

What Makes Trauma-Informed Peer Support Unique?

Shery Mead & Cheryl MacNeil

- **Peer support does not assume a problem orientation.** While people may start with the shared experience of mental health histories, conversations do not have to focus on that experience. When we are with others we assume “get it,” there may be more trust and openness which allows us to try on other ways of understanding our experiences.
- **Assessment and evaluation are not part of relationships.** Instead, people strive for mutual responsibility and communication that allows them to express their needs to each other without threat or coercion.
- **Peer support does not use a medical framework.** Instead, the focus is on building relationships that support learning and growth across whole lives. This might take the form of challenging one another’s language or assumptions about what they experience.
- **Peer support assumes full reciprocity.** There are no static roles of helper and helpee. Reciprocity is the key to building natural community connections. This is an enormous shift for people who have learned to think about community as a series of services.
- **Peer support assumes evolution as opposed to individual recovery from a specified illness.** The very fact of conversation changes the ways in which people speak and know. As Gergen explains, “We come to be aware that each truth about ourselves [and others] is a construction of the moment, true only for a given time and within certain relationships.”
- **Peer support requires people to rethink definitions of safety.** While the traditional system has concerns about liability, the responsibilities of peer support require people to embrace “relational” meanings of safety. Relational safety has been described as: the emotional safety one feels through validation; being involved in compassionate relationships; having a place where you can be who you are; having the tools and education to be in mutually responsible peer relationships; feeling like you are not being judged; and not feeling like you have to have all the answers. (MacNeil and Mead, 2005).

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