

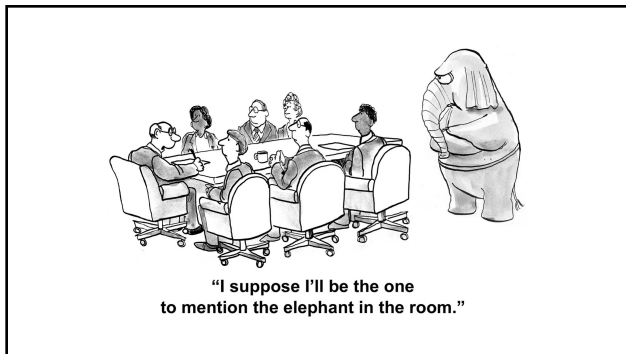




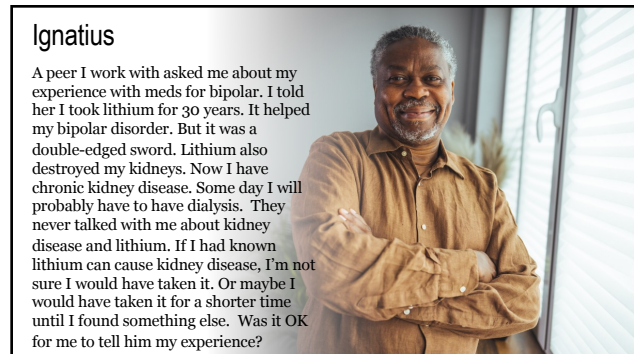
7



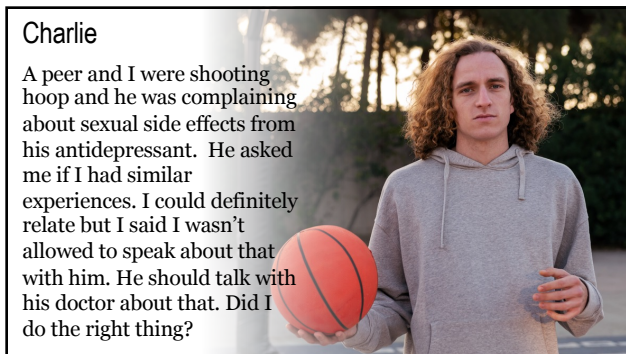
8



9



10



11



12

## Trinity

I am finally off all psych meds and I feel so much better. I have energy and it feels like my passion is back. I don't feel muted anymore. I did it very slowly and it took about a year. My doctor said he wouldn't help me taper off, so I found an online support group. Today a peer I am working with said he wanted to try to come off meds too. Is it OK to share the wisdom of my lived experience of coming off with him?



13

## Guidelines for disclosing lived experience with meds

- ✓ Be thoughtful. There is no cookbook
- ✓ Spend some time thinking about your personal limits when it comes to psych meds. What experiences might you share? What experiences do you choose not to disclose at this time?
- ✓ Generally speaking, follow the peer's lead. Let the peer bring up the topic of meds
- ✓ It's always good to remind our peer that we are not medical staff and we do not give medical advice
  - ✓ We never recommend starting, stopping, increasing or decreasing meds, over-the-counter products, herbs, supplements, diets, etc. (no matter how healthy)
  - ✓ We can help our peers find credible, scientifically sound information about products (including meds) in order to ask questions and discuss with the doctor or nurse
    - ✓ Medline Plus <https://medlineplus.gov/>
    - ✓ National Center for Complementary and Integrative Health <https://www.nccih.nih.gov/>
- ✓ After disclosing one of our experiences with meds, it's important to remind our peer that what worked for us might not work for them. One size does not fit all.
- ✓ Check in with your supervisor when unsure

14

## Guidelines for avoiding drift away from the role of peer supporter



15

## Coco

Drift away from peer role, into clinical role



16

## Pat's thoughts...

- ✓ Coco did good peer work when supporting Stephanie getting a telehealth visit set up
- ✓ Coco drifted from the peer role, into a clinical role, when she began her studies into her peer's readiness to reduce meds:
  - ✓ Peers do not assess peers for "readiness to reduce meds"
  - ✓ It's the medical team's role to do shared decision making about starting, stopping, increasing or decreasing meds (or supplements or over-the-counter drugs)
- ✓ The role of the peer specialist is to support people in becoming empowered self-advocates who have a voice and choice in decisions about meds
- ✓ Peer specialists support folks in finding credible information about meds and supporting people in presenting that to the provider

17



## Marisol

Drift away from peer role, into clinical role

18



### Pat's thoughts...

- ✓ Marisol had a strong and healing relationship with the program participant
- ✓ Marisol began to drift from the peer specialist role into a clinical role, when she began trying to persuade the participant to be compliant with meds in order to get the housing
- ✓ Peer specialists don't persuade or "get" people to do things including "getting" people to be compliant with meds
- ✓ Peer specialists support participants in having a voice and a choice in decisions about meds
  - ✓ Review requirements for housing eligibility with participant
  - ✓ Do a decisional balance worksheet to weigh pros and cons of housing options
  - ✓ Work to understand participant's challenges with using meds
  - ✓ Help participant prepare questions or concerns about meds for nurse

19



Jamal

Drift from peer role into paid friendship

20

### Pat's thoughts...

- ✓ Jamal remained focused on Sophia's goals which is great
- ✓ Jamal drifted away from the peer supporter role, into paid friendship
- ✓ If a person asks, it's usually fine for peer specialists to share their experience w/ CBD if it's legal in your state. However, it's always important to add: *"What worked for me may not work for you. It's important to talk with your prescriber about using CBD before you take it. I'm not a doctor and I can't recommend it to you. But I can support you in getting ready for to talk with your prescriber about that. I can even come to the appointment with you if that would help."*

21



Quentin

Drift from peer role into activism

22

### Pat's thoughts...

- ✓ Quentin has drifted away from the peer supporter role, into activism
- ✓ Peer supporters do not practice activism during paid work hours.
- ✓ Advocacy is a central role of peer supporters
- ✓ In situations where people want to come off meds, the role of peer specialists is to support people in advocating with a medical provider for deprescribing, med reduction, and/or med discontinuation
- ✓ Peer specialists support people in finding credible information, grounded in good science, and also help people prepare to discuss that information with medical providers.

23



Grace

Drift from peer role into medical role

24

### Pat's thoughts...

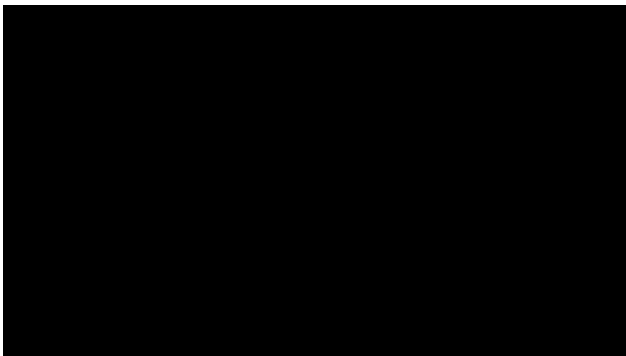
- ✓Med-box drops are not peer work
- ✓Transporting people to med clinic is not peer work
- ✓Transferring urine samples is not peer work
- ✓Taking vitals is not peer work
- ✓Transporting program participants to med clinic is not peer work
- ✓Grace is performing tasks of a Certified Nursing Assistant

25

### Authentic peer work that Grace could provide

- ✓ Help participant understand their legal rights and prepare a psychiatric advance directive if desired
- ✓ Help participant access credible, scientifically sound information about psych meds. Help participant prepare questions for doctor
- ✓ Listen if participant is angry about coercion, forced drugging or involuntary measures and validate the individual's perspective
- ✓ Help participant identify Personal Medicines and the things they can DO to get to the life they want
- ✓ Go to med appointments with participant if asked
- ✓ Support participant in developing their own story or understanding of "what happened to me". Represent that story when working with the rest of the team.
- ✓ Have some fun with the participant and in so doing, show that recovery can be NOW, not something way down the road

26








27

### Peer Specialists and Involuntary Treatment

- Never participate in "take downs" or other involuntary measures
- Influence team culture
- Hold the hope
- Validate the anger
- Help person exercise choice within the non-negotiable zone
  - Help person prepare for advocacy with authorities
- Explore psychiatric advance directive for future use

28

### Join our conspiracy of hope

-  patdeegan.pda
-  patdeegan
-  patdeegan.pda
-  patdeegan.pda
-  www.patdeegan.com/



29



30