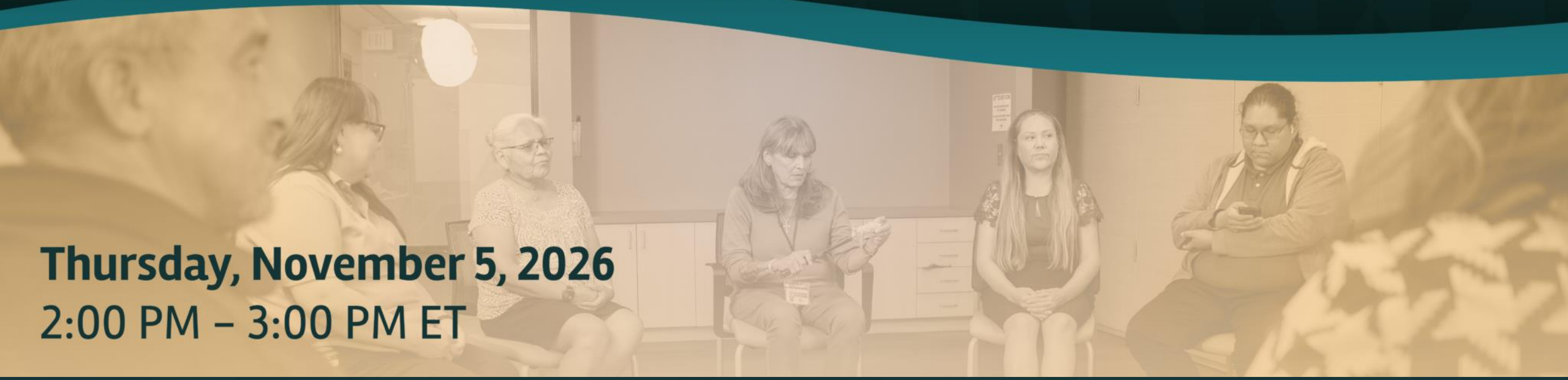
Strengthening the Behavioral Health Workforce Through Peer Support

ncuih.org/events



Thursday, November 5, 2026

2:00 PM – 3:00 PM ET

Welcome and Introductions



Colin Cash, Mille Lacs Band of Ojibwe, to Director of Tribal Development at Pathfinder Solutions.



Allyson Shaw, Shoshone/Paiute Behavioral Health Manager, Urban Indian Center Salt Lake



Craig Sandoval, Director of Clinical Operations, Navajo/Hopi/Santo Domingo Pueblo, Urban Indian Center Salt Lake

Today's Objectives

1. Describe the role of peer support in behavioral health services and workforce development.

2. Identify ways to integrate peer support into culturally responsive UIO programs.

3. Apply lessons on developing and sustaining peer support programs.

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Migizi Miigwan

"Eagle Feather"

National Council on Urban Indian Health



Boozhoo



Colin Cash Niitamigahbow, Director of Tribal Development at Pathfinder Solutions.

- Vice Chair of Governor's Advisory Council on SUD
- Tribal Employment Rights Office Board member for Mille Lacs Band of Ojibwe
- Father
- Partner
- Foster Parent
- Deadley Uncle

Shattered Identity and Social Constructs of Tribal Communities



Exploitation



Exclusion



Loss of Connection



Trauma

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Shattered Constructs of Tribal Nations



Historical Trauma:

a. **Breakdown of Family Structure**
   i. Domestic Violence
   ii. Out of Home Placement
   iii. Intergenerational Trauma

b. **Stigma to being Native**
   i. Internalized Oppression
   ii. Racism and Discrimination

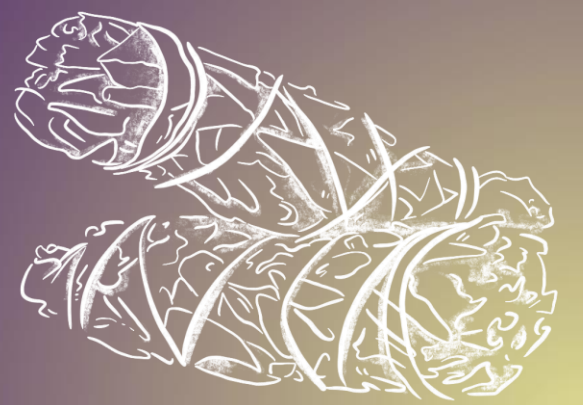
Shattered Constructs of Tribal Nations



Exploitation:

- **a. Exploitation of Native Women/Children**
  - i. MMIW/R
  - ii. Foster Care/Adoption
- **b. Lands**
  - i. Allotment Act (1887)
- **c. Culture**
  - i. Assimilation Policies
  - ii. 1978 AIRFA
- **d. Legal and Political Disenfranchisement**
  - i. Political Marginalization (JUNE 1924)
    1. Lack of Representation

Shattered Constructs of Tribal Nations



Loss of Connection

a. Learned Helplessness
b. Violence
c. Substance Use Disorder
d. Suicide

Shattered Constructs of Tribal Nations

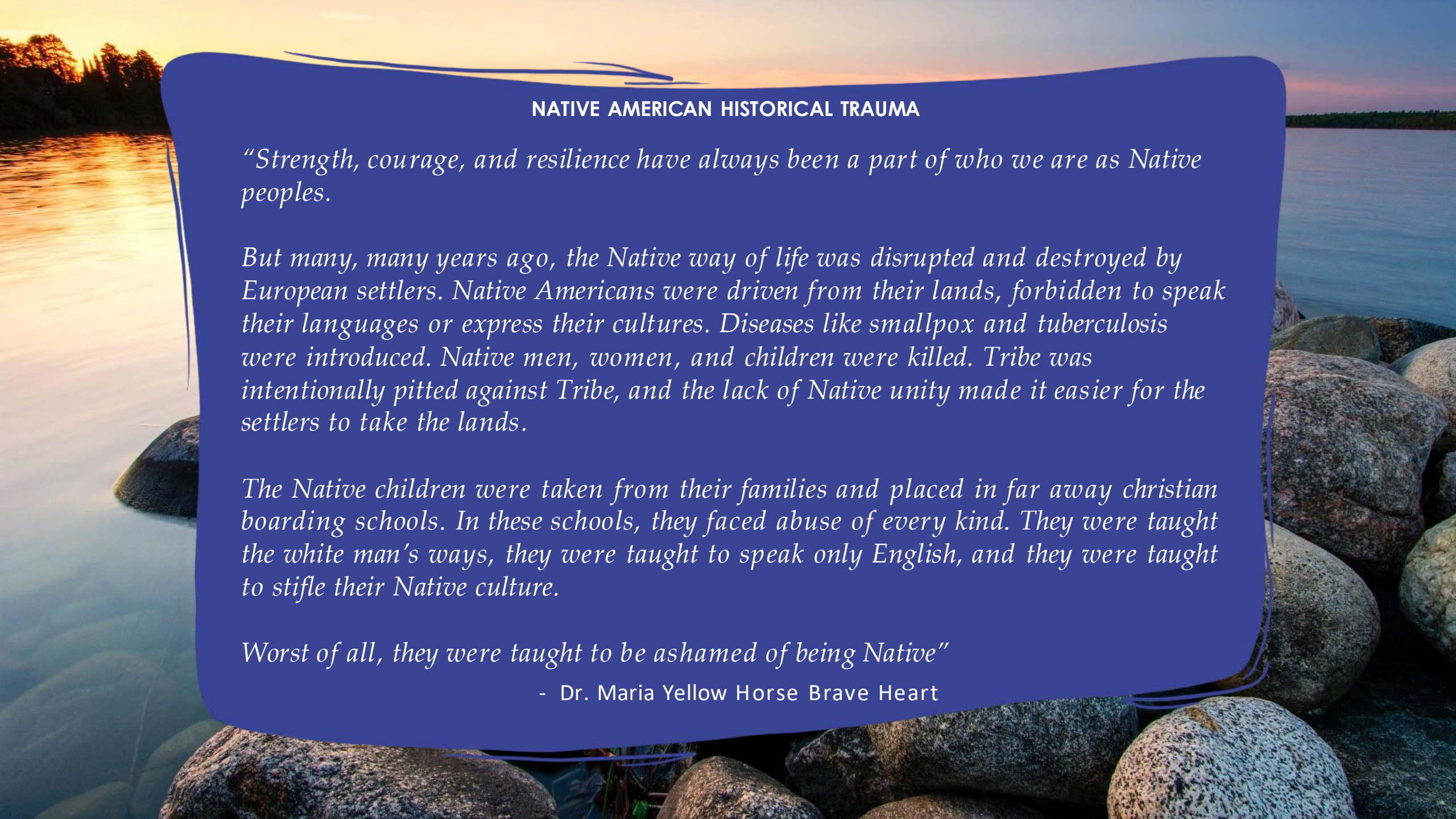


Exclusion:

a. Banishment

b. Blood Quantum

c. Culture



NATIVE AMERICAN HISTORICAL TRAUMA

"Strength, courage, and resilience have always been a part of who we are as Native peoples.

But many, many years ago, the Native way of life was disrupted and destroyed by European settlers. Native Americans were driven from their lands, forbidden to speak their languages or express their cultures. Diseases like smallpox and tuberculosis were introduced. Native men, women, and children were killed. Tribe was intentionally pitted against Tribe, and the lack of Native unity made it easier for the settlers to take the lands.

The Native children were taken from their families and placed in far away christian boarding schools. In these schools, they faced abuse of every kind. They were taught the white man's ways, they were taught to speak only English, and they were taught to stifle their Native culture.

Worst of all, they were taught to be ashamed of being Native"

- Dr. Maria Yellow Horse Brave Heart

Understanding Colonization

Colonization Defined

Colonization is the action or process of settling among and establishing control over the indigenous people of an area, appropriating a place or domain for one's own use.

Related Concepts

- Savior Complex
- Hero Syndrome
- Messiah Complex
- Superman Complex
- White Knight
- White Savior



4 Themes to NA Resilience

1: Resilience is embedded within Native Culture

2: Attain strength from each other, families, relatives, and tribal communities

3: Feel oneness with all creation

4: Legacy of survival passed down.

**Donna G, Gregory S: The Resilience of Native American Elders 2009*

Evidence of Resilience and Solutions

Social Structures Still Alive

1. Matriarchal
    a. Grandmothers/Mothers are heads of families
2. Elders
    a. Hold a lot of power within the community
3. Drum Ceremonies
    a. Structure still in practice
4. Sundance Ceremonies
    a. Structure still in practice

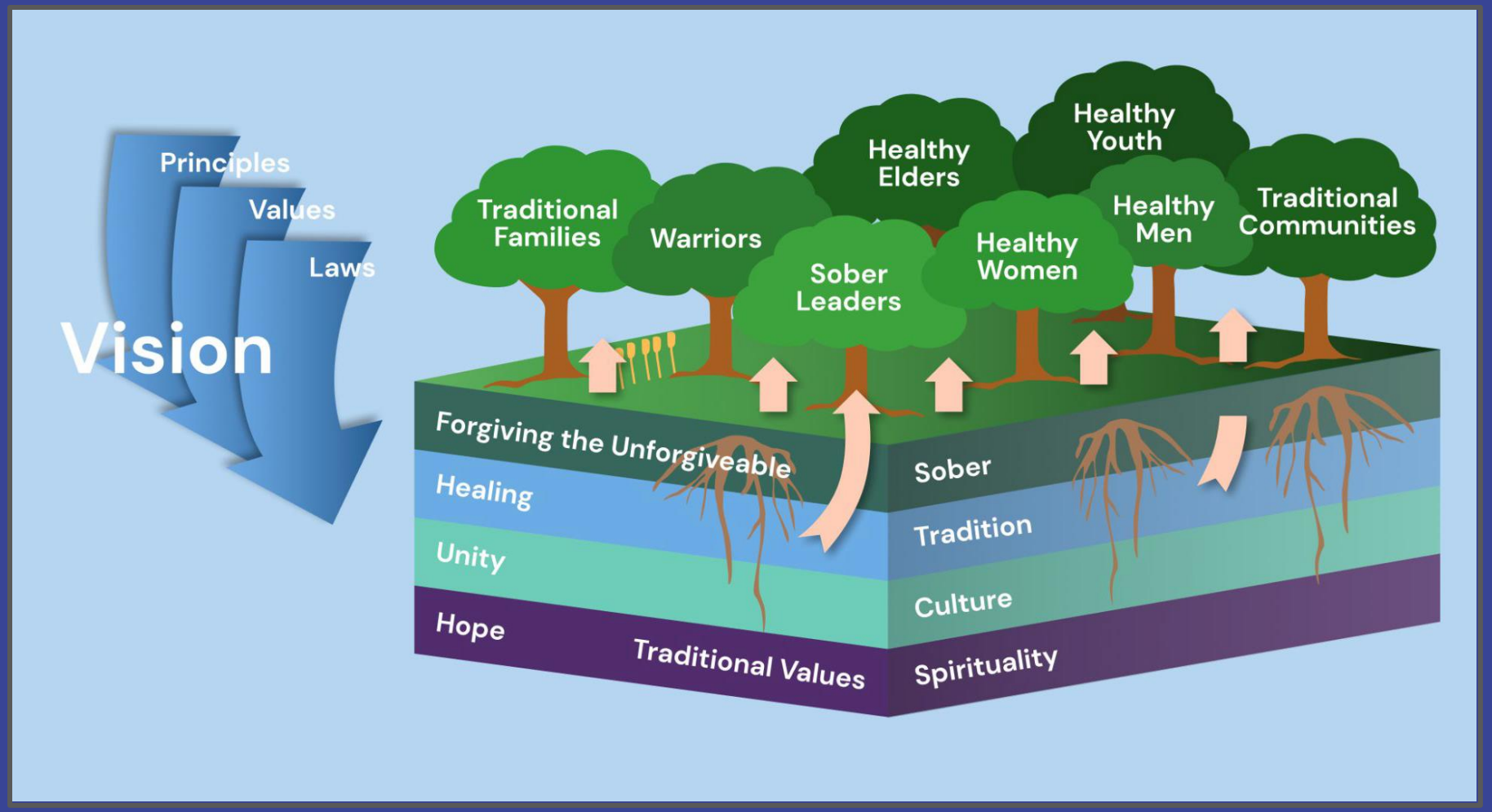


Healing Forest/ROSC

"What's called for in this metaphor is treating the soil — creating a Healing Forest within which the health of the individual, family, neighborhood, community, and beyond are simultaneously elevated.

The Healing Forest is a community in recovery."

The Wellbriety Movement®



Evidence of Resilience and Solutions



Culture Resilience

- Survival of Teachings
- Sweatlodge
- Moccasin Game
- Ribbon Shirt/Ribbon Skirt (Representation)
- Language
- Naming Ceremonies
- Funeral Ceremony
- Fasting Camps

Evidence of Resilience and Solutions:

Advocacy

A.I.M

Recovery Movements

Environmental Advocacy

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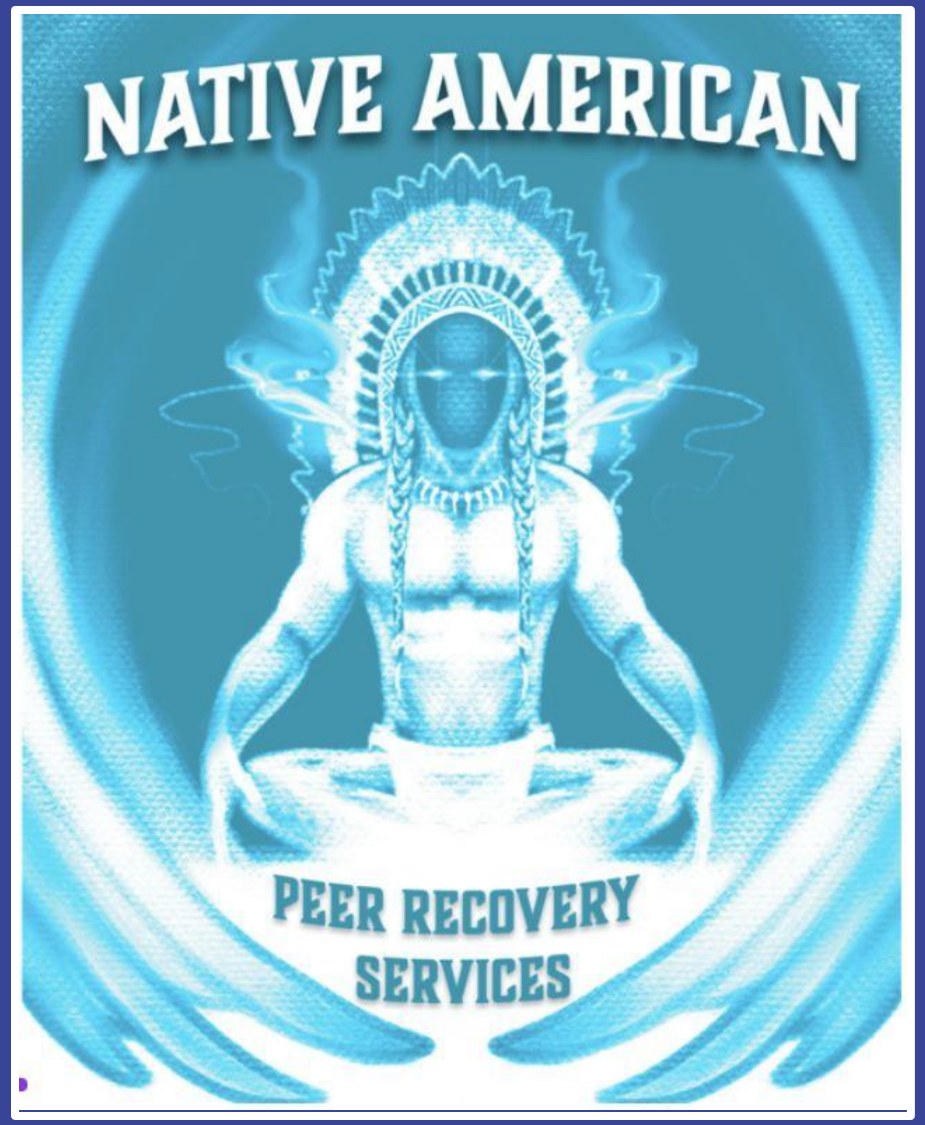
Building Trust: A Crucial Foundation

> “Either you have a seat at the table or you're on someone's menu.”

Establishing trust is paramount in fostering genuine partnerships and effective recovery ecosystems. By ensuring Tribal communities have a voice and agency in shaping their own solutions, we can break cycles of mistrust and promote healing from within.

Native American Peer Recovery Services



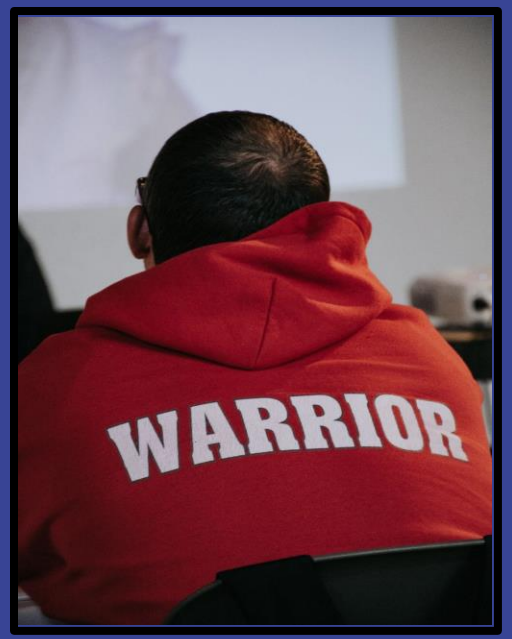
Addressing Historical Trauma

1. **Rebuilding Family Structure**
   a. Support in all forms of life
   b. Recovery is Holistic
2. **Pushing back on Exploitation**
   a. Advocacy
3. **Building Connection**
   a. Culture
   b. Ceremony
   c. Building/Connecting Ecosystems of R continuum
4. **Inclusion**
   a. Representation
   b. Multiple Pathways to Recovery




INDIGENOUS

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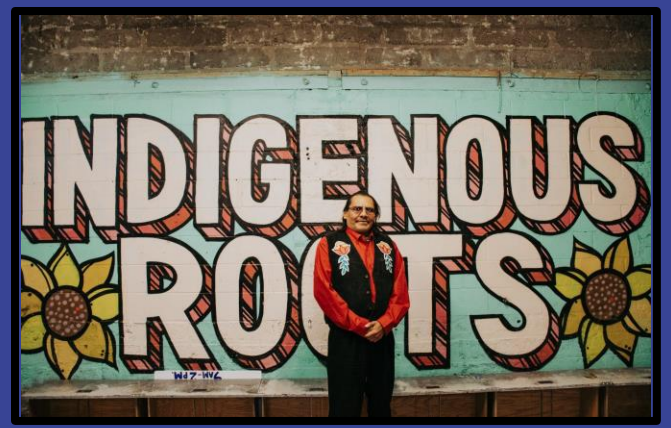
INDIGENOUS
ROOTS


INDIGENOUS
ROOTS



The Role of Partnerships in Sustainable Change

- **Building Meaningful Collaborations**
  - Engaging Native leaders, elders, and community organizers in initiatives.
  - Partnering with Indigenous-led organizations for authentic impact.
- **Co-Creation, Not Just Inclusion**
  - Moving from inclusion to empowerment—letting Native communities lead.
  - Ensuring representation at decision-making tables.

Working Together for a More Equitable Future

- **Actionable Steps for Organizations and Individuals**
  - Invest in Native-led initiatives.
  - Advocate for policy changes that promote equity.
  - Be intentional in amplifying Indigenous voices.
- **A Call to Action**
  - Holding space means committing to action, not just conversation.
  - We must walk this journey together, honoring the past while shaping the future.

COMMUNITY ENGAGEMENT









Key Takeaways

Historical Context

Acknowledge the impact of colonization and historical trauma on substance use and mental health within Tribal communities.

Trust Building

Prioritize trust-building through collaborative partnerships and culturally responsive approaches.

Data-Driven Strategies

Utilize data to inform the development and implementation of targeted interventions.

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Thank You!

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STRENGTHENING THE BEHAVIORAL HEALTH WORKFORCE THROUGH PEER SUPPORT

Allyson Shaw, LCSW
Craig Sandoval, M.Ed
The Urban Indian Center of Salt Lake

AGENCY MISSION

To serve THE PEOPLE by honoring Native cultures, strengthening health and wellness programs, and cultivating community.

Learning Objectives

01

UNDERSTAND PEER SUPPORT

Explain how peers expand access, support workforce development, and strengthen engagement, recovery, and continuity of care alongside clinicians, SUDCs, and case managers.

02

IDENTIFY INTEGRATION STRATEGIES

Identify practical ways to integrate peer support into culturally responsive urban Indian health programs.

03

PLAN FOR SUSTAINABILITY

Plan for sustainability through hiring, training, supervision, role clarity, and organizational support.

Peer Support

Peer Support In Practice

Peer support is a non-clinical service where an individual who has lived experience in recovery offers practical guidance to someone in need.

Peer support offers individual and group connection grounded in lived experience and recovery.

Care navigation connects clients with behavioral health, primary care, public health, and family services.

Peer support helps with transitions between care levels and to navigate referral pathways.

Peer support inspires hope that people can and do recover!

CERTIFIED PEER SUPPORT SPECIALIST

The Role of a Certified Peer Support Specialist (CPSS)

Expanding access • Empowering recovery • Building community

MENTAL HEALTH

Emotional wellness, recovery and connection

SUBSTANCE USE

Recovery support, encouragement and skills

FAMILY & CAREGIVERS

Support for parents, families and caregivers

WALKING ALONGSIDE OUR RELATIVES

Advocate through recovery • Share resources and practical skills
Mentor, coach and set goals • Build community support networks

LONG-TERM LEADERSHIP & WORKFORCE DEVELOPMENT

Train and supervise peers • Educate communities • Develop resource networks

A Familiar Face Throughout Recovery

CPSS provides a trusted connection across every stage of care.

01

INTAKE

Welcome relatives and connect them with a clinician for assessment.

02

PROGRAM ENTRY

Follow up on recommendations, orientation, and enrollment.

03

TREATMENT

Provide individual and group peer support and address barriers.

04

AFTERCARE

Offer continued contact, including early discharge and care transitions.

HOW PEER SUPPORT COMPLEMENTS OTHER SERVCES

Peers help relatives understand treatment, overcome barriers, and build confidence.
Lived experience models hope and supports collaboration with providers.

POTENTIAL BENEFITS

Stronger provider relationships
Better treatment retention
Greater access to social supports

PEER SUPPORT | STRENGTHENING CARE

How Peer Support Strengthens Care

Building connection, hope, and recovery through lived experience.

SHARED EXPERIENCE & TRUST

Connect through lived experience, mutual understanding, respect, and hope. Offer practical insight for navigating health and community systems.

ENGAGEMENT & RECOVERY

Maintain contact through calls, texts, and emails; share lived experience purposefully and provide encouragement and follow-up.

RESOURCE NAVIGATION

Help relatives identify, access, and learn to use recovery and community resources, complementing case management and supporting independence.

Integrating Peer Support into Urban Indian Health Programs

CORE PRINCIPLES

Holistic Healing
Physical, mental, emotional, and spiritual wellness; CPSS joins the support circle.

Cultural Connection
Medicine Wheel framework for goal setting, traditional healing referrals, restore connections to the community, support

Reciprocity & Mutuality
Shared experience, trust, and social support strengthen connection.

Trauma-Informed Care
Recognize historical and generational trauma, emphasize safety and empowerment.

PRACTICAL INTEGRATION STRATEGIES

Include CPSS in interdisciplinary staffing, treatment planning, and program design.
Provide peer-supported orientation/onboarding for new clients.
Refer clients facing treatment interruptions, ASAM-identified needs, missed visits, or barriers to mental health progress.

Lived experience builds connection, hope, and credibility.

BUILDING & SUSTAINING THE PEER SUPPORT WORKFORCE

CERTIFICATION & ENTRY

Utah CPSS: age 18+, Utah address, one year in recovery, and approved 40-hour training.
Pathways: MH/SUD, Family, and Youth/Young Adult.

CONTINUING EDUCATION

Two-year certification cycle; 20 CEUs, including peer-specific, ethics, and suicide prevention topics. Utah DHHS learning opportunities and additional crisis intervention or case management training.

SUPERVISION & SUPPORT

Weekly clinical supervision, monthly peer support meetings. Clear expectations, mentorship, and collaboration across multidisciplinary teams.

CAREER DEVELOPMENT

Build pathways to mentorship, peer training, supervision. Invest in retention, workforce integration, and leadership opportunities.

SUSTAINING PEER SUPPORT PROGRAMS

Funding • Billing • Access • Culturally responsive care

SERVICE DELIVERY

Reimbursable individual and group peer support, eligible targeted case management.

MEDICAID BILLING

H0038: individual, per 15 minutes. H0038 HQ: group services.

BILLING WORKFLOWS

Connect services to established treatment plans. Bill initial contacts as case management when all requirements are met.

TELEHEALTH ACCESS

Offer video and audio services; improve access and maintain engagement.

KEY MESSAGE Sustainable programs pair reliable funding with appropriate billing and accessible, culturally responsive services.

ORGANIZATIONAL BUY-IN & RETENTION

Why we integrated peer support • Building a workforce that lasts



ORGANIZATIONAL INVESTMENT

Expand our clinical framework with peer support. ARPA funded recruitment; eligible reimbursable services support long-term sustainability.



SUPERVISION & CONSULTATION

Weekly individual and group supervision, plus a consultation space to discuss client impact, challenges, and workload capacity.



ROLE CLARITY & INTEGRATION

Define CPSS duties and boundaries across the team. Include peer support in provider recommendations and individualized treatment plans.



BENEFITS & PROFESSIONAL GROWTH

Competitive pay, benefits, leave, and predictable hours (Mon–Fri, 8:30–5, occasional evenings/weekends). Fund certification, CEUs, and training.

COMMUNITY CONNECTION & CULTURAL STRENGTHS

Peer support success story • Consistency, trust, and access to treatment



A SAFE GATHERING SPACE

UICSL as a welcoming place to seek help. A new client presented in crisis during the first three visits but continued to engage.



SAFE DETOX

CPSS helped by arranging medical detoxification and exploring residential options, while encouraging the client along the way.



PERSISTENT THROUGH BARRIERS

Multiple attempts were made to enter out-of-state residential treatment, including a wait after an arranged admission did not begin.



SUCCESSFUL TRANSITION

The client completed transport, arrived at the residential facility, and remains in treatment at the time of this presentation.

Survey

