# An Exploration of Peer Recovery Support Services Across State Behavioral Health Systems SUPPORTING STATEMENT

#### B. COLLECTION OF INFORMATION EMPLOYING STATISTICAL METHODS

# **B1.** Respondent Universe and Sampling Methods

A purposive sampling strategy is the design approach for the proposed study. Forty (N=40) representatives from state and organizational agencies of mental health and substance abuse will be interviewed with the structured questionnaire, Peer Recovery Support Services Across State Behavioral Health Systems. The forty representatives will be chosen from states across the 10 public health regions. States are identified by SAMHSA subject matter experts and stakeholders who are familiar with the structure and function of peer recovery support services. The sampling recommended by SAMHSA experts and stakeholders is a selection of states that have a strong history of providing peer-led services and have an active peer-based organization.

## **B2.** Information Collection Procedures

**Attachment A** (Peer Recovery Support Services Across State Behavioral Health Systems) is a copy of the data collection instrument to be used. As described above, the sampling plan is purposive. Each potential participant will be informed of the purpose of the request for their participation, their right not to participate, and the degree to which the information they provide will be kept private. The data collection form has an introductory script **(Attachment B)** describing the above. Basic demographics, e.g., job description, length of time in position, etc., will be collected from all participants.

## **B3.** Methods to Maximize Response Rates

Strategies to help sites maximize response rates rely upon previously established relationships with SAMHSA peer recovery support stakeholders. Persons who meet the inclusion criteria and wish to participate will be reminded of the upcoming, scheduled interview via voicemail or email at least 1 business day in advance, to reduce the chance of a missed appointment. The participant may designate another representative if he/she is not available or feels that the designee may be better positioned to participate in the interview. One reminder phone call and/or email may be sent if an interview appointment is missed in an effort to reschedule.

## **B4.** Tests of Procedures

The semi-structured interview questionnaire that will be utilized with state and organizational representatives from mental health and substance abuse agencies was reviewed by committee members of the SAMHSA Recovery Strategic Initiative who are familiar with the structure and function of peer recovery services.

#### **B5.** Statistical Consultants

The project officer who will oversee the data collection across sites is Beda Jean-Francois. She will collaborate with Cathy Nugent of CMHS as needed. Data analysis will be performed internally, by the Center for Behavioral Health Statistics and Quality (CBHSQ) under the supervision of Lisa Patton, Quality, Evaluation, and Performance Branch Chief.

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#### **List of Attachments:**

Attachment A - Data collection instrument, Peer Recovery Support Services Across State Behavioral Health Systems)

Attachment B – Introductory Script for data collection instrument

#### References

Laudet, A.B. & Humphreys, K. (2013). Promoting recovery in an evolving policy context: What do we know and what do we need to know about recovery support services? Journal of Substance Abuse Treatment, 45, 126-133.

Partners for Recovery (2010). Financing recovery support services: Review and analysis of funding recovery support services and policy recommendations. Rockville, MD: Center for Substance Abuse Treatment, Substance Abuse Mental Health Services Administration.

Westat (2012). Analysis and recommendation for the role of peer support services within an integrated healthcare system. Presentation prepare for the Center for Mental Health Services, Substance Abuse Mental Health Services Administration.