



OPERATIONAL STRESS INJURY
SOCIAL SUPPORT

SOUTIEN SOCIAL
BLESSURES DE STRESS OPÉRATIONNEL

OSISS General Briefing



OSISS

(Operational Stress Injury Social Support)

Peer support to CAF, Veterans and families affected by OSI



Created in 2001 with 4 coordinators



Joint DND/VAC program



Family support began in 2005

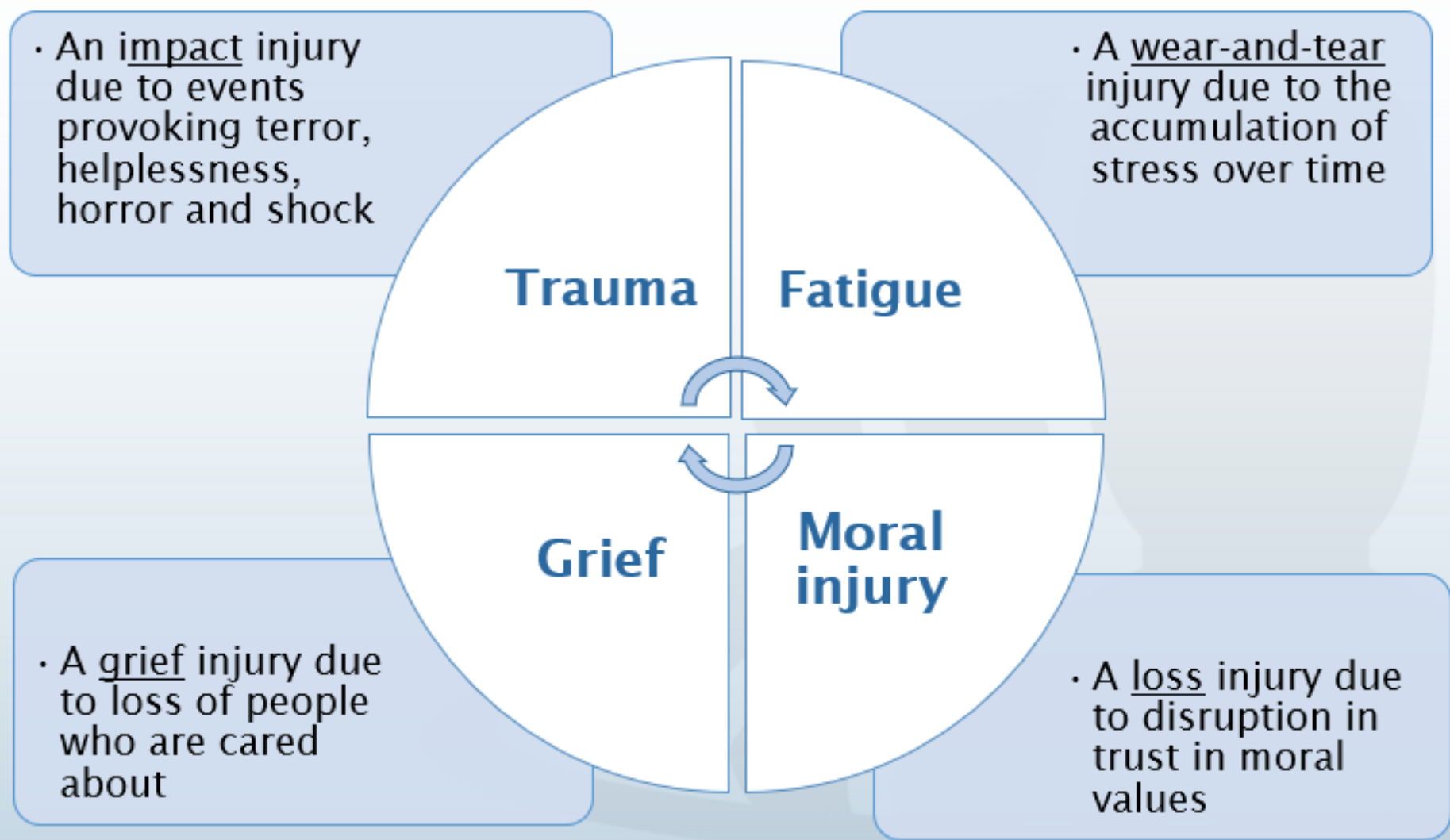


Almost 70 team members nationally



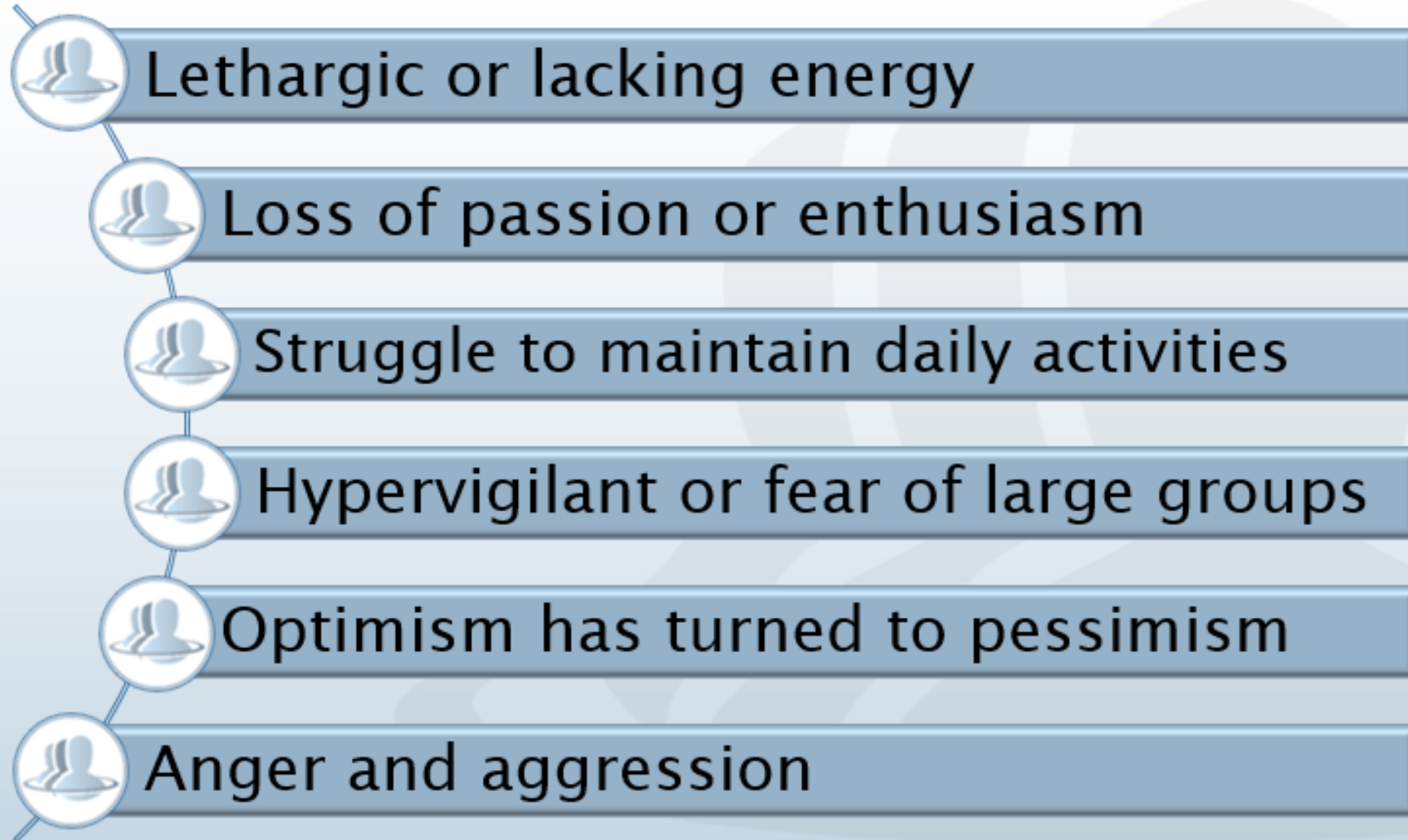
Supported by amazing, trained volunteers

POSSIBLE CONTRIBUTORS TO OSI



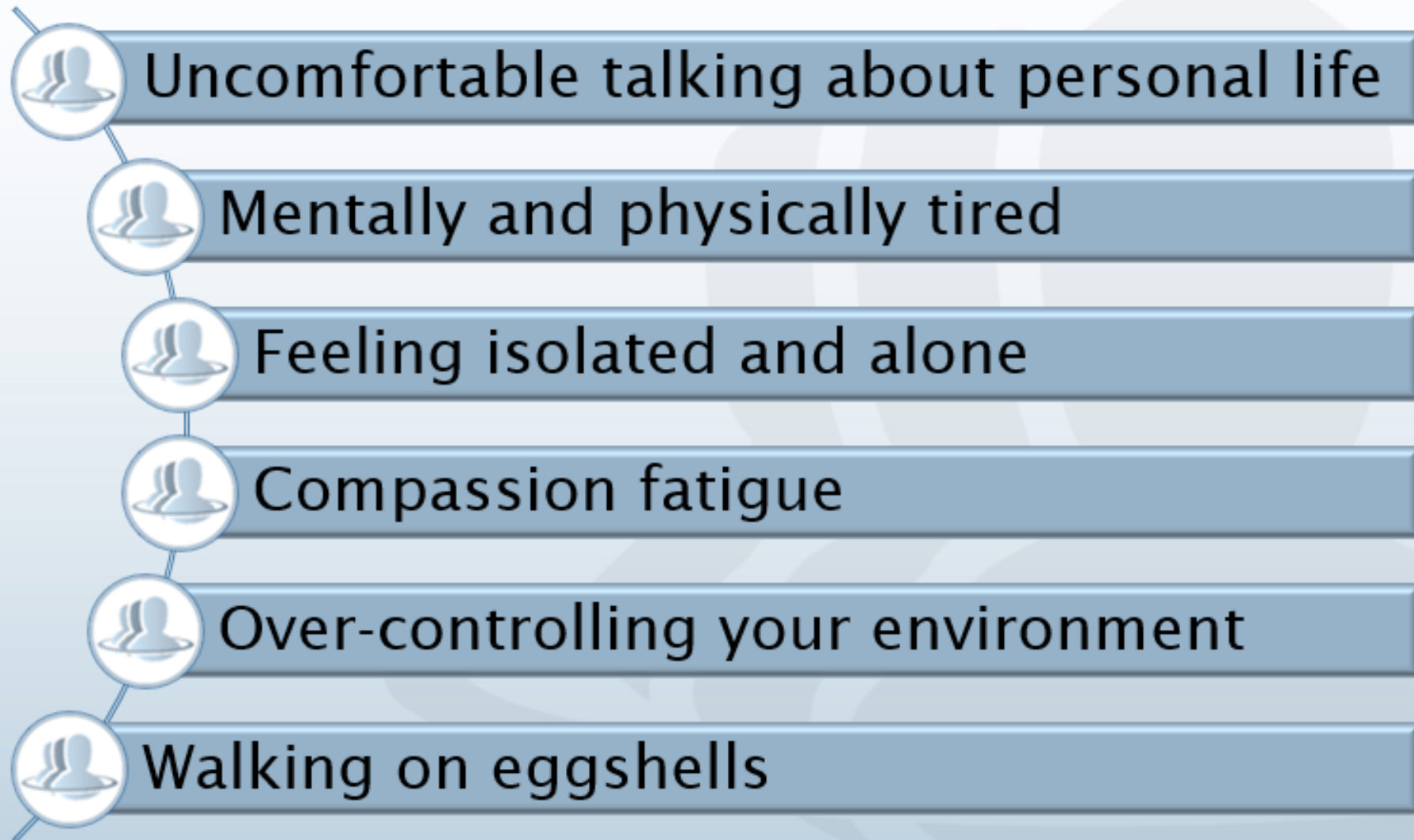
Adapted from Capt(N) Bill Nash USMC and
USN combat and operational stress control

POSSIBLE EXPERIENCES & BEHAVIOURS OF OSI



These are examples of some possible effects of living with OSI; some people may experience some, all or none of these.

POSSIBLE EXPERIENCES & BEHAVIOURAL IMPACT ON FAMILY MEMBERS



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WHAT WE DO AS COORDINATORS



One on One Support

- Connect with peers where they are comfortable in the community
- Listen with no judgement
- Suggest resources
- Share ideas on wellness and recovery



Group Support

- Facilitate social groups
- Share positive solutions with others
- Guest speakers on occasion



Volunteer Management

- Recruit, retain and manage peers from the program who are at a point in their recovery to “pay it forward”

The Peer Support Counsellor Trifecta

Why Peer Support as a Complement to MH Clinical Support, Works



Shared Lived Experience (SLE)

"Efficacy of any therapeutic intervention is improved when the therapeutic alliance between therapist and client is well established"

Dr Mary Jo Peebles

- **Trust**
- Cognitive Empathy
- You Are Not Alone
- Practical (without solutioning)
- Model good Salutogenics

Good Person

"The values of peer support are about being human."

Mental Health Commission of Canada

*"Peer Support is about Social Change"...***Intentional Peer Support .org**

- **Safe/Effective use of SLE**
- Compassionate Empathy
- Personal Traits – Boundaries, and Hope established

Current 'Barriers to Success' for implementation of this model: Discussion:

- No established formal Governance
- Limited established PD accreditation
- No agreed upon standards & definitions
- Acceptance and Integration by MH Clinicians
- Understanding of Peer Support
- Lack of people with all parts of the 'Peer Support Counsellor Trifecta' (advocacy at the appropriate level)

'As a Modality' - Professional

- Bridge Gap to Clinical Care
- Current Social Narratives/issues
- Relevance to being capable of support
- Attainable (ETB)

"Though comprehensive training takes time, it's important that peer workers have a good grasp of the organizational culture they are working with and the ability to assess risk and maintain boundaries." — **Evidence Network for Mental Health and Addictions (EENet)**

Education & Information