The importance of peer support – a case study

The role of a peer supporter is to offer strength, hope and encouragement to our patients through embodying recovery, offering support and challenging denial. So often, our patients tell us that seeing peer supporters who have come through the programme and are currently maintaining and even enjoying their recovery, helps them to shift their negative thinking and believe that they too can recover.

“Can’t be right. This bloke seems pretty well-adjusted. Relaxed. Clear, smiling eyes. Is this what recovery looks like?”

That’s what I thought about the first peer supporter I remember seeing. There would have been others before him. But I was orbiting Pluto for a few days and too absorbed in myself to notice or care.

Then I started to pay attention. And it was this chap, who voluntarily gave up his time, that set me on my way to thinking “maybe I could change too”. Why not? I enjoyed the daily 12-Step meetings and the sense of connection and belonging they gave me. And, of course, the ‘chairs’ of the meeting were illuminating – be it their pain, tragedy, humour or hope.

However, the peer supporters that I ‘gelled with’, gave me something extra: a deeper, more personal insight into how recovery had changed their lives. I decided then, that I wanted to do peer support. I thought of it as a benchmark for the success of my recovery. On reflection, I think that was my ego talking. Maybe. Maybe not. I don’t really care. I do peer support now and believe that it comes from a good place.
I’m fortunate enough to support a therapist every week in an aftercare session with ex-patients and do a monthly one hour talk that includes a Q&A. It’s the Q&A that I enjoy the most. You don’t get the opportunity to do that in a 12-Step meeting, but here you can really get to grips with what’s going on with the patients and let the session flow.

My approach to the talks is to be ‘normal’. I just say it how it was for me and how it is now. I don’t preach. I don’t assume the guys have intimate knowledge of the 12 steps, nor do I ram them home – I contextualise them and give evidence on how they worked for me. I discuss how a step, or something I learned on the Addiction Treatment Programme, connects to my work life, social life, inner life, family life, and so on.

I’ve done quite a few talks in the last six years and I’ve learned that it’s important to make patients feel comfortable. The more relaxed they are, the more they listen and the more they ask. I don’t blast in there with jokes but I do use humour liberally – if it feels right. I guess that’s it; with experience, one gets to quickly assess the mood of the room and the approach to take.

It’s also vital to keep the room moving. Over time, I’ve learned techniques to gently close down dominant voices and ensure everyone can have their say – should they choose to. Occasionally, difficult subjects come up where I have asked the patient to raise it with a therapist. When handled carefully, I’ve found the group is generally supportive in these instances.

I also feel a special bond with other peer supporters. We meet regularly and have the opportunity to share anything that’s on our minds (we are encouraged to process anything that may be triggering with a therapist or a peer). There’s honesty and great camaraderie in these sessions – I think it’s more than us having a shared experience and, if you will, surviving. I think the common denominator is compassion. Hard-won compassion.

I talk a lot about responsibility. It’s not a classic recovery or therapeutic concept, but it’s one of the biggest messages I have to pass on. Responsibility is at the core of my life now. I take responsibility for my actions and I behave in a responsible way. That doesn’t mean I don’t have fun – far from it!

I’ve learned that the more responsible I am; the more freedom I have. And the more freedom I have, the more I want to use it responsibly. Realistically, my mind can’t handle unlimited freedom. It couldn’t while fizzing on drugs or flying on booze, and it can’t clean and sober. It was a myth. Responsibility gives me a workable boundary in which to fully engage with life and, depending on what’s been thrown at me, I can cope or thrive.

Part of this responsibility is a healthy commitment to peer support. Not out of duty or loyalty to Priory or the patients. I do it because it feels like the right thing to do and I enjoy the warm feeling when connecting with someone for the first time or seeing a glimmer of hope rising.

I recently re-read the promises I’d made to myself on my first day at Priory. Under the section ‘what do I want to achieve?’ I’d scrawled just one sentence in capitals: “To get the twinkle back in my eye”. Well, the twinkle is well and truly back and long may it remain.

Enquiries and further information

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