

The Role of Lay Peer Leaders in Patient Education and Self-management

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Since 2011, the Self-Management Program in Ontario has been offering a variety of evidence-based workshops developed by the Patient Education Research Group at Stanford University. In 2013, the Canadian Association of Wound Care's PEP Talk: Diabetes, Healthy Feet and You was added to the list of peer-led programs. In Session 47, on Day 4 of the conference, the regional co-ordinators will share their reasons for including CAWC's PEP Talk in their list of peer-led pro-

grams and build awareness by using evidence specifying the value of peer leaders in promoting healthy behavior change. We will also share a clinician's experience in working with lay peer leaders and present testimonials from patients, providers, and peer leaders from across the region and in various health-care settings.

Overcoming Resistance

Self-management workshops, led by trained peers, are a key component of the continuum of care. As co-ordinators we often hear from our partners, specifically clinicians, comments like: "What can a peer leader teach my patient that I can't?" Another common comment is

along the lines of: "They aren't even trained health-care workers!" It can be perplexing to respond to these statements, knowing how valuable peer leaders have proven to be in evidence-based workshops promoting self-management across the province.

We have found that peer leaders have the ability to teach about lived experiences. Education and support from someone who has lived with chronic disease(s) or chronic pain themselves—and has been able to develop their own self-management skills—resonate in their facilitation and build a level of trust and learning that is unique to this form of patient care. Peer leaders have the ability to bridge gaps in the circle of care. They can educate patients about prevention and, most importantly, about how

Conference Tip:

Prioritize your session attendance. You might have a grand plan to fill up your agenda and attend a session in every time slot, but sometimes reality gets in the way and you can't quite manage it. To make sure you have the energy to attend all your high-priority sessions, create an A list and B list. If you need to drop a session, take it from your B list.





to help people help themselves to live well with their diagnosis. They can share personal stories of successes, what resources and techniques have helped them, and how to overcome failure.

Evidence-based programs, like PEP Talk and Stanford, which we offer regionally, provide a framework to the knowledge sharing and empowerment of participants undertaken by trained peers. Both programs have been well studied in improving self-management behaviour. This grounding in the evidence allows us to continue to offer these programs in our regions.

Well-trained Leaders

Peer leaders are required to undergo an extensive training process. Once trained, they follow a standardized curriculum when conducting workshops.

The standardized curriculum is aligned with goal setting and coaching techniques utilized in clinical practice to support ongoing health behaviour change and follow-through. While there are regional variations, the workshops are offered in settings that allow the co-ordinators to refer back inquiries of a clinical nature to members of the health-care team. We have found that clients often return for visits with their health-care

team with a greater willingness and ability to be involved in their self-care.

Furthermore, we have found that it's not only the participants who see benefits from the workshops. The peer leaders receive satisfaction from giving support, which helps them find meaning in their own diagnosis as well. Behaviour change is increased in peers as self-management techniques are reaffirmed. 🙌

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Four reasons to consider peer-led self-management education:

1. Peers can provide a positive, judgment-free learning environment for participants.
2. Peers are ambassadors of behaviour change.
3. Peers can act as liaison between health-care providers and participants.
4. Using evidence-based programs, peers increase access to and knowledge of health-care resources.