Episode 3: From Peer Support to Policy- Racquel Garcia on How to Get Involved with Advocacy and Find Your Voice

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Justin Bell: Hey, everybody. Welcome to the Peer Support Professional's Guide. I'm your host, Justin Bell, research scientist in person in recovery. Peer support is one of the fastest growing roles in behavioral health right now. With that growth comes opportunity, but also also a lot of questions about how we do it well. So each episode of the guide, I sit down with peer specialists, leaders, advocates from across the field, talk about what's actually happening on the ground, what's working, what's challenging, what it takes to grow in this role. Whether you're just getting started as a peer or whether you've been doing this work for years, this is your guide to help you build skills and think critically. Today's episode is on advocacy. Professional respect is rarely given for free, and that's true for peers as well, who are often fighting for the respect of other professionals, fighting for fair wages and fighting for the people they serve to have better access to treatment. So that begs the question, how do you become an advocate as a peer professional? Well, today I talked to a personal role model, Raquel Garcia, founder, owner, and chief innovation officer of Hard Beauty, a Colorado based recovery community organization. Raquel is a nationally certified peer support specialist and serves on Colorado's State Opioid Abatement Council. Her career and advocacy has included testifying before Congress and fighting for a stronger peer workforce in her state and region. We discuss the tough questions about the workforce's present and its future, and how peer professionals can play a role in shaping their own destiny and their community's destiny, as well as if they find the right pathways to advocacy. Let's jump into it. All right. Hello. thank you so much, Racquel, for joining us on the Peer

Recovery Support Specialist Guide. How are you doing today?

Racquel Garcia: I'm doing okay. How are you doing, Justin?

Justin Bell: I'm doing well. Doing very well. Well, I invited you to this podcast because I'm a fan. I've followed you on LinkedIn a lot. I know I've seen you at conferences and we've ran into each other. and I've been especially impressed by the advocacy that you do, not only at state level, but also national level. and I think people assume maybe when that when they see you do stuff like, oh, that you just were naturally built for that, that you just, like, started off like that, which is probably not true. So, can you tell us kind of about how you got into peer support and then how you ended up doing all this advocacy stuff?

Racquel Garcia: Sure. well, first and foremost, I'm a woman in long Term recovery. And so, I've been in recovery for over 16 years. and I kind of. If I. If I'm honest, I think I've always been a little bit of an advocate. Even prior to my substance use, I lived on a street called Mercer Drive, 18981 East Mercer Drive. And in that community, it was a very diverse community, which in the part of Colorado that I grew up in, is very rare. And I think I've always wanted to change the world. even at nine years old, we had a group. I was like the. The ringleader of the. All the kids in the neighborhood.

Justin Bell: Okay.

Racquel Garcia: And I would take them outside, and, you know, back then it was doing dance offs in the front yard to Madonna, Papa Don't Preach.

Justin Bell: Yep.

Racquel Garcia: And. And then it was also this opportunity to clean up our neighborhood. I think I probably learned a little bit of that in school. And I would take the neighborhood kids and I'd say, everybody grab a Safeway sack. And we would go around the neighborhood and just clean up trash. I even had a song. And, we were called the Litter Bugs, ironically. And the song was the Litter Bugs never litter. The litter Bugs never litter. So what can we do to stop you from littering up our world? And I would go around and clean up trash, and, you know, trauma happens, addiction happens, and my life, you know, gets upside down. From about the time I was 10 years old until I was 32.

Justin Bell: Okay.

Racquel Garcia: And I've always been a little scrappy. My mom always said I was sat on the outside that way. Always a little. Kind of. A little scrappy.

Justin Bell: Sure.

Racquel Garcia: And I got sober. And I've never been very good at acting like things aren't wrong when they are. Even in my family of origin, you know, my dad. Dad had struggled with alcohol. And I was always on the outside because I would call that forward or call that out. And then, you know, I became, Covid happens and I become a peer support

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Racquel Garcia: specialist. I'm kind of out of default. I got sober in a town of 2,500 people. And when I got sober, I was in treatment, and they launched me from a very,

you know, more, populated area where I went to treatment back to my. My town of Palm Palmer Lake, Colorado. At the time, the population was 2500.

Justin Bell: Yeah.

Racquel Garcia: There were only three people of color in the town. Myself, Darnell and Sylvia.

Justin Bell: Okay.

Racquel Garcia: And, I was so scared of youth that I kind of lived out loud in a small town. it's so easy to go right back to the bar, you know, where everybody's hanging out. And I couldn't do that. That's not where I could go. And so, I started to live out loud, fearful that I would drink or use again. And then, Covid happened, and, people started calling me a little bit more often than they used to because they were struggling. Now, when I got sober, my plan was to be a labor and delivery nurse. To be honest, I was so excited that I'd had a baby without any, drugs. Not realizing a lot of people have babies without drugs.

Justin Bell: That's fair. Yeah.

Racquel Garcia: But I show the world. Yeah. I was really proud of myself, you know, like, oh, my gosh, look, look. I just had a baby without any substances, which for me, was me. Yeah, yeah, yeah, exactly. and my mama had said to me, you know, Racquel, you want to be a labor and delivery nurse? And I said, yeah, mom, I'm going to help. Help other babies or other mothers have babies with, no substances. And she said, that's interesting. How many people have called you because they're struggling with a

substance use disorder or actually, you know, she said, addiction because they can't stop drinking.

Justin Bell: Yeah.

Racquel Garcia: And, you know, that week, 10 people called me in the last two weeks. Their mom, their dad, or something, and a light bulb went off. And so I put myself through school, became an addiction counselor. But I didn't love counseling. I didn't. I didn't like telling people what to do. I didn't like to live in the trauma of people's past. And then Covid happened, and people knew that I had done this work privately for people in my community. I had never even known that peer coaching was a thing. So in 2019, nobody knew who I was or never heard of this thing. And all I knew was I wanted to help people. I discovered peer recovery coaching, actually. I got my certifications as a youth coach and an executive coach first, before I ever became a peer coach. And then I discovered peer coaching, and that's how I became in the world of coaching, it was kind of like this beautiful firework moment of everything that I had been through, my past, my present, and I could, for a while, see a future. it was just beautiful. And so I took on peer coaching and started, off with just me, myself, and I, and a little Venmo and my phone, and I would meet people, and we meet online, and that's how we started. Nobody knew who I was, didn't know anything about me. In a town of 2500, you're the only three people of color. It's kind of easy to stand out.

Justin Bell: Sure.

Racquel Garcia: And I know that I've used that to my advantage, to be honest. Right. I, used to feel like being unique was a negative thing. And, you know, tattooed to my. From my ears to my toes. so I stand out in a lot of places. But it became an asset.

Justin Bell: Yeah.

Racquel Garcia: And, someone discovered me online. Actually, it's how I got discovered. Started working for an agency, started my own, and here I am. Advocacy circled back around when, with moms, to be honest. So I had, a client whom I was working with, and I watched this wonderful human who had spent 10 years unhoused and not part of her plan. She found out she was pregnant.

Justin Bell: Yeah.

Racquel Garcia: The system gave her nine months to get her life together.

Justin Bell: Yep.

Racquel Garcia: And the whole time, the system is working against her because every move she made, instead of being celebrated for trying to move forward. Forward. They told her she was doing it wrong. She moved too far from the baby. She didn't pick the right home. The job wasn't right.

Justin Bell: Yep.

Racquel Garcia: And I was asked to join in a court hearing where they were going to determine the permanent placement of her daughter after nine months. Ten years unhoused. They. She was supposed to pull her whole life together in nine months.

Justin Bell: Yeah.

Racquel Garcia: Justin, I sat in that courtroom and I listened to a social worker take every step that this woman took and use it against her again. She didn't pick the right recovery home. the job was too far away. She had to travel by bus.

Justin Bell: Yeah.

Racquel Garcia: And I watched my client, which we made sure that she had dentures to walk into the courtroom because we knew that that would have been an issue and she would have been judged.

Justin Bell: Yep.

Racquel Garcia: my co worker and I made sure she had clothes that she felt confident in.

Justin Bell: Yeah.

Racquel Garcia: I watched. In Colorado, we'll call it a Cherry Creek family, which means the one of the most affluent communities in our state.

Justin Bell: Sure.

Racquel Garcia: I watched this woman walk in with her perfectly curled hair and her Abercumbrian Finch husband. And I knew that my Hispanic unhoused client didn't have a chance.

Justin Bell: Not a chance. Yep.

Racquel Garcia: And I watched them take her baby and remove custody from her permanently. My coworker had to put my. Put her hand on my knee because I was shaking. And, I vowed that I would do whatever I could for women and moms and babies and families to not have to have that experience.

Justin Bell: Yeah.

Racquel Garcia: Now, good, news. I still actually, to this day, speak to this mama.

Justin Bell: Really? Okay. I was going to ask.

Racquel Garcia: Yeah, yeah. She, had a second child.

Justin Bell: Okay.

Racquel Garcia: Her second child. Her plan was to deliver this baby in a tent because she's not going anywhere near a system or a hospital.

Justin Bell: That's fair.

Racquel Garcia: That will ever repeat that trauma on her again.

Justin Bell: Yep. It's fair.

Racquel Garcia: No, she wasn't going to do it. She called us, she called me and her second child. We convinced her. I do a lot of work in hospitals. It's been an advocacy thing. After I saw what happened to her, where she would have a beautiful birthing

experience. And she called us about two weeks before she was going to deliver. And this is a cool story for all of us peers. She kicked everybody out of the room. All family. She allowed myself another peer and a recovery doula in the room.

Justin Bell: Wow.

Racquel Garcia: And we were able to give her. We did a dimly lit room. I washed. She was still unhoused, so I washed, the street off of her feet with buckets of water. And, we anointed her with lavender oil. And I got to cut the cord of her second child coming into the womb.

Justin Bell: Yeah.

Racquel Garcia: And I've been fighting for mamas and babies and shifting systems ever since.

Justin Bell: Yeah. Yeah. And I mean, I imagine in a situation like that, in a relationship like that, you're kind of. You're seeing yourself. Right. To some degree. Was there that identification?

Racquel Garcia: Absolutely. I wasn't unhoused, but I was a mother who struggled.

Justin Bell: Sure.

Racquel Garcia: And part of my story, too, is when I got out of treatment, I had to go back to an active using husband for eight years. I think people think you just, you know, just leave, just change your life. It'll be easy. Women don't really can't afford that. I had

been home for 16 years. I had left my career to raise children, and I didn't have a choice.

Justin Bell: Yeah.

Racquel Garcia: the world is not as simple as get your life together in nine months, woman, or leave that husband.

Justin Bell: Ma'.

Racquel Garcia: Am.

Justin Bell: Yeah.

Racquel Garcia: to go where? And do what? With who? With my four children. And do what?

Justin Bell: Yeah.

Racquel Garcia: I can't afford to live, so I did. I see a lot of, a lot of myself, in. In this woman. And we. I call her Daisy. the Daisy. Daisy's path has still not stayed. Has not been an easy path even to this day. But for peers, the connection is. I always say we do this with our programming is. Connection is our metric. Right.

Justin Bell: Yeah.

Racquel Garcia: The courts want her to have a perfect life. They want, you know, positive, negative, toxic. They're looking for all these things that you're being measured

against and for peers. I just want connection. And the fact that she stays connected to me, five years later is a win.

Justin Bell: Yeah. Yeah. It's so true. I mean, I've been talking with some folks now about pure research and peer evaluation and stuff like that. And it's like the metrics that we have just aren't good. You know, the clinical metrics that everybody's used to of, you know, even things like reduced substance use and stuff

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Justin Bell: like that doesn't tell the full picture, you know, at all, or even quality of life. Like, there's things that, like, are less tangible than that. I think, you know, you're describing this person as continuing to live their life and continuing to flourish in certain ways and, continuing to be connected to other human beings and trust other human beings. I think that's kind of incredible after all those experiences. So, I agree. I agree that the metrics are different. So where did that take you from that point? I mean, did you continue to help mothers in a certain way from that point on?

Racquel Garcia: yes, I've stayed very active with mothers. I have another mom that, has struggled off and on with both the birth of her first child and, struggled again with her second child. So right now, currently, our organization, Hard Beauty does. we have a maternal peer response program where we respond bedside to 12 hospitals in labor and delivery spaces across the state of Colorado. which. You're going to love this, Justin. From a research standpoint, I just met with Denver Health Hospital, which was one of our pioneering hospitals, to do a research study on the work that we do and have done over. we'll do it for the rest of this year and then all of 27.

Justin Bell: Okay.

Racquel Garcia: but our success rates are great because we can come alongside in the birth of a child in itself is one of the most vulnerable moments for a woman. Now let's add a layer of substance use which comes with high stigma.

Justin Bell: Yeah.

Racquel Garcia: People who say to you, if you loved your baby, you'd stop. As if that's the only thing we needed to hear. Yeah. and I've been fighting for, moms, the opportunities for mothers to have an opportunity to recover. and I'm still. And I still right now employ 15 moms in active and sustained recovery within our organization. So it's not just only about helping people coming in the door, but creating a life and a. And a, professional opportunity.

Justin Bell: Yeah. For.

Racquel Garcia: For mamas like me, we created our own workforce.

Justin Bell: Yeah. Yeah.

Racquel Garcia: And it's working. And so now it's neat because, you know, it's one thing you and I, Justin, talking about peers.

Justin Bell: Yeah.

Racquel Garcia: You know, I've, we've been helping people for a long time. But what I

see, the shift change for us in Colorado is, you know, the highest, maternal mortality is caused by overdose and suicide for moms. And we have reduced that in the last two and a half years by 60%.

Justin Bell: Wow. Yeah.

Racquel Garcia: And a lot of credit goes to naloxone.

Racquel Garcia: But when I talk to mamas, we refuse to believe that it is just a couple sprays up the nose that has saved our lives. We know that when we partner with healthcare systems and we are allowed, especially our peer organization gets to go in and teach stigma and bias trainings side by side with medical professionals. We build these with, with, with our partners now in medical spaces. we see the whole culture change. Right.

Justin Bell: Yeah.

Racquel Garcia: I walk into a hospital now and people are speaking differently. There's not stigma and bias. And that's actually how I got started in hospitals, because a doctor said, hey, Racquel, you go on a couple tours with me to some labor delivery spaces.

Justin Bell: Yep.

Racquel Garcia: I just want you to listen, I want you to listen to, for stigma and bias and, you know, discrimination. And I heard some, Justin, I did, I heard a lot. But what I heard most of were people who didn't know how to help us.

Justin Bell: Yeah.

Racquel Garcia: Not that they don't want to.

Justin Bell: Sure. Yep.

Racquel Garcia: But if I say I come in as a mom and I'm in active use and I'm pregnant and I say yes. Frozen.

Justin Bell: Yeah. Yeah.

Racquel Garcia: And so I, I said, well, what if I showed up?

Racquel Garcia: What if, what if in that moment you don't have to know everything?

Justin Bell: Yeah.

Racquel Garcia: What if you can say, doctor, look, I'm sorry you're struggling. And I, I don't know, but I do know a group of women or I do know this woman, Racquel, that'll come sit with you.

Justin Bell: Yeah.

Racquel Garcia: And she's overcame where you're at. That has shifted the game and we are seeing it change all across Colorado. and has been one of the most rewarding experiences of my career, of my life.

Justin Bell: Yeah. That's cool. Yeah, it resonates a lot because we had. Our first guest was a peer who worked in a hospital environment. Not maternal specific, but she was still in the ED and she said the same thing. It's just like a lot of the nurses, like, it's not like they're bad people at all. They want to help like any other patient. But yeah, they just like they don't know what to do. And it's awkward. I had a conversation too, with a physician, a couple days ago, and she. We were having the conversation about recovery, and she's like, yeah, like, I don't. I never got any training about. Even if a person tells me that they're in recovery, like, I don't really know what to say or what to ask. I'm just kind of like, oh, great. Okay,

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Justin Bell: next question.

Racquel Garcia: Well, it's interesting. Yeah, you say that and I have. It's interesting. I had a knee surgery and I went to my physical therapist, and I was so scared that they were going to try to put me back on opioids because that was an addiction I had after back. And this is another ironic moment about the work I get to do in hospitals because my addiction comes from doctors. Yeah. I was overprescribed medications, obscene amount of opioids. Opana and Norco.

Justin Bell: Sure.

Racquel Garcia: After back and brain surgery. So I don't particularly care for doctors. I had not cared for doctors. And I've come to be more. I tell everybody, you allowing me in these spaces has been healing for me. but I had my physical therapist. I went up to her and I said, Dana, I. I just want to let you know that I'm an addict and I'll do whatever

you tell me so that I don't have to be put on back on pain pills. Like.

Justin Bell: Yeah.

Racquel Garcia: And she said she froze. She was like, nobody's first of all ever been honest with me.

Justin Bell: Right. Yeah.

Racquel Garcia: Cool story. Fast forward. I have taught. She is no longer a physical therapist in practice, but now she teaches physical therapies at our state college. And every year I go to her physical therapy class and I teach those physical therapists about what. It's like, it's one of. One of if I walk in your. In your therapy room. Right. And so now Dana has me come alongside her and teach those individuals what we might. How it may look. How do we, you know, how maybe operate in recovery, what to look for teaching about naloxone. And so that's a cool story because that's. I have been able to see that full circle moment.

Justin Bell: That's pretty cool. Yeah, I mean, that's. That's like the biggest complaint I hear is that, you know, my friends who are in recovery are like, they, you know, they. They tell a doctor that they're in recovery, and then like 30 minutes later they're like, okay, so I'm gonna write you a script for Vicodin. And it's like, no, I have the same thing, you know, don't just write it out, you know? And it's same experience.

Racquel Garcia: Same experience. I had one after I. I got. I have an autoimmune, and I got sick. And I told them, my biggest fear is, you're gonna put me on something and I. Help me get off. And I was very reluctant. And then it happened. They put me back on

PE Medicine. They were not gonna up me or refill my prescription. I went into panic mode on the detox. And I said, you forced me to use behaviors that I really worked hard to put away because you left me on a medication that I know the effect of. Because the last time I tried to detox off opioids, I tried to take my own life inside an emergency room. Nobody offered me mat support, any kind of medication. So I know what that looks like, and I'm not going back there. And so I tell people. It was so. I had so much shame around it, I had to call a friend and say, hey, I know you got a couple pain pills. And I was. I asked her for. I was two or three Dilaudids. My husband took me to a campground in our little pop up camper with our children, and I attempted for four days to detox myself off the pain.

Justin Bell: Brutal.

Racquel Garcia: So, you know, But. But like I said, you go from there to now. where I get to advocate at the Capitol. I do a lot of advocacy, and testifying at our state Capitol.

Justin Bell: Yeah.

Racquel Garcia: I get to work on policy, too, in a system at a hospital at Denver Health Hospital. They ask us. Ask me to review their documents to see if it is, you know, person centered.

Justin Bell: Yeah, right.

Racquel Garcia: Is this person centered? are you just checking boxes? Are you trying to get to know me?

Justin Bell: Yeah. Yeah.

Racquel Garcia: Right. And so that has been very rewarding on the advocacy side.

Justin Bell: Well, can you explain more of that? Because I think a lot of peers I talk to, they kind of have that same, like, they're like, I want to do policy. Like, I want to, like, change the world in that way. I want to, like, testify, you know, Congress or my state capitol or something like that. How did you get into that? What was your pathway getting into that sort of work?

Racquel Garcia: I, think a lobbyist found me, actually.

Justin Bell: Oh, okay.

Racquel Garcia: and knew that I knew the story about Daisy.

Justin Bell: Okay. Yeah.

Racquel Garcia: And what I love about what this lobbyist says, she said, Racquel, I heard you come to testify once.

Justin Bell: Yeah.

Racquel Garcia: And then I saw you kind of never leave the Capitol for two years. And I. I remember I was intimidated. I mean, I remember remembering. I remember walking, into the Capitol.

Justin Bell: Yeah.

Racquel Garcia: And the last time I'd walked into the Capitol, I have four children of my own. I was on a field trip with my kindergartner, walking around like a tourist.

Justin Bell: Yeah.

Racquel Garcia: And here I am. I was nervous. M m. But they had specifically were doing, a bill around, What was it? the first bill I testified on was drug induced homicide.

Justin Bell: Oh, okay.

Racquel Garcia: And the reason why is because my best friend Shawna died of an overdose, in my home by my substances.

Justin Bell: Yeah.

Racquel Garcia: And, I didn't go to jail. I didn't go to prison.

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Racquel Garcia: but there's plenty of people who wanted me to. And I tell people, what good would it. I'd still be incarcerated to this day, and what good would it have done?

Justin Bell: Yeah.

Racquel Garcia: After Shawna died, I got into recovery and have never used again two

and a half months after she died. And so that story is what they wanted to use. And then I just became fascinated to learn more.

Justin Bell: Yeah.

Racquel Garcia: And I told. I'll never forget telling Bria. I said, so I'll be up here one time. You're gonna get me up here one time, girl. I am never coming back here. And it's interesting, if I walk in the Capitol today, there are people that know me by name.

Justin Bell: Yeah.

Racquel Garcia: I'm sure it, depends on what I'm passionate about.

Justin Bell: Right.

Racquel Garcia: I don't tell my story to everyone.

Justin Bell: Yeah.

Racquel Garcia: I think as a peer.

Justin Bell: Right.

Racquel Garcia: I'm not here to trauma dump, but there are pieces of my story that are important, and things that I'm passionate about. And so I think when it comes to advocacy is finding, somebody somewhere to share your story and learning about that and how to share your story.

Justin Bell: Yeah.

Racquel Garcia: And what's the purpose? What is the outcome I'm looking for? Right. Usually for me is to pull on the heartstrings of the human that I'm sitting in front of.

Justin Bell: Yeah.

Racquel Garcia: To remind them that I'm their sister, cousin, aunt, mama, you know, that's. You know, that's. That's what I do.

Justin Bell: Yeah. I think that's awesome. I. Do you have tips on, like, kind of like the strategy to share in your story? Because I think that's something I wonder about. I'm. I guess I'm a cynical person. And I'm like, probably not everybody's interested in the emotional stuff, but then I'm sure there, are those who do care. so how do you decide what parts of your story you're going to share what pathway you're going to go in terms of telling your story or being strategic about it. How does that shape your testimony?

Racquel Garcia: First of all, what is the outcome I want to achieve?

Justin Bell: Yeah.

Racquel Garcia: I also do some studying of who I'm talking in front of.

Justin Bell: Right.

Racquel Garcia: You know, who's sitting on the. On the Behavioral Health Committee. I can see who's speaking at the Joint Budget Committee, who's getting ready to cut the

$1.6 million off of my state budget. And I did know that one of those, individuals had a son who was struggling with mental illness and substance use.

Justin Bell: Yeah.

Racquel Garcia: And it may not always be for me to share my story. I have a sister who has struggled with schizophrenia, for a long time. And maybe I'm sharing her story, she gives me permission, or I share Daisy's story. Right. It doesn't always have to be about me. It's what is the outcome I'm trying to achieve. And will this story pull on the heartstring of that human? And so I learned very early when I started doing policy work, I ended up in a Zoom room randomly. You know, the NADOC sends out the Capitol Hill day. Oh, yeah, whatever. Right through nadac. And I was young and ambitious in this field, and I was like, let me go figure out what this is. That's a great place to start, because you meet a lot of people on Zoom. You can get kind of your fear through that way, overcome that fear. And I. I had a mentor come in the room, and she taught me. She said, hey, Racquel, so before you talk in front of these people, go learn something about these people. And I was like, okay. So I had two days of that. So the next day, I went and researched the person I was going to talk to.

Justin Bell: Yeah.

Racquel Garcia: And so I do that in all of my advocacy work. I do that before I speak to a politician.

Justin Bell: Yeah.

Racquel Garcia: or anybody, is to understand who I'm speaking to. Because there are

some people in my current community that we will be very. 99% of the things that we will discuss, we will not agree on. But if I can find one common ground, one commonality, we can probably move forward. And especially where I live, I live, in a community that thinks very differently than myself. But there are moments when I can find that piece that we can connect on. Right. Substance use and mental health. If I raise in a room, doesn't matter who, how many of you in the room know or impacted or love someone who has struggled with substance use disorder or mental health, the hands go up.

Justin Bell: Yep. Of course, yeah, yeah, everybody's been impacted. But, I think it's such a good point. This, the strategy of that. That's like something that I've learned as well, is like, I think when I first realized that I could share my lived experience, I was like, oh, I'm gonna tell the entire world. Every person that I meet, I'm gonna talk about my lived experience. And then, you know, somebody was kind of honest with me at one point. and I'm glad that they were. We're kind of like, yeah, for me, sometimes intimidated. when somebody shares their lived experience, if we're having a conversation about, like, opinions and stuff like that, it can kind of shut me down and I could argue with them about why they shouldn't feel that way and blah, blah, blah. But,

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Justin Bell: like, you know, some people are just not going to care. And so, yeah, I mean, it depends, like, what I lead with. You know, obviously I'm a researcher, and so I know there's some people I talk to who, like, don't care at all about my lived experience. Actually, they might not like that I have lived experience. And so then I lead with the hard. I'm a researcher, research scientist. I work here. I've, done these papers and stuff like that. and then, of course, many other groups that I lead with. I'm in long term

recovery, and that's kind of my expertise here.

Racquel Garcia: But, well, it doesn't make sense to. We don't have to put ourselves at risk.

Justin Bell: Yeah.

Racquel Garcia: You know, you don't have to risk yourself all the time. And I. Sometimes I want to be known for just being Raquel Garcia. Often.

Justin Bell: Yeah.

Racquel Garcia: If I go into a room, I go. I. You know, I. People do know what I do, and sometimes I don't want to talk about that. I often go to hide. and I love watercolor. I've come to love watercolors. And I started taking watercolor classes at a local library because I don't. I'm just Raquel. I don't have to say I'm a woman in long term recovery. I don't have to say I am the executive director of the Heart Beauty Foundation. I get to just be Raquel. I don't have to be a mom. And I don't do anything. Just me. And nobody asks me. And. And I even have a little lie. Light liar. I say to people when they meet me if I don't want to talk.

Justin Bell: Now you're about to put it publicly on this.

Racquel Garcia: okay. Well, yeah, well, as the glee. You can't see any. You gonna hear me. But, when people ask me what I do for a living, sometimes I'll say, I work in public policy. And you want to talk about shutting down a conversation very quick. And nobody wants to keep going. Yeah, nobody. Yeah, I work on public policy. Done. We have ended

the conversation and we can move on.

Justin Bell: Yeah.

Racquel Garcia: But if I do speak about I work, you know, I work in substance use and mental health, then sometimes that continues and sometimes I. I don't mind being a. A place to receive because that's. It opens me up. Right now I'm gonna have to share if I say this. And it's not even my lived experience, it's just who I am, what I do. Now we are probably having a 45 minute conversation about a family member or themselves.

Justin Bell: That's true.

Racquel Garcia: And sometimes as a peer, we've got to figure out how to turn that off.

Justin Bell: Yeah.

Racquel Garcia: And so, I don't know, you could all say that Raquel told you to find a little white lie in your life. I'll take the blame, but sometimes you just need to be able to turn it off.

Justin Bell: Yeah, no, absolutely. I'm reading Bill, White's autobiography right now, and he talks so much about that where he's like, you have to find who ways to just separate yourself from this stuff. You can't be in it all the time, you know, and I think that's like, the expectation, unfortunately, is like the best peers are constantly in the trenches 24 7, you know, putting themselves out there. And obviously we know where that leads to. It's not sustainable. And I, mean, even though I'm not doing day to day work, me too. Sometimes I just have to like, unplug from this stuff. And,

Racquel Garcia: Yeah, well, I think that's a lot too. You know, the last year we've had, you know, the, all the changes and the administration and the shift in funding and Medicaid and all of that has almost had me at burnout.

Justin Bell: Yeah.

Racquel Garcia: You know, it has been a challenge. And so, I feel like the last 18 months have been some of the most challenging of my entire life in sobriety. It has tested my own recovery. Yep. I've been honest about that. Like, thank goodness I still have a strong recovery for myself because I'd be lying if I tell you I haven't been tempted to have a drink and that scary place for me.

Justin Bell: Yeah.

Racquel Garcia: Even though I'm still trying to get the watercolor in. Right. And so we have to figure out A way to disconnect, to move on. We have to find a way to take, care of ourselves. Because the idea too is that you, you need to have a full cup so that people receive your overflow.

Justin Bell: Yeah.

Racquel Garcia: What you don't want people to do is get your crusty bottoms of your well.

Justin Bell: Right.

Racquel Garcia: And in a perfect world, we're going to get the overflow. And I think this

last 18 months or so, I think everyone has had a challenge in this field to try to keep themselves together. and we've just seen that. So, you know, trying to find times where we can turn it off are really important.

Justin Bell: Yeah, yeah, absolutely. Well, it brings us to the workforce. And I wanted to ask you about advocacy in the peer workforce. I mean, you know, I know you just said a bunch of stuff that's workforce related about how hard it is, but, in general, kind of, where do you see, I don't know, the biggest advocacy points in the peer workforce? The biggest things that, you know, the workforce, you know, need strengthening in or we need more advocacy around, from your perspective and your state.

Racquel Garcia: in my state, and I'm watching other states, I'm watching Minnesota, I'm watching Kentucky. got a great friend in Minnesota and we've been talking a lot about this. because the hardest part has been, you

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Racquel Garcia: know, it's been great to see that peers have been funded. Right. That we have had a great opportunity, unlike ever before for people with experience and the peer workforce to be recognized, to have grants come out from the federal government.

Justin Bell: Oh, yeah.

Racquel Garcia: but, you know, I'm going to talk about the one that I don't love and the one that I think that has caused the most harm is Medicaid. you know, I sat at a SAMHSA conference probably three years ago. I think now I'm losing track of time. Four years ago, and they asked, leaders from all over the country to fly to Virginia. We had

some conversations about what peers were going to look like with the Medicaid open, with Medicaid opening up. And I was hopeful, kind of.

Justin Bell: We all were. Yeah, yeah.

Racquel Garcia: I wanted it to work out. I think it was as Medicaid wants to be. You know, look at all the good we're doing. But the implementation and the way, the infrastructure of that was done poorly from the get go. reimbursement rates.

Justin Bell: Yeah.

Racquel Garcia: Have been cut so low in our state that now I cannot hire a peer if I do Medicaid work for minimum wage. Yeah, can't do it. the administrative Burden is crushing. Small organizations billing infrastructure requirements that are supposed to protect us against fraud are instead being weaponized against small peer providers who don't have teams of compliance officers.

Justin Bell: Yeah.

Racquel Garcia: To back it. And I'm living with this right now.

Justin Bell: Yeah.

Racquel Garcia: Our organization has attempted to do peer recovery work at a very ethical and high level for over three years now, only to have been robbed by a Medicaid biller and rendering provider, which I spoke about publicly over three years ago. Nothing's been done. That person is still in practice today. And I'm doing it again right

now. I had to fight for the Medicaid dollars that we work for.

Justin Bell: Yeah.

Racquel Garcia: And people, I don't think even, you know, everyday folks don't realize that we do all of this fronted.

Justin Bell: So.

Racquel Garcia: Which means we have to pay for every service upfront for our staff. And, trying to provide health care and all of these things. Hoping. Hope. Right. Is really. It's not even hoping. It's wishing at this point. Wishing they would reimburse you your Medicaid dollars. Yeah. And I won't make excuses for people in the workforce who are doing dirty.

Justin Bell: Sure.

Racquel Garcia: I know people are dirty.

Justin Bell: Mm.

Racquel Garcia: But I also see a system that was never set up for us in the first place. We were forced into a medical system doing community based work. They weren't willing to budge. They added administrative burden. And we're still fighting for our survival. Yeah. On. This will be the first public conversation I've ever had. But March 14th, hard beauty walked away from Medicaid.

Justin Bell: Wow.

Racquel Garcia: I won't do it anymore. It's cost my organization, my staff.

Justin Bell: Yeah.

Racquel Garcia: It's cost our organization. trust in our communities.

Justin Bell: Yeah.

Racquel Garcia: I have a hospital who won't even work with us if we're even touching Medicaid.

Justin Bell: Yeah.

Racquel Garcia: So Medicaid, that is supposed to be access to services for the most marginalized and vulnerable population doesn't take care of the workforce. Who's supposed to do that work?

Justin Bell: No.

Racquel Garcia: And so, yeah. The advocacy work that matters the most to me right now is making sure that the systems we built to protect Medicaid are not destroying the very providers who serve the people Medicaid is supposed to help.

Justin Bell: M. Yeah.

Racquel Garcia: That's where we're at. And you can't fight when attorneys are $1,000 an hour to go get your money.

Justin Bell: Yeah.

Racquel Garcia: And they've holding all your funding hostage. So. Yeah. It's been the most frustrating and caused burnout. And you built a workforce on the back of us.

Justin Bell: Yeah.

Racquel Garcia: And I watch all these wonderful Reports come out from samhsa, about how wonderful the workforce is. Yeah, I know, but it feels like a lot of lip service right now. Right? Stop telling people you value them and don't make us feel bad for wanting to be paid an equitable wage. Look, gas is over $5 a gallon right now. Yeah, and then you want to shame me for wanting to make a livable wage. Not even. So. Yeah. I mean, that's my soapbox right now. Hey, I'm so frustrated with Medicaid. I was. I was trying to. I told everybody I was going to be, I'm trying to love it till I'm not. And now Raquel and Hardbeat are on the side of not.

Justin Bell: I think. Yeah, I think people need to hear this. I think people need to hear these stories. I. I don't think you're alone. And I'm very concerned. Like, I'm. I don't know if I'm, like, you know, I can't say that I'm. I'm

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Justin Bell: anti Medicaid or anything like that, I guess, but I'm. From a research standpoint, I'm not on the front lines. But something concerning is happening here with

fraud going on in Minnesota, fraud going on in Kentucky. States changing. Yeah. Colorado states are changing their requirements to become more and more clinical because that's sort of what this Medicaid billing requires. they're making it, you know, like in Maine, where, you know, in other states that I've heard, including Minnesota, too, that, you know, it's a requirement that clinicians are the supervisors of peers, which is not a great model at all. And most of the time, they just put somebody in that position who doesn't understand the peer role. And yes, I mean, I've heard from multiple people now that it is that pressure that's coming in from Medicaid billing and from other, you know, from just trying to, like you said, get peers into these, into a system, a billing system, really, that doesn't, It doesn't fit, you know.

Racquel Garcia: No, the only one to be able to afford to employ up here will be in. Here's our safety nets. C. Snips in Colorado will be the only ones to be able to actually employ up here. I mean, that's why people are contracting, because you can't make enough money to build. Build a workforce within itself. and my challenge, too. And there were some challenges at the SAMHSA conference several years ago around where does this information come from? I went to my state Medicaid And I could tell at the last opioid conference we had, state opioid conference, I'd pushed a button. But I said, I'm only pushing the button because I want to be helpful. I, at some point want to be a collaborative partner alongside fixing the pipes. So I have this, this concept of, you know, they've decided just to turn off the water, which is, nope, we'll just make pier so unbelievably low reimbursements that we get to say, see, we still offer peer. Yeah, they're going to turn off the water instead of fixing the pipes. But the pipes were never for peer in the first place. Right. They were never. We were never supposed to be clinical. And what should have done. What they should have done is grabbed your leaders that were sitting all over the country and said, for those of you who are interested, can you come to the table? I get a lot of people who want my opinions.

Medicaid, I'm telling you now, you have wonderful peers across the country who do great work who could help you build a better pipeline.

Justin Bell: Yeah.

Racquel Garcia: So that you can turn on the water that has more accountability on it. But just choking it out is not the way to go. And that's what it feels like they're doing. They're going to choke out the peer workforce instead of, empowering the peer workforce and you could do it better. And so I did go to my state providers and said, is there a way we could bring some really trusted providers together and let us help you do this?

Justin Bell: Yeah, yeah.

Racquel Garcia: Let us come up with a collaborative model where we're not giving out peer codes across the country in this generic form in our state. I said, when I told them we did a maternal peer response, they were shocked. I had, a CFO testify in front of the governor on the joint budget committee who said the $1.6 million they were looking at cutting was only for sober parties for people in recovery. Boy, you want to watch my headspin. I said, well, you know, some people might be doing that, but what some of us are also doing with that money that you're going to cut is I come bedside to mamas in need.

Justin Bell: Yeah.

Racquel Garcia: We do involuntary commitments to people who are struggling with substance use or dual diagnosis individuals. And so I remember it actually showed up

on the LinkedIn. the person from the state had commented and said, I may have been the one that misquoted that. So we still don't even. People still don't know what the, the scope of what a peer can do. Right. Because you get one code, you're grouped under that. Everybody's doing that thing. And I thought, well, why don't we start classifying not as a hierarchy model, but the different types of peers. Right. We do very different work. Everything's part of the continuum. But there's other ways to think about this. And sometimes it feels like, you know, because it wasn't their ideas, or egos are involved or we might have to admit we did wrong. Hey, we didn't get this right. Yeah, let's reimagine. that's what I'm hoping. Because at this point I have to take the stance of no Medicaid for peers right now. Until I'm shown something different. I am m not a supporter of peers, for going for Medicaid. I just don't think that there was a great model from the beginning. And I don't think it's doing really great on our clinical sides either. The amount of oversight and stuff is going to choke out our behavioral health workforce. And I get to see that, Justin,

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Racquel Garcia: because I'm the chairwoman to the advisory council to the Behavioral Health Administration for Colorado and we get to see a, great providers. And my co chair is a clinical provider. And so as me, as a peer, as the chairwoman and my clinical, we have the same view on the way this is happening. So we're going to have a behavioral health force workforce crisis in general, not just.

Justin Bell: Yeah, yeah, I hear you. I hear you 100%. I guess the question that I have for you is like, you know, the first guest we had on, I mentioned, you know, she was working in a hospital, but they were paying her a salary. Like she didn't have to bill or anything like that. So that was awesome. That was amazing. because they saw the roi,

but I'm sure. And I did, I kind of, I didn't say it was coming from you, but I relayed some comments. I said, I talked to somebody who's really like, this Medicaid stuff is, is hurting. And you know, their first response was like, well, like, how do we do this then? And you know, they were at an rco, like, how do we do this? And so my question for you is, what is Hard Beauty doing now that they're not taking the Medicaid dollars? Where, how do you survive? How do you stay sustainable if that's not where the money's coming from?

Racquel Garcia: I actually was very honest with an individual and they asked me that, what are you going to do? And I said, I'd rather Stand on a street corner with a cup and m. because it's destroyed my workforce as far as, like, pressure in work.

Justin Bell: Yeah.

Racquel Garcia: we have decided to aggressively do grants and fundraising.

Justin Bell: Sure. Yeah.

Racquel Garcia: Going back to more community based work. Yeah. I had to release and let go of half my workforce, unfortunately. we used to employ 30 people in recovery. We are down to 16. That's unfortunate. I had to do layoffs.

Justin Bell: Sure.

Racquel Garcia: we're going back. you know, this idea. I remember when I first started my first nonprofit organization, it was only goods after a forest fire in my community, and I never took a dollar unless it was donated. And I didn't receive any salary. I was a stay

at home mom, and I just kind of did this as community work, but I watched a community rally around us.

Justin Bell: Yeah.

Racquel Garcia: So hard Beauty is focusing. It's been nice to release Medicaid. I mean, the stress level of my team is so much greater.

Justin Bell: Yeah. Yeah.

Racquel Garcia: Because it activated a hustle in us that we worked as people in recovery to try to remove. And you almost, until it's gone, don't realize you've been in this hustle again. so it's a different hustle. Right. I'm gonna have to work really hard at creating relationships, but that's what we're good at.

Justin Bell: Yeah.

Racquel Garcia: And, you know, it's showing value to our community.

Justin Bell: Yeah.

Racquel Garcia: That if something were to happen and I said, hey, Harvey, you might have to close its doors. That the community itself would rally around us and say, absolutely not. They are so valuable. And so we just are returning back to our roots. You know, we partner with law enforcement in our community. We built, a, training alongside officers and really went back to building relationships. we do a lot of consulting and contracting work. especially we've got, like, a new perinatal IOP coming to our local

university hospital. And it's wonderful because they bring in the curriculum and they let us read it, and we're like, ooh, you know, I don't really know if that. If I'm gonna respond to that.

Justin Bell: Yeah.

Racquel Garcia: And so people are starting to value us for more than just hustling services. Right. We are so much more valuable than the hustle of the service in the one on one. I think Hard Beauty has done a great job of showing that, you know, we can be advocates, we can consult on projects, we can provide services. We create trainings. We train peers in the state of Colorado. we train peers all over the country. We just got credentialed for some work in Indiana so I think we have broadened the scope of what we are capable of, as peers. And I think that that is the way heart, beauty, will build ourselves and continue to grow and sustain ourselves moving forward.

Justin Bell: Yeah, that's a great answer. I reminded by one of Bill White's, of course, quotes where he talks about. He was predicting this in, like, 2013 and saying that if we just focused on peer services exclusively as the only thing we were going to do for recovery, we would lose our. And that if we did not also pad it with community, the community focus was going to be lost. And I see that happening. It was such a premonition of many premonitions that he had. And I went to the recent, Marco conference. Minnesota association of. Yes. we covered community organizations.

Racquel Garcia: So good.

Justin Bell: Yes, yes. They're amazing. And, there was a lot of discussion. I did see Randy, of course, Randy Anderson received advocacy award, another great advocate.

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Justin Bell: And, there's a lot of discussions about Medicaid. And kind of with the recognition of, like, Medicaid's changing, things are probably going to be, of course, more locked down. And so I think the sentiment there was like, let's start working together. You know, organizations that have been adversarial in the past, like, let's, you know, drop the swords and start to apply for joint grants, and go in for funding together and support Marco even more so that we have advocates at the policy level and really get back to our roots. Like you were saying, this all started with this RCO model and this community approach, and that's what peers were meant to be. And then it got a little bit sidetracked. And like I said, I think it's great to have peers working in emergency departments, peers working in all sorts of different settings and stuff like that. But if you lose that, the RCO roots, it just. It's not the same. There's just something missing there.

Racquel Garcia: So we become competition. I think something you said is important. I remember when I first got in, what attracted me to this was people in recovery. We're all hanging out, we're all doing this thing, helping the world. And then when Medicaid came in, it became, well, are you working with that organization? I can't work with you because I can't bill it. And then you watch organizations isolate themselves because. And not keep, keep, keep, you know, training peers and re. Credentialing and advancing peers because they're too busy in the Medicaid hustle.

Justin Bell: Yeah.

Racquel Garcia: You know, and organizations that used to work. I remember this. I have a vision in my head right now of three organizations in this parking lot when one of the RCOs opened, and everybody was just excited and celebrating, and we didn't even

know the. Anything about Medicaid yet.

Justin Bell: Yeah.

Racquel Garcia: And we all just got a little money from the SOAR Grants, and we were just like, yeah, you know, and then Medicaid showed up. And the sad thing is that all three of our organizations were robbed from Medicaid, you know, and we're all became victims because of it. And then we could not even work together because it divided people and recovering people. We were never supposed to be divided. At the end of the day, we are recovering. We all met in basements and, and, and just got together in these places and where things, like that never mattered. So I appreciate what you said because I feel like that's the. What I want to go back to. So what my thing is, if you come in my organization now, I can help you. You can go see somebody across the street or across the way, and I don't have to. I don't have to micromanage that.

Justin Bell: Yeah, freedom. Yeah, absolutely. Yeah. Yeah. I think what you said is, it's a warning, but there's. There's an opportunity, here, which, I see you capitalizing on. But as we kind of get to the end, I guess before we wrap up, I wanted to ask you one last question in the, spirit of this podcast, which is the Peer Support Professionals Guide, if you had to give one piece of advice to a peer professional who wants to grow into advocacy work, what would you tell them?

Racquel Garcia: I think it's. Start by knowing your story and the pieces that you feel comfortable sharing. Remember, we do not have to expose ourselves or exploit ourselves to be seen, heard, and acknowledged. And then go find the rooms where decisions are being made about people like you and like me. And walk in, sit, listen, and observe before you speak. And what you don't know, go learn. I have gone to, I've gone

to school three times. I actually just applied for another, ah, educational opportunity. Because I also have to admit I don't know everything. And you can learn as much as you can in the streets. I mean, I'm on Hustler, baby. I was a hustler back then. I'm a hustler now. But I also have to acknowledge when that hustle is, I'm capped out and I don't know anymore. And so, you know, continue to learn, you know, and find your people. advocacy done alone is exhausting and lonely.

Justin Bell: Yeah.

Racquel Garcia: And right now I have my own fight in the state of Colorado. And I'm so grateful for other leaders who have gone through some of the mire and the muck whom, if I did not create that, right back to our recovery roots. Even as a leader, I have recovery leaders that I can lean on. I was in struggle about 60 days ago, and really, honestly, my recovery was very much on the line. And I called another leader, Terry Smith, who runs Connect in Colorado, and I said, girl, I feel like I want to take a drink. She said, I'm getting in my car and I'm driving to see you. I. I had a

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Racquel Garcia: friend drive all the way to Avon, Colorado, because I told her, I feel like I'm on the verge sometime of a drink in jail. She got in her car and she drove. Because this work is still based in recovery. Don't forget your recovery. Yeah, don't. Don't get lost in the advocacy and the policy that you forget about what you started with here. My name is Raquel Garcia. I am a woman in long term and sustained recovery. And if you don't root yourself in that, you will lose yourself. You know, I am in one of the hardest seasons of my professional life right now. And the thing that keeps me going is knowing, that what I've built matters to real people and that I've got people in my life

that matter.

Justin Bell: Yeah. Well, thank you so much for your time. You do fantastic work. keep doing what you're doing, and, thanks for your time today.

Racquel Garcia: Thank you so much. Justin.

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