



International Civil Aviation Organization

WORKING PAPER

A42-WP/501¹
TE/196
12/9/25
(Information paper)

ASSEMBLY — 42ND SESSION

TECHNICAL COMMISSION

Agenda Item 24: Aviation Safety and Air Navigation Priority Initiatives

SUMMARY OF THE EVIDENCE FOR PEER SUPPORT IN AVIATION

(Presented by the International Transport Workers' Federation (ITF))

EXECUTIVE SUMMARY

Mental health and psychological well-being of aviation personnel are critical to flight safety. Confidential, non-punitive peer support programmes (PSPs) provide a trusted mechanism to overcome stigma and healthcare avoidance, identify latent safety risks and reduce operational costs. This paper summarises evidence of the efficacy of PSPs for aviation personnel.

<i>Strategic Goals:</i>	This working paper relates to <i>Every Flight is Safe and Secure</i> ; and <i>No Country Left Behind</i> .
<i>Financial implications:</i>	Work to be undertaken within the 2026–2028 Regular Programme Budget and/or extra-budgetary contributions.
<i>References:</i>	Annex 19 - <i>Safety Management</i> Doc 10185, <i>Manual on the Critical Incident Response Programme for Cabin Crew</i> Doc 9859, <i>Safety Management Manual (SMM)</i> ICAO Safety Management Implementation (SMI) website Electronic Bulletin 2020/55 WHO guidelines on mental health at work Mental Health at Work - International Labour Organization (ILO)

¹ English, Arabic, Chinese, French, Russian and Spanish versions provided by ITF.

1. INTRODUCTION

1.1 Aviation professionals operate in high-stakes environments with irregular schedules, heavy workload and prolonged separations from home. Expecting flawless performance regardless of personal or societal stressors contributes to concealment of mental health issues and undermines safety. Peer support programmes (PSPs) are a practical, evidence-based response that complements clinical services and safety management systems (SMS).

2. DISCUSSION

2.1 Contextualising mental health within the aviation ecosystem

2.1.1 The well-being of aviation personnel is as essential as the technical systems they operate. Aviation professionals are expected to perform flawlessly, regardless of personal challenges, psychological strain, or broader societal disruptions such as pandemics, economic instability, or international conflict. This inherent expectation is placed on aviation professionals within a demanding environment characterised by high-stakes decision-making, irregular work schedules, and extended periods away from home, further exposing them to significant psychological stressors.

2.1.2 The operational importance of well-being aligns with the principles espoused by the World Health Organization (WHO) and the International Labour Organization (ILO), which have jointly called upon employers and governments to address mental health concerns in the working population. Their guidelines on mental health at work provide evidence-based recommendations to promote mental health and prevent mental health conditions. A key recommendation from those guidelines is the incorporation of psychosocial risk mitigation as an essential element of occupational health and safety management systems.

2.1.3 Positioning the aviation industry's mental health challenge within this broader public policy context reveals a shared global responsibility. The WHO estimates that approximately 15 per cent of working-age adults have a mental disorder at any given time, and that depression and anxiety alone cost the global economy an estimated US\$1 trillion annually in lost productivity. This underscores that addressing mental health is not a unique burden for aviation but a core global labour issue. The imperative to address this is amplified within aviation due to the direct link between psychological distress and operational outcomes. Research consistently demonstrates that workers experiencing psychological distress are up to 40 per cent more likely to be involved in an accident or other safety-related event. This statistic establishes a potent and unequivocal link between mental well-being and flight safety.

2.2 The critical barrier of stigma and healthcare avoidance

2.2.1 Despite the clear link between mental health and safety, aviation personnel face formidable barriers to seeking assistance. The primary obstacle is the fear of negative professional consequences, which has created a widespread epidemic of healthcare avoidance. Data from multiple studies illustrate the scale of this problem. For example, 57 per cent of pilots and 67 per cent of flight attendants engage in some form of healthcare avoidance as they fear losing their flying status.

2.2.2 These findings reveal a profound conflict between the requirement to self-report medical issues and the professional consequences of doing so, with fear of losing one's livelihood being a central motivator for non-disclosure.

2.3 Peer support programmes as a proactive safety and well-being solution

2.3.1 Given the barriers to traditional healthcare, a new approach is required. Peer Support Programmes (PSPs) have emerged as a uniquely effective mechanism for addressing the challenges of stigma and avoidance. The fundamental strength of a PSP lies in the trusting relationship between colleagues who share a professional background and lived experience. This trust is the crucial ingredient that enables a pilot or cabin crew member to seek help without the fear of negative professional consequences common in traditional systems. More than two-thirds of aviation professionals indicate they would be willing to approach a PSP when in need, making it a more trusted option than traditional employer-provided support, such as Employee Assistance Programmes (EAPs) or internal HR departments.

2.3.2 The evidence base for the efficacy of PSPs is compelling. Among larger operators, 93 per cent report that PSPs accessible to safety-critical personnel provide measurable value to their organisations, a figure that remains a robust 73 per cent even when smaller operators are included. Across the board, 91 per cent of operators state that PSPs are appreciated by their personnel, and 86 per cent believe these programmes contribute to a more open workplace culture and help reduce stigma. Feedback from flight crew members reinforces this view: 81 per cent report satisfaction with the quality of support, and up to 95 per cent of those who engage with a well-established PSP would recommend it to a colleague.

2.3.3 These programmes are not merely a feel-good benefit; they function as a critical risk-mitigation tool that identifies latent safety risks. The data on healthcare avoidance reveals that a significant portion of the aviation workforce may be operating with unaddressed mental health issues. The high degree of trust placed in PSPs demonstrates that these programmes are not just an alternative support option; they are the most effective gateway for many to seek help without fear of professional consequences. This is a crucial function: current data indicates that nearly 1% of individuals who contact a well-established PSP may be experiencing mental health issues severe enough to pose a potential risk to operational safety. This statistic reveals a direct causal link between the establishment of a trusted, confidential gateway and the identification of a previously hidden and serious safety risk.

2.4 **Best practices for effective implementation**

2.4.1 To be successful, a PSP must adhere to a set of key principles and best practices that ensure its credibility and effectiveness.

2.4.2 *The Principle of Independence and Confidentiality.* Successful Peer Support Programs emphasise the creation of a robust "firewall" between the programme and management. This structural independence is not merely a formality; it is the *sine qua non* of their success. Without this firewall, the fear of losing one's livelihood will render the programme useless.

2.4.3 *Structure, Governance, and Oversight.* An effective PSP requires a well-defined and independent governance structure. This includes an Independent Management Team, ideally comprising an experienced Peer Supporter, an experienced aviation psychologist, and an experienced aeromedical doctor. This team is responsible for providing ongoing clinical support to peers, safeguarding clinical case files, and providing initial and recurrent training. Additionally, a multi-stakeholder Monitoring Group should be established to continuously evaluate the programme's functioning and success. This collaborative structure promotes trust and ensures accountability without compromising individual confidentiality.

2.5 **The Operational and Financial Case for Investment**

2.5.1 Beyond the significant safety benefits, there is a compelling financial and operational case for the implementation of PSPs. The argument for investment is not based on abstract concepts but on a clear, quantifiable return on investment (ROI). Cost-benefit analyses, even under conservative financial

assumptions, have shown that PSPs can yield returns on investment between 300 per cent and 400 per cent. This is achieved by considering direct costs such as absenteeism, staff turnover, and medical expenses, with one study showing a 91% reduction in lost work hours and a 92 per cent reduction in associated costs. When indirect benefits -such as improved morale, increased trust, and operational continuity- are factored into the equation, estimated returns can reach as high as 2,500 per cent.

2.5.2 The business case for PSPs is further strengthened when linked to a mature Safety Management System (SMS). According to a white paper on ROI for safety interventions, SMS provides the necessary data and cultural foundation to analyse key performance indicators, identify hazards, and measure the financial and safety payback of interventions² The PSP is a natural and cost-effective component of a data-driven SMS, demonstrating that safety and profit are directly correlated. By proactively addressing psychosocial risks and providing a trusted avenue for support, PSPs prevent costly incidents and improve operational resilience, effectively turning human factors concern into a source of tangible business value.

3. CONCLUSION

3.1 ICAO has already laid important groundwork in this area through guidance materials such as the *Manual on the Critical Incident Response Programme for Cabin Crew* (Doc 10185). Expanding this work to a broader framework for mental health and peer support is a logical and strategic evolution of the organisation's commitment to aviation safety.

— END —

² *Return on Investment Tool for Assessing Safety Interventions* - FAA, accessed on August 28, 2025, https://www.faa.gov/sites/faa.gov/files/about/initiatives/maintenance_hf/fatigue/2012-10_return_on_investment_examples.pdf