



ETHICAL GUIDE FOR PEER RECOVERY SUPPORT SERVICES AND CONDUCT

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Introduction:

The purpose of this publication is to inform the Peer Recovery Support profession, the behavioral health community, the community at-large, along with other interested parties, of the ethical responsibilities that are expected from Peer Recovery Support professionals. This publication is a collection of national research, recommendations from a state-level advisory board in Indiana, experiences from Peer Recovery Support professionals, and those whom have supervised them. The information contained within this publication is intended to guide the effective and ethical delivery of Peer Recovery Support services. This publication is a continuation of an effort in Indiana to support and strengthen the Peer Recovery Support profession. The *Ethical Guide for Peer Recovery Support Services and Conduct* is a complimentary publication to the *Peer Recovery Coaching Standards for Professional Practice and Supervision* and *Competencies for Effective and Ethical Peer Recovery Coach Supervision* publications.

Ethical Dimensions:

Within the effective delivery of Peer Recovery Support services, it is imperative that the Peer Recovery Support professional, as well as the organizations the Peer Recovery Support professional represents, thoroughly comprehend, implement and maintain the ethical standards for the Peer Recovery Support role. These Peer Recovery ethical guidelines provide a guide to services delivered, as well as any representation of the Peer Recovery Support profession, whether publicly or privately. Failure to follow, and continually implement, these standards during any Peer Recovery Support services delivered, or during activities where the peer is representing the Peer Recovery Support profession, may cause harm to the populations the peer serves, the organization(s) the peer represents, the Peer Recovery Support profession, the recovery community and the community at-large.

Within the peer recovery support professional field, there are multiple modalities and versions of ‘lived experience’ that are utilized to structure a Peer Recovery Support professional’s credential and/or job description. As the daily employment duties may vary depending on the populations served, it is recommended these ethical standards be maintained throughout the Peer Recovery Support profession, regardless of credential, ‘lived experience’ criteria or any other nuances that differentiate peer recovery support roles.

Peer recovery support is grounded in a peer-to-peer relationship during the delivery of services. This hinges on the Peer Recovery Support professional maintaining a non-clinical relationship with the

populations the peer serves; this relationship is based upon acceptance, support and respect. This non-judgmental approach to a person's recovery will allow the Peer Recovery Support professional to meet a person 'where they are' (that is, the person's physical, economic, recovery and psychosocial 'location') currently and aid with goal setting, removing barriers that can potentially impede positive change to a person's life, or any other non-clinical services that are within the Peer Recovery Support professional's standards of practice.

As noted in multiple publications on the ethical standards for Peer Recovery Support services, the four primary domains for effective Peer Recovery Support services are:

Latrogenic – means unintended, treatment-caused harm or injury. It means that an action taken to help someone, possibly with the best intentions, actually resulted in physical or emotional injury or death. Peer Recovery Supports must be vigilant to quickly weed out well-intended actions that may harm one or more parties. This underscores the importance of seeking guidance from other Peer Recovery Supports and from supervisors.

Fiduciary – describes the relationship in which one party has assumed a special duty and obligation for the care of another. This ethical dimension is a reminder that the relationship between a Peer Recovery Support and those for whom the Peer Recovery Support provides services is not a relationship of equal power. It is solely a supportive relationship. 'Fiduciary' implies that one person enters with increased vulnerability, requiring the objectivity, support and protection of the other – like a relationship one would have with a physician or attorney. While the power differential between Peer Recovery Support and those whom they serve is less than that between a surgeon and his/her patient, the Peer Recovery Support can still do injury through what the he or she does or fails to do. These relationships are held to a higher level of obligation and duty than would be found in friendships, which are reciprocal in nature.

Boundary Management - encompasses the decisions that increase or decrease intimacy within a relationship. This is potentially an area of considerable difference between Peer Recovery Supports and traditional service professionals. Where traditional helping professions (physicians, nurses, psychologists, social workers, addiction counselors, etc.) emphasize hierarchical boundaries and maintaining detachment and distance in the service relationship, peer-based services rely on reciprocity and minimizing social distance between the helper and those being helped. (Mowbray, 1997). While addiction professionals and Peer Recovery Supports both affirm and define boundaries of inappropriateness, they may differ considerably in where such boundaries should be drawn.

Multi-party vulnerability – phrase that conveys how multiple parties can be injured by what a Peer Recovery Support does or fails to do. These parties include: the person receiving recovery support services, that person’s family and intimate social networks, the Peer Recovery Support professional, the organization for which the Peer Recovery Support is working, the recovery support services field, the larger community of recovering people, and the community at-large.
(White, Ethical Guidelines for Peer-based Recovery Support Services)

These four primary domains will assist with guiding decision-making when it comes to the delivery of Peer Recovery Support services and the conduct of Peer Recovery Support professionals. Failure to adhere to these domains in the Peer Recovery Support professional role may hinder, and potentially harm, the populations the Peer Recovery Support serves, the organization the peer represents, the Peer Recovery Support profession, the recovery community and the community at-large. It is recommended Peer Recovery Support professionals conduct themselves in an ethical and professional manner in all affairs pertaining to Peer Recovery Support.

Ethical Education and Understanding

As continued efforts are made to support and strengthen the Peer Recovery Support profession, it is vital to the successful growth and sustainability of this movement that the Peer Recovery Support professional, the behavioral health community, the recovery community and the community at-large not only understand the role of Peer Recovery Supports, but that they also have a knowledge of the ethical structure of the Peer Recovery Support role. It is vital all Peer Recovery Support professionals have training specific to the ethical dimensions and criteria of the Peer Recovery Support role. It is encouraged that this education, specifically written to the ethical structure of the Peer Recovery Support role, be obtained before the peer begins providing Peer Recovery Support services.

Role Distinction

The role of the Peer Recovery Support professional is a non-clinical support role for an individual’s recovery process. Throughout much of the industry to this point, there has been a good deal of role ambiguity for Peer Recovery Support services. It is crucial that the role of Peer Recovery Support services (outlined in *Peer Recovery Coaching Standards for Professional Practice*) be one based upon the peer-to-peer distinction. The peer-to-peer distinction is characterized by a shared understanding, respect and mutual empowerment (BRSS TACS Peers). There have been multiple articles published regarding the role of Peer Recovery Supports and how they differentiate from other recovery supports and clinical roles. The matrix found below will allow Peer Recovery Support professionals, the recovery supports field, recovery community and community at-large to distinctly understand the role of Peer Recovery Supports as a complimentary piece to a person’s personal pathway to recovery. Please reference the matrix below:

What a Peer Recovery Support is/does	Is Not/Does Not
A person in recovery	A clinician
Share lived experience	Give clinical advice
A role model	An expert or authority figure
See the person as a whole person in the context of the person’s roles, family, community	See the person as a case or diagnosis
Motivate through hope and inspiration	Motivate through fear of negative Consequences
Support many pathways to recovery	Prescribe one specific pathway to recovery
Function as an advocate for the person in recovery, both within and outside of the program	Represent perspective of the program
Teach the person how to accomplish daily tasks	Complete tasks for the person
Teach how to acquire needed resources, including money	Give resources and money to the person
Help the person find basic necessities	Provide basic necessities, such as a place to live
Use language based on common experiences	Use clinical language
Help the person find professional services-- from lawyers, doctors, psychologists, financial advisers, etc.	Provide professional services
Share knowledge of local resources	Provide case management services
Encourage, support, praise	Diagnose, assess, treat
Help to set personal goals	Mandate task and behaviors
A role model for positive recovery behaviors	Tell the person how to lead his/her life in recovery
Provide Peer Recovery Support services	Do whatever the program insists he/she do

ADAPTED FROM: SAMHSA’s Bringing Recovery to Scale Technical Assistance Center Strategy (BRSS TACS) 2012

Ethical Standards:

Peer Recovery Support professionals' ethical standards have been defined to ensure that Peer Recovery Support services are delivered in a manner that will assist with maximizing outcomes for all populations served. As the Peer Recovery Support profession continues to flourish, these ethical standards will assist with maintaining the integrity and effectiveness of the Peer Recovery Support role.

Self-care:

Peer Recovery Support depends on the Peer Recovery Support Professional being a healthy model for recovery. Self-care, for this publication's purpose, refers to the Peer Recovery Support professional creating practices and modalities that help ensure that the Peer Recovery Support professional, at minimum, maintains their current trajectory of recovery and utilizes recovery supports and/or natural community supports that foster the Peer Recovery professional's personal recovery pathway. The following guidelines will assist Peer Recovery Support professionals with guiding their decision-making to help ensure they maintain their personal recovery:

1. Peer Recovery Support professionals have a duty to maintain their personal recovery by creating, implementing, and sustaining methods that support their wellness in the following dimensions:
 - a. Emotional: the ability to cope effectively with life and build sustaining relationships with others.
 - b. Spiritual: related to values and beliefs that help one find meaning and purpose in life.
 - c. Intellectual: recognize one's unique talents and seek out ways to use knowledge and skills.
 - d. Physical: physical activity, healthy nutrition and adequate sleep.
 - e. Environmental: the surroundings one occupies.
 - f. Financial: feeling of satisfaction about one's financial situation.
 - g. Occupational: satisfaction with one's choice of work.
 - h. Social: a sense of connectedness and belonging
2. The use of substances may not have a negative impact on the peer's personal recovery or the effective and ethical delivery of Peer Recovery Support services.
3. When necessary, discuss any concerns or barriers to continued personal recovery with one's recovery supports and supervisor.
4. Effective management of one's professional workload, including advocating for personal recovery when workload becomes a barrier.

- a. This includes working alongside one’s supervisors and organizations to ensure policies and procedures, workload and job duties foster a recovery-oriented approach to Peer Recovery Support services.
5. Self-care and personal recovery are a top priority of the Peer Recovery Support professionals and organization they provide services for.
6. Identify and attend continuing educational trainings specific to self-care related information.

Complimentary tools that may assist with creating and maintaining self-care methods are:

1. SAMHSA 8 Dimensions of Wellness resource booklet
2. Self-care assessment worksheets
3. SAMHSA Compassion Fatigue publication

Professional Conduct:

The professional conduct of Peer Recovery Support professionals, both publicly and privately, are best when they are based upon the foundations of acceptance, non-hierarchical relationship mentality, and the ability to conduct themselves in a respectful manner to all populations encountered. The activities and beliefs peers hold in their personal lives are, in fact, personal. The Peer Recovery Support professional has an ethical duty to ensure their personal beliefs/opinions do not affect the effective and ethical delivery of Peer Recovery Support services. The guidelines listed will assist a Peer Recovery Support professional with maintaining effective and ethical Peer Recovery Support services:

1. Provide Peer Recovery Support services only when provided appropriate supervision.
 - a. These supervisory competencies can be found in *Supervision Competencies for Effective and Ethical Peer Recovery Coach Supervision*.
2. Create and maintain an environment that fosters teamwork and inclusion.
 - a. This includes all teammates, including other Peer Recovery Support professionals, as well as the recovery community and community at-large.
3. Maintain adherence to all organizational policies and procedures, including applicable laws.
4. Maintain a person-driven approach to all services provided.
5. Develop and maintain an ability to not allow personal beliefs/opinions to affect services delivered.
6. Provide information, resources and referral(s) that support multiple pathways of recovery.
7. Utilize person-centered, positive, non-discriminatory language.
8. Stay within the scope of non-clinical Peer Recovery Support services.

9. Stay current regarding information and knowledge relevant to Peer Recovery Support services and share this information and knowledge with all appropriate avenues.
 - a. Identify and attend continuing educational opportunities that will support and improve skill sets pertaining to the Peer Recovery Support services provided.
 10. Disclose ethical responsibilities and expectations to organizations where the Peer Recovery Support Professional provides services.
 11. Maintain connection to the Peer Recovery Support professional community through any means available.
 12. Immediately report ethical concerns to the Peer Recovery Support professional in question.
 - a. When a resolution cannot be met, the chain of command within the organization should be used to report the ethical concerns, including reporting to the Peer Recovery Support professional's supervisor and credentialing agency, when necessary.
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Supervision and Organizational Policy:

For the Peer Recovery Support professional to provide and maintain effective and ethical service, proper supervision and organizational policy are essential. By providing the Peer Recovery Support professional the proper support, as well as necessary guidance and structure, it will ensure that outcomes are maximized for the populations the organization and Peer Recovery Support professional serve. Competent and effective supervision that fosters an attitude of inclusion, support, motivation and guidance will assist with maximizing the services the Peer Recovery Support professional provides. Furthermore, an organization utilizing policies and procedures that foster a team environment that promotes a recovery-oriented approach to care and provides the Peer Recovery Support professional with the structure to be successful will assist with maximizing services as well. As a component of effective and ethical Peer Recovery Support services, it is important that the organization utilizing the Peer Recovery Support professional have a comprehensive understanding of the Peer Recovery Support's role and ethical structure. Comprehending and possessing a copy of the Peer Recovery Support professional's ethical guidelines/code of ethics on file will assist with adhering to the Peer Recovery Support's ethical obligation for their role. All staff understanding the ethical expectations will assist with role integration and maintenance. This will assist with ensuring that the supervisory staff, as well as employees working alongside the Peer Recovery Support professional, understand the Peer Recovery Support role and ethical

criteria. It is the organization's duty to ensure that the Peer Recovery Support professional is adhering to the ethical structure of the role. Suggested best practices include:

1. Utilizing comprehensive orientation and ongoing training for new staff, peer leaders, and peer services providers. This orientation, initial training and ongoing training may cover ethics-related topics, including relational power and power dynamics, using scenarios of relevant peer incidents as a training method.
2. Utilizing learning sessions to explore sound approaches to ethical dilemmas, as identified by the peer, supervisor, organization and/or populations the peer serves.
3. Creating methods to track and document patterns of ethical dilemmas, in order to explore ethical dilemmas organizationally and programmatically.
4. Creating written guidelines regarding setting and maintaining boundaries.
5. Providing trainings on boundary issues.
(Adapted from CAPRSS Tip Sheet: Ethical Framework for Service Delivery)
6. Not allowing Peer Recovery Support services to be provided unless the Peer Recovery Support professional is provided effective and ethical supervision.
7. Creating policies and procedures specific to re-occurrence of the Peer Recovery Support professional's diagnosis symptoms, including how to support the peer while also ensuring the peer is not providing peer recovery support-related services during the peer's re-stabilization in recovery.
8. All Peer Recovery Support professionals being provided supervision that utilizes a strength-based approach.
9. Peer Recovery Support supervisors having a detailed understanding of the Peer Recovery Support professional's role and ethical guidelines.
10. Peer Recovery Support supervision supporting self-care and the pursuit of continuing education.

Boundary Management:

While personal recovery is the foundation upon which effective Peer Recovery Support services is based, it is recommended a Peer Recovery Support professional's personal recovery not coincide with their professional services delivered. Peer Recovery Support professionals have an ethical duty to establish healthy boundaries that will foster peer-to-peer relationships with the populations they serve; however, steps must be taken to ensure that the Peer Recovery Support professional's personal recovery is not involved with the Peer Recovery Support services delivered. Personal recovery information should only

be included when the purpose of that self-disclosure is to support the recoveree's personal recovery and conveys the peer-to-peer aspect of the relationship. At no time should a Peer Recovery Support professional's self-disclosure be a means to influence a recoveree's personal recovery pathway choices. Establishing the expectations of a Peer Recovery Support-based relationship with a recoveree at the beginning of services, so all involved have a firm understanding of expectations and boundaries, is recommended. To maintain healthy and supportive boundaries, a Peer Recovery Support professional may:

1. Maintain objectivity in all Peer Recovery Support services provided.
2. Not develop, nor maintain, personal and/or business relationships with recoverees.
 - a. Do not provide Peer Recovery Support services to family, friends or personal contacts.
3. Not share any personal contact information with recoverees.
 - a. This includes personal social media accounts and utilization of personal communications devices in the delivery of Peer Recovery Support services.
4. Only provide Peer Recovery Support services during business hours and within organization's/supervisor's expectations.
5. Provide self-disclosure of your personal recovery to support or further a recoveree's personal recovery.
 - a. This disclosure should not have a negative impact on the recoveree's personal recovery, nor be a means to influence the recoveree's choice of a personal recovery pathway.
6. Not discuss work/personal issues with recoveree.

Cultural Competency:

It is necessary that Peer Recovery Support services be delivered in a manner that fosters a non-hierarchical, peer-to-peer relationship, while also maintaining effective and healthy boundaries. As Peer Recovery Support professionals provide services, it is imperative that these services and the atmosphere in which they are delivered be based upon cultural competency and inclusion. Peer Recovery Support professionals are expected to have empathy and compassion for all cultures, not only with those with which they identify or interact, while delivering Peer Recovery Support services. This cultural competency, understanding and education can be achieved through multiple avenues; however, this education and understanding should be continually approached and evaluated. This continual cultural growth will allow the Peer Recovery Support professional the ability to maintain an attitude of inclusion

and acceptance. To create, implement and sustain cultural competency in all Peer Recovery Support services provided, a Peer Recovery Support professional may follow these guidelines:

1. Do not discriminate against any population based upon personal beliefs, bias or misinformation.
2. Identify and implement methods that will foster inclusion and acceptance of all populations.
3. Advocate on behalf of underserved populations and accept that not all populations are equally served or represented within our current culture and systems.
4. Provide Peer Recovery Support services that are delivered within the context of a recoveree's minority status.
5. Effectively identify the Peer Recovery Support professional's personal biases and create a plan to ensure personal biases do not affect the Peer Recovery Support services provided.
6. Continue to grow as a Peer Recovery Support professional in the context of exposure and knowledge of varying cultures.

As this publication acknowledges, the effectiveness and efficacy of Peer Recovery Support services requires the Peer Recovery Support professional to adhere to ethical guidelines that ensure culturally competent and supportive peer-to-peer services that are accepting and inclusive in nature and 'meet the person where they are' in their recovery.

Peer Recovery Support Ethical Criteria

Peer Recovery Support professionals may:

1. Maintain their personal recovery by creating, implementing and maintaining their wellness in these dimensions: Emotional, Spiritual, Intellectual, Physical, Environmental, Financial, Occupational and Social.
2. Not allow the use of substances to have a negative impact on their personal recovery, nor the effective and ethical delivery of Peer Recovery Support services.
3. Discuss with their recovery supports and supervisor, when necessary, any concerns or barriers to their continued recovery.
4. Provide Peer Recovery Support services only when provided appropriate supervision.
5. Utilize effective management of their professional workload, including advocating for their personal recovery when workload becomes a barrier.
6. Create and maintain an environment that fosters teamwork and inclusion in all professional activities.
7. Adhere to all organizational policies and procedures, including any applicable laws.
8. Maintain a person-driven approach to all services provided.
9. Provide information, resources and referral(s) to multiple pathways of recovery.
10. Stay within the scope of non-clinical Peer Recovery Support services.
11. Stay current regarding information and knowledge relevant to Peer Recovery Support and share as appropriate.
12. Disclose ethical responsibilities and expectations to organizations where the peer provides services.
13. Maintain connection to the Peer Recovery Support professional community.
14. Refrain from developing or maintaining personal and/or business relationships with recoverees, including sharing personal contact information.
15. Provide Peer Recovery Support services during business hours only and within organizational expectations.
16. Provide self-disclosure of personal recovery to support or further a recoveree's personal recovery.
17. Not discuss work/personal issues with recoveree.
18. Not discriminate against any population based upon personal beliefs, bias or misinformation.
19. Identify and implement methods that foster inclusion and acceptance of all populations.
20. Not allow personal beliefs/opinions to affect services delivered.

Additional Resources:

SAMHSA 8 Dimensions of Wellness resource booklet
SAMHSA Compassion Fatigue publication
CAPRSS Tip Sheets (Ethical Framework for Service Delivery and Participatory Process)
SAMHSA Core Competencies for Peer Workers in Behavioral Health Care Settings
Ethical Guidelines for Peer-based Recovery Support Services
iNAPS National Practice Guidelines for Peer Supporters
ACMHA Peer Services Toolkit

Works Referenced:

SAMHSA's Bringing Recovery to Scale Technical Assistance Center Strategy Peers 2017
White, Ethical Guidelines for Peer-based Recovery Support Services 2007
CAPRSS Tip Sheet: Ethical Framework for Service Delivery
SAMHSA's Bringing Recovery to Scale Technical Assistance Center Strategy (BRSS TACS) 2012