), improved well-being (Bagnall et al., 2015), and reduced symptom severity (Thekkumkara et al., 2023) among those receiving peer support. Additionally, research indicates that involving peer workers with lived experience of detention and substance use benefits the peer workers themselves, leading to improvements in their mental health, the development of a positive new identity, and progress in their own recovery process (Bagnall et al., 2015; Barrenger et al., 2020; Lindström et al., 2024). Related to gender-responsive issues, peer workers are also recently mentioned as a way forward to tackle discrimination towards women in mental health (Chevillotte & Dondé, 2024).

Despite these strengths, the implementation of peer workers in addiction services faces several challenges. First, despite recent developments towards recovery-oriented service delivery, there remain questions about the positions and roles of peer workers in these services. In that respect, research suggests that peer workers have the greatest transformative potential for recovery-oriented services when they are involved as partners in co-creation at the organizational level, where they can help shape and innovate service delivery. However, in most mental health and addiction services, peer workers are typically engaged in co-production, where they deliver predetermined services but have limited influence on broader organizational practices (Åkerblom & Ness, 2023). While their peer support remains valuable, this restricted role limits their ability to challenge and transform 'business as usual'. Additionally, while it is generally recognized that peer workers play an important role in recovery-oriented service delivery, power imbalances related to professional background still institutionally echo in the unequal remuneration and insecure job positions of peer workers (Mirbahaeddin & Chreim, 2022). Moreover, there is an increasing demand for comprehensive training and intervision programs, not only for peer workers but also for the teams in which they work (Mirbahaeddin & Chreim, 2022; Van Steenberghe, 2020). Additionally, the structural implementation of peer workers in prison settings presents unique challenges, including variations in prison types, security concerns, ethical challenges and the often ambiguous status of peer workers, particularly regarding their affiliation—whether tied to the prison itself or an external community-based mental health service. One of the most significant challenges is fostering an open prison culture, which is crucial for creating an environment that can effectively support and facilitate the integration of peer-based support services (McCrary et al., 2022).

Despite the general and evidence-informed recognition of the value of peer work in recovery-oriented addiction support, the structural integration of peer workers in the addiction field remains challenging. In that respect, Reeves and colleagues (2024) have identified four critical factors contributing to the effective integration of peer roles at organizational level: (1) education and training; (2) organizational readiness, including role clarity and recruitment and induction; (3) structural adjustments, including professional supervision; and (4) commitment to peer integration and recovery practice, including leadership and championing. In the same vein, studies focusing on peer work in prison emphasize that the successful implementation of peer support interventions hinges on addressing individual, service-level, and organizational factors (Walton et al., 2024), and on adopting a capacity-building approach that fosters partnerships between prison and health services (South et al., 2016). However, in the Belgian addiction treatment as well as the specific prison context, while there is growing support and funding for peer workers, these structural dimensions remain underexplored. More research is needed to fully understand the place of peer workers and how to best support their sustainable integration in addiction services and prison settings in Belgium.

While we acknowledge that the embedment of experiential knowledge and peer support can take many forms—ranging from voluntary self-help groups and peer-run services to the formal integration of peer workers within services—the scope of this project focuses specifically on the formal implementation of peer workers in structured service settings (Solomon, 2004).

International perspective

The RECO-PEERS project is situated within a broader international trend that increasingly emphasizes the structural integration of experiential knowledge into health care policy, practice and research (World Health Organization, 2021). This trend reflects a growing recognition of the value that lived experience brings to improving service delivery and health outcomes. As recent as May 2024, at the 77th World Health Assembly (WHA), Member States endorsed a landmark resolution to implement, strengthen, and sustain regular and meaningful social participation in decision-

making processes for health (World Health Assembly, 2024). Embedding experiential knowledge into (mental) health systems not only improves care but also advances the realization of the human right to health, fostering more inclusive and responsive health care systems that leave no one behind (De Ruyscher et al., 2024). In line with this global shift, Mental Health Europe champions co-creation as a vital framework for mental health systems, encouraging collaboration between individuals with lived experience and professionals to design and implement services and policies. Similarly, across Europe, there is a growing momentum to embed peer workers in addiction and mental health services, as well as in justice systems. Various countries are moving towards formalizing the role of peer workers, acknowledging their unique contribution to bridging gaps between traditional services and the lived realities of people facing addiction or mental health challenges. A leading example of peer work integration in addiction treatment comes from the UK's Lived Experience Recovery Organizations (LEROs), community-based services supporting people in recovery from problems with alcohol and/or drug use that are founded and led by people with lived experience of recovery. With 33 LEROs across the UK, they operate on three principles: responsiveness to community needs, co-creation, and a human rights-based approach. To strengthen the RECO-PEERS project, we will closely collaborate with experts who are closely involved in the roll-out of LEROs in the UK:

- Dave Higham is founder of LERO "The Well" (<https://www.thewellcommunities.co.uk/>) and chair of the College of Lived Experience Organizations (CLERO, <https://www.clero.co.uk/>). He has played a pivotal role in developing quality standards for peer-based recovery support services that inform the UK's national Commissioning Quality Standard. His work is informed by his own lived experience of addiction, incarceration and recovery;
- Dr. Ed Day is a psychiatrist and associate professor in Psychiatry at the University of Birmingham. Appointed as the National Drug Recovery Champion by the UK government in 2019, he is leading expert in the development of peer-based recovery support services within addiction treatment.

These collaborations will allow the RECO-PEERS project to draw on best practices from the UK's cutting-edge peer-based recovery initiatives. More broadly, the RECO-PEERS project aligns with and actively contributes to the above-described international efforts by integrating experiential knowledge into every phase of the project, both by collaborating with a lived experience co-researcher throughout the project and by ensuring the involvement of people with lived experience in each work package. Our participatory approach ensures that policy recommendations are co-created with the people they are meant to serve, reflecting not only academic and professional knowledge but also the invaluable insights of lived experience, fully aligned with the emerging European and global standards.

Objectives

This project seeks to strengthen and broaden the structural integration of peer workers within addiction support services and prison settings in Belgium. The aim is to address gaps identified in scientific literature, practice and policy. These gaps involve key factors necessary for the effective incorporation of peer roles at the organizational level: (1) education and training; (2) organizational readiness, including role clarity, recruitment, and induction; (3) structural adjustments, such as professional supervision; and (4) a commitment to peer integration and recovery practices, supported by leadership and advocacy (Reeves et al., 2024). Moreover, existing research highlights issues of power imbalances, unequal pay, and job insecurity for peer workers (Mirbahaeddin & Chreim, 2022). In the prison context, additional challenges arise, including ethical concerns and the often unclear status of peer support workers. Studies on peer work in prisons emphasize that successful implementation depends on individual, service-level, and organizational factors (Walton et al., 2024) and advocate for a capacity-building approach that fosters collaboration between prison and health services (South et al., 2016). However, in the Belgian addiction treatment system and prison settings, these structural dimensions remain underexplored. Thus, research is necessary to fully understand the role of peer workers and to develop strategies for their sustainable integration in these settings, which is the focus of this study.

The overall goal of the RECO-PEERS project is to address the above-described gaps and to enhance and expand the embedment of peer workers in the broad field of addiction support services as well as prison contexts in Belgium. More specifically, the objectives of this project are fourfold as we intend to:

- (1) Gain insight into the evidence base and inspiring practices on implementing peer workers in mental health care, addiction treatment and prison settings (WP1)**

- Provide an overview of existing evidence on implementing peer workers in mental health care, including addiction treatment and prison contexts;
- (2) Identify international inspiring practices of implementing peer workers in addiction treatment and prison contexts.**
 - Map the current implementation of peer workers in addiction services and prison contexts (WP2)
 - Identify where and how peer workers are currently implemented within addiction services and prisons;
 - Identify challenges, gaps, and opportunities for enhancing the implementation of peer workers in these contexts;
 - Gain insight into the practices and challenges of the ten newly implemented D&D practices in prison, from the perspectives of D&D coordinators and peer workers.
- (3) Evaluate the implementation and service delivery of the ten D&D projects in prisons (WP3)**
 - Assess the implementation process of peer workers in the D&D projects, with a focus on the perceptions of key prison stakeholders;
 - Assess the implementation process of peer workers in the D&D projects, with a focus on the experiences of the peer workers themselves;
 - Assess the service delivery of peer workers in the D&D projects, with a focus on the perspectives and experiences of detainees.
- (4) Develop a comprehensive policy framework for the structural embedment of peer workers in addiction services and prison contexts (WP4)**
 - Identify critical themes and co-creatively develop strategies to successfully and structurally implement peer workers in addiction services and prison contexts;
 - Identify lessons learned and provide recommendations for scaling up and sustaining the implementation of peer workers in prison contexts.

Methodology

Figure 1 provides a comprehensive overview of the planned work packages (WPs) in the RECO-PEERS project. The mixed-methods sequence of the WPs is designed to start with a wide perspective and progressively narrow the focus, while ensuring that stakeholders are increasingly involved throughout the process. Additionally, we have chosen to integrate the focus on the prison context throughout the project design, as highlighted in orange, rather than treating it as a separate research track.

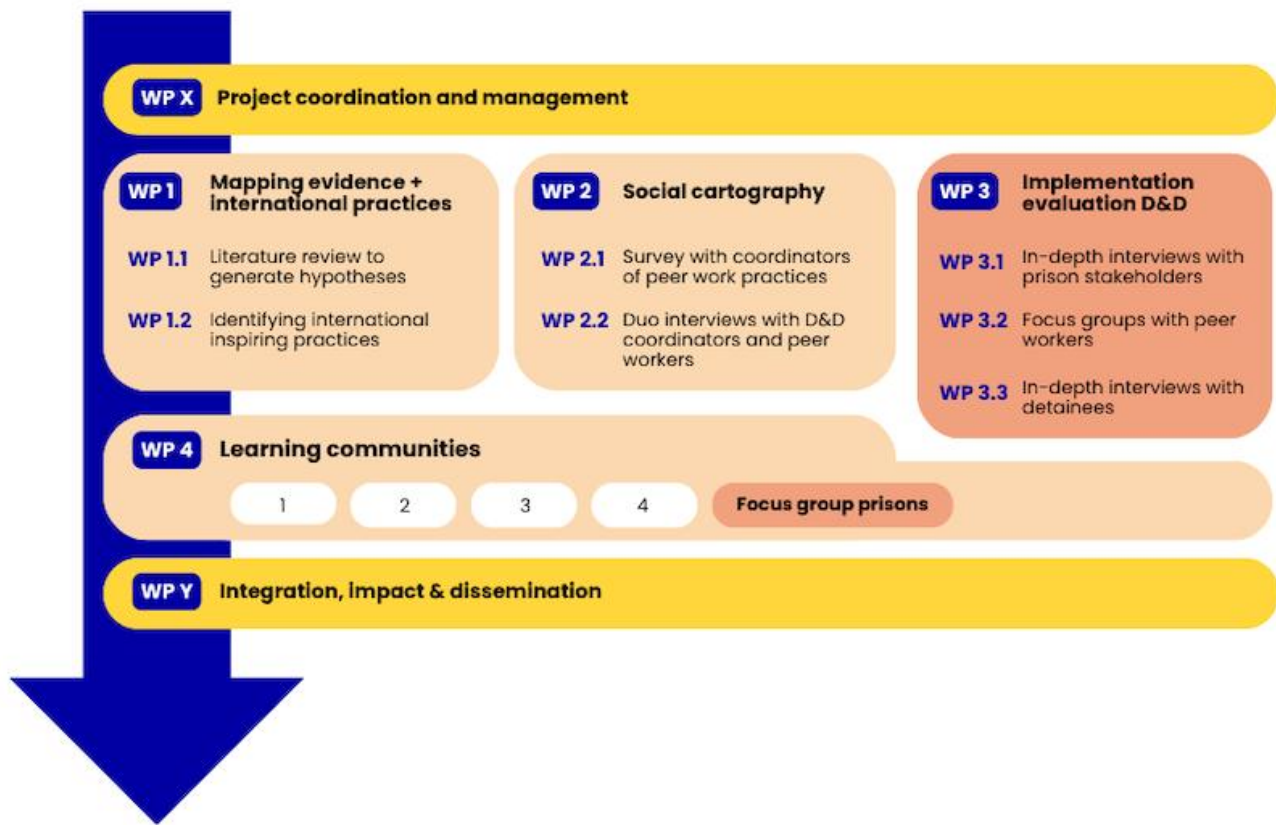


Figure 1 - Overview of work packages

Expected recommendations

We have designed the research project to generate impact not only after its completion, but also throughout its course. A key element of this approach is the close collaboration with a co-researcher with lived experience of addiction in all phases of the research process. This collaboration has an impact on both the co-researcher and the overall research team. For the co-researcher, being involved as an equal partner validates their lived experience as a valuable source of knowledge. It can also support their own recovery process by fostering personal growth, professional development and a new sense of identity. At the same time, this co-creative process helps the research team blend academic knowledge, not only with professional knowledge but also with experiential knowledge in an equal way, enhancing the overall quality and impact of the project. In addition to the close collaboration with the lived experience co-researcher, we have ensured that perspectives grounded in lived experience are well-represented throughout the project by incorporating their participation in each work package.

In the same vein, the RECO-PEERS project will create impact during its execution by collaboratively developing policy recommendations within the learning communities (WP 4), that are composed of practitioners and peer workers from addiction services. For the D&D projects, a focus group will be organized. This collaborative process not only ensures that the recommendations reflect the realities and challenges faced by those directly involved in the field but also fosters a sense of ownership among the stakeholders, thereby increasing the likelihood of successful implementation. To further validate these co-developed policy recommendations, we will organize one focus group with federal policymakers in the field of addiction support and one focus group with policymakers in the field of detention in the final phase of the research project. Based on these focus groups, we will finalize policy recommendations, focusing on the implementation

of peer work in addiction services and as well as prison contexts. This participatory way of working guarantees the ecological validity and relevance of the recommendations created, and enhances their sustainable embedment.

Upon completion of the project, we plan to disseminate our findings among policy makers through various channels:

- At international level, we will share these recommendations with influential policy organizations such as the EUDA and the WHO.
- At national level, we will present our recommendations to the General Policy Cell Drugs and distribute them to the relevant federal and regional ministries responsible for Health, Justice, Welfare, and Education. The inclusion of the Education ministry might seem further removed from our project but is particularly important, as we anticipate that our research will highlight the need for further training and supervision of peer workers and teams.
- At national level, we also plan to liaise with the Superior Health Council (“an independent network of experts that provides scientifically based advice on public health to policymakers and healthcare workers operating under the authority of the Federal Public Service for Public”) about the possibility to further validate the developed guidelines and recommendations, analogously with a project on off-label use of psychotropic drugs for people with intellectual disabilities, that we were previously involved in.

To disseminate findings among practitioners in the fields of addiction and prison services, we will adopt a multifaceted approach:

- In collaboration with the multimedia team at HOGENT, we will produce a series of informative video clips, each approximately 15 minutes long, focusing on key insights and recommendations from each work package. These clips will be made available in Dutch, French, and English to ensure broad accessibility. Our prior experience in creating similar dissemination materials, such as for the BELSPO-financed SUMHIT project, will guide this process. We will spread these video clips to all relevant organizations via the 20 regional mental health network coordinators as well as the central prison administration.
- We plan to host one Dutch-language and one French-language interactive webinar to provide an overarching view of the project’s outcomes. These webinars will offer practitioners, including peer workers, an interactive platform to connect, engage with the findings and discuss practical applications within their own work contexts.
- Upon completion of the project, we will write a summarizing article to be published on the VAD website and aim to produce at least one publication in a widely circulating professional journal such as *Psyche*.
- Despite the relatively short duration of the RECO-PEERS study, we do not intend to wait until the end of the project to start dissemination. Throughout the project, we will keep the field updated about ongoing research activities and intermediate results through our social media channels, such as LinkedIn.

Individuals facing substance use problems are still among the most stigmatized populations in society, often encountering social exclusion and discrimination, both in public perception and within our (mental) health care systems. Overall, through the RECO-PEERS project, we aim to significantly contribute to the structural embedment of peer workers in addiction services and prison contexts, recognizing the transformative potential of lived experience in fighting stigma. By sustainably integrating peer workers into these environments, we do not only seek to enhance service delivery but also aspire to foster a broader societal shift that promotes inclusive citizenship and improved quality of life for those affected by addiction.

Bibliographic overview

Åkerblom, K. B., & Ness, O. (2023). Peer workers in co-production and co-creation in mental health and substance use services: a scoping review. *Administration and Policy in Mental Health and Mental Health Services Research*, 50(2), 296-316.

- Bagnall, A.-M., South, J., Hulme, C., Woodall, J., Vinall-Collier, K., Raine, G., Kinsella, K., Dixey, R., Harris, L., & Wright, N. M. (2015). A systematic review of the effectiveness and cost-effectiveness of peer education and peer support in prisons. *BMC public health*, 15, 1-30.
- Barrenger, S. L., Maurer, K., Moore, K. L., & Hong, I. (2020). Mental health recovery: Peer specialists with mental health and incarceration experiences. *American Journal of Orthopsychiatry*, 90(4), 479.
- Bellamy, C., Kimmel, J., Costa, M. N., Tsai, J., Nulton, L., Nulton, E., Kimmel, A., Aguilar, N. J., Clayton, A., & O'Connell, M. (2019). Peer support on the "inside and outside": building lives and reducing recidivism for people with mental illness returning from jail. *Journal of Public Mental Health*, 18(3), 188-198.
- Best, D., Critchlow, T., Higham, D., Higham, K., Thompson, R., Shields, D., & Barton, P. (2024). Delivering peer-based support in prisons during the COVID pandemic and lockdown: Innovative activities delivered by people who care. *International Journal of Offender Therapy and Comparative Criminology*, 68(10-11), 1161-1174.
- Chevillotte, E., & Dondé, C. (2024). Peer workers to address discrimination against women in psychiatry and mental health. *L'Encephale*, 50(1), 108-110.
- DeHart, D., & Mason, G. (2022). Certifying Incarcerated Persons as Peer Support Specialists: A Qualitative Exploration of A Prison-Based Program. *Alcoholism Treatment Quarterly*, 40(4), 464-480.
- De Ruysscher, C., Magerman, J., Goethals, I., Chantry, M., Sinclair, D.L., Delespaul, P., De Maeyer, J., Nicaise, P., & Vanderplasschen, W. (2024). Islands in the stream : a qualitative study on the accessibility of mental health care for persons with substance use disorders in Belgium. *FRONTIERS IN PSYCHIATRY*. 15.
- Lindström, J., & Rantanen, T. (2021). Experts of the streets: The thoughts of experts by experience with a history of crime and substance abuse on working as a team with professionals. *European Journal of Probation*, 13(3), 226-241.
- Lindström, J., Rantanen, T., & Toikko, T. (2024). Narratives of experts by experience: A journey from criminal to expert. *Journal of Social Work*, 24(3), 415-433.
- McCrary, H., Burden, E., Pierre, M. S., & Berkebile, B. (2022). Peer Recovery Support Services in Correctional Settings. Bureau of Justice Assistance, US Department of Justice.
- Mirbahaeddin, E., & Chreim, S. (2022). A narrative review of factors influencing peer support role implementation in mental health systems: implications for research, policy and practice. *Administration and Policy in Mental Health and Mental Health Services Research*, 49(4), 596-612.
- Mowen, T. J., & Boman IV, J. H. (2018). The duality of the peer effect: The interplay between peer support and peer criminality on offending and substance use during reentry. *Crime & Delinquency*, 64(8), 1094-1116.
- Ray, B., Watson, D. P., Xu, H., Salyers, M. P., Victor, G., Sights, E., Bailey, K., Taylor, L. R., & Bo, N. (2021). Peer recovery services for persons returning from prison: Pilot randomized clinical trial investigation of SUPPORT. *Journal of substance abuse treatment*, 126, 108339.
- Solomon, P. (2004). Peer support/peer provided services underlying processes, benefits, and critical ingredients. *Psychiatric rehabilitation journal*, 27(4), 392.
- South, J., Woodall, J., Kinsella, K., & Bagnall, A.-M. (2016). A qualitative synthesis of the positive and negative impacts related to delivery of peer-based health interventions in prison settings. *BMC health services research*, 16, 1-8.
- Stack, E., Hildebran, C., Leichtling, G., Waddell, E. N., Leahy, J. M., Martin, E., & Korthuis, P. T. (2022). Peer recovery support services across the continuum: In community, hospital, corrections, and treatment and recovery agency settings—A narrative review. *Journal of addiction medicine*, 16(1), 93-100.
- Thekkumkara, S., Jagannathan, A., Muliya, K. P., Joseph, A., & Murthy, P. (2023). Feasibility testing of a peer support programme for prisoners with common mental disorders and substance use. *Criminal Behaviour and Mental Health*, 33(4), 229-242.
- Van Steenberghe, T., Reynaert, D., Roets, G., De Maeyer, J. (2020). Ervaring werkt?! Ervaringskennis cocreatief inbedden in je organisatie. Acco.
- Walton, H., Sherlaw-Johnson, C., Massou, E., Ng, P. L., & Fulop, N. J. (2024). Peer support for health, social care, and educational needs in adult prisons: a systematic scoping review. *Public Health*, 236, 412-421.