



National Association for the
Advancement of Suicide Prevention

Peers in the Suicide Prevention Workforce

A Workforce Brief for Nonprofit Leaders, Peer Program Leaders, and Senior Peers

Peers play an important role in suicide prevention. A peer in this context is someone who has lived experience with a suicidal crisis — meaning they have personally faced suicidal thoughts or survived a suicide attempt.

Role in the Suicide Prevention Workforce

Peers work alongside — not instead of — professional helpers. They fill gaps in the system by offering hope, shared understanding, and real-world perspective. Research shows that peer support can improve outcomes, reduce hospitalizations, and increase help-seeking (Chinman et al., 2017).

What Peers Do

- **Share lived experience:** When appropriate, peers share their own story to reduce shame and build trust.
- **Offer emotional support:** They listen without judgment and validate the pain of others.
- **Model recovery:** By being present and thriving, peers show that crisis is survivable, recovery is sustainable.
- **Connect people to care:** Peers help bridge the gap between someone in crisis and professional services.
- **Participate in systems change:** Peers help organizations understand what survivors actually need.

Where Peers Work

- Crisis centers and warmlines
- Hospitals and emergency departments
- Community mental health centers
- Community based nonprofits
- Schools and colleges
- Veterans’ programs
- State and local health departments
- Online and phone-based support platforms

Peers in Suicide Prevention: By the Numbers

Exact national counts of trained suicide prevention peers are not yet standardized. However, data from several sources offer useful estimates:

- **988 Suicide & Crisis Lifeline:** Over 200 crisis centers across the U.S. participate in the Lifeline network. Many are integrating peer support specialists into their teams (SAMHSA, 2023).
- **Mental Health First Aid (MHFA):** More than 4 million people have been trained in MHFA in the U.S. since 2008, with tens of thousands completing training each year (Hermosilla et al., 2023; MHFA, 2023; Morgan et al., 2018).
- **Peer Specialist Workforce:** As of 2024, there are an estimated 100,000 certified peer support specialists working in behavioral health across the country — a number that continues to grow (Ostrow et al., 2025a; Ostrow et al., 2025b; Ten Priorities, 2024).
- **Youth-focused programs:** Programs like More Than Sad (AFSP) and SOS Signs of Suicide have trained millions of students and educators in recognition and response (Schilling et al., 2016).

Two Peer-to-Peer Models in Suicide Prevention

1. CAMS (Collaborative Assessment and Management of Suicidality) — Peer-Enhancement

CAMS is a well-researched, clinician-led framework adapted in some programs to include peer navigators who work alongside providers. Peers help translate the care plan, reduce shame, and support engagement between sessions. Studies show improved outcomes in youth populations when peer support is added (CAMS-Care, 2026; Shepler et al., 2022).

2. Multi-modal Peer Support for Older Adults

A peer support model designed specifically for older adults at risk for suicide. Trained peer volunteers — many of whom are older adults themselves — make regular check-in calls, share resources, and provide companionship. A pilot study found participants reported reduced isolation and improved reasons for living (Drouin et al., 2023).

Peer Readiness and Support: Not everyone with lived experience is ready or able to take on a peer support role. *Readiness is personal.* Organizations are strongly encouraged to allocate resources to support assessing readiness, training, and support.

References

CAMS-Care. (2026, January 29). Supporting clients between sessions: Peer support and new data from Now Matters Now [Webinar]. <https://cams-care.com/resources/events/supporting-clients-between-sessions-peer-support-and-new-data-from-nowmattersnow/>

Chinman, M., Daniels, K., Smith, J., McCarthy, S., Medoff, D., Peeples, A., & Goldberg, R. (2017). Provision of peer specialist services in VA patient aligned care teams: protocol for testing a cluster randomized implementation trial. *Implementation Science*, 12(1), 57.

Drouin, M., Flanagan, M., Carroll, J., Kerrigan, C., Henry, H., & Toscos, T. (2023). Piloting a Peer Support Program for Patients Who Screen Positive for Intimate Partner Violence, Suicidal Ideation, and Depression. *Healthcare*, 11(17), 2422.

Shepler, C. R., Edelmann, A. C., Firemark, A. J., Sugar, C. A., Lynch, F. L., Dickerson, J. F., ... & Asarnow, J. R. (2022). Stepped care for suicide prevention in teens and young adults: Design and methods of a randomized controlled trial. *Contemporary clinical trials*, 123, 106959.

Hermosilla, S., Forthal, S., Sadowska, K., Magill, E. B., Watson, P., & Pike, K. M. (2023). We need to build the evidence: A systematic review of psychological first aid on mental health and well-being. *Journal of traumatic stress*, 36(1), 5-16.

Morgan, A. J., Ross, A., & Reavley, N. J. (2018). Systematic review and meta-analysis of Mental Health First Aid training: Effects on knowledge, stigma, and helping behaviour. *PloS one*, 13(5), e0197102.

Mental Health First Aid USA. (2023). Mental Health First Aid impact report. National Council for Mental Wellbeing.

Ostrow, L., Cook, J. A., Pelot, M., Salzer, M. S., & Burke-Miller, J. K. (2025a). Post certification wages among certified peer specialists working in peer support and other occupations. *Psychiatric Services*, 76(4), 350-357.

Ostrow, L., Cook, J. A., Pelot, M., Robinett, K., Salzer, M. S., & Burke-Miller, J. K. (2025b). Employment Status Following Peer Specialist Certification: Results of a 3-Year Multistate Survey. *Psychiatric Services*, 76(5), 497-501.

Schilling, E. A., Aseltine Jr, R. H., & James, A. (2016). The SOS suicide prevention program: Further evidence of efficacy and effectiveness. *Prevention Science*, 17(2), 157-166.

Substance Abuse and Mental Health Services Administration. (2023). 988 Suicide and Crisis Lifeline: Year one data and outcomes report. U.S. Department of Health and Human Services.

Ten Priorities, T., & Agenda, A. A. (2024). Listening to the Peer Support Workforce.

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