Report on Peer Support
UNC-Chapel Hill Student Groups and UNC System Wellness Programs

JULY 2020
HANNAH BARKER
ACKNOWLEDGEMENTS

Special acknowledgement and thanks to all UNC-Chapel Hill interview participants, the UNC-Chapel Hill Mental Health Coalition, and interview participants from North Carolina State, Fayetteville State University, and Appalachian State University. This report would not be possible without the help of Emma Caponigro and the members of the UNC-Chapel Hill Mental Health Coalition for providing a space for introductions to various student groups addressing mental health on campus. Thanks to the Peers for Progress team at the Gillings School of Global Public Health at UNC-Chapel Hill, consisting of Dr. Ed Fisher; Patrick Tang, MPH; and Samantha Luu, MPH for their continued feedback and contributions to this research and report. Finally, thank you to the UNC-Chapel Hill student body for your work and interest in the realm of mental health on campus. This work was supported by the Department of Health Behavior and Peers for Progress in the Gillings School of Global Public Health.
# TABLE OF CONTENTS

Executive Summary .................................................. 1

Introduction ............................................................. 3

Interview Process ....................................................... 5

Findings ........................................................................ 7
  Challenges and Barriers .................................................. 7
  Strengths of Existing Programming ................................. 8
  Group Needs and Desired Resources ............................... 9
  Thoughts on Collaboration ........................................... 11
  Lessons from Peer Support on Other Campuses ............... 11
  Future Plans and Goals ................................................. 12

Report Limitations ....................................................... 13

Implications and Recommendations ................................. 14

Table 1 ....................................................................... 16

Appendices ................................................................ 18
Background

Peer support was emphasized as a strategy to improve student mental health in the UNC-Chapel Hill 2019 Report of the Mental Health Task Force. Great value can be gained by founding and maintaining these groups and maximizing their potential to address campus mental health at the ground-level. Peer support groups create a culture of mutuality and community, bringing us a few steps closer to a mentally healthy campus. Furthermore, peer support advances two of UNC-Chapel Hill’s strategic initiatives:

- Build our community together: Rich in backgrounds and experiences – where all work together toward a common goal of creating a more diverse, equitable and inclusive community
- Strengthen student success: Prepare students for success by providing a student-centered experience, learning adapted to contemporary needs and access to resources

The current report sought to 1) identify sources of peer support within student organizations at UNC-Chapel Hill and other campuses within the UNC system, 2) assess strengths and needs of those organizations, and 3) offer recommendations for expanding and improving peer support for mental health at UNC-Chapel Hill. The goal of providing this information is to increase the capacity of student groups to collaborate, enhance their programs, and gain greater recognition across campus.

Sample and Process

Student groups and representatives from other campuses within the UNC system were interviewed about their peer support activities and their needs and wants for future services. 13 key informant interviews were conducted between January and March of 2020, and participants were recruited from student groups and organizations whose mission directly or indirectly addressed mental health at UNC-Chapel Hill.

Findings

Interview participants expressed passion and care for addressing mental health and helping their fellow students. There was great variability in the nature of the needs identified and the structure of support services offered. Interview findings were summarized into six main categories.

- Common challenges and barriers: Challenges include need for additional dedicated peer support leadership; difficulty with participant recruitment and retention in clubs and programs; competition between groups providing similar services and programming; difficulty “standing out” to students within messaging across campus; and the challenge of intergroup collaboration failures where work was not shared equally.
- Strengths of existing programming: Strengths include maintaining consistent attendance at meetings; group commitment to seeking the stigma of mental health; openness of participants to peer support services and programming; existing support networks outside of mental-health specific environments; development of resources for online navigation; existing learning and collaboration in the Mental Health Coalition; and an overwhelming desire to show each other kindness and improve student wellbeing.
• **Resource needs:**
  
  o Skills enhancement, program improvement, and community-specific needs: For example, desire for training for more “awareness” of mental health, tailoring of programs to strengths and challenges of specific communities, e.g., LGBTQ students, African American students.
  
  o Coordination and communication: For example, wider knowledge and awareness of available campus resources within groups.
  
  o Campus-oriented improvements: For example, culturally representative providers at UNC-Chapel Hill’s Counseling and Psychological Services.

• **Thoughts on collaboration:** Groups are open to collaboration and learning from other groups currently offering peer support.

• **Lessons from programs on other campuses:** Wellness programs within the UNC system have a wide breadth of peer coaching topics including finances, school success, and physical wellbeing, all of which are tied to students’ overall mental health; they offer the benefit of sharing lessons learned/successes with emerging programs.

• **Future plans and goals:** Existing groups seek to expand the impact and capacity of their programs to reach more students; a variety of groups desire to collaborate with other campus groups; groups strive to develop more infrastructure for mental health support; emerging technology to ease access; and need for expansion of leadership to enhance succession planning and program sustainability.

**Implications**

Based on these findings, the University has a clear opportunity to capitalize on this information to support student groups and peer support initiatives. The report concludes by outlining key recommendations including: increased funding, improved linkages to CAPS, workshops and training, collaboration between school administration and student groups, and adaptation of programs to serve unique COVID-19 concerns and needs.
INTRODUCTION

Project Background

The Report of the Mental Health Task Force published in April 2019\(^1\) encouraged UNC-Chapel Hill to, “Increase resources for programs focused on peer-to-peer support, non-crisis support and discussion.”\(^1\) This current report sought to survey current peer support services and activities on campus especially as they relate to the concerns Section 3 of the Mental Health Task Force Report detailed.

Qualitative interviews focused on the types of resources needed for programs offering peer support, as well as the breadth of these programs. Speaking with representatives from these groups afforded the opportunity to understand their future goals while identifying needed resources to optimize peer support to students. UNC-Chapel Hill is a university with over 800 student group organizations, and many other structures lending themselves to peer support. As such, there is ample opportunity to expand and strengthen existing programs and efforts. In doing so, the goal is to add to and improve existing infrastructure for mental health on campus.

Rationale

One of the identified “overarching challenges” in the Report of Mental Health Task Force included the observation that “the University is currently disconnected from its own grassroots initiatives.”\(^1\) UNC-Chapel Hill student groups, the primary focus of these interviews, encompass some of these grassroots initiatives. This report provides an opportunity for student groups to voice their needs and desires to the formal UNC-Chapel Hill administrative structure. The goal of providing this information is to increase the capacity of student groups to collaborate, receive support from administration, and to meet or exceed future programmatic goals.

Student mental health is a serious and immediate concern to the University. Data indicate high rates of hopelessness, anxiety, depression, suicidal ideation, and other mental health concerns in undergraduate, professional and graduate student populations both at UNC-Chapel Hill and across the nation.\(^1\) This growing need is compounded by the current distancing measures in place to protect against the spread of COVID-19.

---

\(^1\) UNC-Chapel Hill Mental Health Task Force Report | April 2019
Peer support is an evidence-based intervention strategy for improving mental health outcomes, such as decreasing loneliness, improving disease management, and improving daily functioning.\textsuperscript{2,3} It is currently utilized by a number of student groups at UNC-Chapel Hill and throughout UNC system campuses. To alleviate an increasing burden on campus counseling centers, mental health infrastructure can be expanded and improved through peer support initiatives. Grassroots efforts by student groups to provide peer support and a safe place for expressing emotion improves UNC-Chapel Hill’s mental health infrastructure.

**Definition of Peer Support**

This project used a broad definition of peer support, which includes but is not limited to support between students with shared lived experience. Organized, planned programs may deliver peer support using dyadic pairs (mutual support), trained peers helping students one-on-one, and group-based support. Beyond programs and groups identified as peer support, it can also present in networks and groups of people who share activities and space for discussion without predetermined agendas or goals. Indeed, peer support is integrated into most socially-oriented groups on the UNC-Chapel Hill campus, such as student-run clubs, common interest groups, resident halls, club sports, and fraternities/sororities.
INTERVIEW PROCESS

Interview Participants

Key Informant Interviews (KIIs) included participants from student groups at UNC-Chapel Hill focused on mental health, representatives from campus Greek life and club sports, and staff from three other NC universities with peer support-based wellness programs. Approaches to support ranged from offering “motivational coaching,” to weekly support groups, to online peer support. Groups often targeted specific communities of students on campus (e.g., students dealing with body image or food-related challenges) and their unique mental health needs. Common activities for the groups included: weekly or bi-weekly in-person meetings; educational or advocacy-based events; on-campus recruiting and representation; and email updates to members. Many groups expressed a desire to expand their programming, and were working to increase membership.

Interview participants included leadership from the following organizations:

- Peer-Based Support Network
- OCEANS
- Buddy Project
- I Am Shakti
- Sexuality and Gender Alliance
- Mind Above Matter
- We Wear the Mask
- Embody Carolina
- UNC-Chapel Hill club soccer
- UNC-Chapel Hill Greek life

Additional interview participants outside of UNC-Chapel Hill included staff from Fayetteville State University, Appalachian State University, and North Carolina State University who run wellness programs on their campuses. See Table 1 at the end of the report for descriptions of student groups and interview participants.

Methods

A structured interview guide was prepared ahead of interviewing and reviewed by the Peers for Progress team. The guide was iteratively edited over the course of the semester based on question repetition and areas for expansion (see Appendix A).

Key Informant Interview (KII) participants were selected and contacted through purposive sampling. Interview participants were initially contacted for recruitment via email. For those participants that did not respond to initial recruitment inquiries, a second round of emails were
sent or different members of leadership were asked to participate. In-person introductions were made during monthly Mental Health Coalition meetings. KIIIs were conducted in person, via phone, or on Zoom. KIIIs averaged 35 minutes, and ranged from 25 minutes to 1 hour.

KIIIs were not transcribed; instead, active notes were taken during interviews and reflective summaries of participant answers were recorded at the conclusion of the interview. Findings were compiled by identifying common responses to interview questions, and then supplementing with less common responses. The goal of presenting the findings is to highlight the diversity of KII responses, not just responses frequently represented in interviews. Many groups had individual concerns more specific to the design or set-up of their groups, such as adaptations necessary to meet their community’s needs. All findings have been reviewed by those interviewed and are communicated publicly with their permission.
FINDINGS

Overview of Findings

Interview findings are summarized into six main categories including: common challenges and barriers; strengths of existing programming; group needs and desires for resources; thoughts on collaboration; lessons from programs on other campuses; and future plans and goals. The subsequent sections will explore these topics further. The goal of the findings is to highlight the variety and majority of group responses, including those unique to one group.

1. Challenges and Barriers

Many common barriers to providing programming or offering more peer support included needing more leadership capacity; wanting dedicated peer support leadership; difficulty with participant recruitment and retention in clubs and programs; competition between groups providing similar services and programming; difficulty “standing out” to students within messaging across campus; and the challenge of experiencing collaboration failures where work was not shared equally.

On dedicated leadership, the Sexuality and Gender Alliance (SAGA) was one group that spoke to the need for additional leadership in their student group; there was a desire for board-appointed positions solely dedicated to peer support programming. This was an ongoing challenge because of the volume of existing work to be done in student groups. Creating additional peer support programming requires supervision and leadership capacity. Similarly, Embody Carolina spoke about already utilizing their members as group leadership, meaning that new leadership would often be chosen within their membership base.

Many interviewees expressed difficulty navigating through available peer support on campus. One participant specifically called attention to the difficulty of finding support groups addressing grief. Not having a centralized resource to navigate existing support groups and peer support has deterred student groups from offering peer support services and programs. Fortunately, student group Mind Above Matter is developing a centralized online resource to mitigate this barrier.

A common theme with all interview participants included difficulty with recruitment and retention to their student groups. With a large number of student organizations already on campus, student groups experience a sense of competition between groups providing similar services or targeting similar populations. Additionally, they find it hard to “stand out” amidst a constant influx of messaging across campus addressing mental health and student wellbeing. A number of groups have found their own success through word of mouth referrals, active outreach, or advertisements posted at incoming student orientation. Participants have expressed interest in finding new ways to recruit members and retain consistent attendees to their events and programming.
Lastly, challenges to developing programs included difficulties when trying to collaborate with other campus groups. One participant described an attempt to collaborate with another student group that suffered from poor communication and uneven burden of work for each group. Ultimately, this collaboration collapsed because of the breakdown of communication and task sharing. **The ongoing challenge of maintaining effective communication and work distribution reveals an opportunity for groups to work on their approach to collaboration and equitable distribution of programming work to ensure future success.**

2. **Strengths of Existing Programming**

Some of the strengths to be highlighted from interviews includes: groups with consistent members at meetings; groups seeking to address the stigma of mental health; the openness of participants to peer support services and programming; existing support networks outside of mental-health specific environments; development of resources for online navigation; existing learning and collaboration in the Mental Health Coalition; and an overwhelming desire to show each other kindness and improve student wellbeing.

Even newer student groups, such as I Am Shakti, have consistent attendance from core members. Many groups have weekly or biweekly meetings comprising returning participants as well as new interested persons. While some students’ groups struggled with retention, the ability of others to engage consistent membership could be leveraged as a strength for starting a peer support initiative.

I Am Shakti is also one of the groups directly addressing heightened mental health stigma within certain populations. I Am Shakti aims to create a space for the South Asian community to address mental health and challenge stigma. They remain open to other participants, and they create a vital space for discussion and support. Similarly, many other groups such as We Wear the Mask, SAGA, I Am Shakti, and OCEANS also address stigma and create spaces for communities with historically heightened stress and stigma around mental health. These communities include African American students, South Asian students, students with obesity, and LGBTQIA+ students. Student groups are beginning to see the start of mental health stigma reduction within their communities through their efforts to foster awareness and support.

Another strength of student groups is the openness and willingness of leadership to offer peer support services to other students. Participants spoke about wanting to incorporate the benefits of peer support into existing programming and to expand these services for the benefits of their current and future members. Two interview participants represented UNC-Chapel Hill club sports and Greek life, which involve a significant percentage of the undergraduate student body. These participants spoke about the ways in which these institutions already provide peer support, such as through “big-little” matching or team bonding between new players and upperclassmen. These existing networks offer a large opportunity for expanded peer support, and currently act as a necessary resource and support structure for many students attending UNC-Chapel Hill.

“**We want to know how do you target vulnerable groups without creating stigma, or blaming identity for mental health issues, but also recognizing there are specific risks in certain communities.**”

- SAGA
Student groups have already begun to collaborate and learn mutually by developing centralized resources and forming the Mental Health Coalition. As mentioned previously, Mind Above Matter is developing an online tool to navigate existing mental health resources on campus. This will be beneficial to those within student groups and those who are interested in getting involved in student organizations and activities. The Mental Health Coalition is an immense asset to campus mental health. The Coalition is run by student government representatives and offers a space for monthly meetings where student groups and interested persons can come together to discuss future plans and ask for collaboration, ideas, and support.

As an attendee at some of these meetings, I witnessed the importance of this continued communication and face-to-face building of rapport. The Coalition is acting as a learning network for students and has the capacity to expand its operations to foster collaboration between groups.

Overall, the interview participants showed passion and care for addressing mental health and helping their fellow students. Immense value should be placed on the work that goes into founding and maintaining these groups, and the potential they offer to campuses to address mental health on the ground-level.

3. Group Needs and Desired Resources

Through the course of interviewing, desires and needs for resources came up in a number of different categories including: skills enhancement, program improvement and community-specific needs; coordination and communication; and campus-oriented improvements.

**Skills Enhancement, Program Improvement, and Community-Specific Needs**

A consistent response, cited by about half of the interview participants, was the desire to learn about how to maintain the mental health of the peer supporters. This point was raised to highlight the importance of offering support to those providing support to others, and learning that peer supporters also have boundaries themselves. Peer supporter mental health can be addressed through training and awareness of other existing resources.

Participants also expressed a desire for an increase in available training specific to peer support. Some participants cited a desire for training for more “awareness” of mental health, whereas others expressed a desire for training on specific skills to translate to peer support, such as the problem-solving elements of cognitive behavioral therapy. Alongside this desire for the development of accessible training, some participants expressed a need to complete a “peer certification.” They saw this as a way to ensure that participants had the necessary skills and knowledge to be peer supporters, and support the role with tangible qualifications and competencies.
As mentioned previously, participants wanted to see an easily accessible online database of resources, including available training. To develop their own peer support programs, participants expressed that they have a desire to see accessible examples of peer support program curricula, and to learn from other existing peer support programs.

Participants spoke about wanting to learn about current best-practices on topics including how to reach vulnerable groups on campus; to reach students otherwise "in-need" of support; to create an open, welcoming, comfortable, and safe space for students to come and talk about issues during group meetings; and to explain the benefits of peer support to participants. In addition to these topics, participants wanted to be able to employ these best-practices without creating stigma or implicating a students’ identity in mental health problems. Moreover, many had a desire to learn about issue-specific or community-specific topics, exploring intersectionality (specifically in the lens of peer support), and ways to encourage the overall health and well-being of others.

**Coordination and Communication**

Within coordination and communication, participants wanted greater knowledge and awareness of available campus resources; to know how to encourage student group leadership participation; and how to smoothly transfer ownership of peer support programs from group to group on campus. As previously stated, awareness of campus resources may soon be improved by centralized resources online. Additionally, the Mental Health Coalition acts as a facilitator to some of these desires for improved coordination and communication.

**Campus-Oriented Improvements**

On the campus-level, interview participants wanted to see training for staff and faculty on how to avoid perpetuating mental health stigma and weight bias. Participants, specifically OCEANS, wanted to see staff and faculty utilize weight bias training to transform their treatment of students, and to become aware of microaggressions and biases. OCEANS also wanted to see more available support for students with obesity on campus, not in the form of weight loss programs, but in ways to share experiences and receive emotional support. This sharing of experiences was mentioned as a prime opportunity to practice peer support and collaborative learning.

Another important point for campus-oriented change, brought up by Embody Carolina and We Wear the Mask, is the need for students to have access to culturally representative providers at

---

*I want Embody to tackle new issues, get involved in things not generally thought of, and to explore intersectionality and how to incorporate it into peer support."

- Embody Carolina

*I want to know how to make people comfortable enough to want to speak up...how to foster an open, welcoming, and nurturing space for the South Asian population and anyone else who wants to join."

- I Am Shakti

*UNC-[Chapel Hill] can be doing more for obesity-related stigma like more recognition for weight bias and training on weight bias for faculty, staff, and students."

- OCEANS
UNC-Chapel Hill’s Counseling and Psychological Services (CAPS). This coincides with the general feedback from participants of their desire for more knowledge about providers off-campus that meet culturally-specific needs. A common theme in interviews was the acknowledgement of the shortcomings of CAPS in providing relevant and affordable off-campus referrals. Although peer support may not directly alleviate this issue, a benefit of developing peer-based programs is the ability for peer supporters to expand the number of, and diversity and cultural representation of those with whom individuals can talk about their concerns.

4. Thoughts on Collaboration

Participants were open to collaboration and learning from other groups currently offering peer support. Collaboration was considered a positive way to understand where programs are thriving or struggling, and to move forward with shared amounts of work between representatives or groups. Participants expressed their willingness and desire to initiate peer support programs as a multi-group effort, especially in the case where one group does not have the leadership capacity or funding to fully supervise and run a program. Collaboration with CAPS is viewed as a vital step to the success of peer support initiatives in order to get referrals and spread positive messaging via word of mouth.

Participants not currently planning on developing peer support programming specifically wanted to connect with groups providing training on various topics, such as those that Embody Carolina provides on body image. This was expressed by some participants, including UNC-Chapel Hill Greek life, in order to learn from readily available trainings and build off of the knowledge moving forward.

5. Lessons from Peer Support on Other Campuses

I spoke with campus wellness staff at Appalachian State University, Fayetteville State University, and North Carolina State University following their peer wellness program presentations at the 2020 Behavioral Health Convening on Tuesday, February 11, 2020. Here are some key lessons and take-aways from those interviews:

- Programs at other campuses in the UNC system have similar goals to alleviate pressure on campus health systems.

- Success with recruitment and retention of participants in peer support-based initiatives is attained partially through collaboration with campus health services akin to the counseling center.

- Common wellness approaches include using peers as coaches for students through one on one appointments, after training specializing in skills like “motivational interviewing.”

---

“Learning what other campuses are doing is always helpful because you may be able to replicate or adapt what other groups are doing.”

- Be Present at Fayetteville State University

“After meeting with a lot of peer coaching advisors, you notice the most successful programs are the ones housed in the counseling center or with a referral network built into them before they start.”

- WeCoach at Appalachian State University
Programs on other campuses were designed to relieve counseling centers from consistent high student demand and are seeing success via referrals from those very counseling services. NC State Wellness Coaching has seen success after initial years of programming, and wellness programs at both Appalachian and Fayetteville state are continuing to grow over time through positive word of mouth on campus. These wellness programs have a wide breadth of peer coaching topics including finances, school success, and physical wellbeing, all of which are tied to students’ overall mental health.

6. Future Plans and Goals

Future plans for groups with existing programs, such as SAGA, which offers a peer support matching program for incoming students, include expanding the impact and capacity of their programs to reach more students. Newer groups wanted to foster existing peer support by continuing to grow their group participation and their breadth of the services offered.

Groups without designated peer support programming, such as I Am Shakti and We Wear the Mask had a desire to foster a sense of community within their groups and planned to create and hold workshops to encourage self-reflection among their participants. They wanted to provide tools for students to practice positivity and build self-esteem in a safe place.

Groups with emerging and existing programs desired to collaborate with other campus groups, CAPS, and even other campuses as well as evaluate their efforts. One future goal for OCEANS includes increasing awareness for faculty and staff about the perpetuation of bias, ideally achieved through training and space for education and reflection. The Peer-Based Support Network and other groups with existing programming desired feedback from participants within their programming, including the development of methods to collect feedback and conduct full evaluations of programs.

Participants from both UNC-Chapel Hill Greek life and club sports spoke about wanting to utilize these spaces to develop more infrastructure for mental health support. These systems are already utilized to foster peer interactions and community support, and participants said there is ample opportunity to expand peer support. This goal is contingent on having the proper funding and representatives for programming within these systems.
REPORT LIMITATIONS

Groups Not Interviewed

Groups not interviewed, but asked to participate, included other undergraduate groups involved in the Mental Health Coalition; various graduate-level programs focused on mental health or wellbeing; and undergraduate resident advisors. This is a limitation of this report because it does not offer the opportunity for all perspectives to be addressed. Graduate and professional student concerns are likely to be different from undergraduate student group priorities, however, these differences were not considered in this report. Similarly, no interview or participating group specifically touched on the unique experience of international students at all levels of the university. Finally, a number of groups within and outside of the Mental Health Coalition were not interviewed either due to difficulty contacting them and scheduling interviews, or due to disruption from COVID-19.

COVID-19 Complications

The emergence of the COVID-19 pandemic caused some disruption to interviews with campus groups and with follow-up plans to host an in-person workshop following Mental Health Awareness week on campus. COVID-19 has had impacts on the ability of campus groups focused on mental health to continue offering the same services they had initially offered on-campus. Mental health providers on UNC-Chapel Hill campus have largely moved to phone counseling and telehealth to continue providing care. A consequence of COVID-19 was large-scale transfer to online learning and adoption of social distancing.

The mental health ramifications for these changes is not yet fully researched, but early indications suggest the impact to student mental health will not be positive. This is a time where mental health infrastructure and peer support is especially vital to campus health and success. Certain groups, such as NC State wellness coaching, have offered their services online, but have experienced lower engagement due to the change in formatting. One positive outcome from COVID-19 complications may be establishment of multi-platform programming. Thus, in the future, peer support may be available in-person and virtually.

Interviewer Bias

It is always possible for interviewers to introduce bias when interpreting and communicating the results of interviews. To minimize the influence of bias, this report was sent to interview participants for review and was discussed with and reviewed by colleagues in the Peers for Progress research team in the Department of Health Behavior before public dissemination.

“Every conversation right now involves COVID. It is impacting every part of coaching...but we keep virtual spirit moving forward.”

- Wellness Coaching at North Carolina State University
IMPLICATIONS AND RECOMMENDATIONS

Initial Follow-Up

Initially, the Peers for Progress team planned to follow up on these interviews in April of 2020 by holding an in-person workshop to address key desires for resources and information (see Appendix B for webinar agenda and topics or watch webinar here). These plans were altered and the workshop was transformed into an online webinar. One positive outcome of this change is that the webinar is recorded and available to watch for those who were unable to attend (see Appendix C for reflections on the webinar). News of the webinar was met with positive responses from interview participants. Current plans include developing additional webinars or workshops for the upcoming semesters to expand and build on the material and the initial webinar discussion.

Recommendations for Future Support and Development

We recommend that UNC-Chapel Hill administration, those leading efforts in response to the 2019 Report of the Mental Health Task Force, and the campus community utilize this report to help facilitate student groups’ peer support and other activities to address and enhance campus mental health. Amidst recognition of campus mental health problems and the vision of the 2019 Task Force Report, as well as the recent challenges of pandemic disease and ongoing concerns about racism and inequity, we recommend:

1. As students face an array of serious threats to their mental health and well-being, the UNC-Chapel Hill administration should recognize the current opportunity for and allocate resources to develop the capacity for an expanded and enhanced network of peer support initiatives to address student mental health.

2. UNC-Chapel Hill administration and Student Government should recognize the Mental Health Coalition as a collaborative learning network among student groups that provides a key opportunity for sharing lessons learned and working together on new initiatives.

3. The Mental Health Coalition should grow to include other campus systems, such as Greek life and club sports. This inclusion along with support from UNC-Chapel Hill administration can expand peer support across major systems on campus.

4. UNC-Chapel Hill administration should provide or facilitate additional funding for peer support initiatives. This funding should be structured to maximize the ability of groups to be nimble in responding to changing student interests and needs.
5. Faculty and topic experts should provide workshops and training on varied topics, including, e.g., peer support program development, topics of interest to student groups, leadership and organizational development.

6. UNC-Chapel Hill administration should provide support for making peer support accessible to the student body throughout the duration of COVID-19 restrictions. This should include groups adapting existing programs to online platforms during COVID-19, as well as groups beginning new peer support initiatives to address expanded mental health needs during the pandemic.

7. Counseling and Psychological Services (CAPS) has several important roles to play:
   - Recognizing and encouraging general understanding of peer support activities and services as an important part of efforts to improve mental health on-campus.
   - Linking with peer support organizations to facilitate both referrals to CAPS as well as CAPS offering information on campus peer support organizations to those it serves.

8. UNC-Chapel Hill should collaborate with other campuses to encourage peer support across the UNC system.

In closing, peer support contributes to and benefits from a climate of support in the surrounding community. Accordingly, these recommendations should extend to a campus-wide initiative for all persons learning, working, or teaching on UNC-Chapel Hill’s campus.
<table>
<thead>
<tr>
<th>Student Group/Organization</th>
<th>Group Description*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Health Coalition</td>
<td>The current Coalition was created by the Mental Health Task Force during the 2018-2019 school year to promote transparency and collaboration between mental health organizations on UNC-Chapel Hill's campus.</td>
</tr>
<tr>
<td>Peer-Based Support Network</td>
<td>Peer-Based Support Network is a program designed to promote student mental and emotional wellness through weekly group discussion sessions led by facilitators trained by the UNC-Chapel Hill School of Social Work.</td>
</tr>
<tr>
<td>OCEANS or “Outreach, Community Engagement, Advocacy and Non-Discriminatory Support”</td>
<td>OCEANS seeks to empower adolescents living with obesity, by organizing monthly socials and support groups, and an annual 5k and policy-based advocacy projects.</td>
</tr>
<tr>
<td>Buddy Project UNC-Chapel Hill</td>
<td>UNC-Chapel Hill’s student chapter of Buddy Project, a non-profit movement that aims to prevent suicide and self-harm by pairing people as buddies and raising awareness for mental health.</td>
</tr>
<tr>
<td>I Am Shakti</td>
<td>I Am Shakti at UNC-Chapel Hill is an organization dedicated to sensitizing the South Asian viewpoint of mental health. They offer meetings, activities, and general support to all interested persons on UNC’s Chapel Hill campus.</td>
</tr>
<tr>
<td>Mind Above Matter (formerly known as Mind over Matter)</td>
<td>An initiative formed by current UNC-Chapel Hill students to reform the current scatter of mental health organizations to create a more practical and user-friendly system of obtaining help and information for mental illness by aggregating all of UNC-Chapel Hill’s mental health resources in one place.</td>
</tr>
<tr>
<td>Sexuality and Gender Alliance (SAGA)</td>
<td>SAGA works to foster a strong LGBTQ+ community at UNC-Chapel Hill as an events-based organization that hosts many programs and activities throughout the year, along with a peer support program pairing incoming students with “families” within SAGA.</td>
</tr>
<tr>
<td>We Wear the Mask</td>
<td>We Wear the Mask is committed to implementing continuous and sustainable initiatives that encourage comfort in expression, emotion, and positive strategies that promote a better quality of life and state of mental health, with specific focus on creating safe spaces of discussion and learning more about cultural experiences that affect mental health of those within the African-American population.</td>
</tr>
<tr>
<td>Student Group/Organization</td>
<td>Group Description*</td>
</tr>
<tr>
<td>--------------------------------------------</td>
<td>---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Embody Carolina</td>
<td>A UNC-Chapel Hill Campus Y committee working in partnership with professionals at the UNC-Chapel Hill Center of Excellence for Eating Disorders to raise awareness about eating disorders, cultivate a safe environment for students through meaningful policy change and educate students and community members about how to be a compassionate and effective ally to a peer with an eating disorder through the peer-led Embody Carolina training.</td>
</tr>
<tr>
<td>North Carolina State University Wellness Coaching</td>
<td>Wellness coaching at NC State aims to provide students the space to explore their well-being, the knowledge needed to be proactive, and accountability to practice skill-building in a supportive environment.</td>
</tr>
<tr>
<td>Fayetteville State University “Be Present Empowerment Model® (BPEM®)”</td>
<td>The Be Present Empowerment Model® (BPEM®) at Fayetteville State is led by campus Certified Peer Educators that have been used to assist students in developing peer led support systems to address holistic health. The Model is a social justice leadership program designed to build the capacity of participants and examine ways that social contexts such as race, gender, class, sexuality, and age impact the campus community and individual well-being.</td>
</tr>
<tr>
<td>Appalachian State University “WeCoach” Program</td>
<td>Appalachian State University’s Department of Wellness and Prevention Services developed WE COACH, a peer to peer wellness coaching service, as a complement to other professional one on one services provided to students.</td>
</tr>
<tr>
<td>UNC-Chapel Hill Greek Life</td>
<td>A representative from a Panhellenic sorority on UNC-Chapel Hill campus spoke on behalf of their particular house, and on behalf of Greek Life at UNC-Chapel Hill as a whole.</td>
</tr>
<tr>
<td>UNC-Chapel Hill Club Sports</td>
<td>A representative from a UNC-Chapel Hill club soccer team was interviewed, and spoke on behalf of the basis for peer support specific to club soccer, and within UNC-Chapel Hill club sports in general.</td>
</tr>
</tbody>
</table>

* Select descriptions from 2019 UNC-Chapel Hill Mental Health Task Force Report
Appendix A

Identifying Peer Support Resources on Campus to Advance UNC-Chapel Hill Campus Mental Health: Qualitative Phone/Email Interview Guide

Hello, my name is Hannah Barker and I am an RA with Peers for Progress, a program of the Gillings School of Global Public Health at UNC at Chapel Hill. Peers for Progress, along with the UNC-Chapel Hill Mental Health Coalition, is working to get a handle on the many, varied peer support groups and activities on campus and to identify what challenges they face. This might lead for example to something like a workshop to encourage peer support on campus. The information provided in these interviews would inform the structure of such a workshop or perhaps other activity.

Outreach Email: I’m reaching out today to learn more about [insert organization]. Do you have some time within the next week to have a phone conversation to answer a few questions? If yes, please let me know when you are available. If not, would you mind responding to some questions about your organization via email? I’ll follow up with you within the next 24 hours. Thank you!

1) What is the name of your program?
2) What is your role in the organization?
3) When did the organization get started? How did the organization begin?
4) Can you briefly describe how the organization works?
5) What kind of services/events are offered?
6) Do you have any peer support initiatives or programs? Or do you incorporate peer support into any of your initiatives/campus services?
   a) If the organization has structured peer support programs...
      i) Who in your program provides peer support/is a peer supporter?
      ii) How do you recruit them?
      iii) Are they trained? What kind of training do they receive?
      iv) How are participants matched with peer supporters?
      v) What types of support do peer supporters provide?
      vi) What is the duration of the program?
      vii) Do you feel like you are reaching the students you intend to?
      viii) What are your goals for the initiative? What are the intended outcomes?
ix) Are there any major challenges or barriers you have come across with trying to utilize peer supporters?

x) What are your future plans for this program? What resources do you need to advance the program?

b) If the organization offers mutual support...

i) What are your goals for the initiative? What are the intended outcomes?

ii) How does peer support take place in your group – through meetings, individuals getting together, other ways?

iii) What are your future plans for this program? What resources do you need to advance the program?

7) Peer support can include social and emotional support; linkages to care or other resources; life skills-based; etc.. Do any of your initiatives/programs/services offer these kinds of benefits?

8) Are there any major challenges or barriers you have come across with trying to peer supporters?

9) What kind of assistance do you think your organization/program would benefit from?

10) Would workshops be useful to your organization? For example, sessions on different kinds of peer support; organizational readiness for a peer support program; collaborating on peer support with other organizations; etc.

11) What would you like to learn from other organizations addressing mental health on campus? In what ways do you think collaborations with other organizations are useful?

12) How might you envision your organization collaborating with other campus organizations to offer peer support programs?

13) Is there anything else you would like for me to know about your program?

14) Do you know of any other organizations that I should talk to that address mental health through peer support?

Thank you so much for taking the time to speak with me today! We really appreciate your input. I will be in touch soon and please email me with any follow-up thoughts, comments, or questions.
# Appendix B

**Agenda for Webinar “Building Peer Support Programs for Wellbeing at UNC-Chapel Hill” held on April 7th, 2020**

<table>
<thead>
<tr>
<th>Block</th>
<th>Guiding Questions</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>• What are we going to talk about?</td>
<td>• Introducing the P4P team</td>
</tr>
<tr>
<td>~7 min</td>
<td>• Who are we?</td>
<td>• Go over webinar agenda</td>
</tr>
<tr>
<td>People Helping People: Definition, Range &amp; Application</td>
<td>• What is “People Helping People (PHP)”</td>
<td>• What is the breadth of MH concerns on campus?</td>
</tr>
<tr>
<td>~15 min</td>
<td>• How to address mental health through PHP</td>
<td>• Can these issues be addressed through PHP?</td>
</tr>
<tr>
<td></td>
<td>• What does PHP look like in different group capacities?</td>
<td>• <em>PS in the aftermath of COVID-19</em></td>
</tr>
<tr>
<td></td>
<td>• What are tangible examples of ways groups/individuals can utilize PHP?</td>
<td>• Groups identified on campus to individual support outside of groups</td>
</tr>
<tr>
<td>Interview Findings</td>
<td>• Share lessons from interviews</td>
<td>• Common barriers to successful programming</td>
</tr>
<tr>
<td>~8 min</td>
<td>• Ask for additional feedback</td>
<td>• Desired education and resources</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Future group goals and thoughts on coordination/collaboration</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Ask for additional information</td>
</tr>
<tr>
<td>Overview of Skills and Rules of Thumb</td>
<td>• Areas of competency</td>
<td>• What are the 5 key functions of successful peer support?</td>
</tr>
<tr>
<td>~10 min</td>
<td>• General lessons learned</td>
<td>• What are the frequent components of successful peer support programs?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• <em>Description of problem-solving and CBT approaches in context of PS</em></td>
</tr>
<tr>
<td>Resources</td>
<td>• What training is available for Peer Supporters on and off campus?</td>
<td>• Training resources</td>
</tr>
<tr>
<td>~5 min</td>
<td></td>
<td>▪ Formal and informal skill development</td>
</tr>
<tr>
<td></td>
<td></td>
<td>▪ Applying skills during COVID-19</td>
</tr>
<tr>
<td></td>
<td></td>
<td>▪ What skills do you already bring to the table?</td>
</tr>
</tbody>
</table>
| Looking to the Future: Program Management & Development | • How do we move forward?  
• How to support those providing PS?  
• How to fill gaps in implementation? | • Program Management  
• Program Development  
• Collaborative learning network  
• Look at example programs/curriculum  
• Open discussion:  
  ▪ What programs would you like to see next year?  
  ▪ How can you prepare for that now?  
  ▪ What support are you looking for...?  
  ▪ How can P4P continue to support PHP initiatives? On the individual and group levels? |
| --- | --- | --- |
| Closing | • Where do we go from here?  
• Wrap-up | • Leave participants with some brainstormed plans for next semester  
• Share contact information  
• Answer unaddressed chat questions  
• Connect to extended discussion time |
| Extended discussion time | • Any desired topics of discussion from attendees  
• Prepare for 1-3 topics | Possible Discussion Topics/Questions:  
• How to of community-specific tailoring  
• Connecting this to now - COVID-19 impact on future PS programs  
• How to have successful program recruitment & retention?  
• Supervision |
Appendix C

Webinar Reflections

The Webinar titled “Building Peer Support Programs for Wellness at UNC-Chapel Hill” was hosted in Zoom and attended by mainly UNC-Chapel Hill faculty and staff. All interview participants from UNC-Chapel Hill were invited to attend. Two interview participants attended, and the rest of the participants have received the link to watch the webinar online on their own time. The webinar also remains publicly available to view on the Peers for Progress website.

The webinar received positive feedback from participants expressing it was informative and inspiring for their own programming within their department. Since this webinar, some of the attendees have continued to collaborate with Peers for Progress on developing peer support interventions for mental health amid COVID-19.

The 1-hour duration for the webinar worked well on the Zoom platform. The agenda for the webinar was adapted from the original workshop agenda, and was shortened for time.

If future workshops are in-person, the duration should be extended to include more time for activities and participant discussion. Future suggested topics include: envisioning peer support programming; understanding programmatic leadership roles; facing challenges of recruitment and retainment; creating diverse and inclusive communities; and meeting community-specific needs without creating or perpetuating mental health stigma.