“Benefits of Peer Provided Services and Drop In Centers
Following is a brief summary of research demonstrating the benefits of peer run services:

- A participatory evaluation of the NYAPRS Peer Bridger Project conducted by Cheryl MacNeil, Ph.D. examined benefits of peer services including temporary relief from social isolation often experienced by people who are hospitalized and the ability to share with each other wisdom and survival skills necessary for the process of recovery. The most substantial finding was that follow-up re-hospitalization rates during a two year period decreased from 60% to 19%, an improvement of 41% for individuals who were recipients of peer provided bridging services (Rosenthal, H., Testimony Regarding the Results of the Research Study of the New York City Involuntary Outpatient Commitment Pilot Program, December 16, 1998).

- 70% of self-help groups report their members stay out of the hospital, hold a job and are living more independently and assuming more responsibility (Rosenthal, H., Testimony Regarding the Results of the Research Study of the New York City Involuntary Outpatient Commitment Pilot Program, December 16, 1998).

- Clifford Thurston, one of a growing number of consumers nationwide who is working for MCO’s, has made the following statement about drop in centers: “The bottom line is that these programs are being funded because they’re cost-effective. They reduce hospitalizations and get people back to work” (Technical Assistance Guide on Consumer-run Drop-in Centers, National Mental Health Consumers’ Self-Help Clearinghouse).

- People participate in self help because it works. The movement is relatively new, but studies are now being completed that demonstrate the benefits of consumer provided services including helping people cope with and overcome their individual and collective problems as well as the stigma and discrimination encountered in the external environment (Consumer/Survivor-Operated Self-Help Programs: A Technical Report, U.S Department of Health and Human Services, Substance Abuse and Mental Health Services Administration Center for Mental Health Services, www.samhsa.gov).

- A common conception about drop in centers is that they are unstructured environments where people “hang out” and find respite. While this is partially true, drop in centers have evolved into environments where people learn about recovery, access resources, develop self esteem and leadership skills, obtain employment and are becoming strong centers for advocacy. Some common activities at drop in centers include, but are not limited to: self-help group meetings, group meals, weekly or monthly socials or parties, social/recreational excursions, consumer speakers’ bureau, individual advocacy, systems advocacy, referral bank for mental health services, computer access and training, employment services, guest speakers/workshops, assistance with basic needs, consumer-run businesses, political events, and outreach programs (Technical Assistance Guide on Consumer-run Drop-in Centers, National Mental Health Consumers’ Self-Help Clearinghouse).”