

Solutions to Problems in Managing Peer Supporters



**PEERS FOR PROGRESS
PROGRAM DEVELOPMENT GUIDE**

A COMPREHENSIVE, FLEXIBLE APPROACH

Recently updated and expanded, the Peers for Progress Program Development Guide is a comprehensive approach to program development and management that encompasses key behavioral, organizational, programmatic, and system elements needed for successful peer support programs.

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Delivering quality health care to clients is at the forefront for clinic and community-based organizations alike. Asked to treat complex and sensitive personal issues, health professionals are expected to demonstrate the highest standards of expertise and ethics.

However, organizations that are considering starting peer support programs have, at times, expressed reservations about the potential problems that may arise from bringing in peer supporters and how this may impact their overall quality of care. Peer supporters come under added scrutiny because they often lack formal training in the health sciences. Furthermore, they may have limited experience in their role as a peer supporter and may not know how they fit within a host organization. These are all valid concerns about the ability of peer supporters to conduct the work that's expected of them.

To explore the types of problems that arise with peer supporters, Peers for Progress surveyed our grantee projects and asked them to share examples of problems they encountered and their solutions. Despite frequent concerns about problems caused by peer supporters, serious errors were actually quite rare. As with any new staff, many of the problems were promptly resolved through booster training, mentorship, and supportive supervision.

Problems Reported

Misinformation

Among our grantee projects, peer supporters seldom provided clients with inaccurate health information. In one case, a peer supporter was using outdated information on target HbA1c. In another example, peer supporters were encouraging participants to ask for eye exams when they didn't need it, resulting in unnecessary referrals. These issues were easily resolved by updating the guidelines, and providing follow-up trainings for the peer supporters. In a third case, a peer was providing incorrect information in the form of personal opinions, which, combined with other performance issues, resulted in her release from the program. A key way to address problems of misinformation is through monitoring and providing peers with 24/7 backup.

Breaches of Trust

Breaches of trust were extremely rare. In one community-based project, one peer supporter broke the confidence of a mentee by becoming involved in gossip. The peer supporter was warned that she would be released if the issue reoccurred, which was sufficient to prevent subsequent violations. Problems related to confidentiality and trust can have serious repercussions, so supervisors should take an aggressive stance when these issues occur.

Incompatibility between Client and Peer Supporter

Some situations arose in which peer supporters or program participants requested to be reassigned for various reasons. For example, one participant requested to be changed because she and her peer supporter knew each other before the program. In another case, a male participant pursued a romantic relationship with his peer supporter. Although the research team offered to reassign the client to another peer, he declined and dropped out of the program.

Overly Directive Support

Despite completing initial trainings, some peer supporters had trouble mastering motivational interviewing skills and providing non-directive support, which were crucial intervention components. One project expressed that this was the biggest issue that they had to deal with: peer supporters enthusiastically giving advice, acting “bossy”, and proposing their own solutions rather than eliciting responses from their clients. While none of the participants complained about receiving directive support, our projects provided ongoing supervision, periodic group meetings, calls, observed role plays, or booster trainings to discuss and practice non-directive support.

Proactive—Responsive Principles in Action

Be Proactive

First and foremost, a program needs to provide **24/7 back up** for peer supporters. This can be done by providing the phone numbers of their supervisors (e.g.,

nurse educators, community coordinators). Back up is most effective and efficient when there is a protocol in place so peer supporters recognize when and who they need to ask for help. If peers have back up and resources available to them, they will use them. This is the best way to prevent and resolve misinformation.

Regular check-ins/meetings, and contact notes can be helpful in terms of proactively identifying and troubleshooting problems that peer supporters/participants are facing. **Group supervision** is a useful model for collaborative information sharing.

In addition to these management approaches, it is just as important to start off on the right foot during the **selection and training** of peer supporters. Several grantee projects screened candidates using questionnaires and interviews to understand the motives and backgrounds of peer supporters. Quite a few of the projects also conducted training evaluations to assess post-training competencies. Observations are often used during selection and training in order to identify “red flags”.

All of these proactive processes help programs prevent or detect problems early on before they turn into bigger issues.

Be Responsive

Successful peer support programs learn from and respond to their peer supporters and program participants. For example, one project shared that their participants wanted to choose their own peer supporter instead of being matched by the program. The project then created “baseball cards” for each peer supporter with a picture and a few facts about them from which clients could choose. Several projects recognized the need for booster trainings and promptly organized these to strengthen peer supporters’ abilities and clarify their questions.

Peer supporters genuinely want to help others! As caring, resourceful people, they will try to help their clients in the best way that they know how. It’s up to the programs to provide the necessary supervision and guidance to address emerging problems and ensure consistent quality of care. By being proactive and responsive, our grantees were able to address emergent problems before they became bigger issues.