

Opioid Response Network

The Power of Family Peer Relationships

Supporting Systems that Serve People with Opioid, Stimulant & Other Substance Use Disorders

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Opioid
Response
Network



Working with communities.

- ✧ The SAMHSA-funded *Opioid Response Network (ORN)* assists states, tribes, organizations and individuals by providing the resources and technical assistance they need locally to address the opioid crisis and stimulant use.
- ✧ Technical assistance is available to support the evidence-based prevention, treatment and recovery of opioid use disorders and stimulant use disorders.



Working with communities.

- ✧ The *Opioid Response Network (ORN)* provides local, experienced consultants in prevention, treatment and recovery to communities and organizations to help address this opioid crisis and stimulant use.
- ✧ *ORN* accepts requests for education and training.
- ✧ Each state/territory has a designated team, led by a regional Technology Transfer Specialist (TTS), who is an expert in implementing evidence-based practices.



Contact the Opioid Response Network

- ✦ To ask questions or submit a technical assistance request:
 - Visit www.OpioidResponseNetwork.org
 - Email orn@aaap.org



Overall Mission

To provide training and technical assistance via local experts to enhance **prevention, treatment** (especially medications like buprenorphine, naltrexone and methadone) and **recovery** efforts across the country addressing state and local - specific needs.





Approach: To build on existing efforts, enhance, refine and fill in gaps when needed while avoiding duplication and not “recreating the wheel.”

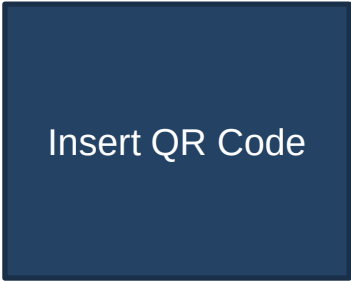
Substance Abuse and Mental Health Services Administration (SAMHSA)

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ORN Evaluation Survey Link

The grant that provided funding for this training requires that we request you to complete the brief survey linked below. Your feedback is important and provides support for this type of work to continue. Scan the QR Code to access the SAMHSA feedback survey.



Insert QR Code

Link to Survey: [Insert Link]

The survey will ask about your satisfaction with the training program you just completed as well as some basic demographic information. Your responses will help the Opioid Response Network improve the services they provide.



Thank you in advance for completing this survey!



Objectives

Describe the purpose and principles of family support

Differentiate family peer support from counseling, therapy, advocacy and case management

Recognize common experiences and needs of families affected by substance use.

Identify practical strategies family peer supporters use to promote hope, engagement and recovery.

Describe current evidence supporting family involvement and family peer support

The Power of Family Peer Relationships-Why did I choose to stand with families

I didn't set out to become a family peer support specialist.

I set out to save my family — and in doing so, I found a calling.

- ✧ For years, I watched my family fracture under the weight of a loved one's substance use disorder — the 2 a.m. phone calls, the shame we carried in silence, the feeling that no one could possibly understand.
- ✧ The day I finally connected with another family member who had lived it, everything shifted. Someone sat across from me, looked me in the eyes, and said: ***“I know. I've been there. And there is a way through.”*** That moment of being truly seen — not pitied, not judged — became the reason I do this work.



Substance Use Disorders: A Family Crisis

Think about the word **family**.

Family does not have one universal definition.

“When someone we love is struggling with substance use, the person using substances is not the only person experiencing the impact.

Families are living with uncertainty, fear, grief, hope, frustration, financial consequences, disrupted relationships, and sometimes involvement with multiple systems.

Family peer support recognizes that the family also deserves a relationship centered on dignity, understanding, hope, and recovery.”

Family peer support begins with **relationship**, and relationship begins with authenticity.



What Is Family Peer Support?

Core Definition

- ✧ Family peer support is a relationship in which a person with relevant lived experience of supporting a family member affected by mental health and/or substance use challenges uses that experience to provide **hope, connection, information, encouragement, and practical support** to another family.
- ✧ SAMHSA identifies lived experience as an important foundation of family peer support and describes family peer specialists as people who can use their experience to help other families understand and navigate challenges.
 - Family peer support is fundamentally **relational**.
 - It is not simply a collection of tasks.
 - It is not merely giving information.
 - It is not directing families toward services.
 - The relationship itself can become a source of hope.



It's About Connection

Family peer support is relational, so the training should model the same qualities we want participants to bring into their work:

- ✧ respect, curiosity, authenticity, humility, hope, choice, connection.

Question:

“When you hear the words family peer support, what is the first word that comes to mind?”



Six Core Principles

1. Hope

- ✧ Hope means believing change is possible without promising a specific outcome.

Peer language:

- ✧ “Things can change.”
- ✧ rather than:
- ✧ “Everything will be okay.”

2. Self-Determination

- ✧ The family makes its own decisions.

The peer provides:

- ✧ information,
- ✧ options,
- ✧ experience,
- ✧ encouragement,
- ✧ questions,
- ✧ connections.
- ✧ But the peer does not take over.



Six Core Principles

3. Strengths

- ✧ We do not look only at what is wrong.

We ask:

- ✧ “What has helped you survive this?”
- ✧ “What have you learned?”
- ✧ “What are you already doing well?”

4. Mutuality

- ✧ The relationship is based on shared humanity and lived experience.
- ✧ The peer may know something about navigating the system.
- ✧ The family knows something about their own family.
- ✧ Both forms of knowledge matter.



Six Core Principles

5. Authenticity

- ✧ A peer does not have to pretend to know everything.
- ✧ Sometimes one of the most powerful statements is:
- ✧ “I don't know, but I'll help you figure out where to find the answer.”

6. Cultural Humility

- ✧ We cannot assume that our experience represents another family's experience.

Ask:

- ✧ “What does this mean in your family?”
- ✧ rather than assuming we already know.



Peer Support vs. Therapy

Therapy

- ✧ Focuses on:
 - clinical assessment,
 - diagnosis,
 - treatment,
 - therapeutic interventions,
 - mental health symptoms,
 - trauma processing.

Family Peer Support

- ✧ Focuses on:
 - lived experience,
 - hope,
 - connection,
 - mutuality,
 - empowerment,
 - practical experience,
 - recovery support,
 - system navigation.



Peer Support vs. Case Management

A case manager may coordinate:

- ✧ housing,
- ✧ benefits,
- ✧ transportation,
- ✧ referrals,
- ✧ healthcare,
- ✧ services.

A peer may help the family learn **how to navigate those systems.**

- ✧ Instead of: “I’ll call them for you.”
- ✧ A peer might say: “Would you like to practice what you want to say before you call?”
- ✧ The difference is important.
- ✧ The first completes the task.
- ✧ The second builds capacity.



What We Can Say With Confidence

We can say: **Families matter.**

We can say: **Families are affected by substance use and deserve support in their own right.**

We can say: **Family involvement can improve engagement and family functioning when appropriately implemented.**

We can say: **Family members need information, connection, support, and practical tools.**

We can say: **Peer relationships can reduce isolation and increase hope.**



But we should avoid saying:

- ✧ “Family peer support guarantees recovery.” or: “Family involvement always improves outcomes.”
- ✧ Family involvement must be individualized.
- ✧ For some families, involvement may be highly beneficial.
- ✧ For others, relationships may be complicated or unsafe.
- ✧ Peer support must remain person-centered and safety-conscious.



A Family Peer Support Conversation

Example

- ✧ **Parent:** “I don't know what to do anymore. I've tried everything.”
- ✧ **Peer:** “It sounds like you've been carrying this for a long time.”
- ✧ **Parent:** “I feel like I'm failing.”
- ✧ **Peer:** “I remember how easy it was for me to believe that too. Substance use affected so many decisions and relationships that I eventually started believing everything was my fault. What helped me was learning that supporting someone didn't mean I was responsible for their choices.”
- ✧ **Parent:** “How did you learn that?”
- ✧ **Peer:** “A lot of trial and error. One thing that helped was learning to separate what I could influence from what I couldn't control. Would you like to talk through that?”



Notice what the peer did.

They:

- ✧ validated,
- ✧ shared lived experience,
- ✧ offered hope,
- ✧ did not diagnose,
- ✧ did not prescribe,
- ✧ did not tell the parent what to do,
- ✧ asked permission,
- ✧ returned the conversation to the parent.
- ✧ That is peer practice.



The Power of “Me Too”

- ✧ One of the simplest and most powerful peer statements is: **“Me too.”**
 - Not because our stories are identical. They aren't.
 - But because shared experience can communicate:
- ✧ **“You are not alone.”**
 - A professional may understand substance use.
 - A clinician may understand diagnosis.
 - A case manager may understand resources.

A family peer supporter may say: ***“I know what it feels like to love someone whose substance use affects the entire family.”***



What Families May Need From Us

Families may need:

- ✧ **Someone who listens. Someone who does not judge.**
- ✧ **Someone who understands systems. Someone who can explain that they are not alone.**
- ✧ **Someone who can help them identify choices.**
- ✧ **Someone who can remind them of their strengths.**
- ✧ **Someone who understands that hope and exhaustion can exist simultaneously.**
- ✧ **Someone who can say: "You can love your family member and still have boundaries."**
- ✧ **Someone who can say: "You are allowed to take care of yourself."**
- ✧ **Someone who can say: "Recovery may not look exactly the way you imagined."**
- ✧ **Someone who can say: "You don't have to solve everything today."**



Peer Drift

“Peer drift happens when we begin with peer support and gradually move into another professional role.”

- ✧ This can happen because we care.
- ✧ We want to fix things.
- ✧ We want to protect people.
- ✧ We want to make things easier.

But gradually we may begin: diagnosing, directing, counseling, managing, making decisions, solving problems for families.



The Five Pause Questions

Ask:

- ✧ Am I listening or directing?
- ✧ Am I sharing experience or interpreting clinically?
- ✧ Am I supporting a decision or making the decision?
- ✧ Am I helping navigate the system or becoming the system?
- ✧ Am I building capacity or creating dependence?

“The goal isn't for the family to need me. The goal is for the family to discover that they can do this.”



Protecting the Integrity of Peer Support

One of the greatest implementation challenges is **role erosion**.

- ✧ A program may hire family peer supporters because it values lived experience.
- ✧ Then gradually:
 - caseloads increase,
 - paperwork increases,
 - referrals increase,
 - administrative duties increase,
 - transportation duties increase,
 - crisis responsibilities increase,
 - case management responsibilities increase.

Eventually, the peer role can become indistinguishable from another professional role.



This is peer drift at the organizational level.

Understanding Families Affected by Substance Use

Families may experience:

- ✧ fear, grief, anger, guilt, shame, exhaustion, financial stress, disrupted relationships, loss of trust, uncertainty, safety concerns, child welfare involvement, criminal legal involvement, housing instability, social isolation.

Families may simultaneously experience **hope and exhaustion**.

- ✧ They may say: “I want to believe things can get better.”
- ✧ while also saying: “I don't know how much more I can take.”

Both can be true.



Co-Occurring Mental Health and Substance Use

- ✧ Families may also be supporting someone experiencing mental health challenges alongside substance use.
- ✧ This can create enormous confusion.
- ✧ Families may ask: “Is this the substance use?”
 - “Is this mental illness?”
 - “Is this trauma?”
 - “Is this medication?”
 - “Why is my loved one behaving this way?”
- ✧ The peer should not diagnose.
- ✧ Instead: ***“There are several things that could contribute to what you're seeing. It may be helpful to talk with a qualified professional. I can help you think through what questions you want to ask.”***



Seven Practical Strategies

1. Listen Before Fixing

- ✧ Sometimes families need someone to hear the story before they are ready for solutions.

2. Ask Permission

- ✧ “Would it be okay if I shared something that helped me?”

3. Normalize

- ✧ “You're not the only parent who has experienced this.”

4. Share Experience

- ✧ Use: “What helped me was...” rather than: “What you need to do is...”



Family Peer Support as Systems Change

5. Identify Strengths

- ✧ Ask: “What have you already done that has helped?”

6. Focus on the Next Step

- ✧ Instead of solving everything: “What feels most important today?”

7. Build Connections

- ✧ The peer should not become the family's only source of support.
- ✧ Help families identify their broader support network.



Family Peer Support as Systems Change

Ask: “**What can family peer supporters see that systems sometimes don't?**”

- ✧ Examples: confusing processes, inaccessible services, stigmatizing language, unnecessary barriers, communication failures, repeated storytelling, unclear expectations, lack of family voice.

“When one family struggles, it may be an individual problem.

When many families struggle with the same thing, it may be a systems problem.”

- ✧ ***Family peer supporters can help organizations recognize those patterns.***



Remember the PEER Approach

P — Presence

- ✧ Be fully present with the family.

E — Experience

- ✧ Use lived experience intentionally.

E — Empowerment

- ✧ Build the family's confidence and voice.

R — Relationship

- ✧ Protect trust, mutuality, boundaries, and connection.



Key Messages to Leave With Participants

- ✧ Families are affected too.
- ✧ Families have strengths.
- ✧ Families deserve their own support.
- ✧ Lived experience is valuable knowledge.
- ✧ Hope does not require promises.
- ✧ Peer support is different from therapy.
- ✧ Peer support is different from case management.
- ✧ Peer support is different from advocacy.
- ✧ The family's voice should remain central.
- ✧ The goal is increased capacity—not dependence.
- ✧ Family peer support can strengthen both families and systems.
- ✧ We don't have to fix someone to walk beside them.



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