

THE IMPACT OF COVID-19 ON PEER SUPPORT SPECIALISTS:

Findings from a National Survey

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EXECUTIVE SUMMARY

Researchers at Boston University's Center for Psychiatric Rehabilitation, in collaboration with the National Association of Peer Supporters (NAPS), conducted a survey of US-based Peer Support Specialists from May 18, 2020-June 22, 2020 in order to assess the impact of the novel coronavirus/COVID-19 on the peer support workforce, including job tasks, challenges and supports. A total of 1,280 peer support specialists (paid and volunteer) qualified for, consented and responded to the online survey. Individuals from all 50 states responded. Respondents were predominately female (69%) and white (73%), with a mean age of 50 years.

KEY FINDINGS:

- 1. JOB LOSS/ECONOMIC IMPACT:** All respondents had been employed for pay or volunteering in peer support positions prior to COVID-19 (as of February 2020), including 67% who were employed full time at that time. At the time of survey response (May/ June 2020), 6.2% reported no current paid or volunteer peer position, and 8.5% reported having lost a job/ being laid off due to COVID-19. Furthermore, 7.3% reported losing some or all benefits due to COVID-19, and 13.4% reported having to take a pay cut. Despite these factors, the majority of respondents believed that the coronavirus crisis had impacted their personal financial situation less than most others.
- 2. CHANGES TO TASKS:** The majority of peer support specialists (72.5%) reported being engaged in new job tasks due to COVID-19 and related changes, including tasks specific to the pandemic, including: technology, community resources, and other non-peer related tasks. Conversely, respondents reported engaging less frequently in many standard peer support-related tasks, particularly in terms of providing individual support and group facilitation. A sizable portion (44.8%) of respondents stated that the number of individuals they were supporting had increased as a result of the pandemic, while 29.1% reported a decrease.

- 3. INDIVIDUALS SUPPORTED:** Many peer support specialists (57.1%) indicated that more individuals were reaching out for support since the pandemic began. Respondents reported that the individuals they support are experiencing significant additional challenges since the pandemic, including increased isolation (91.5%), mental health symptoms (86.4%), substance use issues (67%), food shortages (63.5%), housing instability (60.1%), possibility of job loss (59.4%), and interpersonal/ family violence (38.3%).
- 4. SUPPORT AND POSITIVE IMPACTS:** Respondents also reported that they themselves are experiencing a variety of new and additional challenges related to their peer specialist roles, especially feelings of isolation (73%) and communication challenges (69.7%). Despite the above factors, most respondents reported feeling “satisfied” or “very satisfied” with the amount of support that they are receiving during this crisis from their organizations (68.1%), supervisors (74.5%), and coworkers (74.5%). Furthermore, almost three quarters of respondents reported positive impacts benefits resulting from the pandemic, including benefits to peer specialists, service recipients and the field as a whole. For example, benefits included being able to learn and apply new technology, provide tangible supports such as food and housing assistance to those they support, connect and engage more readily with some peers, and exercise creativity in their roles. They can now support geographically diverse individuals, and noted an increased awareness of the mental health and peer services more broadly.

DISCUSSION:

Taken together, results of this survey suggest that peer support specialists have reported job and income losses due to COVID-19, but at rates less than other US worker populations. Individuals served by peer support specialists are facing substantially increased material, psychological and interpersonal challenges due to the pandemic, making peer support services even more critical at this time. Peer support specialists may be filling gaps in mental health service needs and delivery that have resulted from the pandemic, including those that clinical

staff may not be able or willing to address. Based on survey responses, it appears that peer support specialists, and the organizations in which they work, demonstrated flexibility and creativity in addressing unplanned needs and were not constrained by existing job descriptions.

Lessons learned from the peer support workforce during this pandemic should influence future service delivery; for example, remote or virtual support has allowed some individuals to engage in services who were previously unable, such as those with transportation barriers or discomfort with in-person interactions. Implications for these findings include the need to continue to fund this vital part of the mental health workforce and support peer specialists through the pandemic. Given the information gathered about the unexpected benefits arising from the pandemic, we should systematically examine these creative adaptations to ensure the continuation of flexible, creative, and responsive mental health peer support services while preserving the integrity and values of peer support.