



SUPPORT GROUP LEADER AGREEMENT

*On behalf of Canadians who have been diagnosed with alopecia areata,
the Canadian Alopecia Areata Foundation:*

provides structure and tools for community-based support groups;

*promotes and supports current research toward treatment and cure;
increases awareness of the disease in the media and education systems;
networks with complementary organizations in pursuit of common goals;
and dialogues with health communities and government.*

Thank you for your interest in being a Canadian Alopecia Areata Foundation (CANAAF) Support Group Leader. Your contribution is extremely valuable to both the organization and the Canadian alopecia community.

A **Support Group Leader** is a resource for individuals who are seeking emotional, medical, and cosmetic assistance in relation to a diagnosis of alopecia areata. More particularly, the **goals** of a support group leader include:

- offering **guidance** to all individuals and their families through group interactions;
- explaining and adhering to confidentiality to provide a **safe place** for individuals to discuss the impact of alopecia areata on their lives;
- offering a **forum** for individuals to meet with others who are also assessing the impact of alopecia areata upon their individual lives;
- assisting individuals to share their experiences and coping strategies in response to alopecia areata;
- ensuring the group is **open to new participants**, being sensitive to their individual experiences, responses and interests;
- providing **information and education** to the general public about alopecia areata, its cause and treatment options;
- contributing to **CANAAF as a whole**, in all of its activities, events, and campaigns.

The core goal of a CANAAF support group is to create **a safe and confidential environment in which members feel their perspectives are heard and respected** as they make decisions based upon a diagnosis of alopecia areata. The CANAAF Board, the Chair of the CANAAF Support Committee, and other support group leaders are all available as resources.

Support group leaders **offer peer support** and therefore must acknowledge to their group members they are not psychologists or medically trained. There may be instances when a support group leader determines the group is not able to assist a particular individual, in which case they are encouraged to work with the Chair of the Support Committee in connecting the individual with **more formal medical and therapeutic assistance**. If a leader believes an individual within their group is in crisis, it is recommended they advise the individual to seek professional help and go to the emergency department at their local hospital.

CANAAF **requires** the following of its support group leaders:

1. complete the CANAAF **Volunteer Program Application Form** and an **informal resume** to provide CANAAF with an indication of your educational background, work experience, and volunteer efforts. If any of these contexts are **specific to alopecia** – such as existing volunteer efforts with another alopecia non-profit organization or employment by a hair prosthesis business – they should be highlighted.
2. available **phone messaging and an exclusive CANAAF email account**. There is often a high degree of vulnerability involved in reaching out to a support group, so all messages should be returned in a timely manner, and with a consistent degree of care and attention. The CANAAF website will list your CANAAF email address and contact phone number.
3. conduct **four regular meetings** per year and inform info@canaaf.org of all meeting dates, times, and locations so that the meeting can be publicized on the CANAAF website and via social media. Email info@canaaf.org of any change in date, time or location of a scheduled meeting as soon as possible so that community can be updated.
4. inform CANAAF if employed by an **alopecia-oriented for-profit business**, and refrain from advertising products or services to individuals participating in the group. If asked about services/products for people with alopecia, be forthcoming as well as provide the names of at least two other relevant businesses. If CANAAF is informed that a support group leader has been exclusively marketing their own business in tandem with the position of support group leader, the agreement of that leader becomes null and void and they may no longer represent CANAAF in any position.
5. complete a **Vulnerable Sector Screening Program – Police Reference Check** with the local police enforcement agency and submitting it to CANAAF before being approved as a support group leader.
6. ensure your group has a **medical advisor**, and their name is provided to info@canaaf.org. The medical advisor is a resource for both a support group and its leader. Their presence at meetings is encouraged, but not mandatory.
7. receive approval in advance of any expenditure for which **compensation from CANAAF head office** is sought.
8. inform info@canaaf.org of any **change in name, address or telephone number**.
9. acknowledge that **the use of CANAAF's name and logo** is permitted only by approved support group leaders who act in compliance with this agreement. This privilege of use can be revoked at any time.

If after reviewing the above, you are committed to taking on the role of a support group leader, please sign this agreement as indication you will comply with the noted goals and requirements, as well as CANAAF's mandate. Your signed agreement can be mailed to the address noted below. Once CANAAF is in receipt of your signed agreement you will be interviewed by one or more members of the CANAAF Board. After your interview you will receive a letter from the CANAAF President or a member of the CANAAF board executive indicating whether or not you have been approved as a CANAAF support group leader. Such approval stands until either the Board revokes the agreement or you choose to step down from an approved position.

Please indicate what support you would like to provide in your area:

- Adult/Parent - Support Group Leader for CANAAF _____
(Your city, town or region)

- Kids/Teens Club - Support Group Leader for CANAAF _____
(Your city, town or region)

DATE

SUPPORT GROUP LEADER SIGNATURE

WITNESS SIGNATURE

NAME PRINTED

NAME PRINTED

TELEPHONE NUMBER

EMAIL

ADDRESS

DATE

CANAAF – BOARD OF DIRECTOR SIGNATURE

**Canadian Alopecia Areata Foundation
c/o Debbie Pond
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