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# Recovery Support Specialists Experiences of Burnout and Plans for the Future

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## Background

Peer Recovery Support Specialists (PRSS), trained individuals with lived experiences who support others recovering from substance use or co-occurring mental health challenges, are a growing segment of the behavioral health workforce. Evidence demonstrates PRSS delivered services are an effective component of behavioral health treatment, and prior research findings support the use of peer models for addiction treatment (Eddie et al., 2019). Protecting and retaining this workforce is essential for meeting treatment demands and ensuring the well-being of the behavioral health field. While burnout rates in the behavioral health workforce have always been problematic, the COVID-19 pandemic accelerated these rates—some studies estimating burnout reaching as high as affecting 67% of the workforce (Rollins et al., 2021; Pathman et al., 2021). There is strong evidence connecting burnout to workforce turnover and reduced quality of care (Weikel & Fisher, 2022). Despite the well-documented prevalence of burnout, little is known about the specific experiences of burnout among PRSS and the effects of this stress on their future career plans.

## Research Questions

This study sought to identify the relationship between burnout, work satisfaction, and planned retention of PRSS in the behavioral health field. Specifically, this study sought to answer the following research questions: 1) What is the extent of burnout among PRSS? and 2) How does burnout impact future career plans of PRSS? Additionally, this study also considered: 3) What factors promote/inhibit turnover for the PRSS workforce? 4) How do burnout, job satisfaction, and ability to meet financial needs predict intent to turnover? and 5) Are there are differences in intent to leave by characteristics of the PRSS workforce?

## Methods

This survey study was conducted in partnership with Faces & Voices of Recovery (F&V), a national nonprofit organization committed to organizing and mobilizing the millions of Americans in long-term recovery from substance use. Survey questions investigated the proportion of PRSS considering leaving their current position, the factors promoting or inhibiting their turnover, the extent to which burnout, job satisfaction, and ability to meet financial needs predicted intent to leave, and whether there were differences in intent to leave by characteristics of the PRSS workforce. Standardized survey instruments measuring burnout, resilience, and workplace satisfaction were identified through a review of peer-reviewed and gray literature. Relevant items from the identified instruments were selected and

adapted for a peer audience. F&V contributed expert feedback on survey development and organized a focus group of subject experts (n=6) to test the survey and provide feedback. The self-administered online survey was distributed by F&V's listserv and remained open for four weeks. After survey data were cleaned with suspected bot submissions removed, bivariate and descriptive statistics were conducted, and multivariate linear regression models were generated in Stata.

### Key Findings

The survey yielded a sample of N=453 respondents. Most respondents self-identified as White (72%) and female (69%), with an average age of 46 and some caregiving responsibilities (62%). About one-third of PRSS (39%) provided both mental health and substance use recovery PRSS services, and 42% were in a PRSS supervisor or manager-certified role. Nearly half (42%) of survey respondents reported considering leaving their position, and 44% reported an intent to leave in the next year. The most common reasons for leaving included opportunities to pursue a position with better pay/benefits (76%), career advancement/promotion opportunities (61%), burnout (41%), and a lack of advancement opportunities in their current role (41%). Other factors associated with intent to leave included being in a role that requires completing tasks that fall outside of PRSS job responsibilities, high levels of burnout, and being unable to meet their financial needs. However, respondents also identified commitment to serving individuals in recovery (76%), having experience in the position (62%), and enjoying coworkers (55%) as primary reasons for remaining in their current position. The final multivariate model showed that intent to leave was significantly predicted by inability to meet financial needs (OR=0.49, 95% CI [0.33, 0.72],  $p < .05$ ), extra tasks outside of PRSS responsibilities (OR=2.81, 95% CI [1.85, 4.28],  $p < 0.05$ ), lower overall job satisfaction (OR=0.41, 95% CI [0.23, 0.73],  $p < 0.05$ ), and higher rates of symptoms of burnout (OR=1.55, 95% CI [1.01, 2.38],  $p < 0.05$ ).

### Policy Implications

PRSS report a deep commitment and satisfaction for their work, with their job providing a sense of personal fulfillment and an ability to use their own experiences to benefit others. Yet burnout, pay lower than what is needed to fulfil financial obligations, and taking on additional tasks outside of the PRSS role were commonly reported experiences that contribute to PRSS intending to exit the workforce. The study findings imply that, without organizational and system-level factor changes to better support the PRSS workforce, patterns of burnout and employee turnover are likely to persist. Organizations that employ PRSS might consider offering greater schedule flexibility and working hours to accommodate employee responsibilities outside of their position, including caregiving demands. Systemic issues of low pay and a heavy workload can be partially attributed to low reimbursement rates for PRSS-provided services, as this workforce remains underpaid despite the implementation of Medicaid reimbursement services (Wallis et al., 2023). Increasing the Medicaid reimbursement rate for peers could increase the payment employers can offer PRSS (Videka et al., 2023). Additionally, greater definition of PRSS roles and increased understanding of PRSS' scope of practice could help minimize instances of PRSS being unintentionally or knowingly misused (Wallis et al., 2023).

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