



Supporting Mental Health in
First Responders

Overview of Peer Support Programs

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Introduction

First responders attend calls and witness events that can cause them to experience strong emotional, physical, cognitive, or behavioural responses. These can be traumatizing and interfere with performance during and after incidents. They also face day-to-day life stressors that are common in many peoples' lives at work and home. The compounding effect of life stress and trauma exposure can be detrimental to their mental health.

Often, co-workers who have had similar experiences can provide support and referral assistance through peer support, improving the lives of their peers and helping them towards recovery, empowerment, and hope. Peer support may also reduce the use of formal mental health, medical, and social services, which can reduce the cost of a first responder's recovery.

Increasingly, first responder organizations are embracing peer support. In its best form, it operates with autonomy and entrusts support workers to make judgments and decisions. Because peer support work can be exhausting and emotionally challenging, care must be taken to ensure that those involved in it have ongoing training and formalized support to prevent burnout and injury.

Definition of peer support

The Mental Health Commission of Canada (MHCC) defines peer support as “a supportive relationship between people who have a lived experience in common in relation to either their own mental health challenge or illness or that of a loved one.”

The ultimate goal of peer support is to help workers who are experiencing mental health challenges to achieve hope and recovery. For someone experiencing a challenge, the insight gained from a peer support worker's experiential knowledge can be deeply supportive.

Peer support model

While some organizations have informal support models, peer support is most effective when it is structured into a formalized, intentional peer support form. In this model, there is training for peer support workers.

In first responder organizations, critical incident stress management (CISM) falls under the umbrella of peer support. The distinction is that CISM is incident specific, a form of support and diffusing that follows exposure to a traumatic incident or event. Peer support may include CISM as well as other forms of support.

Workplace peer support is a subset of formalized peer support. In workplace-based peer support programs, employees that may have lived experience of mental health challenges

are selected or volunteer and receive training to support other employees within their workplace.

Benefits and outcomes of peer support

Research shows that peer support programs can:

- Humanize mental health challenges and take them outside the medical realm
- Promote socialization, reducing feelings of isolation and alienation that can be associated with mental health conditions
- Help people gain control over their symptoms and reduce hospitalization
- Foster hope and recovery
- Help people learn coping skills and improve resilience
- Promote a better understanding of mental health issues and services for all within an organization
- Create opportunities for increased employee engagement
- Help peers reach life goals and improve quality of life
- Provide rewards and further healing for the peer supporter through the experience of listening to and helping others

Components of a peer support program

It is difficult to create a definitive list of what to include in a peer support program. The types of support will vary widely depending on the individual needs of the peer requiring support.

MHCC list the following as examples of peer support program components:

- One-to-one peer support such as co-counseling, mentoring, and befriending
- Self-help support groups where peers meet regularly to provide mutual support without the involvement of professionals
- Community resource referral
- System navigation (e.g., case management)
- Artistic and cultural activities
- Social and recreational activities
- Advocacy services
- Paper and online information development and distribution
- Mindfulness
- Goal setting
- Assistance with self-managing of medication and self-harm
- Wellness recovery action plan (WRAP) — a self-administered template that provides a structure for people to monitor their distress and wellness

The role of a peer support worker

Peer support workers are occupationally aware (a critical skill for first responders) and understand the potential for trauma and operational stress injuries in first responder work. Typically, they also have lived experience of a mental health challenge or injury. This helps them relate to similar challenges experienced by others and provide empathetic support, encouragement, and hope to peers facing mentally difficult situations. Trauma-informed experience helps to support healing and helps peer support workers be seen as “safe” and non-threatening.

Although peer support can be offered on its own or as a complement to clinical care, a peer support worker does not take the place of a clinician and should not aim to “fix” a fellow employee.

Peer support workers should be in a positive state of recovery and growth, able to cope skilfully with their own mental health challenges and able to provide support when requested.

Recommended attributes of a peer support worker

Certain attributes, some intrinsic and some learned, contribute to the effectiveness of a peer support worker and can assist with hope and recovery.

A peer support worker should be:

- Empathetic, respectful, and non-judgmental
- Skilled at communicating and active listening to encourage openness and honesty
- Capable of critical thinking to assist the peer to discuss concerns, determine the peer’s true needs, and detect when a peer is nearing or in crisis
- Keen to learn and build peer support skills
- Committed to confidentiality (within legal limits)

Boundaries and limits

It is important to establish and maintain boundaries within peer support relationships. This can be a challenge as the relationship between the peer and the peer support worker is based on a trust that has been developed. This, in itself, can blur the line between a professional and personal relationship.

Training for peer support should include discussion of boundaries and limits — what’s appropriate for the organization and for the peer and the support worker. An organization’s peer support policy should include language about boundaries and limits.

Here are some points worth considering when determining boundaries:

- Communicating boundaries early in the peer support relationship can be helpful in managing expectations. This might include setting limits on time or location — for instance, agreeing that peers may contact support workers only up to a specific time of day or that they cannot approach support workers while they are on a call.
- Peer support workers should listen but not counsel. They should avoid determining solutions for the peer and instead aim for active listening, empathy and referral.
- Those offering peer support should be friendly and compassionate but maintain a professional relationship. There can be a fine line between a helping relationship and a friendship. When the relationship becomes too personal, the relationship should be ended.
- When acting in a peer support role, the focus of the interaction should remain on the recipient peer's needs.
- Establishing a back-up peer, or having oversight from a peer support coordinator or a psychologist, can assist when the boundaries appear to shift. If the relationship becomes close or inappropriate (if it becomes too intimate or sexual in nature, for instance), being able to hand off the file and extricate oneself from the relationship helps to keep peer support ethical and ensures that the peer who is in need of support has someone else who can take over with an understanding of that person's needs.
- Peer support training should be provided on how to recognize when the peer supporter is becoming too involved or when the peer seeking help is becoming too dependent.

Recruitment

Peer support work is typically voluntary and needs to be fully supported by management. Often, there is a lead peer support coordinator who oversees selection, alone or by committee. Some organizations use a nomination process and implement psychological screening and interviews for those who want to volunteer; for others, the process is less formal.

While prospective support workers may have faced or be facing their own mental health challenges, it is important that they are recovered to the point where they are able and ready to support a peer. The support workers' level of recovery in their own mental health journey will provide insight and inform their knowledge as they support others.

It's important to recognize that recovery is a dynamic process; once selected for the program, peer support workers' role must continue to be voluntary, enabling them to step away when they feel they need to — if they find that the work triggers mental health concerns in themselves or if they are simply in need of a health break.

Guiding values and principles

Guiding values and principles of practice should steer the efforts of peer support workers and inform organizations overall in supporting workers. Here is a summary of values and principles, from the MHCC document *Guidelines for the Practice and Training of Peer Support*.

Primary values

- Self-determination and equality (the belief that each person knows the path towards recovery that is most suitable for them and that it is the peer's choice to engage in a peer support relationship)
- Mutuality and empathy (the belief that all involved in the peer support relationship can benefit from the reciprocity and understanding that comes from lived experience)
- Recovery and hope (the belief that there is power in hope and positivity and that these can aid in recovery)

Principles of practice

- Recognize the power of hope and view every peer as having a unique path to recovery. Respect where each individual is in their journey towards recovery and recognize that while peer support workers may have lived experience, the beliefs and healing paths of peers may not be the same as their own.
- Help peers to determine their own direction. Work with peers to identify and explore options, and support them to take steps forward on their own rather than "helping" by doing it for them.
- Create a peer relationship that is open and flexible and maintain the focus on the peers and their needs.
- Focus on positivity and on the peer's journey to a more hopeful, healthy and full life, rather than focusing on symptoms, diagnoses or objectives set by someone other than the peer.
- Share aspects of lived experience in a manner that is helpful to the peer, demonstrating compassionate understanding and inspiring hope for recovery.
- Self-care is essential to the well-being of the peer support worker. Take care to recognize the need for health, personal growth, and resiliency when working as a peer support worker.
- Use communication skills and strategies to foster an open, honest, non-judgmental relationship that validates the peer's feelings and cultivates trust.
- Empower peers to find their path towards a healthier outcome, and encourage them to disengage from the peer support relationship when the time is right for the peer.
- Respect professional boundaries with the peer and with other professionals should they become involved.
- Collaborate with others (community partners, mental health practitioners, other stakeholders) whenever appropriate.
- Know personal limits during crises and other times, and seek assistance when appropriate.
- Maintain high ethics and personal boundaries to avoid harming the peer or the reputation of peer support.
- Participate in continuing education and personal development to learn skills and strategies to assist in peer support work.

TEMA recommends the following model for recruitment of peer support workers:



Peer support training

Training needs to be an intrinsic part of a workplace peer support program. To be successful, it must be supported philosophically, practically, and financially by management. For the peer support worker, it should include introductory training and ongoing learning and skill development through the duration of peer support work — particularly as skills can erode over time.

In addition to ensuring that peer support workers have the skills and knowledge to do the work, training can be re-energizing and help build morale, camaraderie, and a sense of shared purpose and value among the peer support team.

Beyond the peer support team, training should also be made available for those in the organization who may, at some point, access peer support.

Employers should invest in training to ensure that:

- Peer support workers have the knowledge, skills, and abilities to be most effective in helping peers move towards recovery
- Peer supporters are able to detect erosion of their own resilience and ways to avoid burnout or relapse
- All employees have basic awareness to recognize signs of mental health challenges and how to access peer support

According to the MHCC, a full complement of training modules would include:

- Basic peer support training to provide an overview of the role and responsibilities of a peer support worker and to enhance the workers' communication, interaction, decision-making, and support skills
- Family peer support training, to provide an overview of the special circumstances that may arise within the family or circle of care support.
- Crisis management training, to provide knowledge of how to identify and safely manage a crisis situation

Note: Other sources recommend annual training workshops to facilitate networking of peer support workers, promote ongoing self-care, and provide additional training opportunities.

Other training considerations

Consideration should be given to providing basic awareness training to all workers in first responder organizations so they have a baseline understanding of the types of operational stress injuries and mental health conditions that may arise, and how peer support may help when they do. Knowing what peer support is, how to access it, what people can expect, and the mental health conditions that may lead to the need to seek peer support can help normalize reaching for or accepting support.

Without that baseline education, it may be difficult to make the cultural shift necessary for people to understand that critical incident stress can affect anyone — including the most seasoned, resilient employee — and that accepting support is not a sign of weakness. This goes a long way to reducing the stigma around mental health conditions and laying the foundation for the success of peer support.

Supervisors and managers need a higher level of training to increase their awareness as they will need to understand and support peer training among those who work for them.

In all cases, it is important to determine the boundaries of peer support and to build training based on the defined scope. If, for instance, the program will only focus on peer support for critical incidents, training should be offered to peer supporters and to all those in the organization about what critical incident is and the potential symptoms people may experience.

If peer support is to be available for a broad range of work-related incidents (e.g. workload, interpersonal conflict), training should expand to address those issues as well. Similarly, if the scope goes beyond the workplace, training should similarly extend to those topics.

Suggested training topics

The MHCC suggests training around three main themes. Here is a summary of the Commission's recommendations:

Fundamental principles of peer support

- Lived experience, hope, and recovery
- Self-determination and how to foster it
- Peer support values, ethics, and principles of practice
- Trauma-informed practice
- Applying peer support principles in diverse environments

Social and historical context of peer support

- Historical context (how the philosophy of peer support and its values were a response to the historic prevalence of social injustice and stigma)
- Prejudice, discrimination, and stigma
- Diversity and social inclusion
- Social determinants of health

Concepts and methods that promote peer-to-peer effectiveness

- Interpersonal communication principles and methods
- Building supportive relationships
- The process of recovery and change
- Building resilience through self-care and wellness plans
- Limits and boundaries
- Crisis situations and strategies
- Connecting with community resources
- Awareness of possible symptoms and potential side effects of medication

Recognizing the unique situation of first responders and their potential exposure to trauma and critical incident stress, training on the following topics should also be considered:

- Understanding mental health issues common to first responders
- The effect of crisis, trauma, and operational stress on well-being
- Signs and symptoms of mental health conditions: compassion fatigue, vicarious trauma, stress, anxiety, burnout, depression, moral distress, post-traumatic stress disorder
- The impact of operational stress and trauma on families of first responders
- Understanding human stress response (flight, fight, or freeze mechanism)
- Suicide awareness and intervention
- Stress management and resiliency
- Signs of substance abuse
- Available referral resources
- Recognizing personal triggers and avoiding relapse
- Recognizing and overcoming the stigma associated with mental health issues

- The importance of families, friendships, and other relationships to the mental health of first responders
- Incorporating personal resilience and stress management to promote positive mental health

Depending on the scope of a peer support program, other training may also be desired. This could include training around interpersonal conflicts at work, managing workload stress, positive parenting, family and marriage/divorce support, grief counselling, preparing for retirement, challenges with eldercare – and more. It is vital to the credibility of a peer support program to ensure that the scope of peer support and the training to support workers are aligned.

Care and support for peer support workers

It is a big responsibility to take on peer support, perhaps even more so in first responder communities where the work is already stressful and emotionally challenging. In addition, peer support is typically voluntary and an add-on to the support worker's job, which can complicate life-work balance.

There is, as a result, a critical need to take care of these caregivers. Peer support workers need formalized psychological support to ensure they are not harmed by the work. This should include regular check-ins with the peer support coordinator and annual (or as needed) assessments with a psychologist or trauma counsellor to monitor the mental health of peer support workers.

Support team members also need to know that when there is a very difficult situation, they don't need to bear the burden alone. As such, the program needs to identify another peer supporter, the coordinator, a clinical advisor, or a psychologist as back-up support. Acknowledgment of the time and effort put into being a peer support worker can also go a long way to maintaining positivity. This might be as simple as a kind word or gesture from the coordinator or a more structured social event that brings all peer supporters together.

Autonomy

Peer support works best when it is supported by management but driven by the peer support team members. Sometimes, and arguably to its detriment, peer support operates out of an organization's human resources department. It is, however, unique and distinct from human resources; members of the peer support team need to know they are trusted to operate with support from management, but at arm's length from it. And those seeking peer support need to know that they can do so without that information being shared with human resources or tracked on their personnel file.

Peer support workers also need to be trusted to make the decision to collaborate with a mental health professional or step away from a peer support relationship when it feels right to do so.

Challenges

While a peer support program can be highly effective, it is not without its challenges. Some are listed below.

- It may be difficult for a peer to access peer support, particularly if they work in a rural area or in a work location with few employees.
- Some organizations either cannot afford, or choose not to budget for, training and delivery of peer support. Similarly, if a program is well-funded, sometimes the delivery of peer support programs face over-scrutiny by funders.
- Peer support is sometimes seen as a cheap option “add-on” to “real” services (e.g., EFAP programs) rather than as a core service or support in its own right.
- Because of the sometimes emotional and triggering nature of peer support, those who provide it are prone to burnout.
- Even with training, it can be difficult for peer support workers to make skilled judgments about peers, particularly when they relate to ethics.
- Peer support workers and peers will be privy, at times, to failings in the mental health system, which can prove frustrating and disheartening.
- Peer support workers often have access to sensitive information about their peers. Training is essential so they know when to honour privacy and confidentiality and when disclosure of confidential information may be necessary (i.e., if peers, someone they associate with, or the peer support worker is in serious and imminent threat of harm).
- Even the most resilient peer support worker may experience burnout or a mental health challenge. This can create issues with continuity of service for peers who rely on a trusted relationship with a peer support worker.

Resources

To learn more about peer support programs, see the following resources:

Making the Case for Peer Support (Mental Health Commission of Canada)
mentalhealthcommission.ca/English/document/445/making-case-peer-support

Guidelines for the Practice and Training of Peer Support (Mental Health Commission of Canada)
mentalhealthcommission.ca/English/document/18291/peer-support-guidelines

TEMA: tema.ca

The First Responder Trauma Prevention and Peer Support Training Program (TEMA):
tema.ca/first-responder