Implementing an Inclusive Peer Support Plan for an Academic Unit: Aspirations, Challenges and Progress to Date

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Edwin B. Fisher, & Samantha Luu

CAROLINA PEER SUPPORT COLLABORATIVE

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LEVINE wellness INITIATIVE
Promoting health and quality of life for Nurses and Society

Introductions – Marianne Baernhol

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Yolonda Childs

Linda Beeber

Cheryl Giscombe

Shielda Rodgers

Peers for Progress
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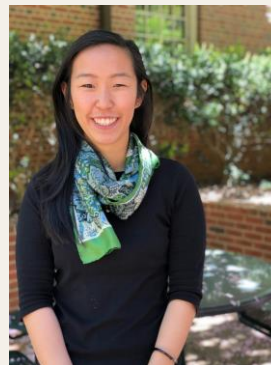Promoting health and quality of life for Nurses and Society

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Introductions - The Leaders of the Carolina Peer Support Collaborative

Ed Fisher

Pat Tang

Samantha Luu

Hannah Barker

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Beginnings – April, 2020 - Linda Beeber

- Administrators were meeting frequently
- Issue of stress in staff, students & faculty raised
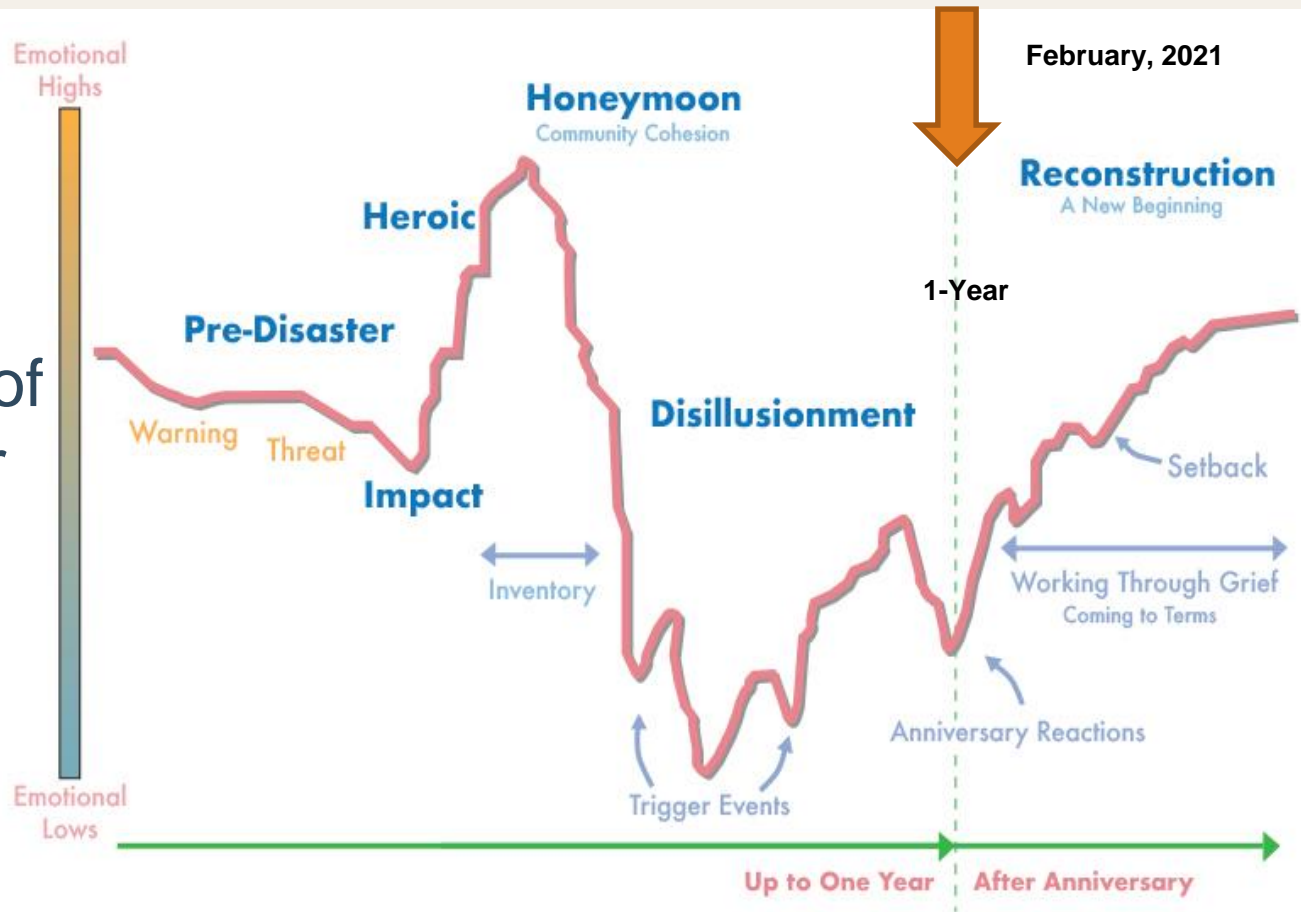- Dean noted importance
- Task group formed
- Plan drafted

Anatomy of a Disaster

Adapted from Zunin & Myers as cited in DeWolfe, D. J., 2000. Training manual for mental health and human service workers in major disasters (2nd ed., HHS Publication No. ADM 90-538). Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Mental Health Services.

Plan is Grounded in Social Support Research

- Social support (informational, instrumental, emotional, social) results in better health & resilience during crises.
- Knowing you have support is better than actually using support
- Natural supports are the best
- In a crisis, more diversity in supporters is associated with better outcomes

Plan Applies Social Support Research

- Inclusive --- staff, faculty, students & administrators (system is only as strong as its weakest link)
- Structural (knowing is more important than using)
- Functional: provides all 4 types of social support (multiple types = strength in a crisis)
- Diverse: connects people from different silos (diversity = strength)

Plan Meets Individual Needs

- Allows for "opt" out of activity but not out of belonging
- Stigma – everyone belongs
- Emphasizes peer support (not professional)
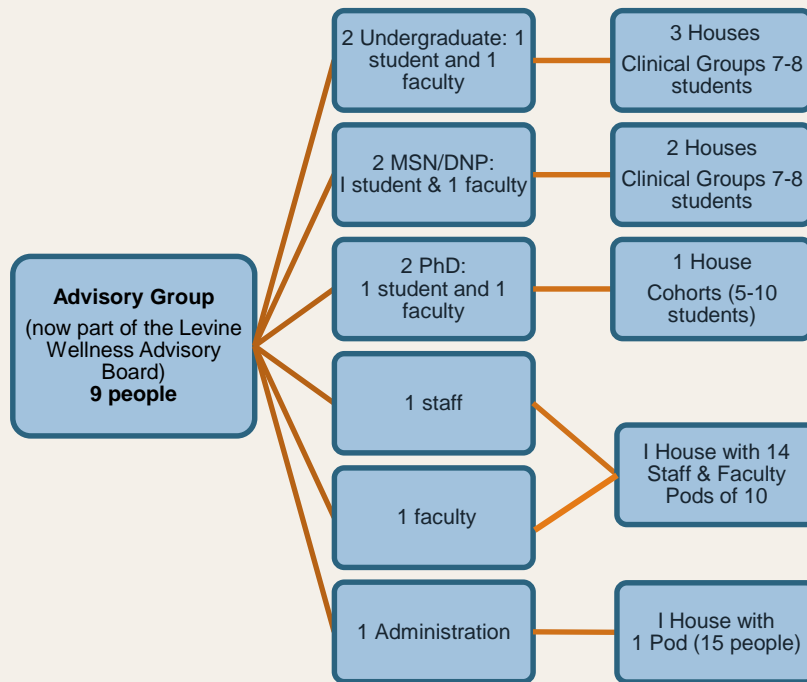- De-emphasizes social and professional silos

Structure

Advisory Group
(now part of the Levine Wellness Advisory Board)
9 people

2 Undergraduate: 1 student and 1 faculty

3 Houses
Clinical Groups 7-8 students

2 MSN/DNP:
I student & 1 faculty

2 Houses
Clinical Groups 7-8 students

2 PhD:
1 student and 1 faculty

1 House
Cohorts (5-10 students)

1 staff

I House with 14 Staff & Faculty Pods of 10

1 faculty

1 Administration

I House with 1 Pod (15 people)

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Structural Support: Pods and Pod Leaders

- Everyone belongs to a pod
- Pod leaders asked to plan one organizing activity
- Advisory team supports the pod leaders (periodic check-ins and cheerleading)

Functional Support: Informational

- Training offered to all (live, group, synchronous and self-paced asynchronous)

    - Crisis, stress and resilience

    - Principles of being a peer supporter

    - Listening, responding and empathic interaction skills

    - Responding to a peer in crisis

    - Resources

Functional Support: Instrumental

- Need-based groups

  - Exchange of information (e.g., what to do on a phone call with a parent far away; updates on travel restrictions & school openings)

  - Practical solutions for common problems (e.g., how to get a COVID vaccination for a parent; how to keep kids busy when you have a zoom meeting)

  - Venting frustrations

  - Sharing sadness and loss

Functional Support: Emotional

- Pods: a continuous avenue to receive peer support; stable membership
- Need-based groups: created to meet issues that emerge; time-limited; variable membership
- Listening sessions: Event or group; as-need basis (e.g., Black Lives Matter protests; assault on the US Capitol) – Shielda will discuss later

Functional Support: Social

- Pods: the initial pod activity introduced people to new contacts
- Additional pod-based social activities if pod desired
- "Diversion" groups – build peer ties through shared interests (new)
- "Pop-ups" and event-related gatherings (wellness walking competition; new)

Preparation for Launch

- Worked with SON media team to develop the message
- Focus groups --- students, staff & faculty
- Presented the plan and asked for feedback

  - (+) Understood the need

  - (+) Emphasized importance of natural helpers chosen by the person

  - (+) Variety is needed

  - (-) Wary of confidences being breeched

  - (-) Wary of being forced to be with others who people they do not like or trust

Preparation for Launch

- Reached out to the group that was forming on campus
- Began meeting and getting
  - Informational support
  - Instrumental support
  - Emotional support
- This became the Carolina Peer Support Network (Ed and Samantha will present later)
- Advised us on the plan

Preparation for Launch

- Approval of the plan by administration

  - Getting buy-in (some were reluctant or too overwhelmed)

- Setting up the pods

  - Recruiting pod leaders & providing support

- Setting up training sessions (3) & incentives

  - Carolina Peer Support Collaborative supplied resources

- Setting up need-based groups

Launch – Shielda Rodgers

- September 28, 2020 – formal launch
- Peer support training sessions
- Organization of pods and initial pod activities
- Need-based groups

Launch – Shielda Rodgers

- Listening sessions
- Meeting regularly with the Carolina Peer Support Collaborative
- Evaluations by Qualtrics

Functional Support: Emotional

- Pods: One instance of a pod leader providing emotional support and referral to appropriate help within the SON
- Need-based groups (2)

  - Faculty with international family members

  - Parenting during COVID
- Event-based Listening sessions

Functional Support: Socializing

- Some pods continued beyond their initial activity
  - Group walks (separately connected by phone)
  - Walking buddies
  - First Monday of the month coffee
  - Friday wine and cheese
  - Halloween costume party
- We are launching "diversion" groups – books, cooking, movies

Lessons Learned – Marianne Baernhol

- Top down sanctioning was crucial
- Adaptiveness, flexibility allowed us to meet needs as they emerged (listening sessions became very important)
- Regular communication back to administration is essential

Lessons Learned – Marianne Baernholdt

- Pods were variable --- depended on the energy of the pod leaders and the chemistry (synergy) of the pod members
- Not everyone will participate (structural belonging without expectations is an important aspect)
- Natural supports were the first line (more active than the built support --- remote work may have accelerated this)

Lessons Learned – Marianne Baernholdt

- Shifted to new types of groups – community building; safe spaces; joy and fun; shared interests
- We have the structure in place should we need to go back to crisis management
- Peer support for the peer supporters (mutual support within the four framers; Carolina Peer Support Collaborative)

Sustainment of the Program – Cheryl Giscombe

Structural changes:

Peer Support Advisory group will merge with the Levine
Advisory Committee (efficiency; shared missions; stigm

One guiding group will coordinate ongoing activities

Sustainment of the Program – Cheryl Giscombe

Functional changes:

Merging peer support into Levine Wellness Activities

Coordinating peer support activities with Office of Inclusive Excellence

Will develop re-training (booster) plan and ongoing evaluation

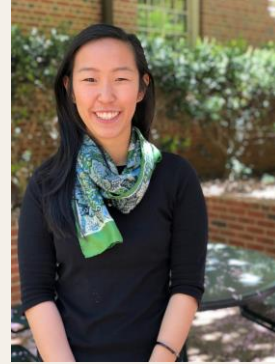Continue to build ties with the Carolina Peer Support Collaborative

Peer Support and Resource Sharing - The Carolina Peer Support Collaborative

Ed Fisher

Samantha Luu

Carolina Peer Support Collaborative

- College of Arts and Science
- Dean of Students
- Graduate School
- Employee Forum
- Center for Faculty Excellence
- Student Government and Mental Health Coalition
- Schools of Dentistry, Medicine, Nursing, Pharmacy, Public Health

- CAPS
- Carolina Center for Public Service
- Carolina Covenant
- Carolina COVID Student Services Core
- Faculty Council
- Peer2Peer
- Student Wellness
- Student Life and Leadership
- Carolina Away
- Carolina Housing
- Schools of Business, Law, Social Work

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Strategies

1. **Not a single program or intervention**
2. **Wide variety of peer support** – individual, group, mutual, formal, informal
3. Peer support for **staff, students, and faculty**
4. **Ownership of programs within** schools, departments, offices, units
5. Core provides resources, consultation, assistance in training, etc.
6. Where possible, integration of peer support into **existing channels**
7. Address **racism, inequity, and COVID-19**
8. **Facilitate cross campus exchange through Carolina Peer Support Collaborative**

Influence of School of Nursing on Others in CPSC

- Sharing and creating resources collaboratively
- Reinforcement of:
  - Mutual support/pods
  - Need-based and affinity-based support
  - Support for faculty, students, and staff
  - Importance of centralized organization for coordination and sustainability

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Panel Reflections
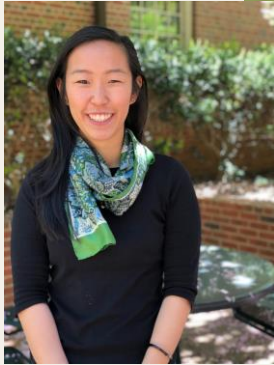
Questions?

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