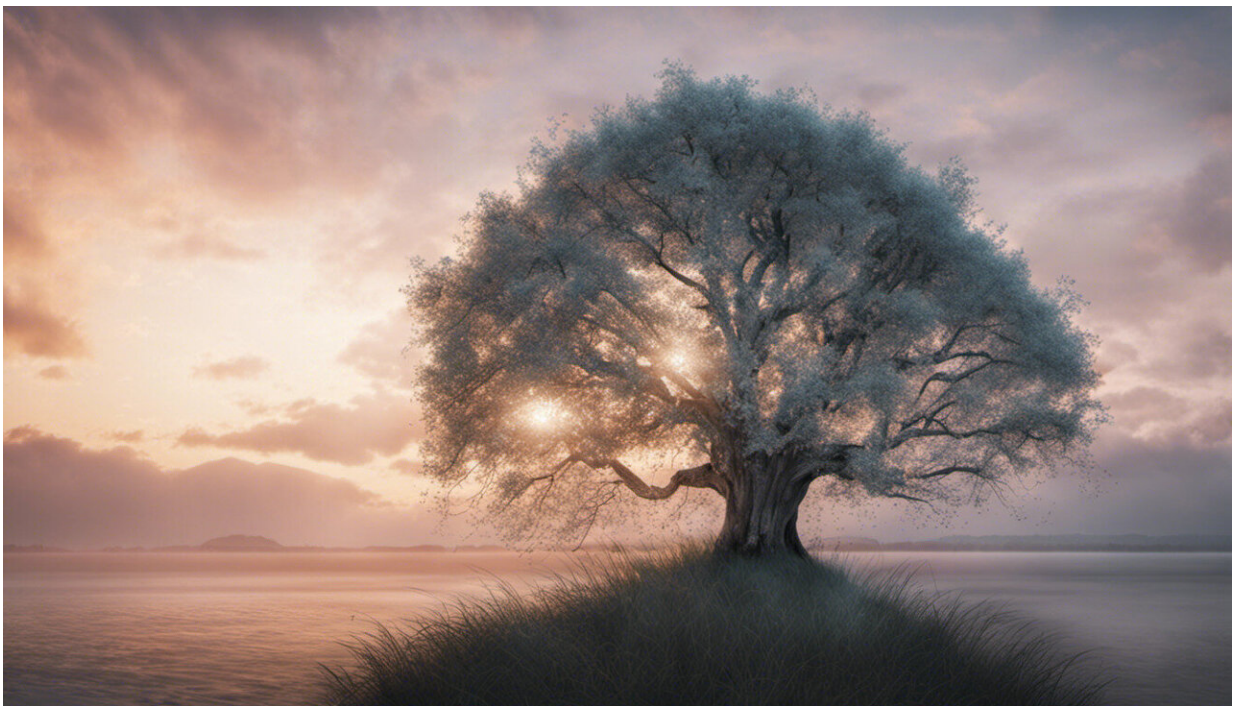


# Peer navigators help mental health clients to make medical appointments and communicate with providers

May 31 2017, by Cindy Monticue

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Credit: AI-generated image ([disclaimer](#))

A new model of care could improve the physical health of people with mental illness, potentially increasing the life span of individuals who typically die 25 years earlier than the general population.

A USC study published in *Schizophrenia Research* suggests the magic bullet may involve peer navigators. These trained role models use their life experience with recovery from [mental illness](#), such as schizophrenia, bipolar disorder or depression, to help motivate others who could self-manage their own [health](#) needs.

"Peer navigators have proven effective at building a strong connection with clients, and this empowerment has resulted in patients having more outpatient visits with doctors, less preference for emergency room visits, more confidence in self-managing their own health care and better detection of diseases," said principal investigator John Brekke, the Frances G. Larson Professor of Social Work at the USC Suzanne Dworak-Peck School of Social Work.

The people who want to do this work generally have been through a life-changing medical event themselves or with a loved one. They have learned the hard way how difficult it is to navigate and manage a complicated diagnosis, treatment or chronic condition. They experienced the confusion, lack of coordination, dangers and inefficiencies in the U.S. health care system, and now they want to share both what they have learned and how to avoid missteps along the way. In many cases, these are laypeople with no prior medical experience or training.

## **Improving coordination of care**

As federal, state and local programs work to leverage the promise of the Affordable Care Act (or its replacement under the Trump administration) for better health outcomes, using approaches that facilitate greater access to quality care and treatment like peer navigators is essential, according to investigators. For the afflicted, it's a matter of life and death.

"These individuals have often times given up—they can't help

themselves—and they aren't getting standard [primary health care](#)," Brekke said. "What's disturbing is that they are dying from preventable medical conditions.

"Just to bring this home, I often tell audiences that if I had been diagnosed with a serious mental illness, the aggregate data suggest that I would have died over a decade ago," he added.

The causes—high blood pressure, heart disease, diabetes, obesity and asthma—are treatable. The problem is that people with serious mental illness tend to be socioeconomically disadvantaged and often don't get the best available health care. Frequently, their own mental health providers pay too little regard to their physical health.

Brekke blames a fragmented health care system—one that segregates the services for [physical health](#) and mental health—for the health disparities in these individuals that often lead to uncoordinated, inferior care and increased [health care costs](#).

"These departments are not integrated and they never have been. Providers in one field are not trained in the other, and they don't want to deal with the issues that don't directly involve them," he said. "We need a health care system that is prepared to deal with persons who have a serious mental illness. They require a different kind of approach."

## Coaching for success

Brekke and his team developed and tested a behavioral model of health-service use focused on educating patients with serious mental illness about self-care, giving them the tools to manage on their own and ultimately helping them find the confidence to navigate a complicated health care system—with peer navigators as coaches.

He enlisted the help of Pacific Clinics, one of Southern California's largest behavioral health care agencies. UniHealth Foundation and the Patient-Centered Outcomes Research Institute, which is the research arm of the Affordable Care Act, have funded his team's work.

"Many of our clients are insured, but do not know how to access and use medical care. Many did not learn as young adults how to take care of their health," said Laura Pancake, vice president of wellness, recovery, integrated care and training at Pacific Clinics. "In many cases, families did not prioritize health, often turning to the emergency room as their primary [health care provider](#)."

Peer navigators use motivational strategies, modeling, role-playing and coaching to help clients achieve certain behavioral goals. They assist clients in making medical appointments, finding transportation, communicating with providers, following through with lab tests and filling prescriptions, and adhering to a doctor's care plan.

"Peer navigators serve a critical role in coordinating care among [mental health care](#) providers, primary care providers, substance abuse providers and specialty care," Pancake said.

Feedback indicates interactions with peer navigators improves the health care experience and gives consumers better access to services.

"Physicians like it because it helps them develop relationships with their patients and facilitates communication and understanding," she said.

Brekke acknowledged a secondary outcome of his research has been the positive effect on the peer navigators themselves.

"It improved aspects of their self-esteem, their confidence and job satisfaction. It actually made them much more aware of their own [health](#)

[care](#) needs," he said.

**More information:** Erin Kelly et al. Integrating behavioral healthcare for individuals with serious mental illness: A randomized controlled trial of a peer health navigator intervention, *Schizophrenia Research* (2017). DOI: [10.1016/j.schres.2016.10.031](https://doi.org/10.1016/j.schres.2016.10.031)

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