

## CLF Peer Support Volunteer Training & Crisis Response Guide

Thank you for your commitment to the CLF Peer Support Connection Program and becoming a Peer Support Volunteer! In this role, you will have the opportunity to help patients and caregivers navigate the many challenges posed by concussion, persistent post-concussion symptoms (PPCS), also known as Post-Concussion Syndrome (PCS), and suspected Chronic Traumatic Encephalopathy (CTE).

Please familiarize yourself with these important topics before your first connection:

1. How to Be a Good Peer Support Volunteer
2. Partner Engagement & Connection
3. Understanding Concussion, PCS, and CTE
4. Responding to Emotional Crisis, Suicide Risk, and Emergency Situations
5. Recognizing and Reporting Child Abuse or Neglect
6. Peer Support Volunteer Self-Care

Our team relies on your self-reported preferences and life experiences to determine what type of peer support match will be best for you and a potential Peer Support Partner. Before moving forward with a match, the Concussion Legacy Foundation Canada will always check with you to confirm your availability and level of comfort with the details of a potential match.

### How to Be a Good Peer Support Volunteer

This section provides introductory concepts to help you excel as a CLF Peer Support Volunteer. For more information, please visit CLF's [Peer Support Volunteer Resource Hub](#), which offers additional training, videos, and answers to frequently asked questions.

#### ***Values & Expectations***

As a Peer Support Volunteer, you are part of a dedicated community working to support individuals and families navigating the outcomes of brain trauma. This community thrives on mutual respect, shared learning, and empathy.

Our values guide how we support Partners and how we engage with one another:

- Respect for different opinions, experiences, identities, and perspectives
- Compassion in communication and listening
- Honesty and openness in sharing lived experiences appropriately
- Curiosity and humility when engaging with others' experiences
- Commitment to ongoing learning and growth

Strive to maintain a supportive environment by upholding the following expectations:

- Listen actively with empathy and allow space for Partner storytelling

- Respond with encouragement, compassion, and curiosity and without judgment, criticism, and unsolicited advice
- Respect personal boundaries and maintain confidentiality
- Lead by example to foster a positive, supportive, and inclusive environment

### ***Know the Role***

A peer-to-peer connection is a supportive relationship between individuals who have lived through similar experiences. These relationships are particularly important during times of stress or uncertainty. Peer support reduces feelings of isolation and uncertainty through:

- Understanding, empathy, and hope
- Normalization of difficult experiences
- Sense of belonging
- Information, education, and empowerment

As a Peer Support Volunteer, you provide social and emotional connection for someone navigating struggles you understand better than the average person. Your role entails:

- Take the lead on outreach and scheduling conversations
- Stay in touch virtually (phone, video, text, email)
- Meet your Partner “where they are” and help them feel heard
- Listen and share experiences
- Talk through problems together
- Brainstorm ways to use resources and make progress

Peer-to-peer connections can be a great complement to medical and mental health support; however, these relationships are not a replacement for professional care. Be sure to understand the key differences outlined in this PSV training supplement: [How Peer Support Differs from Professional Mental Health Care](#)

### ***Listen, Ask Questions, & Share Experiences***

Build a relationship with your Peer Support Partner by looking for opportunities to make them feel heard and understood. You can start by simply listening and asking questions. Try to ask questions that will help you gain a deeper understanding of your Partner’s unique struggles. Then, consider sharing something about your own life experiences you think they might find helpful or relatable.

Here are a few examples of questions to ask:

- Can you tell me more about what you’ve been through?
- What is the hardest part of this experience for you right now?
- What has been the most difficult part of this experience overall?
- What do you feel is most important for me to know about your journey?
- What would help you feel more supported?
- What helps you find small moments of joy?
- Would it be helpful if I shared something similar from my own experience?
- Are you able to talk with friends or family about your feelings?

- Do you feel your healthcare providers understand what you're going through?
- How would you describe your feelings about what you're experiencing?
- Would you like to reconnect with the [HelpLine](#) team for additional resources?

### ***Build Momentum***

More than anything else, Peer Support Volunteers should convey optimism that a Partner can and will find a strategy to help manage their own or their loved one's symptoms.

Recovering from a concussion, navigating PCS, navigating suspected CTE, or supporting a loved one can be a daunting, frustrating, and exhausting experience. Your Partner may not know what options are available; they may feel like they have tried every possible treatment; or they may feel like they are on the right track but not improving quickly enough.

Peer Support Volunteers can help by listening with sincerity. Then, when it feels appropriate, suggest small ways to build momentum. Examples of activities that build momentum include:

- Journal thoughts and feelings
- Discuss goals while staying flexible in the face of setbacks
- Commit to lifestyle changes
- Track daily symptom severity
- Acknowledge and celebrate progress out loud

The road to recovery or symptom management often contains false starts and setbacks that must be handled with patience and compassion. It is helpful to acknowledge hardship and validate difficult experiences; however, try to help your Partner remain positive. You can point out that bad days, weeks, and months are not uncommon, and it is normal to take a few steps back before moving forward.

### ***Avoid Negativity or Blind Positivity***

You can be an active listener by asking questions and providing constructive feedback. Do your best to avoid negative feedback that might grind the momentum of a conversation to a halt. Be mindful that some feedback can create negative feelings, such as:

- Criticism of past mistakes or missed opportunities
- Sarcasm with unclear meaning (even if intended as humour)
- Pessimistic predictions about the future

On the opposite end of the spectrum, be mindful not to unintentionally invalidate the challenges your Partner is experiencing with "blind" or uncompromising positivity. While it is important to convey there are real, evidence-based reasons to be optimistic about the future, try to remember that concussion, PCS, or suspected CTE can be extremely daunting for patients and caregivers. In these situations, an effective approach can look like:

- Acknowledge the difficulties your Partner is experiencing are real and valid
- Show that you understand, at least in part, what they're going through
- Emphasize the importance of persistence, optimism, and ongoing professional support
- Express your belief that progress is possible or that quality of life can improve

## ***Meet Trauma with Compassion***

Asking questions is a great way to connect with your Partner; however, be mindful that the questions you ask may bring up traumatic experiences that are difficult for them to navigate and retell. Be patient, sympathetic, and flexible, leaving plenty of space for your Partner to work through these difficult emotions.

## **Partner Engagement & Connection**

Peer Support Volunteers play a unique role by offering connection through lived experience, not professional expertise. Your role is to listen, share, and walk alongside a Partner, while leaving medical, legal, and financial matters to licensed professionals. Boundaries protect you and your Partner, build trust, and keep the connection focused on what peer support does best.

### ***Within the Scope of Support***

- Share personal experiences and stories
- Listen with empathy in a judgment-free manner
- Strategize together, build rapport, and explore new ideas
- Suggest resources that have helped you
- Communicate virtually (calls, texts, audio, or video messages)

### ***Outside the Scope of Support***

- Give medical opinions, diagnoses, or advice
- Coordinate care or perform in-depth resource navigation
- Provide legal or financial advice
- Offer financial support of any kind
- Meet up in person

If a Partner asks for support outside your scope, gently reaffirm your role as a Peer Support Volunteer and let them know the Concussion Legacy Foundation Canada can connect them with additional resources. Reach out to our team if you need support in re-establishing boundaries.

### ***Connection Summaries***

After a phone call, video chat, text, or email, you are welcome to share updates with CLF about how the connection went and how your Partner seems to be doing. Connection summaries are not mandatory. If you choose, you can send updates to our team at [support@concussionfoundation.ca](mailto:support@concussionfoundation.ca).

This is a great time to highlight the Partner's progress or major challenges. Please also use this as an opportunity to inform CLF if a Partner requests your assistance with something that falls outside the scope of support.

## Understanding Concussion, PCS, & CTE

The resources below include educational videos, webpages, and webinar recordings with important foundational knowledge. They also provide more information on how to help patients and caregivers advocate for themselves. Please review them closely to understand the differences between concussion, PCS, and suspected CTE.

### ***Concussion***

- [Concussion Guidebook](#)
- [What is a Concussion?](#)
- [What to do After a Concussion](#)
- [Concussion Resources](#)
- **Video:** [What happens when you have a concussion?](#)

### ***Post-Concussion Syndrome (PCS)***

- [Post-Concussion Guidebook](#)
- [What is PCS?](#)
- [PCS Treatments](#)
- [Coping with PCS](#)
- [PCS Resources](#)

### ***Chronic Trauma Encephalopathy (CTE)***

- [CTE Guidebook](#)
- [What is CTE?](#)
- [Living with Suspected CTE](#)
- [Caregiving for CTE](#)
- [Suspected CTE Treatment Methods](#)
- [CTE Resources](#)

## Responding to Emotional Crisis & Emergency Situations

A common symptom of traumatic brain injury is difficulty regulating emotions. It is important for Volunteers and Partners to know this is common. Therapeutic interventions such as Cognitive Behavioral Therapy (CBT) have been shown to improve these symptoms. Look for opportunities to communicate the treatment information on our [PCS Treatments](#) and [Living with CTE](#) pages.

### ***Crisis Mitigation***

Concussion Legacy Foundation Canada takes steps to ensure patients or caregivers who demonstrate a high risk for crisis connect with risk mitigation resources before being onboarded as Peer Support Partners and matched with a Peer Support Volunteer. If a prospective participant appears to be in active crisis or at a very high risk for imminent crisis, Concussion Legacy Foundation Canada staff prioritizes connection with professional medical and mental healthcare providers.

While crisis situations and escalations are rare, Peer Support Volunteers should recognize the warning signs of suicide, emotional crisis, and life-threatening situations. Below we outline these signs and when to notify the Concussion Legacy Foundation Canada Peer Support lead by email and telephone if an emergency arises. The Concussion Legacy Foundation Canada Peer Support lead will take the lead in crisis response escalation.

## ***Recognizing Crisis Situations***

In rare circumstances, a Partner may experience an emotional crisis that escalates to the level of imminent suicide risk or other life-threatening situations. While we do not consider this to be a common part of the Peer Support Volunteer experience, the connection between brain trauma and emotional crisis is now well documented and warrants preparation.

[Research has shown](#) that patients diagnosed with concussion had double the risk of suicide, a higher risk of suicide attempts, and a higher risk for suicidal thoughts than people without brain injuries.

Peer Support Volunteers must know how to recognize signs of an emotional crisis and articulate concerns to peer support staff for possible escalation.

**Video:** [Suicidality and Crisis Training](#) - *Dr. Ciara Dockery, former director of the NFL Life Line, presents on the factors that contribute to suicidality and severe emotional crisis. The goal of this webinar is to understand how to respond if suicide comes up in conversation.*

**Video:** [Helping Concussion and Suspected CTE Patients in Crisis](#) - *This webinar is helpful for understanding a concussion or suspected CTE patient's perspective. It is a good dive into what patients go through and how friends, loved ones, and Peer Support Volunteers can provide the support and recommendations they need to overcome the tough times.*

## ***Definition of Crisis***

We define "crisis" as a situation where it becomes clear a CLF Partner's life is in immediate danger. Some examples of life-threatening situations that a Peer Support Volunteer may encounter with a Partner include:

- Active planning and intention to die by suicide
- An attempt at suicide
- Intimate partner violence or domestic violence
- Drug overdose or alcohol abuse
- Driving while intoxicated

A Partner may show risk factors for crisis that are important to recognize but are not necessarily indicative of immediate danger, such as:

- Thoughts of suicide with no intent to act
- Depression, anxiety, increased sadness, or social isolation
- Substance Use Disorder
- Difficulty in personal relationships

## ***What to Do if a Partner Shows Signs of a Crisis***

If you believe or have reason to suspect your Partner is in immediate danger, notify staff immediately by emailing [support@concussionfoundation.ca](mailto:support@concussionfoundation.ca).

While the Concussion Legacy Foundation Canada is not equipped to provide crisis intervention services, our team responds quickly to assess risk and provide a connection to appropriate crisis response experts.

## ***Calling Emergency Services / 911***

In most situations, if you suspect a Partner is in crisis, notify Concussion Legacy Foundation Canada immediately at [support@concussionfoundation.ca](mailto:support@concussionfoundation.ca).

Contact emergency services before CLF if either of the following is true:

1. The Partner has clearly confirmed in words or actions that their life is in immediate and certain danger, you know their exact location, and any delay could be consequential.
2. The Partner gives consent for emergency services to be called.

For all other situations, CLF staff will work with you to activate the crisis response protocol and work with you until the situation has stabilized.

## ***Crisis Response Protocol***

### ***Step 1 – Direct Contact & Resource Distribution***

The Concussion Legacy Foundation Canada immediately and directly contacts the Partner experiencing a crisis. They may be in crisis themselves or a caregiver for the patient experiencing a crisis. The coordinator provides the following resources for assistance:

#### **Crisis De-escalation Resources**

Resource	Phone Number
<a href="#">Suicide Crisis Helpline</a>	Dial 988; Text 988
<a href="#">Suicide.ca (Quebec)</a>	1-866-277-3553; Text 535353
Veteran, military, and RCMP crisis line	1-800-268-7708
Indigenous crisis line - <a href="#">Hope for Wellness Helpline</a>	1-855-242-3310
ShelterSafe Domestic Violence Crisis Lines	<a href="#">Provincial/Territorial Crisis Lines</a>
Canadian Centre on Substance Use and Addiction Helplines	<a href="#">Addiction Treatment Helplines</a>
Child Abuse and Neglect	<a href="#">Provincial/Territorial Assistance</a>

#### **911/Emergency Services**

- If the Concussion Legacy Foundation Canada's crisis response team believes a crisis has escalated to an attempt at suicide or a life-threatening situation, an emergency response team may be sent to the client's location.

#### **Mobile Crisis Intervention Team**

- Mobile Crisis Intervention Teams affiliated with some local law enforcement or independent organizations mobilize trained mental health counsellors for crisis management and de-escalation. This is a good option when an active suicide attempt or life-threatening situation is not suspected. Concussion Legacy Foundation Canada's crisis response team will work to identify the nearest team.

### **IPV/DV Agencies & Organizations**

- If a Partner's life is not in immediate danger but is at risk from Intimate Partner Violence (IPV) or Domestic Violence (DV), Concussion Legacy Foundation Canada staff will identify and provide local resources such as emergency shelters, local hotlines, and crisis assistance.

### **Local Support and Guidance**

#### **Canadian Mental Health Association ([CMHA](#))**

- This resource provides guidance and support at a local level. This resource is best for building a plan once initial progress is made. CMHA can assist with things like finding local mental health support and programs.

### ***Step 2 – Peer Support Volunteer/CLF Director Debrief***

Once direct contact is made with the Partner and the situation has been deescalated, Peer Support Volunteers are asked to be available for a phone conversation about the emergency response.

This conversation functions as an information-gathering session and as an opportunity to discuss the next steps. After this conversation, the Peer Support Volunteer and Partner connection will be paused and placed on hold.

### ***Step 3 – Partner/CLF Director Follow Up***

The Concussion Legacy Foundation Canada Peer Support lead will follow up with the Partner to provide support and guidance and establish the next steps.

### ***Step 4 – Follow-Up After Crisis & Resumption of Peer Support Relationship***

Perhaps the most impactful action a Peer Support Volunteer can take to contribute to a Partner's recovery from an emotional crisis is simply following up. [Studies have shown](#) that following up with a patient who has been discharged after an emotional crisis or attempt at suicide dramatically reduces the risk of a repeat crisis.

Once the Concussion Legacy Foundation Canada staff has intervened to stabilize the situation and share updates with you, following up via text or phone shows the Partner that you are invested in their well-being, you care how they are doing, and you are available to help them see the next step in their recovery. In short, you provide hope.

When in doubt, message our team: [support@concussionfoundation.ca](mailto:support@concussionfoundation.ca).

The Peer Support Volunteer/Partner relationship can return to independent connection when:

- The Partner in crisis has received a medical evaluation.

- The Partner reports having regular appointments with a mental health care provider or a clear plan to establish regular appointments.
- The Partner has spoken with the Concussion Legacy Foundation Canada Peer Support Coordinator to debrief and discuss the next steps.
- The Partner confirms a desire to resume the Peer Support Connection engagement.
- The Peer Support Volunteer confirms a desire to continue the Peer Support Connection engagement.

## **Recognizing & Reporting Child Abuse or Neglect**

In rare circumstances, a Peer Support Volunteer may recognize the signs of child abuse or neglect when interacting with a Partner.

The CLF Peer Support Connection Program policy is to adhere to provincial and territorial child protection legislation and policies, including provincial and territorial requirements for reporting known or suspected instances of child abuse or neglect ([found here](#)).

### ***Definition of Child Abuse or Neglect***

At the national level, the Canadian Child Welfare Research Portal has defined child abuse and neglect as “acts of commission or omission by a parent or other caregiver that result in harm, potential for harm, or threat of harm to a child. The five primary forms of maltreatment are physical abuse, sexual abuse, physical neglect, emotional maltreatment, and exposure to domestic violence.”

### ***What to Do if You Suspect Child Abuse or Neglect***

The first step a Peer Support Volunteer should take if they suspect an underage Partner is the victim of abuse or neglect is to notify Concussion Legacy Foundation Canada at [support@concussionfoundation.ca](mailto:support@concussionfoundation.ca).

CLF will ask you to provide more details of the circumstance, at which point CLF staff will escalate and may activate CLF’s mandatory reporting of child abuse protocol. If necessary, the Concussion Legacy Foundation Canada staff will work with the Peer Support Volunteer to report the details to the appropriate [provincial or territorial child protective services](#).

### ***Recognizing Child Abuse or Neglect***

Review the warning signs of abuse and neglect compiled by the [Mayo Clinic](#). These signs warrant discussion with the Concussion Legacy Foundation Canada staff. For more information, extensive resources for the identification of child abuse or neglect are listed on the [Children First Canada](#) website.

The presence of warning signs may not necessarily mean that a child is being abused. Nonetheless, report warning signs to the CLF staff via email as soon as they are recognized. For more information, read our [PSV Child Safeguarding Guidelines FAQs](#).

## Peer Support Volunteer Self-Care

Remember that **your health is also a priority**. Helping another person navigate physical and mental health struggles can take a toll on you. Please communicate with our team if you feel overwhelmed or under-supported. We are here for you as well.

One great way to stay in touch with your physical and mental health is to adopt and track self-care habits. Try this [Self-Care Assessment Worksheet](#) to start mapping out a self-care routine.

Another great self-care option is meditation and mindfulness. Legacy Family Community Member Dr. Shannon Albarelli led a session for Concussion Legacy Foundation Canada that you can [watch here](#).

### ***Mental Health Support***

Consulting with a trained mental health professional, such as a psychologist or psychiatrist, is a great way to enhance self-care.

You can search for a mental health professional by location or particular issues you would like to discuss and covered by your insurance with [Psychology Today's Search Tool](#). Alternatively, our team is available to provide confidential support through the [HelpLine](#).

## Conclusion

This role offers a unique opportunity to connect with people who are living with the effects of brain trauma and guide them toward better outcomes.

You will make an enormous difference in a Partner's life just by being there and helping them feel heard. Time and again, patients and caregivers have reported that connecting with a Peer Support Volunteer who understood their struggle made a huge difference.

Concussion Legacy Foundation Canada is grateful for your commitment to improving the lives of individuals navigating the effects of brain trauma. Thank you!

### ***Program Contacts***

<b>Peer Support Team</b>	<a href="mailto:support@concussionfoundation.ca">support@concussionfoundation.ca</a>
Taya Latulippe – Director	<a href="mailto:latulippe@concussionfoundation.ca">latulippe@concussionfoundation.ca</a>