

**Title of Presentation:** Looking inside the Black Box: How Peer Support Differs\_\_  
from Case Management

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**Objective:** This study compared the quality of treatment relationships and engagement in peer-based against regular case management, and assessed the value of positive relationship qualities in predicting motivation for and utilization of community-based services for persons with severe mental illness (SMI).

**Methods:** 137 adults with SMI participated within a 2x(2) prospective longitudinal randomized clinical trial with two levels of case management intervention (peer, regular), and two interviews (6, 12 months). Self-report questionnaires assessed treatment relationships, motivation, and service usage, and providers rated participants' initial engagement and monthly attendance in treatment. T tests and repeated measures ANOVA assessed between-group research questions and linear regression assessed predictive research questions.

**Results:** Participants perceived higher positive regard, understanding, and acceptance from providers in the peer than regular condition at 6 months only, with initially unengaged clients showing increasing contacts with case managers in the peer condition, and decreasing contacts in the regular condition. Six-month positive regard and understanding positively predicted 12-month treatment motivation for psychiatric, alcohol, and drug use problems, and attendance at AA/NA meetings.

**Discussion:** Early in treatment, peer providers may possess distinctive skills in communicating positive regard, understanding, and acceptance to clients, and a facility for increasing treatment participation among the most disengaged, with positive treatment relationship elements leading to greater motivation for further treatment, and utilization of peer-based community services. Findings strongly suggest that peer providers serve a valued role in quickly forging therapeutic connections with persons typically considered to be among the most alienated from our healthcare service system. Further implications of these findings for transforming conventional clinical care as part of system transformation will also be discussed.