

# PEER SUPPORT GROUPS



Who,  
What,  
When,  
Where,  
Why,  
and  
How?

1

My first experience with  
a Certified Peer Specialist  
changed my life...  
Saved my life.

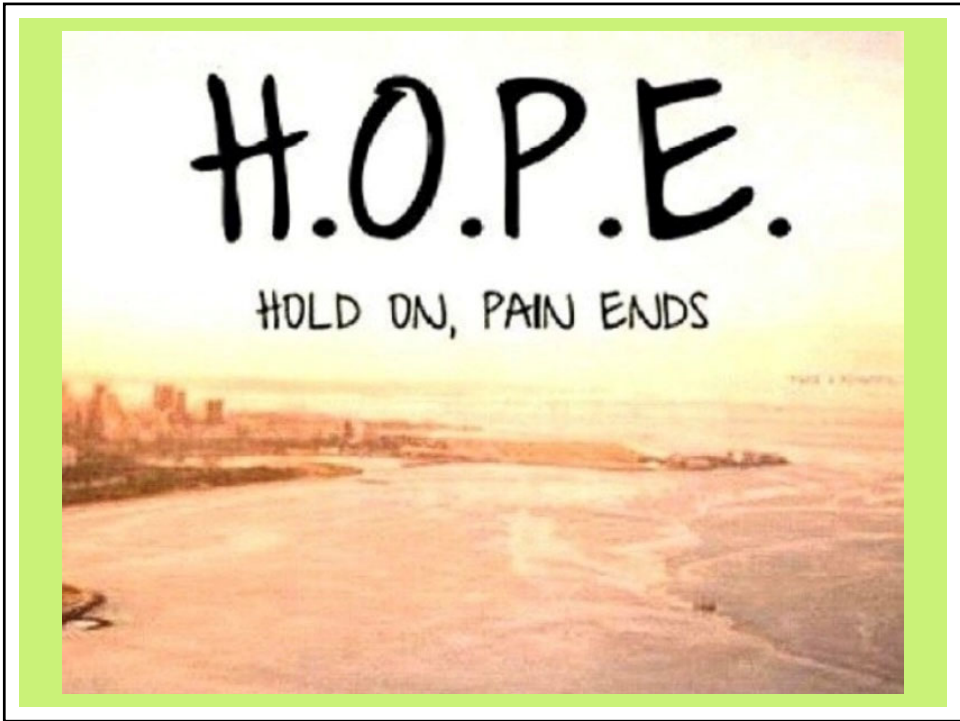
MENTAL  
*Health*  
MATTERS



MENTAL  
*Health*  
MATTERS



2



3

**EIGHT YEARS LATER...**

**Sammlie Sackmann**  
**Certified Peer Specialist**

- Drop-in Center
- Comprehensive Community Services
- NAMI Peer Support Group Facilitator
- Aspirus Hospital Peer Support Group
- Prevent Suicide Wisconsin Lived Experience Panel 2024
- Wood Co. Police Lived Experience Panel 2024
- Wood Co. Police Lived Experience Panel 2025
- Prevent Suicide Wisconsin Conference Presenter 2025



**Fell years ago.**  
**Never gave up.**

4

NOW...



5

You know what, I'm about to say it  
I'm glad you exist and woke up  
today. I know it's not easy  
sometimes but I'm proud of you



6

## WHO?



According to the Wisconsin Peer Specialists website,

“A Certified Peer Specialist offers peer support to people receiving services related to mental health and/or substance use challenges. Whether a Certified Peer Specialist works in a peer-run organization on a team entirely composed of other peer support professionals, or as part of a treatment or recovery team including clinicians and other service providers, they are active participants and colleagues with their own valuable expertise and skill-sets.

A Certified Peer Specialist is a

person who has their own lived experience of mental health and/or substance use challenges and has completed formal training and certification in the peer specialist model of mental health and substance use-oriented peer support. They use their unique set of lived experiences and recovery, in combination with comprehensive skills-training, including continuing education, to support people with similar lived experience. Certified Peer Specialists actively center peer support principles and skills in their work, while working in a clearly defined role and collaborating in a complementary fashion as part of an agency’s team support structure.”

7

## ‘LIVED EXPERIENCE’ EXPLAINED



**“Lived experience”** refers to an individual's personal and subjective encounters, including emotions, perceptions, and the knowledge gained from them, that shape their understanding of the world and their place in it.



The term “lived experience” is defined as “personal knowledge about the world gained through direct, first-hand involvement in everyday events rather than through representations constructed by other people.”



8

# CERTIFIED PEER SPECIALISTS

-  Cultivate empowering and supportive relationships
-  Use self-disclosure to deepen connection and inspire hope
-  Draw on their own lived experience as a valuable source of empathy
-  Provide information about community and recovery-oriented resources upon request
-  Serve a critical role in the systemic rethinking of responses to people in crisis
-  Value self-determination as a guiding ethical principle
-  Facilitate person-centered goal setting
-  Support many pathways to recovery, wellness, and meaningful living
-  Affect positive change in systems
-  Practice trauma-informed approaches in their peer relationships and workplaces
-  Create an environment of respect for their peers and those with lived experience
-  Communicate effectively with their peers, other team members, and clinicians

9

1. I understand that my primary responsibility is to help peers understand recovery and achieve their own recovery needs, wants and goals. I will be guided by the principle of self-determination for each peer.

2. I will conduct myself in a manner that fosters my own recovery, and I recognize the many ways in which I may influence peers and others in the community, as I serve as a role model.

3. I will be open to share with peers and coworkers my stories of hope and recovery and will likewise be able to identify and describe the supports that promote my recovery and resilience.

4. I have a duty to inform peers when first discussing confidentiality that intended serious harm to self or others cannot be kept confidential. I have a duty to accurately inform peers regarding the degree to which information will be shared with other team members, based on my agency policy and job description. I have a duty to inform appropriate staff members immediately about any intended serious harm to self or others or abuse from caregivers.

5. I will never intimidate, threaten, harass, unduly influence, physically force or restrain, verbally abuse, or make unwarranted promises of benefits to the peers I support.

6. I will not practice, condone, facilitate, or collaborate in any form of discrimination based on ethnicity, race, sex, sexual orientation, gender identity, age, religion, national origin, marital status, political belief, disability, or any other preference or personal characteristic, condition or state.

## CODE OF ETHICS

10

**7.** I will advocate with peers so that individuals may make their own decisions when partnering with professionals.

**8.** I will not engage in sexual or any form of intimate activities with any peers I am currently serving, and for a minimum of one year after my peer services end. I will also not enter dual relationships or commitments that may conflict with the interests of peers I support.

**9.** I will keep current with emerging knowledge relevant to recovery and openly share this knowledge with my coworkers and peers. I will refrain from sharing advice or opinions outside my scope of practice with peers.

**10.** I will utilize supervision and abide by the standards for supervision established by my agency. I will seek supervision to assist me in providing recovery-oriented services to peers.

**11.** I will not accept money or items of significant value from those I serve. I will not loan or give money to peers. I will follow agency guidelines.

**12.** I will protect the welfare of peers by ensuring that my conduct will not constitute physical or psychological abuse, neglect, or exploitation. I will always practice with trauma awareness.

**13.** I will, always, respect the rights, dignity, privacy, and confidentiality of those I support.

**14.** As a professional, if I find that my own recovery journey is compromised and interferes with my ability to provide support to my peers, I will engage in my own self-care and community care until such time that I am once again capable of providing professional care.

**CODE OF ETHICS**

11

**TRAITS**

Empathy	Adaptability	Communication Skills	Honesty
Resilience	Compassion	Flexibility	Non-judgemental
Professionalism	Trustworthiness	Sensitivity	Relatability

12



13

WHAT?	
<b>Peer Support Groups</b>	<b>Types</b>
<ul style="list-style-type: none"><li>• Share experiences, struggles, and challenges</li><li>• Offer advice to each other</li><li>• Learn coping strategies</li><li>• Develop skills to live more effectively in their communities</li><li>• Find a sense of worth and confidence</li><li>• Help troubleshoot problems</li></ul>	<ul style="list-style-type: none"><li>• One-to-one support, also called mentoring or befriending</li><li>• Online forums</li><li>• Community and school-based programs</li><li>• Informal drop-in centers</li><li>• Structured peer support programs</li><li>• Weekend camps</li><li>• Peer education and leadership programs</li></ul>

14

## PEER SUPPORT GROUPS

- Reduce Hospitalizations:** Studies have shown that individuals engaging in peer support can *experience a substantial decrease in the number of hospital admissions, particularly for mental health conditions.*
- Increased Treatment Engagement:** Peer support can encourage individuals to actively participate in outpatient therapy sessions, *leading to better treatment outcomes.*
- Improved Symptom Management:** Individuals often report a *reduction in the severity of symptoms* related to their condition, including depression, anxiety, and substance use, when involved in peer support groups.
- Enhanced Social Connection:** The sense of belonging and shared understanding within a peer group can *significantly improve social isolation* and overall well-being.
- Empowerment and Hope:** Access to peer support can *foster a sense of empowerment and hope* for recovery, motivating individuals to actively manage their conditions.

15

## EXAMPLES


Cancer	Student	Women's	Diabetes
Grief	Senior	Nurses	Men's
Divorce	Abuse	LGBTQIA+	Mental Health

16



17

## WHEN?




- How often the group will meet (weekly, biweekly, monthly)
- The duration of each meeting (1 or 2 hours in length)
- Time of day - consider the most appropriate time of day for peers
- Days of the week – weekday or weekend
- Availability of the venue

18



19

**WHERE?** 

**Consider:**

- The number of people attending the meeting
- Finding a central location, accessible by public transport with plenty of accessible parking
- A welcoming, quiet, clean and comfortable environment that allows for privacy
- Access for people with all levels of limb loss, consider prosthetic, manual and motorized wheelchair users
- A venue which provides good lighting, heating and cooling
- Evening or after-hours access if required, with safe access to parking before and after the meeting
- Cost of room hire
- A safe environment without physical hazards
- Access to accessible toilets and kitchen

20

## PLACES



21

**“ROCK BOTTOM  
BECAME THE SOLID FOUNDATION  
ON WHICH I REBUILT MY LIFE.”**

**J.K. ROWLING**



22

## WHY?

### Benefits of Peer Support

- Connection
- Understanding
- Coping strategies
- Perspectives
- Support



Anyone can benefit from a peer support group, *including* people who are dealing with anxiety, depression, stress, addiction, or other challenges.

23

A negative  
mind will never  
give you a  
positive life.

[www.LifeLessonsPage.com](http://www.LifeLessonsPage.com)

24

## HOW?



### Key elements to include:

- Greeting and introduction
- Group purpose
- Confidentiality guidelines
- Ground rules (optional)
- Open invitation to share

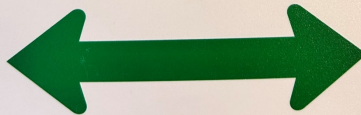
### Important considerations:

- Tailor to the group
- Positive tone
- Accessibility

25

**ALWAYS**

**BE HONEST  
BE KIND  
BE FRIENDLY**



**JUST HOW YOU WANT TO BE TREATED**

26

## -4 VOLUNTEERS NEEDED-



27

## BREAKOUT GROUPS



28

## DISCUSSION

**What worked well?**

**What was challenging?**

**What did you learn?**

***How do you feel?***

29

## Q & A



30

**You'd be surprised  
who's watching your  
journey and being  
inspired by it.  
Don't Quit.**

31

## REFERENCES

Wisconsin Peer Specialists

NAMI

Limbs 4 Life

Wisconsin Department of Health Services

Mental Health America

32

## CONTACT INFO

**Sammie Sackmann**

[ssackmann@milc-inc.org](mailto:ssackmann@milc-inc.org)

