Exploring Peer Health Coach (PHC) Roles in the Online Health-Management Program for Adults with Spinal Cord Injury (SCI)

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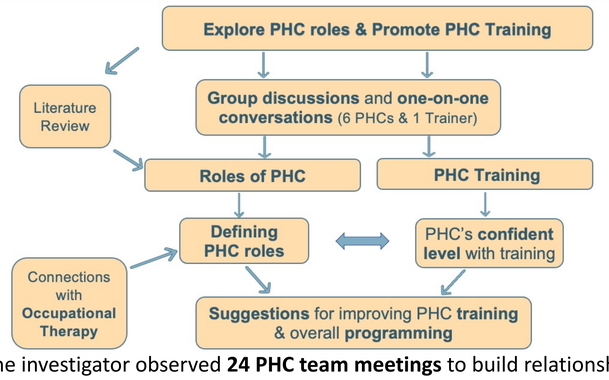
Background

- **296,000** people in the US are living with Spinal Cord Injury (SCI)
- **30%** require re-hospitalization within 1 year post discharge (NSCISC, 2021).
  - Individuals with SCI are at higher risk of developing **secondary health issues** , many of which can be prevented or managed by health management knowledge and strategies (Houlihan et al., 2017).
- **Gap:** Services, resources, & self management tools in the community currently **inadequate** for individuals with SCI (Allin et al., 2020).
- **SCI Peer Health Coach** (PHC) can play powerful role in promoting health management as are **trained** to support peers as they adjust to life changes & manage health challenges (Skeels et al., 2017).
- **SCI&U:** online health management program which utilizes **SCI-PHCs** & has shown potential to improve self-efficacy, quality of life & ability to address secondary SCI complications (Allin et al., 2020).
  - **International cooperation** between UToronto and United Spinal Association. Research approved though **REB** of Utoronto.
- **Aims:**
  1. Describe the innovative **PHC role** in relation to traditional roles of "peer" & peer mentor"
  2. Evaluate the current **PHC training** process within SCI&U.

Methods



- The investigator observed **24 PHC team meetings** to build relationship with the team & inform the training evaluation as well as the PHC roles.
- **Training materials** were reviewed & categorized to match different roles PHC served in the coaching sessions.
- **Current literature** related to PHC & peer mentor positions was reviewed to develop an overall **understanding** & to inform **PHC roles**.

Peer Health Coaches Characteristics

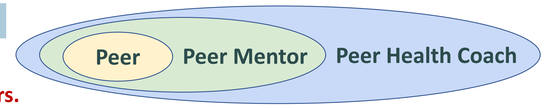
- PHCs receive over ***6 months*** of **evidence-based training & certificate** & participate ***weekly*** team meeting.
- **6 SCI-PHCs** participated in this project.

Age	Range: 36-55; Average: 49
Gender	2 Females, 4 Males
Ethnicity/heritage	1/3 identify as non-white
Years Since Injury	Range: 9-31; Average: 21 years
Level of SCI	Range from C4/5 to L5
Formal Education Level	Every PHC has some post-secondary experience
Years of SCI Peer Experience	Range: 4-28 years; Average: 16 years

Results & Discussion

PHC Roles in relation to Peer and Peer mentor

*All Peer Mentors are Peers;
All Peer Health Coaches are Peer Mentors & Peers.



	Peer	Peer Mentor	Peer Health Coach
Training & Certificate	N/A	~ 6-8 hours training	6 months of in-depth training with certification
Roles	SCI-Peer	SCI-Peer, Supporter	SCI-Peer, Supporter Advocate, Coach
Relationship	***Unintentional & unstructured***	***Intentional short-term & unstructured***	***Intentional long-lasting & structured***
Focus	***Empathizing***	Solving ***immediate needs*** by information sharing	***Developing skills*** & ***Behavior Change*** for long-term inter-dependence
Tools & Skills	Share **lived experience**	Share **lived experience** SCI related **knowledge** & **management skills**	Share **lived experience,** SCI related **knowledge** & **management skills** **Language-based/defined professional skill set**

PHC Roles & Gear shifting

- PHC **switch** between roles **naturally to meet the specific needs** of peers.
- **Training** is the **'gear stick'** that allows a PHC to **recognize** and **shift** into different modes as needed.

P (Park)
*The very **beginning**:*
Focus on listening & establishing relationship
Roles: SCI-Peer, Supporter

D (Drive)
***Moving forward**:*
BAP, instructing, working towards a goal
Roles: SCI-Peer, Supporter, Advocate, Coach

N (Neutral)
***In-between** sessions:*
Peer not ready for a change
PHC defaults to supporting
Roles: SCI-Peer, Supporter, Advocate

L (Low gear)
*When come across **challenges**:*
Solving problems, Challenger, Advising
Roles: SCI-Peer, Supporter, Coach

R (Reverse/Back-up)
*When peer is **overwhelmed**:*
Peer needs to regroup
Supporting, Motivating
Roles: SCI-Peer, Supporter, Advocate, Coach

* **Therapeutic modes** from Renee Taylor 's ***The Intentional Relationship: Occupational Therapy and The Use of Self*** was referred to inform **PHC modes shifting**. (Taylor, 2020)

PHC Training Materials and PHC's Confidence Level of each Training Item

PHC Training Items	PHC's Confidence with Training (scale of 1-10)	
	Range	**Average**
• **Interpersonal/Interactive skill base**		
○ Relationship building	7.5-10	8.9
○ Shared story (therapeutic use of self)	7.5-10	9.2
○ Affirmation statement	7.5-10	8.8
○ Reflective listening	7-10	9.2
• **Professional skill base / Certification**		
- **External** institution:		
○ Brief action plan (BAP)	7-10	9.1
○ Mental health first aid*	5-10	8.3
- **Internal** training:		
○ Identifying support system*	5-9	7.7
○ Resource review/organize*	7-10	8.2
○ In-between call text support/reminders	8-10	9.5
○ Peer sharing experience from coaching	N/A	
○ Role play/simulation		

PHCs feel **confident for most of the training items; need support in **Mental Health First Aid, resource review** & **identifying support system.**

Training Discussion from the PHC Perspective

Pros
- "Training is what makes you a **peer health coach**."
- Training is "infinitely **important**" in building **professionalism** & **confidence.**
- PHC Training is helpful both in the **job/role** & **personal life**.
- Training provided "a good **structure"** for sessions & "gave us the **language".**
- "Training let me know what to **expect."**

Cons
- Situations that PHC felt **unprepared for,** e.g., topics of mortality.
- **Time lags** between different training items.
- Some of the training items **not specifically** designed for the needs of **SCI.**
- Challenging & time-consuming to **navigate health-care system** & **find resources** in different states.

Recommendations

Recommendations for improving the training:

- **Condense** training timeline.
- Meet **support professionals** early, i.e., psychologist & rehab nurse
- **Review** training items on regular basis (in-services/ workshop)
- **Tailor** training specifically to SCI by adding: **trauma informed care, substance misuse, traumatic brain injury, SCI-related health information**
- **Note-taking** skill training & tools.
- Build **Tip booklet** & record **training videos** for different scenarios PHC may face with possible solutions.
- Build **resource library** including safety net services, community services, healthcare system information, etc.

Next Steps:

- Analyze personality test information to inform future PHC recruitment
- Interview PHC trainers & participants to examine from multiple stakeholder perspectives
- **Explore occupational therapy practitioner's role in supporting training and advocating for PHC.**

Goal - Disseminate findings to support recognition of & advocacy for PHC as a professional & valued member of the healthcare team!

References

Infographic

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