



PUERTO RICO

“How do you [best] match the funding to a proper representation [of patients]... use peers.”

INCORPORATING PEER SUPPORT SERVICES INTO TREATMENT TEAMS IN CORRECTIONAL FACILITIES & STATE HOSPITALS

Project Background, Vision, and Outcomes

Puerto Rico wanted to better address the needs of individuals in jails with mental health challenges who were reentering into the community. Mental health treatment services were already being provided in two correctional facilities and two forensic psychiatric hospitals, but these services did not have a peer support service component. To address this problem, Puerto Rico applied for Transformation Transfer Initiative (TTI) funding to supplement existing mental health teams by hiring, integrating and training peer support specialists in trauma-informed care to provide reentry support.

Puerto Rico was particularly interested in helping people in jail with a history of trauma, which can impact decision making and behavior that goes unrecognized as trauma-related. Several partners were involved in implementing this project including non-profits that hire peers and provide services, case managers and coordinators from

state and federal criminal justice agencies, judges, and the Department of Health who created visibility for their “invisible efforts and helped professionalize the peer support specialist role”.

The main outcome for this project was the number of people served, which is about 100 individuals a month. Through the award, 18 peer support specialists were able to attend an in-person training and 4-6 peer support specialists were hired with money allocated to assist them with specific barriers to employment (i.e., costs associated with being hired for the Puerto Rican government). Other measures of success included the ability to provide police with NARCAN training and increased collaboration with police officers.

Project Implementation: Challenges and Lessons Learned

The main challenge to project implementation was a lack of collaboration between justice and mental health

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partners. Clinical staff that worked inside jails did not always understand or appreciate the peer support model and viewed it as a challenge to their authority or domain. Stigma against using peer support services in health treatment models was also mentioned as an ongoing challenge.

Covid-19 also posed a huge barrier to accessing jails. Correctional settings in Puerto Rico limited access to jails and this prevented peers from being able to connect with their clients as intended. To mitigate the restricted access, they started working with similar programs (i.e., NARCAN training team) that already had access to jails and increased engagement with post-release clients and those in the federal court system.

The teachable moment from this project was learning that peers need to be involved in more programming and service delivery initiatives including occupying administrative roles within state government. Additionally, more information and better systems are needed to understand how to best utilize and manage peers in the workplace (i.e., designated workspaces) and establish reporting relationships before starting on the job.

Sustainability and Project Legacy

This project was developed to expand peer support services within correctional facilities and state hospitals in Puerto Rico. After the project period, they plan on continuing to provide peer support services so long as funding is available. The legacy of this project was highlighting the utility of peer

support services in programming at the intersection of mental health and criminal justice.

Health Equity

This project was designed to improve the health equity of individuals with mental health needs involved in the justice system using support from peers with lived experience. Peers that are hired represent the target population, which is one that is often underserved in behavioral health services and can benefit from additional supports.

Peer Services Utilization

This project was designed to increase the use of peer support services, by hiring and training more peers in trauma-informed care. The interviewee stated that there is an ongoing need to codify and formally incorporate peers into service delivery and mandatory training or understanding of peer support models would be useful.

Trauma Informed Care

Trauma informed care is already integrated into the health services programming for legal-involved individuals and the TTI funds were used to train 18 peers in trauma-informed care.

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