

The Zoom Interface

The screenshot shows a Zoom Webinar window with the following elements and annotations:

- Zoom Webinar Header:** Includes "Zoom Webinar", "You are viewing David Terry's screen", and "View Options".
- Maximize Button:** A callout box points to "Click here to maximize your session view" and "Enter Full Screen".
- Q&A Window:** A "Question and Answer" window is open, showing a test question and a text input field. Annotations explain: "You can switch between questions you've asked and those asked by others using these buttons." (pointing to "All questions (1)" and "My questions (1)"); "You can use the Q&A feature to ask questions of the host and presenters. These questions can receive text or live responses. To begin asking a question use the field below. You can see a test question above." (pointing to the input field); and "The To field will tell you who will receive your message. Be mindful of who you are chatting to." (pointing to the "To: All panelists" field).
- Zoom Webinar Chat:** A chat window on the right side of the screen. Annotations include: "The chat feature will allow you to talk with other people in today's webinar." and "Your text can only be seen by panelists".
- Audio Settings:** A "Select a Speaker" menu is open, showing "Speakers (Realtek(R) Audio)" selected. A callout box points to "Click Here to adjust your audio settings".
- Bottom Control Bar:** Contains "Audio Settings", "Chat", "Raise Hand", "Q&A", "Click here to leave the session", and "Leave".

All attendees are muted. Today's session will be recorded.

Peer Support Approaches for Healthcare Providers

Session 3: Peer Support Skills and Competencies (Part 1)

Peggy Swarbrick, PhD, FAOTA

December 7, 2021



Northeast and Caribbean (HHS Region 2)

MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

About Us ...

The Northeast and Caribbean MHTTC received 5 years (2018 – 2023) of funding to:

- Enhance capacity of behavioral health workforce to deliver evidence-based and promising practices to individuals with mental illnesses.
- Address full continuum of services spanning mental illness prevention, treatment, and recovery supports.
- Train related workforces (police/first responders, primary care providers, vocational services, etc.) to provide effective services to people with mental illnesses.

Supplemental funding to:

- Support school teachers and staff to address student mental health
- Support healthcare providers in wellness and self-care activities



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We Want Your Feedback!

Our funding comes from the Substance Abuse and Mental Health Services Administration (SAMHSA), which requires us to evaluate our services. We appreciate your honest, ANONYMOUS feedback about this event, which will provide information to SAMHSA, AND assist us in planning future meetings and programs.

Feedback about this training will assist us in developing future trainings that are relevant to your professional needs. Therefore, your feedback counts!

Video Recording Information

Please Note:

We will be recording this webinar and posting it to our website along with the presentation slides and any relevant resources.

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At the time of this presentation, Miriam Delphin-Rittmon served as Assistant Secretary for Mental Health and Substance Use at SAMHSA. The opinions expressed herein are the views of the speakers, and do not reflect the official position of the Department of Health and Human Services (DHHS), or SAMHSA. No official support or endorsement of DHHS, SAMHSA, for the opinions described in this presentation is intended or should be inferred.

This work is supported by grant H79SM081783 from the DHHS, SAMHSA.

Your Interactions With Us

Question and Answers

- Q & A will occur at the end of the call.
- Type your questions in the Q & A feature in Zoom located on the task bar (hover over task bar).
- Note: your question is visible to all participants.

Chat and Polls

- Throughout the webinar, we will be asking for your input.
- Use the Chat or Poll features in Zoom located on the task bar.
- You can control who can see your chat comments.

The MHTTC Network uses affirming, respectful and recovery-oriented language in all activities. That language is:

**STRENGTHS-BASED
AND HOPEFUL**

**INCLUSIVE AND
ACCEPTING OF
DIVERSE CULTURES,
GENDERS,
PERSPECTIVES,
AND EXPERIENCES**

**HEALING-CENTERED AND
TRAUMA-RESPONSIVE**

**INVITING TO INDIVIDUALS
PARTICIPATING IN THEIR
OWN JOURNEYS**

**PERSON-FIRST AND
FREE OF LABELS**

**NON-JUDGMENTAL AND
AVOIDING ASSUMPTIONS**

**RESPECTFUL, CLEAR
AND UNDERSTANDABLE**

**CONSISTENT WITH
OUR ACTIONS,
POLICIES, AND PRODUCTS**

Adapted from: https://mhcc.org.au/wp-content/uploads/2019/08/Recovery-Oriented-Language-Guide_2019ed_v1_20190809-Web.pdf

Our Presenter:



Peggy Swarbrick, PhD, FAOTA

Peer Support Skills & Competencies Part 1



Why Peer Support & Benefits



Core Peer Support Competencies



Peer Support flow



Strengths-based focus



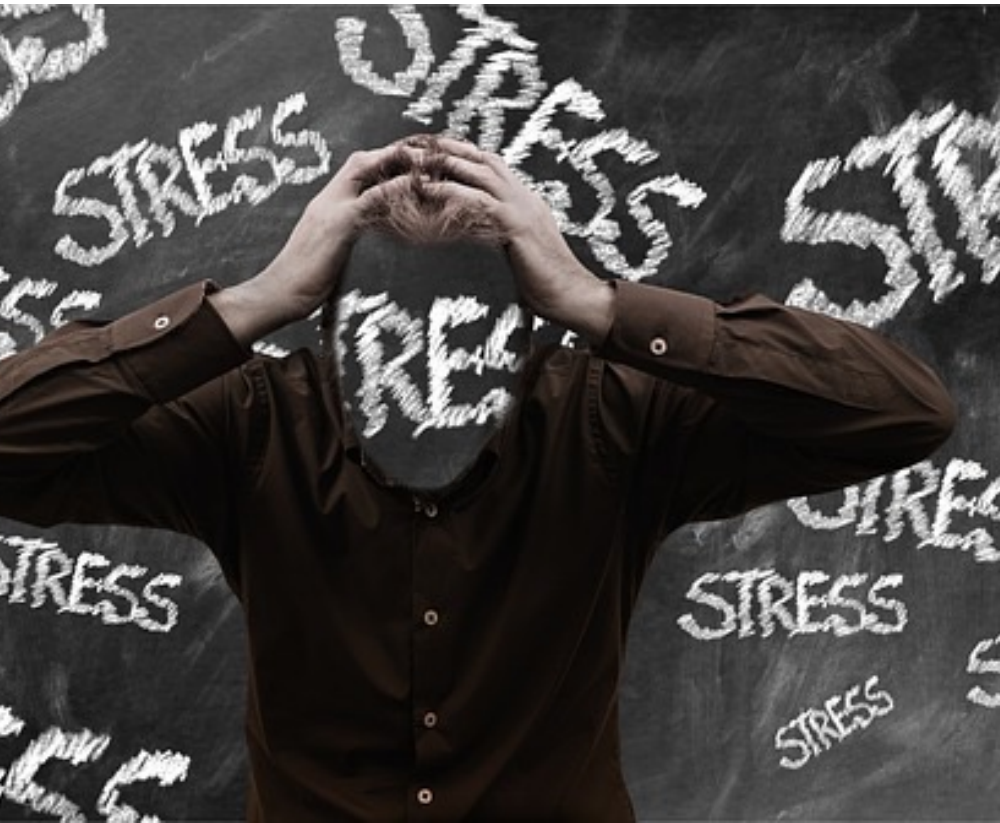
Blocks to connecting and skills for effective engagement

Welcome

What you hope to learn during the next hour?

How does Peer Support fit into your work/role ?

- *Mental and physical health toll*



Burnout

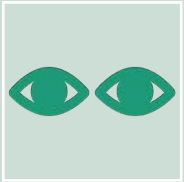
has reached rampant levels among United States (US) healthcare professionals, with over one-half of physicians and one-third of nurses experiencing symptoms.

is detrimental to individuals, families, communities and populations.

Burnout



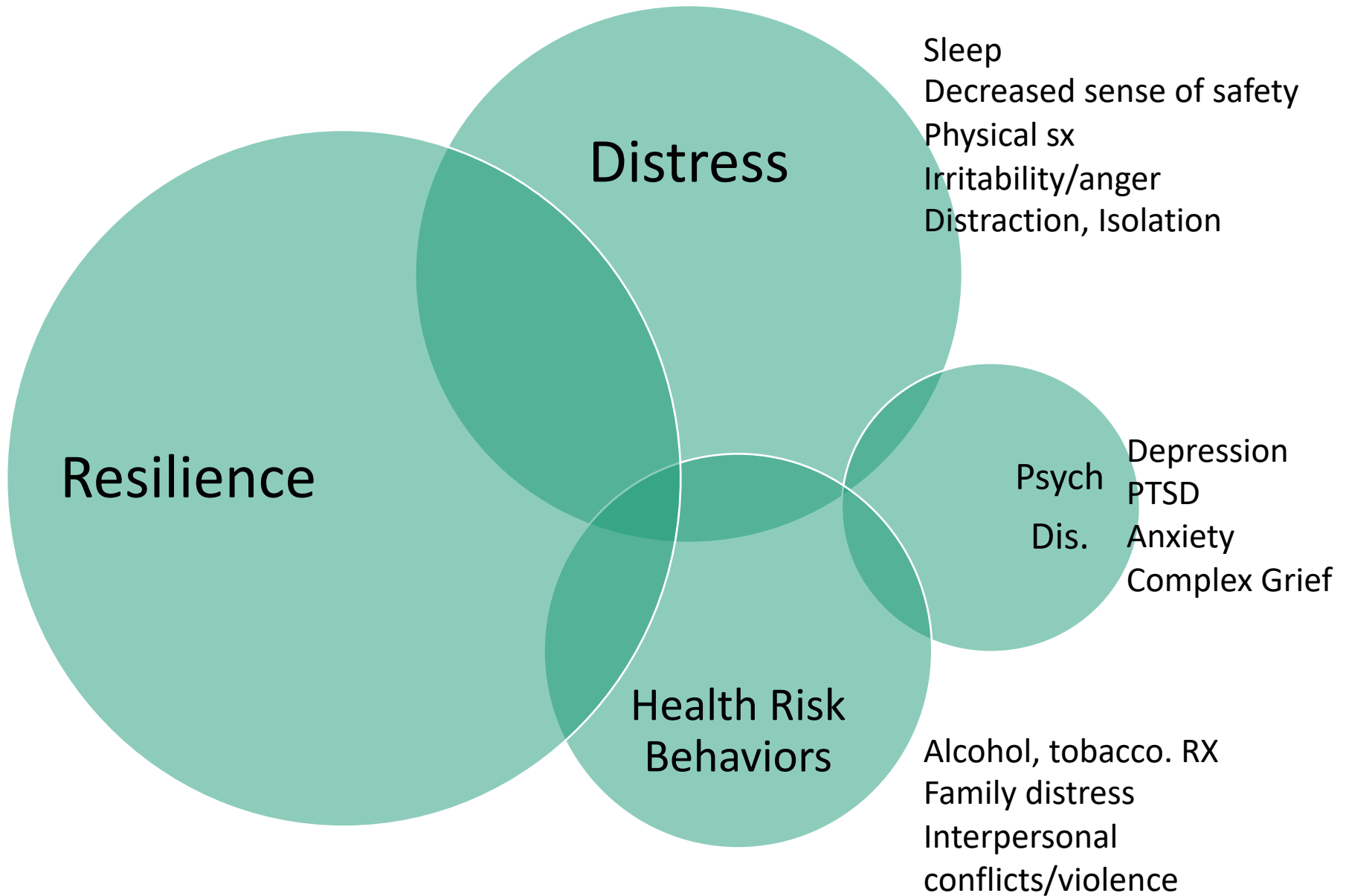
Exhaustion: tired, feel you have nothing left to give, do not experience pleasure in your work, may experience a host of physical symptoms –GI etc



Depersonalization: cynicism, go through the motions, detachment

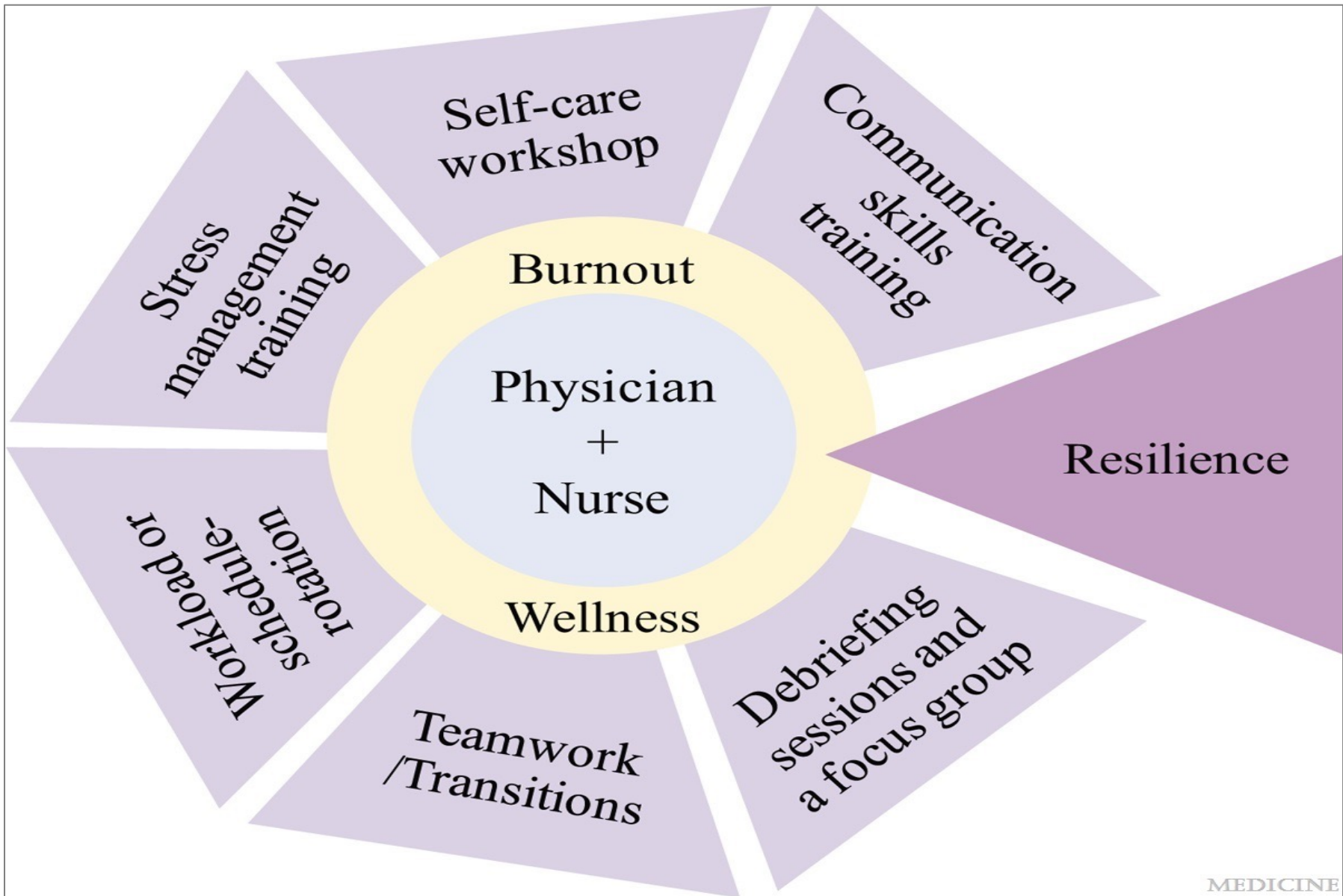


Decreased sense of accomplishment: effort/work does not seem worthwhile



Interventions

- Usually have a self-care focus such as mindfulness training, cognitive behavioral therapy, and exercise – with a particular focus on yoga.
 - System level focused on generating a positive work environment – such as ensuring favorable work conditions to improve workflow.
- Godfrey CM, Rodgers J, Pare GC, Alsius A, Ross-White A, Belbin S, Sears K. (2021). Healthcare Provider Burnout: A Rapid Scoping Review. SPOR Evidence Alliance.



[Interventions to reduce burnout of physicians and nurses: An overview of systematic reviews and meta-analyses](#)

Zhang, Xiu-jie; Song, Yingqian; Jiang, Tongtong; Ding, Ning; Shi, Tie-ying *Medicine*99(26):e20992, June 26, 2020. doi: 10.1097/MD.0000000000020992



Why Peer Support & Benefits

Colleagues Involved in Reaching Colleagues through Listening and Empathy (CIRCLE)

Chantal Brazeau, MD

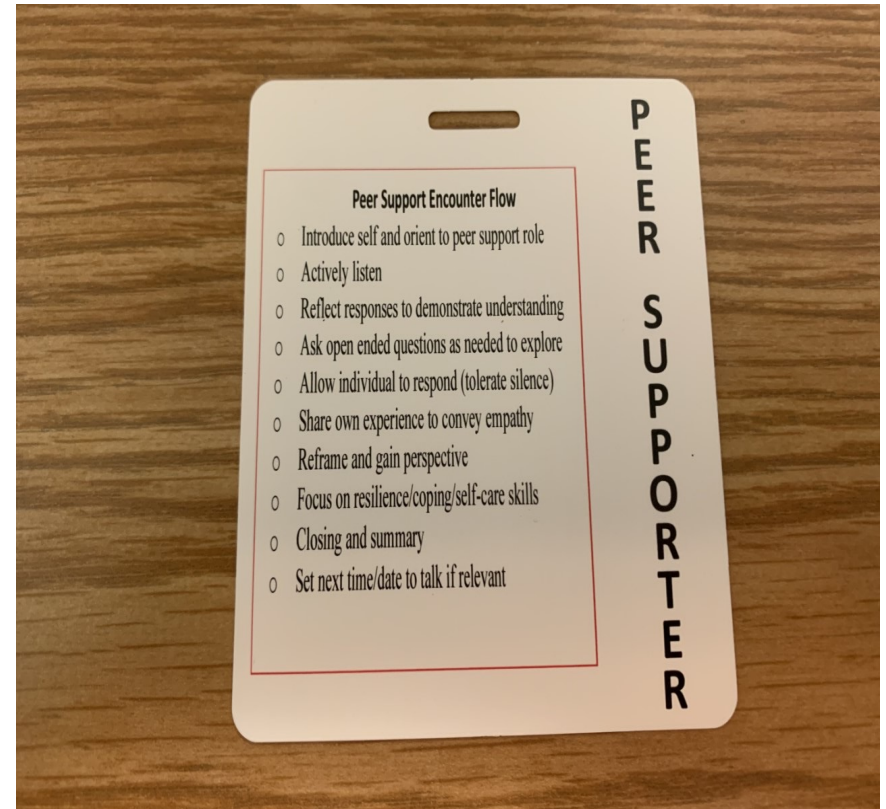
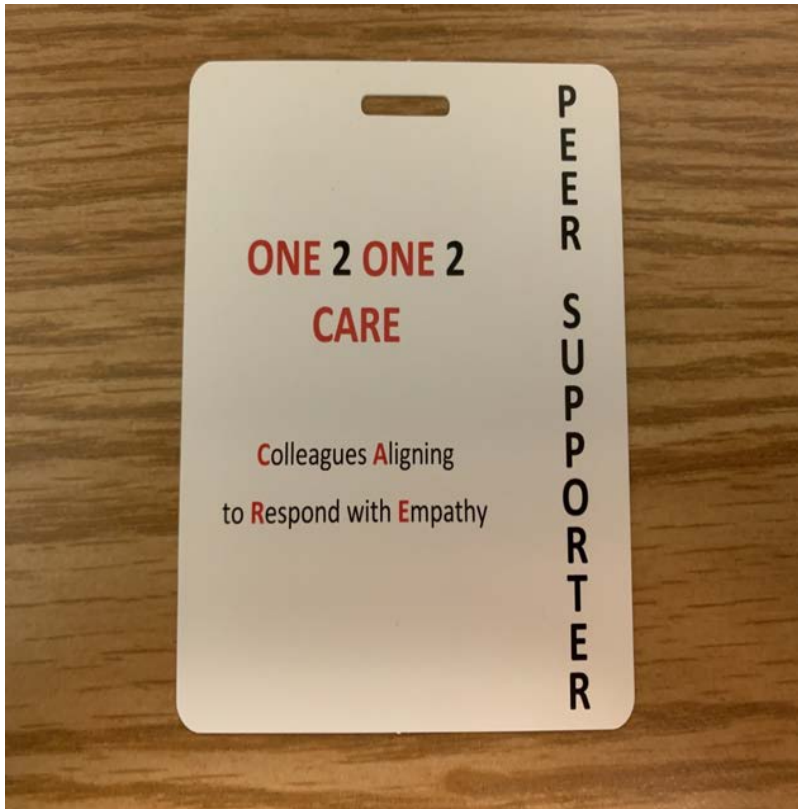
Manasa Ayyala, MD

Ping-Hsin Chen, PhD

Margaret Swarbrick, PhD

ONE 2 ONE 2 CARE

Colleagues **A**ligning to **R**espond with **E**mpathy





What is Peer Support



Peer support is reciprocal, transformative and healing.


- *Connection, information, and resilience-building key tasks, but the core of peer support comes from hearts—connecting with people through similar experiences and situations.*

Peer Support-

Peer-ness is based on role and shared challenges /vulnerabilities/experiences in that role



Colleagues meet, as equals to give each other connection and support on a reciprocal basis



A peer is in a position to offer support by virtue of relevant experience because and can relate to others who are now in a similar situation

Peer Support

Relationship is one of equality (reciprocal)

Offer knowledge & *experiences*

Emotional, informational or practical support

Context: On-the-spot or scheduled

Types of Support

- **Emotional**- empathy, concern, affection, trust, acceptance, encouragement, or caring: helps show the person is valued
- **Practical** – instrumental- concrete, direct ways people assist others- help access concrete direct tangible resources or services
- **Informational** - advice, guidance, suggestions, or useful information to help solve problems /create solutions /plans





Core Peer Support Competencies



Engage in
supportive
relationship

Initiate contact

Listen with careful attention to
the content and emotion being
communicated

Demonstrate genuine acceptance
and respect

Demonstrate understanding of
peers' experiences and feelings

Connection

Engage

```
graph TD; Engage[Engage] --> Listen[Listen]; Listen --> Reflect[Reflect]; Reflect --> Respond[Respond]; Respond --> Exploring[Exploring];
```

Listen

Reflect

Respond

Exploring

Communication

Clarify understanding using active listening skills

A light green downward-pointing arrow indicating a flow from the first step to the second.

Listening for content feeling and meaning and provide reflective response

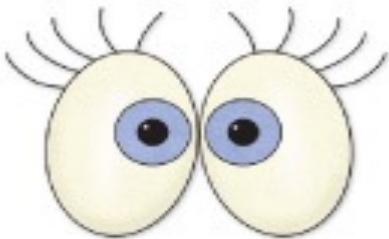
A light blue downward-pointing arrow indicating a flow from the second step to the third.

Aware of listening blocks

Listen

I can LISTEN
with my...

EYES



EARS




HEART



Empathy is

seeing with the eyes of another,
listening with the ears of another,
and feeling with the heart of another.



*“Empathy is...
communicating
that incredibly
healing message of,
‘You’re not alone.’”*

-Brené Brown



Shares experiences

Relate own experiences with permission, to connect and inspire hope, normalize

Discuss ongoing personal efforts to enhance health and self care

Recognize when to share experiences and when to listen

Share

Share personal information to express true empathy without taking the focus away

Avoid

Avoid doing a “analysis” or judging the facts or the situation

Avoid

Avoid trying to fix the issue/solve the problem

Personalizes Peer Support

Understand own
personal values
and culture and
how these may
contribute to
biases, judgments
and beliefs



Recognize and
respond to the
complexities and
uniqueness of
experiences

Helps manage (prevent) crises

Recognize signs of distress among peers and in their environments

Provide reassurance when in distress

Strive to create safe spaces

Take action to address distress or a crisis by using knowledge of resources, services and support preferences

Discuss self-care, elicits the peer's personal coping strategies

**Provides
information**

Discuss self care, elicits the peer's personal coping strategies



Help access services if needed



Use approaches that match preferences and needs



Peer Support Flow

The Peer –Support Flow: Connection

Be present

Eliminate distractions (close computer tabs, silence cell phone, etc.)

Lead with strengths

Share narrative when relevant



Orienting



Connection - Listening & Reflecting



Gain Perspective



Focus on Self care, Build Resilience



Share Resources



Orienting

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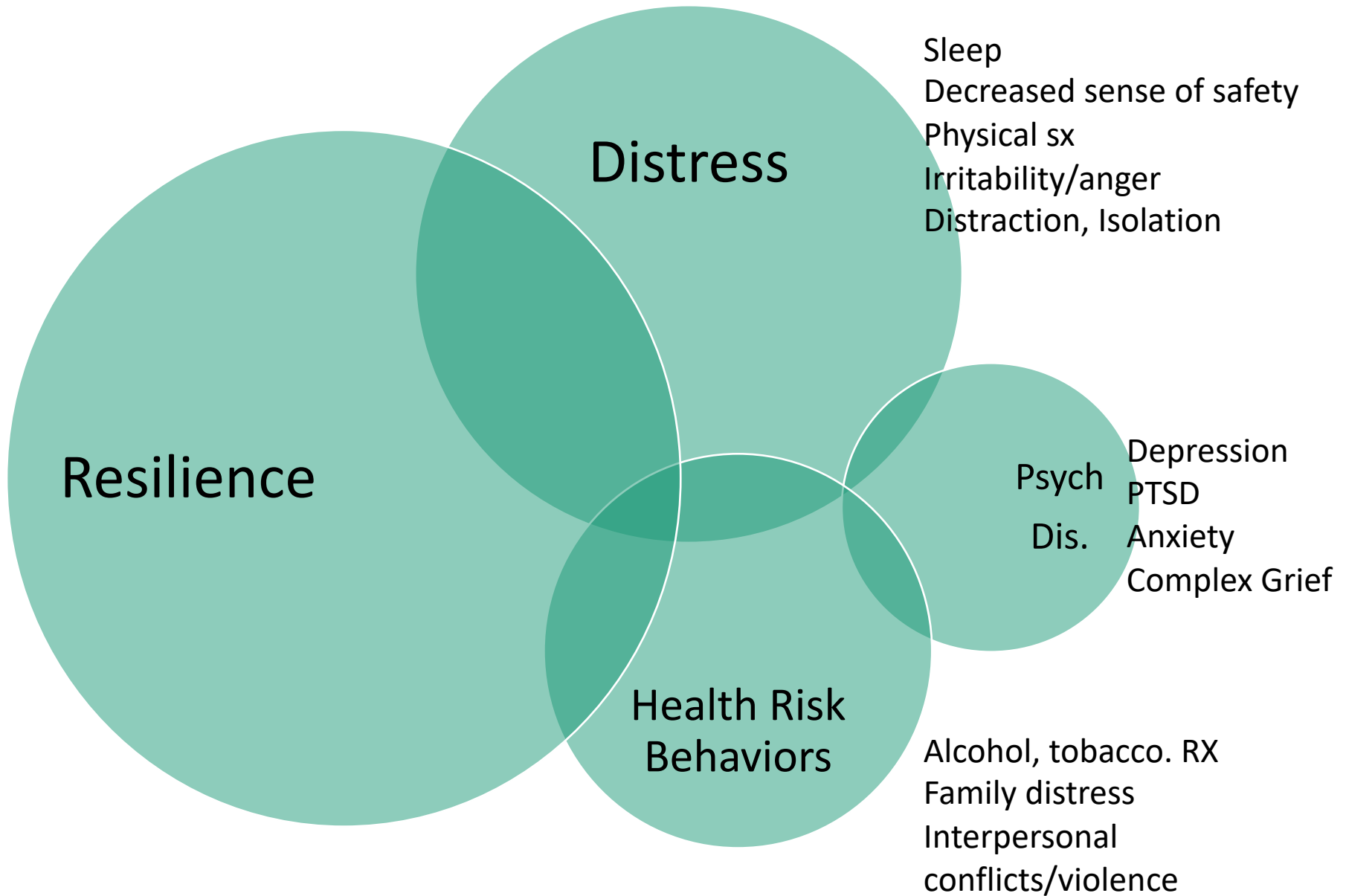
Peer support role/scope of peer support

Wellness/Resilience focus

Reciprocal nature of the relationship



Strengths-based focus





**Strengths &
Needs**

Emotional

Financial

Environmental

Social

Intellectual

Spiritual

Physical

Occupational

<https://alcoholstudies.rutgers.edu/wellness-in-recovery/quiz/>

Wellness Quiz

Take the Wellness Inventory Quiz

This inventory will give you a chance to look at your typical day and week. It may help you think about what you might want to strengthen or improve in your life.



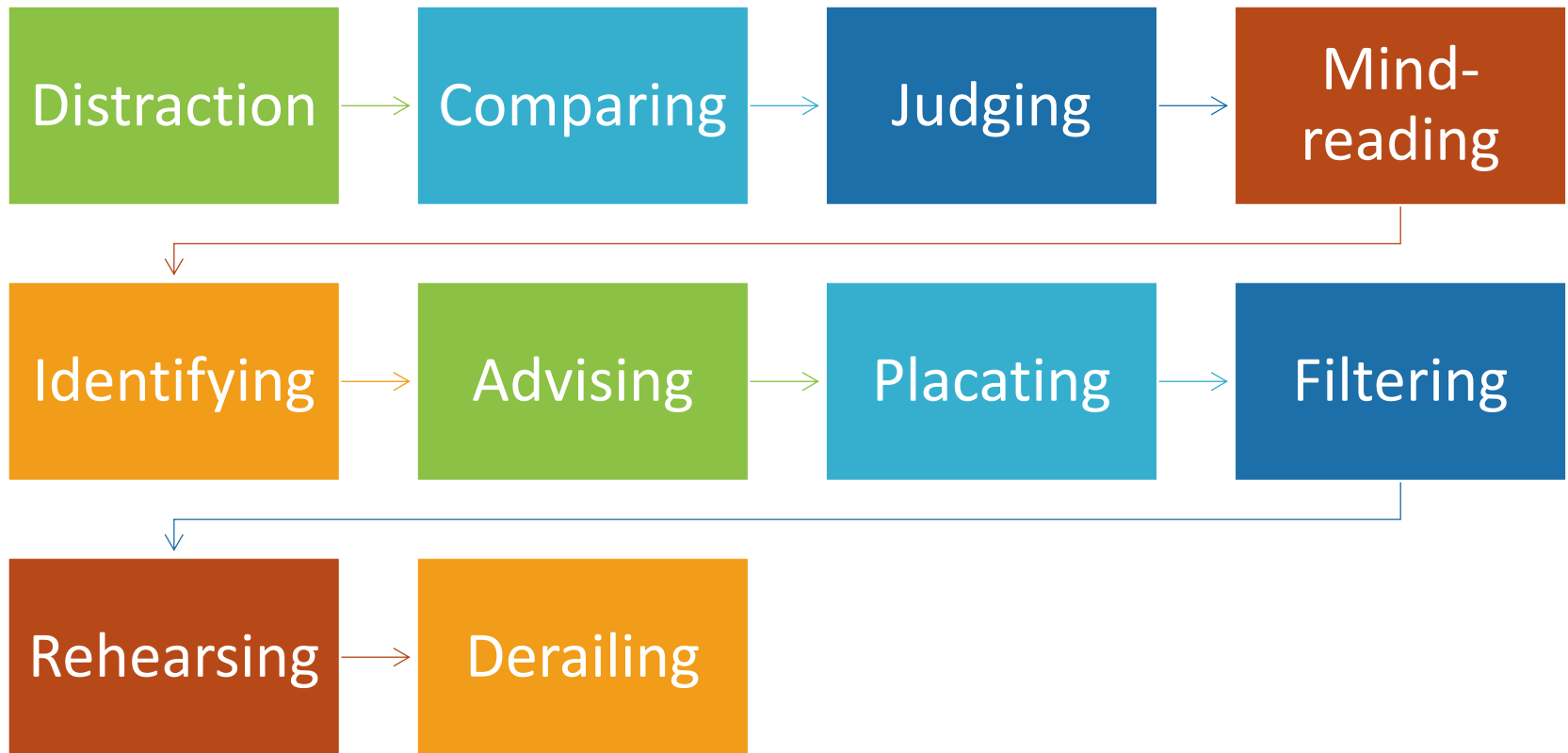
TAKE THE QUIZ





Blocks to connecting and effective engagement

Blocks to Listening



Common blocks to listening.

- **Distraction:** Technology, such as your phone, can take your attention away.
- **Comparing:** *Self-dialogue that happens when the listener competes with the speaker (e.g. “He has it harder than I do” or “Why can’t I be that smart” or “I’m glad I’m not in his shoes”). Listening is being hindered by how much a person is comparing himself or herself to the speaker.*
- **Judging:** *The act of putting labels or judging people before or even during the time they are speaking. You must listen from a neutral standpoint in order to hear the full message being broadcast.*
- **Mind-reading:** *This involves cutting off the speaker in an attempt to speed up the process or get to the truth of the matter. The fact is that you cannot always predict exactly what someone else is going to say. If you cut off the speaker before he/she is done speaking, then you are not allowing the message to fully come through.*

Common blocks to listening.

- **Identifying:** *Focusing on your own experiences while someone is talking. It is good to try to relate to the person speaking, and to share your story as a way of supporting and showing you understand. If you identify too much, you completely miss how the other person is feeling because you are too caught up in how you felt.*
- **Advising:** *You want to “solve” someone’s problems and only listening until you can tell them what to do. It is natural to want to help, but it’s best to support people through exploring and supporting them in solving their own problems.*
- **Placating:** *Agreeing with everything someone is saying to get approval. While it is important to validate someone, if you are constantly trying to agree with that person, then you are not truly listening. True active and reflective listening does not mean agreeing or disagreeing; it is reflecting, like a mirror.*
- Adapted from McKay, Davis, & Fanning (2009), *Messages: The Communication Skills Book*; and from T. Gordon, cited in Miller & Rollnick (1991), *Motivational Interviewing*.

Common blocks to listening.

- **Filtering:** *This is when you only hear part of the message because you are only listening for certain things. Usually people start daydreaming when they do this and are no longer hearing what is being said. This gets in the way because, again, you do not hear the full message.*
- **Rehearsing:** *This happens when you are reviewing and creating your response before a person is even done speaking. When you do this, you are not allowing the full message to come through, as you are not present and not really listening.*
- **Derailing:** *Changing the subject of what was being discussed because you are either bored or uncomfortable with the subject.*

Connect

Contact

at least 2 coworkers and ask them how they are doing.

Tell

coworker that you are thankful for them.

Send

a motivational text to a coworker, friend or family member.



Is peer support for you?
Time to find out...

References/Resources

- Godfrey CM, Rodgers J, Pare GC, Alsius A, Ross-White A, Belbin S, Sears K. (2021). Healthcare Provider Burnout: A Rapid Scoping Review. SPOR Evidence Alliance.
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 - <https://www.johnshopkinssolutions.com/solution/rise-peer-support-for-caregivers-in-distress/>
 - Zhang, Xiu-jie MD^a; Song, Yingqian BS^a; Jiang, Tongtong MS^b; Ding, Ning BS^a; Shi, Tie-ying MS^a. Interventions to reduce burnout of physicians and nurses, *Medicine*: June 26, 2020 - Volume 99 - Issue 26 - p e20992 doi: 10.1097/MD.00000000000020992
 - For more contact me at swarbrma@rutgers.edu
-

Join Us: Peer Support Skills and Competencies, Part 2- December 14, 2021 from 12-1 pm

Core listening skills for focusing on strengths and supporting self-care



How to linkage to wellness/self-care resources



Strategies for becoming a workplace wellness champion.

RUTGERS

Center of Alcohol &
Substance Use Studies

Peggy Swarbrick, PhD, FAOTA

Research Professor and Associate Director

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<https://alcoholstudies.rutgers.edu/wellness-in-recovery/>

Question and Answer



Evaluation Information

The MHTTC Network is funded through SAMHSA to provide this training. As part of receiving this funding we are required to submit data related to the quality of this event.

At the end of today's training please take a moment to complete a **brief** survey about today's training.



Connect With Us

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