

# Providing Peer Support in a Rural Environment



Jim Hajny  
Montana Peer Network





- Statewide 501c3 non-profit recovery organization
- Leading the Recovery Movement in Montana since 2011
- Mission is to lead the expansion and development of recovery oriented behavioral health services in Montana
- More than 1200+ members

[www.mtpeernetwork.org](http://www.mtpeernetwork.org)



- Resident experts for peer support services (10 years experience)
- Contract with the state for training, consultation, and TA around peer support services; developed a toolkit
- Facilitate Peer Support Certification training 4 times a year; Continuing Education courses
- Pilot innovative Peer Support Programs

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# Montana

- 1 million people (43<sup>rd</sup>)
- 255 miles x 630 miles (4<sup>th</sup>)
- 4 urban areas
  - Billings
    - Largest city – 109,000
  - Bozeman
  - Missoula
  - Great Falls



# Montana

- 45 of 56 counties qualify as rural or frontier
- We have members in 78 unique communities
- Large spaces with few people



# Behavioral Health Peer Support Specialist



- Peer support task force 2012-2015
- Certification went into effect October 1, 2017
- First certified BHPSS September 2018
- Peer Support becomes Medicaid billable July 1, 2019
- Peer Support groups become billable for SUD October 1, 2019

# Behavioral Health Peer Support Specialist



- 92 employed cBHPSS
- Working in 25 communities
- 51 provider agencies
- Predominantly MHC and SUD
- FQHC, primary care and criminal justice are rapidly coming on board
- Don't have peer support services for youth and families

# Challenges



- **Distance:** transportation
- **Stigma:** cowboy culture of pull yourself up by the bootstraps; resistance to recovery
- **Small communities:** small audience; Native American reservations



# Native American Reservations



- Montana has 8 reservations
- Provide certification training on reservations through Tribal Colleges
- Support the development of culturally appropriate peer support trainings
- Blackfeet and Crow have adapted our PS 101 training
- Chippewa/Cree and Northern Cheyenne have developed their own

# Challenges



- **Technology fluency**
- **Funding:** city = people = \$\$
- **Workforce development:** recruiting, training

# Solutions

- Outreach coordinator
- Brochures and literature
- E-newsletter
- Social media
- Ongoing in-person trainings & presentations
- Webinars
- Seats on Councils & Boards



# Solutions, cont.



- Always reflect recovery and peer support in a positive light
- Think long term: strategic planning, data collection
- Build partnerships
- Demonstrate effectiveness of Peer Support Services

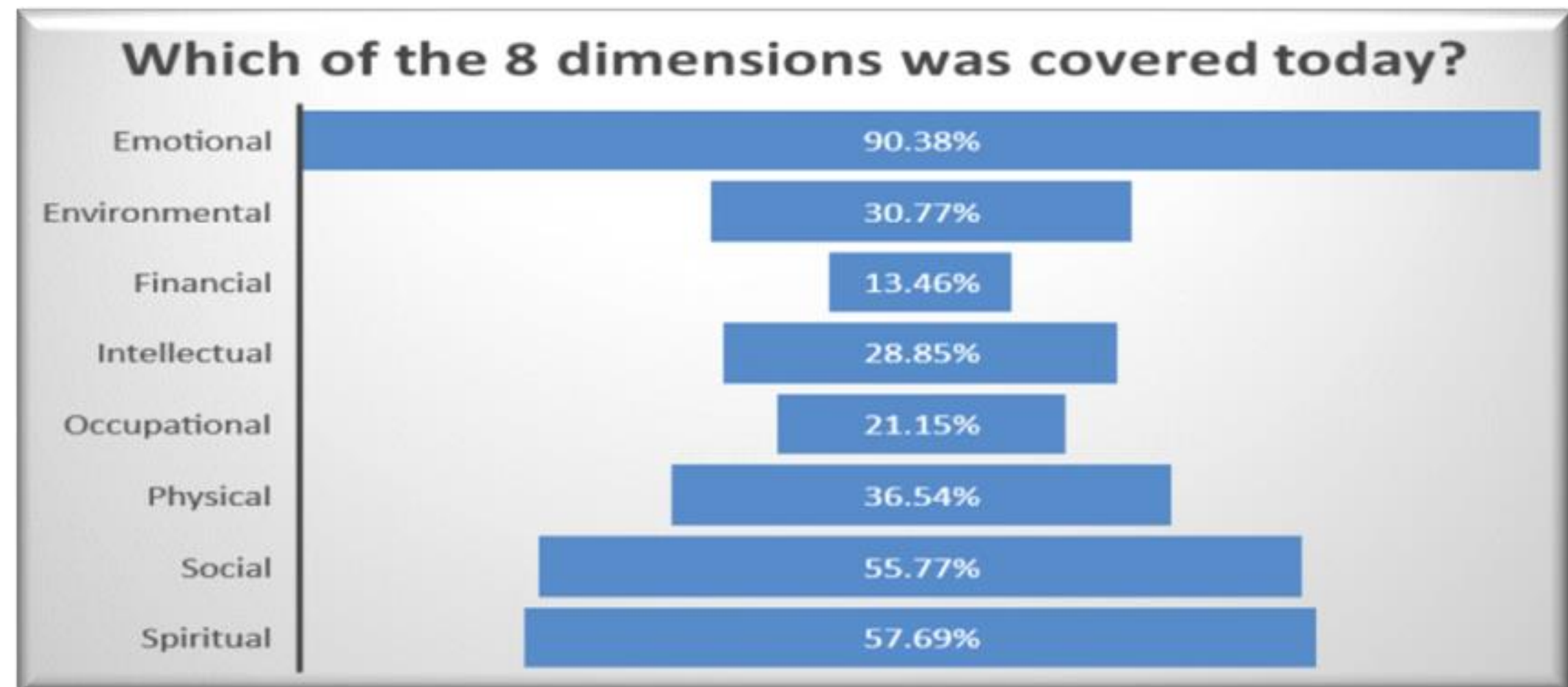
# Recovery Coach Outreach Pilot Project



- Townsend, MT (pop. 2,045)
- Implement community-based peer support (1)
- Fully funded for 12 months
- Provide Peer Support free of charge
- Collect data for performance outcomes
- Build partnerships
- Limited resources
- Find long-term home for the program

# Recovery Coach Outreach Pilot Project

- This prevention program aims to provide community-based peer support in rural community that has very few resources
- 8 dimensions of wellness
- Referrals come from – law enforcement, Health Center, one counselor, flyers
- Community MH awareness walk and MH film – 200 attendees
- Commission has agreed to hire peer supporter



# Recovery Coach Outreach Pilot Project



- Gallatin County, MT (pop. 100,334)
- 2014-2017
- Implement community-based peer support (2)
- Fully funded for 19 months
- Provide Peer Support free of charge
- Collect data for performance outcomes
- Build partnerships – Sheriffs office (DC, PR, PD)
- Demonstrate effectiveness of peer support in crisis response

# Recovery Coach Outreach Pilot Project

- This prevention program aims to divert individuals from high cost intensive or repetitive services and engage them in recovery
- 12-month period 2016-2017
- \$5 to \$1 cost savings per year
- Effectively demonstrated peer support could be effective in the community – led directly to a \$1 million peer support grant







Q & A





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