

# Small Wins, Big Success

## Nurturing Peer Support Program Adoption in China

### BACKGROUND

Since 2012, Peers for Progress has been working closely with the Diabetes Education Management Division of the Chinese Diabetes Society (CDS), and Zhongda Hospital, affiliated with Southeast University, to develop and lead workshops for diabetes healthcare professionals. The purpose of these workshops is to train and coach hospital staff and other clinical teams to develop and implement peer support programs for people with diabetes.

Leveraging our global collaborators (i.e., Taiwan, grantees in Australia, Hong Kong, and US), these workshops serve as a platform for sharing lessons learned between China and the rest of the world. With the support of Professor Zilin Sun and his colleagues at Southeast University, the workshop was approved to be a continuing medical education (CME) course in 2013.

This collaborative effort has made significant impacts. To date, we have conducted 4 workshops and trained over 450 healthcare professionals from all around China. Approximately 30 programs are currently active in 12 cities (e.g., Beijing, Shanghai, Nanjing, Tianjin, and Guilin).

Based on the lessons learned from our most recent diabetes peer support workshop in China, along with our other experiences in training and consultation for Chinese colleagues, this spotlight highlights key strategies that have guided Peers for Progress' approach to nurturing program adoption across cultures and settings.

For organizations without experience running peer support programs, a range of factors need to be taken into consideration before adopting a new program. Questions that often arise include: How does the program align with and advance our organizational goals? Are there best practice models that fit our specific setting and population? What are the necessary investments of financial and human resources? What are the protocols for monitoring, evaluation, and quality improvement? These issues are magnified when promoting program adoption across cultures and settings, in which uncertainty can lead to inaction.

Peers for Progress has been working closely with colleagues in China to promote the adoption of peer support for diabetes management. In this ongoing effort, our strategy has been to seek small wins to encourage the adoption of peer support programs. In this spotlight, we share our lessons learned to shed some light on how to encourage others to take action in the face of numerous barriers and constraints.

### Rationale for Small Wins

In August 2014, Peers for Progress held the fourth collaborative diabetes peer support workshop with Professor Zilin Sun, the Chinese Diabetes Society, and Zhongda Hospital, affiliated with Southeast University. The workshop was held in conjunction with the 2014 International Symposium on Diabetes Education and Management in Tianjin. We trained approximately 250 healthcare professionals. Similar to previous workshops, most of the trainees were nurses with a smaller set of diabetes doctors and primary care providers from community health centers.

## THE CHALLENGE

Over the past two years, trainees have identified several challenges for starting a peer support program in China:

- Lack of suitable candidates to serve as peer supporters
- Limited time for providers to develop and manage programs due to overwhelming workload
- Limited availability of best practices for Chinese settings
- Insufficient funding and resources at both organizational and system levels due to absence of policy support and competing priorities

These challenges limit the feasibility of implementing comprehensive programs. Instead, what has emerged is a Chinese take on continuous quality improvement by focusing on incremental, concrete steps in the short-term.

## Training and Consultation Strategies

### 1. Emphasizing the Four Key Functions

The [four key functions](#) of peer support offer a program framework that allows standardization for high quality programs, while allowing flexibility for local tailoring. During the training, we studied programs in western countries as well as models in the greater China region (i.e., Taiwan, Hong Kong and mainland China). These examples helped illustrate what peer support could look like through tailoring the four key functions to unique settings.

### 2. Starting from One Peer Supporter

As mentioned earlier, lack of funding and suitable candidates for peer supporters poses challenges to program adoption. In hierarchical systems where physicians control the allocation of financial resources, nurses struggle to obtain startup funding. Furthermore, without experience starting and running a program, it becomes even more difficult to build a case to sway decision-makers.

When it comes to recruiting peer supporters, Chinese healthcare providers prefer people who can be role models and have experience in teaching and leadership, since they are expected to facilitate educational activities and lead group discussions. This expectations create a challenge for recruitment.

Therefore, during the training, we asked trainees to focus on finding just **ONE** good peer supporter candidate who loves to help others, demonstrates good leadership, exhibits strong communication skills, and shows willingness to work with a clinical team. Setting an achievable goal like this builds confidence and creates a rewarding experience with peer support for healthcare professionals, peer supporters, as well as patients.

### 3. Incorporating Role Plays & Simulations

During the first workshop, we very quickly realized that most of the trainees were unable to grasp what peer support looks like without experiencing it firsthand. In response, we have increasingly incorporated role plays and simulations in subsequent workshops. Recognizing the widespread acceptance of support group formats, we asked the trainees to simulate group discussions and manage group dynamics. Through these exercises, the trainees learned to identify the characteristics of a good peer supporter, areas of focus for training, as well as limitations of the modality. These activities were designed so that they could be used by the trainees in their own trainings of peer supporters.



#### 4. Experiencing the Power of Peers

Fellow healthcare professionals who have “walked the walk” are especially effective at encouraging new trainees to take the initial steps for starting a program. They also can provide practical resources (e.g., program materials, program solving skills) that can be helpful to others. During the most recent training, we organized a poster session to introduce the key components of the peer support programs developed by previous trainees. We also intentionally built in time for sharing lessons learned.

#### 5. Providing Ongoing Consultation and Support

Healthcare professionals need support too. To address their needs, Peers for Progress has hosted monthly webinars and created an online community for the trainees. Through the platform for the online community, we provide biweekly consultation to answer questions about recruitment, training, management, and evaluation. These provide opportunities for resource sharing, booster training, and continuous troubleshooting.

### Conclusion

In a hierarchical society, program innovation from the ground floor poses a significant challenge. With so many barriers, healthcare professionals can feel overwhelmed and discouraged when starting a new peer support program.

Through our experience, we’ve learned that program adoption in China requires us to focus on small wins in the short term. Building on these concrete steps with ongoing quality improvement and troubleshooting can lead, eventually, to sustainable success.