

Peer Specialist Perspective	Overlap	Clinical Perspective
Work is guided by the Principle of Mutuality defined as a focus on the connection between the Peer Specialist and the peer wherein there is reciprocity.	Unconditional positive regard for the individual being served.	Clinicians are in the role helping and supporting participants with a focus on diagnosis, identification of strengths and treatment. There is not an expectation of reciprocity in clinician/participant relationships.

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Focus on learning together rather than assessing or prescribing help.	A desire to support recovery and the person's achievement of their human potential.	Focus on assessing and helping.

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Emphasis on sharing and exploring life experiences where both individuals share personal experiences and perspectives.	The importance of connection, finding common ground, and respect.	Emphasis on exploring program participants' experiences, with less expectation for the clinician to share their personal experiences.

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There are many ways to understand the experience of what gets diagnosed as mental illness: bio-psycho-social; spiritual; cultural; distress as teacher; altered states; a natural variation of human experience, etc.	A commitment to support the person in making meaning of their experience.	The bio-psycho-social approach is the main framework for diagnosis and treatment while utilizing a cultural competency framework.

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Do not participate in the delivery of involuntary interventions such as commitment to a hospital or outpatient commitment.	Both clinicians and Peer Specialists recognize the importance of choice and self-determination in the recovery process.	Involuntary intervention such as commitment to hospital can be justified if clinicians struggle to balance the Duty to Care with the Dignity of Risk.

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Trained to be advocates for and with participants. Advocacy may include speaking up about participant's needs and goals, and/or coaching participants in speaking for themselves. Advocacy may also include advocating for participant's legal rights, civil rights and human rights.	Both clinicians and Peer Specialists strive to listen carefully to the needs, preferences, goals and aspirations of participants.	Many are trained in recovery oriented practice which strengths based, person-centered and aimed at supporting participants achieving their unique goals.

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Peer Specialists are members of a socially devalued group often referred to as "the mentally ill". As such they are keenly attuned to stigma, dehumanizing practices, objectifying language, prejudice, discrimination and even offensive or traumatizing practices in mental health, health and social service systems. As advocates, Peer Specialists will speak up if clinicians slip into language or practices that (often unintentionally) devalue participants or reinforce the status of being socially devalued.	Together, clinicians and Peer Specialists strive to create a culture of respect throughout behavioral health systems and in the general public.	Clinicians who have not disclosed a personal psychiatric history, are not part of the socially devalued group known as the mentally ill.