

# Social Support in Patients Receiving Buprenorphine Treatment via a Peer-Navigator Program

Kathryn Traub, BA; Emma Chen, BSE; Maham Ahmed; Christine Ramdin, PhD; Lewis S. Nelson, MD, MBA; Cynthia Santos, MD

## BACKGROUND

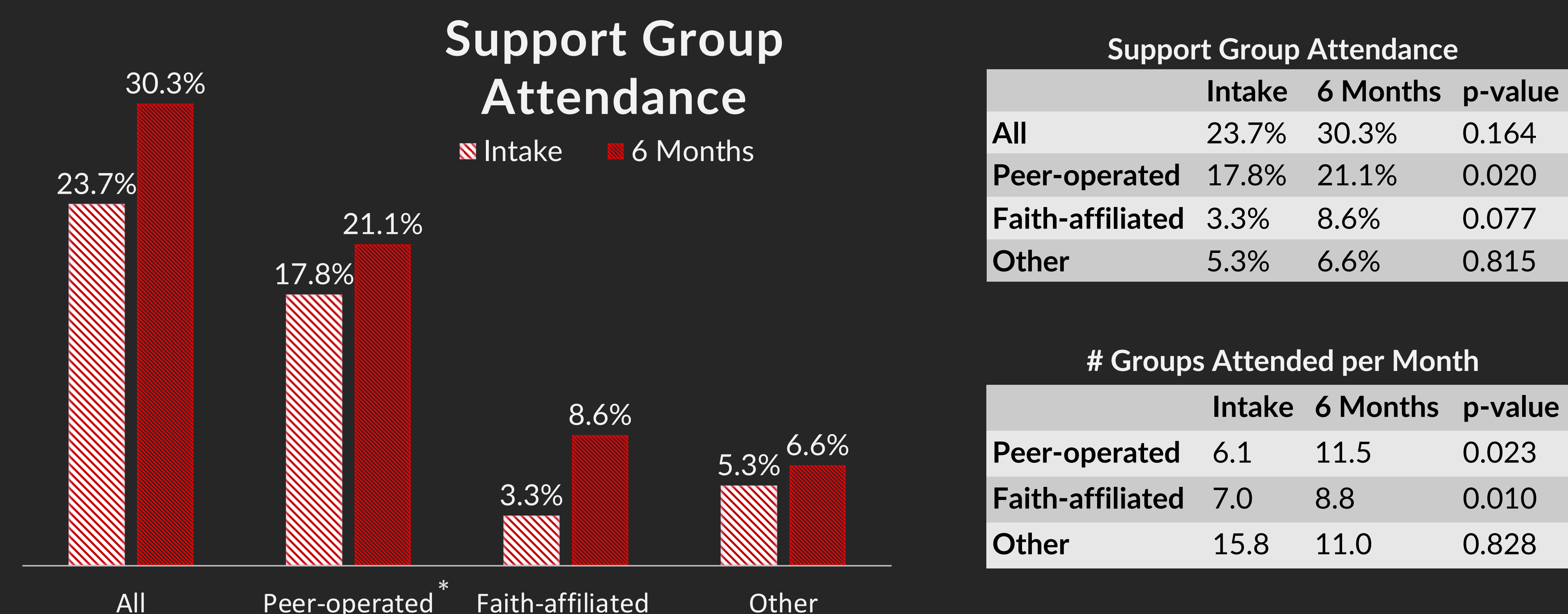
- Quality of social relationships impact treatment outcomes for patients with opioid use disorder (OUD).
- Positive social networks can increase the effectiveness of medications for opioid use disorder (MOUD) and negative social networks can hinder medication therapy.
- Involvement of peer navigators is associated with improved patient relationships with their social supports.

## METHODS

- A retrospective review of federally validated Government Performance and Results Act (GPRA) surveys obtained from patients with OUD receiving buprenorphine treatment via a peer-navigator program at intake and six months.
- Survey Topics:**
  - Support group attendance
  - Interactions with family and/or friends supportive of recovery
  - Sources of social support
  - Satisfaction with relationships at intake and six months
- Analysis:** McNemar test for matched categorical data, Chi-squared difference of proportion test for unmatched categorical data, Wilcoxon signed-rank test for matched continuous data.

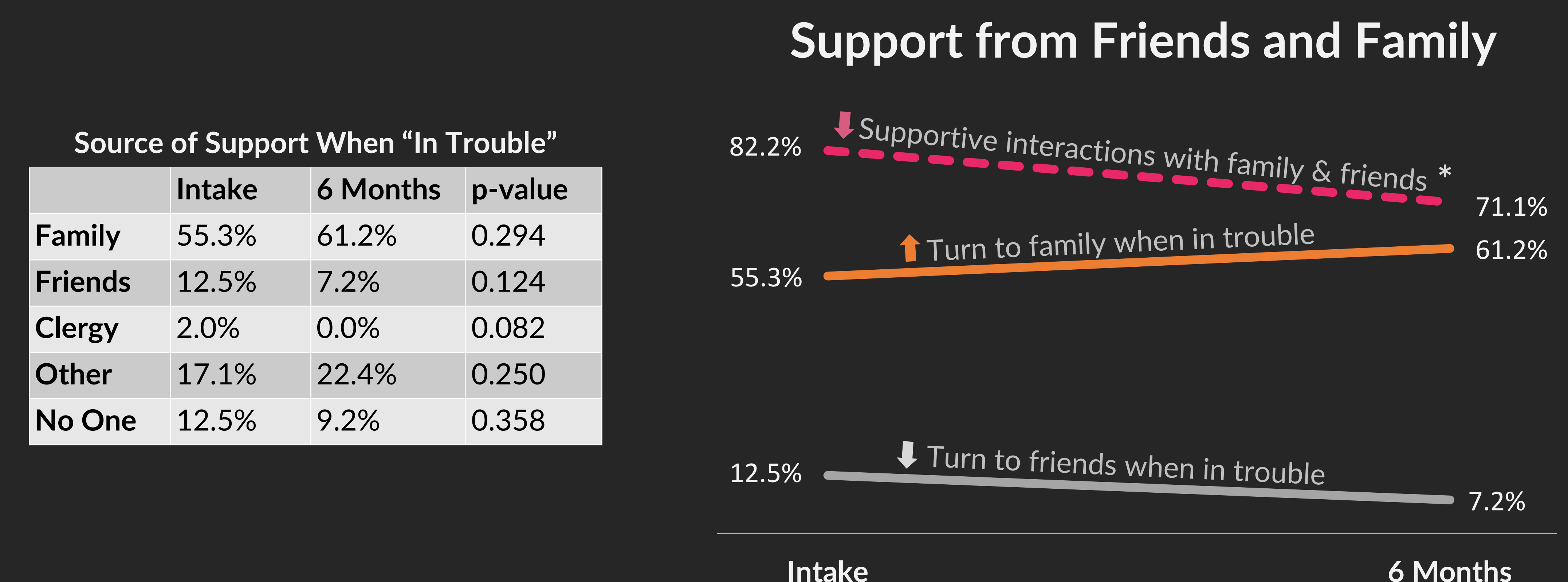
## RESULTS

- Matched survey data available for 153 patients at intake and six months.
- Increase in number of participants attending groups supportive of people in recovery (23.7 vs. 30.3%,  $p=0.164$ ).
- Improved patient satisfaction with personal relationships (3.63 vs. 3.85,  $p=0.024$ ).
- Shift in source of social support:
  - Increased reliance on family (55.3 vs. 61.2%,  $p=0.294$ )
  - Decreased reliance on friends (12.5 vs. 7.2%,  $p=0.124$ ), clergy (2.0 vs 0.0%,  $p=0.082$ ), and no one (12.5 vs. 9.21%,  $p=0.358$ )
- Decrease in participants who reported interactions with family and/or friends supportive of their recovery (82.2 vs. 71.1%,  $p=0.027$ ).



Patients in a buprenorphine treatment program aided by peer-navigators showed increased satisfaction with personal relationships and increased attendance in support groups.

Patients also showed increased reliance on family and decreased reliance on friends.



\*Indicates significant findings.

## DISCUSSION

- Limited reliance on community self-help groups of all kinds with a moderate increase at six-month follow-up. The subset of patients attending peer-operated groups nearly doubled their frequency of attendance.
- Patients increasingly relied on family over other sources of social support, yet they reported a decrease in supportive interactions with family and friends at six-month follow-up.
- Shifts in social support may reflect changes in patient expectations of their social relationships or changes in the composition of patient social networks during treatment.

## FUTURE DIRECTIONS

- Future programming and research should explore engaging family support systems in MOUD to maximize the potential for positive benefit of these relationships.
- Efforts to support family systems may assist in maintaining this relationship over the course of MOUD.
- Given the important role that social relationships play in OUD treatment, future studies should explore these relationships in more detail and include larger sample sizes.

## ACKNOWLEDGEMENTS

Thank you to SAMHSA for the use of their survey. The authors have no disclosures.

## REFERENCES

- Eddie, D., Hoffman, L., Vilsaint, C., Abry, A., Bergman, B., Hoepfner, B., Weinstein, C., & Kelly, J. F. (2019). Lived experience in new models of care for substance use disorder: A systematic review of Peer Recovery Support Services and recovery coaching. *Frontiers in Psychology*, 10.
- Kumar, N., Howell, B. A., Alexander, M., & O'Connor, P. G. (2020). The role of social network support on treatment outcomes for medication for opioid use disorder: A systematic review protocol. *Journal of substance abuse treatment*, 127, 108367.
- Moran, G., Knudsen, H., & Snyder, C. (2019, July 7). Psychosocial supports in medication-assisted treatment: Recent evidence and current practice. *ASPE*.