IC&RC Peer Recovery (PR) Exam
Candidate Guide

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NOTE REGARDING THE PR REFERENCE LIST

The Reference List is now provided separately from the candidate guide and can be found on our website. Please note that to better serve exam candidates with their exam preparation, IC&RC staff are working with Subject Matter Experts to review and update the list of references for the PR exam.

Purpose of the Exam Candidate Guide

The purpose of the Peer Recovery (PR) Exam Candidate Guide is to provide candidates with specific information about the Peer Recovery exam. Candidates are encouraged to review the information contained in this guide, along with the IC&RC General Candidate Guide, to support their exam preparation.

About the Peer Recovery (PR) Certification

Purpose	Recognizes individuals with lived experience of recovery who support others in achieving long-term recovery.
Areas of Focus	Advocacy, mentoring, recovery support, and resource linkage
Target Audience	Peer coaches, navigators, or specialists offering recovery support services.

Question Breakdown and Exam Length

(refer to the General Candidate Guide for a more detailed exam overview)

PR	
Number of Scored Questions	65
Number of Pre-test Questions	10
Total Number of Questions	75
Length of Administration	2 hours

Content Domains and Exam Blueprint

All questions on the exam will address content covered in the domains listed in the table below and expanded upon in the following pages. The "weight" of a content domain

indicates the proportion of questions from that domain on the exam form relative to the other domains. Candidates can use this information for their individual exam preparation planning.

Domains	Weight on Exam
Domain I: *Advocacy*	20%
Domain II: *Ethical Responsibility*	30%
Domain III: *Mentoring and Education*	20%
Domain IV: *Recovery/Wellness Support*	15%
Domain V: *Harm Reduction*	15%

DOMAIN 1: Advocacy

A. Identify strategies for relating to the individual as an advocate.

B. Recognize opportunities for advocacy within systems to promote person-centered recovery/wellness support services.

C. Explain to the individual their rights and responsibilities.

D. Apply principles of individual choice and self-determination in advocacy.

E. Explain the importance of self-advocacy as a component of recovery/wellness.

F. Use person-centered language.

G. Recognize strategies for effective communication.

H.   Differentiate between the types and levels of advocacy.

I.   Provide links to resources.

J.   Identify multiple pathways of recovery/wellness. (e.g., individual, systemic, self-advocacy).

K.   Recognize holistic approaches to recovery/wellness. (e.g., mind, body, spirit, environment)

DOMAIN 2: Ethical Responsibility

A.   Recognize risks that may affect the individual's welfare and safety.

B.   Respond to personal risk indicators to assure welfare and safety.

C.   Report personal issues that may impact ability to perform job duties.

D.   Report abuse or neglect to appropriate authority.

E.   Discuss the individual's satisfaction with their progress toward recovery/wellness goals.

F.   Maintain documentation and collect data as required by your role.

G.   Demonstrate compliance with responsibilities and limits of role.

H.   Apply fundamental principles of cultural awareness (e.g., attunement, competency, humility)

I.   Demonstrate compliance with confidentiality and privacy policies.

J.   Maintain professional and ethical boundaries.

K.   Apply techniques in response to crises and emergency situations.

L.   Use organizational/departmental chain of command to address or resolve issues.

DOMAIN 3: Mentoring and Education

A.   Recognize the importance of self-care.

B.   Establish a peer-to-peer relationship rather than a hierarchical relationship.

C.   Recognize when to self-disclose or share.

D.   Employ strategies to support the development of healthy behavior that is based on self-directed choice.

E.   Describe skills needed to self-advocate.

F.   Support the individual in identifying and establishing healthy relationships.

G.   Recognize strategies to build rapport.

H.   Support the individual's development of effective communication skills.

I.   Support the individual's development of conflict resolution skills.

J.   Support the individual's development of problem-solving skills.

K.   Apply principles of empowerment.

L.   Discuss resource options for community support and professional services.

DOMAIN 4: Recovery/Wellness Support

A.   Support the individual with setting goals.

B.   Recognize that there are multiple pathways of recovery/wellness.

C.   Assist the individual to identify and build on their strengths and resiliencies.

D.   Utilize coaching techniques. (e.g., motivational interviewing, active listening, empathizing, healthy boundaries)

E.   Recognize stages of change.

F.   Recognize stages of recovery/wellness.

G.   Recognize signs of crisis or distress.

H.   Demonstrate effective utilization of tools for outreach and continued support.

I.   Assist the individual in identifying support systems.

J.   Assist the individual in identifying basic needs.

K.   Practice a strength-based approach to recovery/wellness.

L.   Apply peer-to-peer supportive group facilitation techniques.

M.   Recognize the impact of trauma and link individuals to appropriate resources.

N.   Recognize co-occurring and mental health disorders and link individuals to appropriate resources.

DOMAIN 5: Harm Reduction

A.   Recognize principles of harm reduction in SUD and mental wellness.

B. Provide tools and strategies to reduce harm and negative consequences.

C. Discuss harm reduction strategies and readily available resources (e.g., recognizing patterns and behaviors, stages of change).

D. Provide overdose prevention education and link to resources (e.g., naloxone, community resources, testing strips).

E. Identify resources for ancillary/wraparound services.

F. Practice self-awareness of personal beliefs and biases towards harm reduction.

G. Identify alternative approaches that do not seek to prevent or end substance use.

Sample Questions

The following are sample questions that are similar to those you will find in the examination. For additional practice, refer to our Practice Exams, which are available on our website.

The questions on the examination are multiple-choice with either three (3) or four (4) choices. There is only one correct or best answer for each question. Carefully read each question and all the choices before making a selection and choose the single best answer.

Mark only one answer for each question. You will not be given credit for any question for which you indicate more than one answer. It is advisable to answer every question since the number of questions answered correctly will determine your final score. There is no penalty for guessing.

Domain 1: Advocacy

1. Advocacy is intended to:

   (a) Provide education to clients/consumers.

   (b) Support and find appropriate employment for clients/consumers.

   (c) Provide housing and shelter for clients/consumers.

   (d) Promote the dignity of and reduction of stigma against clients/consumers.

2. Employees who voluntarily seek assistance through their employer for mental health and/or addiction-related problems should be referred to a(n):

   (a) Employee Assistance Program.

   (b) 12-step program.

   (c) Community-based program.

   (d) Minister or pastor.

Domain 2: Ethical Responsibility

3. A boundary violation is committed when a peer providing peer support services:

   (a) Shares personal experiences when it seems relevant.

   (b) Accompanies a peer to an appointment.

   (c) Accepts an expensive gift from a peer.

   (d) Respectfully disagrees with a peer's plan for the weekend.

4. Professional development is:

   (a) usually required as part of supervision.

   (b) highly recommended for all new peers.

   (c) an ongoing process to update skills and knowledge.

   (d) an opportunity for experienced peers to train others.

5. Although values and ethics are frequently used interchangeably, how are they different?

   (a) Values and ethics pertain to perspective rights.

(b) Values pertain to beliefs and attitudes that provide direction and ethics pertain to the beliefs we hold about right conduct.

(c) Values are moral principles and ethics pertain to professionalism.

(d) They are both based on community standards.

Domain 3: Mentoring and Education

6. Enabling can be described as:

(a) providing an opportunity for the peer to recover.

(b) the well-intended behavior of others.

(c) allowing an individual the opportunity to discuss their mental health and/or addiction history.

(d) providing treatment opportunities for those in need.

7. Stigma can be clearly defined as:

(a) the experience of being deeply discredited due to one's undesired differentness.

(b) echoes heard from our families and society in general.

(c) hidden pockets within our own belief system.

(d) persons with mental health and/or addiction who do not have a full range of human qualities.

Domain 4: Recovery/Wellness Support

8. People who become involved in public education on social issues are often described as:

(a) Social workers.

(b) Advocates.

(c) Social agents.

(d) Change agents.

9. A good recovery/wellness plan should:

(a) include only long-term goals.

(b) include long term and short-term goals.

(c) include only short-term goals.

(d) be based on the best thinking of the peer.

10. Which of the following is a common risk factor for suicide?

(a) Socioeconomic class

(b) Geographic location

(c) Educational background

(d) Physical health

Domain 5: Harm Reduction

Pending

Sample Item Keys

1	D
2	A
3	B
4	A
5	D
6	B
7	D
8	C
9	C
10	B