



# A Brief History of Youth Peer Support

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## INTRODUCTION

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The youth movement behind youth peer support services follows in the footsteps, while blazing new trails, first set by adults with lived experiences, as well as parents and caregivers of children and youth with certain behavioral, emotional, and mental health needs, supporting each other, peer to peer. Youth peer support specialists not only enrich this legacy, but they carry it forward, being front and center creating the communities of support they need for all youth to thrive, for them, by them.

According to a 2019 report by Substance Abuse and Mental Health Services Administration (SAMHSA), in the United States, there are over 30 states, reservations, and territories with some sort of formal (Medicaid funded) family and youth peer support services and programs in place. Additionally, within our own Youth MOVE National chapter network, 50% of active chapters identify peer support (informal or formal) as a core activity of their group, based on our 2023 annual reporting.

In this issue brief,<sup>1</sup> we will provide a snapshot of the developmental timeline of peer support that eventually led to the implementation of youth peer support that we are seeing today.



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## DEVELOPMENT OF PEER SUPPORT

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Since the 18th century peer support has been an influential part of mental health recovery practices for youth and adults, and in some capacity has existed long before this, anywhere friendship, relationships, and communities have thrived!



The first record of official peer support was in 1784 when the superintendent of a psychiatric hospital ward just south of Paris, France, Jean Baptiste Pussin, prioritized empathy in the clinical practice. Due to the “more gentle, honest, and humane” qualities of past hospital patients, Pussin initiated the process by hiring past patients of the hospital to serve the current patients day-to-day. Even in the most challenging conditions, Pussin noted how these peers were kinder and less cruel than other staff without lived experience inside the hospital. This model of employing patient peers and those with lived experience in the system became more common over the years. Two centuries later, Henry Stack Sullivan applied similar practices by actively seeking individuals with lived experiences of mental health struggles and recovery to join the staff of his inpatient unit, acknowledging their unique empathy and deep understanding of patient needs.



While peer support has been in practice since the 18th century, the official idea of peer support developed from the Psychiatric Survivor Movement, which emerged in the United States during the 1960s and 1970s as a response to the oppressive and dehumanizing treatment of individuals within psychiatric institutions and mental health settings.

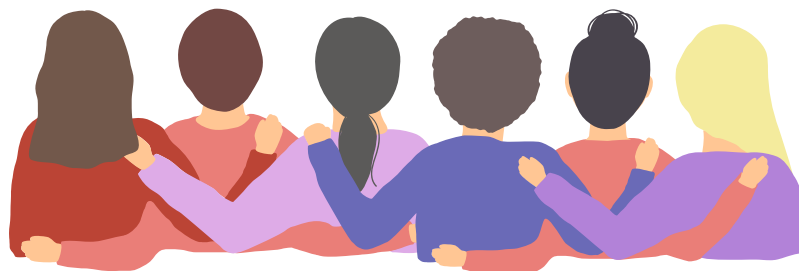
The movement aimed to challenge the medical model of psychiatry and advocate for the rights and autonomy of individuals with psychiatric diagnoses. The movement drew inspiration from various civil rights and social justice movements of the time, such as the anti-psychiatry movement, the anti-establishment movement, the civil rights movement, and the disability rights movement.

Activists within the movement highlighted the abusive practices prevalent in psychiatric institutions, including forced treatments, involuntary hospitalizations, and neglect of basic human rights. One of the foundational events of the movement was the creation of the Mental Patients Liberation Front (MPLF) in 1971, which organized protests, demonstrations, and acts of civil disobedience to challenge the psychiatric system. The MPLF and other groups advocated for alternatives to institutionalization, such as community-based mental health services, peer support, and survivor-led initiatives. The movement played a significant role in shifting public perception and influencing policy changes.



It contributed to the passage of legislation like the Protection and Advocacy for Individuals with Mental Illness (PAIMI) Act in 1986, which aimed to safeguard the rights of individuals receiving psychiatric services. The Psychiatric Survivor Movement continues to be a vibrant force advocating for mental health reform and fighting against the marginalization and stigmatization of individuals with psychiatric diagnoses. The movement emphasizes the importance of survivor-led initiatives, uplifting inherent power, self-determination, and human rights within mental health care. It ultimately works towards restorative practices/decarceration within mental health systems that inspired the emergence of the peer support workforce!

It wasn't until the early 2000's when youth officially became part of the conversation and the National Youth Development Board was established. The subsequent years led to many advocacy efforts for youth and young adults, and the development of youth peer support as a key aspect in a plethora of services.



## HISTORY OF THE PEER SUPPORT MOVEMENT (1900S - TODAY)

The following timeline highlights key moments from the Peer Support Movement starting in the 1900s!

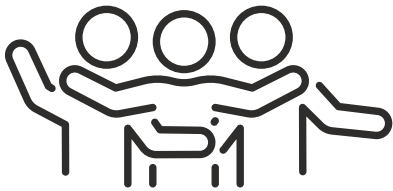
## A Brief History of Peer Support

**1965**

Community mental health professionals and counselors were trained with specific skills in the support of patients with mental illnesses in hospital settings by Dr. Robert Carkhuff. Carkhuff was a clinical psychologist and the author of, *The Art of Helping*.

**1967**

The promotion of wellness in mental health was pioneered by an American psychologist, Emory Cowen, coined one of the fathers of community mental health. He proposed a community mental health care model that required the employment of nonprofessional peers in the development, implementation, and evaluation of community interventions and practices.



### 1980s Psychiatric Survivor Movement “Consumer/Survivor/Ex-patient Movement”

**1982**

Mental Health Consumer Movement was organized to empower former mental health service users to help and advocate for each other. Organizations started to hire staff who had their own chronic disease history, and patients found comfort with the staff. The new peer staff had higher patience and empathy towards current mental health patients.

**1986**

A Publication of *Unclaimed Children* was written and published by Jane Knitzer, which drew attention to children struggling with mental health and the importance of including families as part of the recovery journey.



### 1990s Children’s Mental Health is recognized at a federal level

**1998**

The Federation of Families for Children’s Mental Health was established to focus advocacy on children and youth with mental health challenges.



## A Brief History of Peer Support

**2000**

Youth were promised to be included in conversations about youth mental health. After being verbally excluded at The Surgeon General's Conference, the youth at this conference bonded together to write a manifesto that would lead to the establishment of the National Youth Development Board.



### 2000s Youth Join the Fight through Advocacy

**2001**

The National Youth Development Board was established to advise Substance Abuse and Mental Health Services Administration (SAMHSA). The board consisted of youth and young adults who would be involved in federal conferences, local events, and hired local youth coordinators to implement youth-guided programming in communities. The board aimed to ensure that all federally funded programs required the above listed aspects.

**2002**

United States President George W. Bush created the New Freedom Commission on Mental Health. The purpose of this executive order and commission was to conduct a comprehensive study of the United States Mental Health Service Delivery System. The goal focused on ensuring that mental health care is consumer and family-driven, and youth-guided.

**2007**

The National Youth Development Board transitioned into Youth MOVE National (YMN) with an expanded vision for youth programming focusing on ensuring that youth and young adults are part of the conversation.



### 2010s Youth MOVE National is established as a 501c3

**2013**

The organization of Youth MOVE National established itself as an independent 501c3. Funding was still closely tied to the government and SAMHSA.

**2016**

Peer Center Mental health Reform Act of 2016 was a bill that required SAMHSA to include improving mental and substance use disorder services and develop/support activities to recruit and retain a workforce.



## **YOUTH MOVE NATIONAL™**

### **VISION FOR THE FUTURE**

With over 55 youth-led chapters in the U.S., Youth MOVE National envisions a future in which young people are valued as empowered leaders, advocates, and designers of communities that are built for all youth to thrive through intentional and genuine youth engagement and advocacy efforts, initiatives, and grants.

**If you would like to request technical assistance and consultation from Youth MOVE National, you can submit your request [HERE!](#)**

## **REFERENCES**

- <sup>1</sup> <https://youthmovenational.org/wp-content/uploads/2021/01/Medicaid-Funded-Youth-and-Family-Peer-Support-Guide-2020.pdf>

