

How to Start an Informal Support Group or “Pod”

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Note: “Unit” is used to refer to departments, administrative groups, teams, offices or other organizational components of UNC.

COVID-19 In addition to exacerbation of pre-existing mood and anxiety disorders and likely PTSD among those traumatized through the pandemic, as well as increased domestic violence and suicide, psychological distress is widespread and will persist far beyond the end of viral spread. Psychological burden, however, is too often overlooked.

Background. Much evidence^{1,2} shows the value of peer support in prevention and management of acute and chronic conditions including mental health and in coping with everyday or major stressors. It can be quite simple, just being able to talk with someone about what’s troubling without feeling judged.³ It isn’t necessary that everyone become a denizen of support groups, but it would be very helpful if we could achieve the objective that:

No student, staff member, or faculty feel without someone to whom to turn in the stress of COVID-19.

Mutual Support Activities and Groups or “Support Pods” – Units may already have groups of their members who meet and can provide support to each other. These should be encouraged. In their absence, “Support Pods” can be developed. These can be defined administratively (e.g., department administrative staff) or encouraged among naturally occurring groups (e.g., Moms’ Pod). Pod members meet through their choice of channels (e.g., GroupMe).

Pods may choose to focus on concrete issues or concerns they share (e.g., setting departmental plans for courses to be maintained during the pandemic, studying for comps, meeting university deadlines for budgeting and financial reporting) or may focus on non-business, social discussions (e.g., Netflix best pics). Some may also choose a shared activity such as organizing resources.

Key Strategies – Several strategies have guided efforts to date and will be helpful moving forward.

- *No reinvented wheels* – We recognize many opportunities for support in the University such as Academic Houses in the Pharmacy and Dental Schools, buddy systems for new graduate students, writing groups for early career faculty, the dyadic support system in the Department of Pediatrics, or TEAM ADVANCE mentoring in the Center for Faculty Excellence. The objective is not to replace but to supplement and grow such resources and to promote their enhancement such as through sharing as part of the Carolina Peer Support Collaborative, described below.
- *Focus on stress and distress as common experiences, not clinical entities* – Amidst almost universal stress and distress, the availability of support is good for all of us, not only those who may have had some mental health problems before COVID. Creating support for all has the added advantage of reducing stigma while also expanding the resources and their availability for those who may be most distressed.

How To Start a Pod or Group – As an individual, you can start a mutual support pod in your group or department or other unit.

- If you are in a leadership role, you can suggest development of one or several pods for different groups in your unit.
- If you are not in a leadership role, simply reaching out to some colleagues with whom you feel comfortable can be a way to start. Call them or send them an email and suggest that you all get together just to talk about how things are going, what concerns they share, what they may have found helpful during this stressful time.
- Normally, we may feel hesitant to suggest getting together just, in essence, to support each other. Many have found, however, that there is sufficient awareness of the stress we are all under that folks are willing to come forward in response to such suggestions.
- Keep it simple. Remember the objective. It is not the intent to explore each other's childhoods, but just to create a sense of connection or, as with the objective above, just to create a sense that we all have someone to whom we can turn.
- Most often, pods will benefit from folks having something in common. That can be categories into which we fall, e.g., doctoral students, early career faculty, but it can also be other things, "Mom's Pod," ophthalmology pizza group, soccer club.
- In the current crisis and with related economic uncertainties, privacy and confidentiality are key concerns. This may especially be a current concern among administrative staff in some units. This suggests sensitivity to defining a group so that members feel comfortable *within* it. It may also be useful to set some ground rules or agreements about what can be discussed, perhaps what cannot be discussed, what kinds of advice are to be shared, and "what is said in the pod stays in the pod."
- It might also be helpful to discuss expectations for what members will do if they become concerned about one another. If someone seems like they may be struggling, e.g., missing several meetings or being unusually quiet, one or two members might reach out to her or him. This however might depend very much on the nature of the pod and the preferences of its members.
- Similarly, the pod might discuss folks who are not members but about whom there is some concern. Reaching out may be appropriate. Again, during this stressful time, people seem to be more open to others' expressions of concern than they may be in "normal" circumstances.
- Start with simple activities, e.g., a Zoom meet, and then see what they may lead to, e.g., discussion of a book all have read or a Netflix series all are watching, a shared project, a group happy hour.
- Look around and see if there are others who might fit well with the group and join in. Remember the objective, nobody be without someone to whom to turn.
- You might volunteer to make and circulate the Zoom appointments for meetings or other necessary bits of coordination. Or you might suggest that the group figure out a way to share these.

Carolina Peer Support Collaborative A group of staff, students, and faculty interested in promoting these sorts of programs has been meeting since April, naming the aggregate of all their activities the *Carolina Peer Support Collaborative*. Included in the group are representatives from the College and Graduate Schools' Deans' offices, Carolina Black Caucus, Employee Forum, Student Government, the Center for Faculty Excellence, and the Schools of Dentistry, Medicine, Nursing, Pharmacy, Public Health, and Social Work. Members of the Collaborative share protocols and resources through a [Microsoft Teams page](#).

The [Peers for Progress](#) website also includes a variety of webinars and resources for peer support amidst COVID-19.

References

1. Perry HB, Zulliger R, Rogers MM. Community health workers in low-, middle-, and high-income countries: an overview of their history, recent evolution, and current effectiveness. *Annu Rev Public Health*. 2014;35:399-421.
2. Fisher EB, Ballesteros J, Bhushan N, et al. Key Features Of Peer Support In Chronic Disease Prevention And Management. *Health Aff (Millwood)*. 2015;34(9):1523-1530.
3. Fisher EB, Tang PY, Evans M, et al. The Fundamental Value of Presence in Peer and Mutual Support: Observations from Telephone Support for High Risk Groups. *The Global Journal of Community Psychology Practice*. 2020;11(2).