



Training peer supporters

Rapid review of feasibility and impacts



Setting the scene

- Eastern Academic Health Science Network is one of 15 Academic Health Science Networks (AHSNs) set up to spread innovation at pace and scale to improve health and generate economic growth.
- Peer-to-peer support is receiving increasing interest in the UK. Peer support involves someone using their own life experience or knowledge to help someone else, often from their own community or with similar experiences or physical or mental health conditions. Peer supporters may be paid or unpaid.
- There are mixed findings about the value of peer support and not all peer supporters feel well equipped for their role. Understanding what works best to train and develop peer supporters may be essential for assuring quality and getting the most benefit from this approach.

Reviewing the evidence

- Eastern Academic Health Science Network worked with an independent organisation, The Evidence Centre, to review evidence about training and development for people providing peer support.
- Ten bibliographic databases were searched up until March 2018 for studies from developed countries, published in English, about training peer supporters to provide information and support in residential, community or primary care settings.
- Ninety studies were included in the review, most of which were from the United States.



Recruiting peer supporters

- Recruitment may be part of the development process for peer supporters. The reviewers did not find any robust evidence comparing different approaches for recruiting people as peer supporters.
- There was evidence that many different types of people can be recruited and trained to provide peer support including those with physical and mental health conditions, children and university students, hairdressers and people from specific ethnic groups.
- Including information sessions and short training as part of the recruitment process was found to engage and help retain people.



Training peer supporters

- Both short and longer courses increased the knowledge and confidence of peer supporters. Even half day courses were found to increase knowledge and confidence when they included role play and other interactive elements. Sometimes peer supporters went on to change their own health behaviours or impact positively on others after training, but this was not always the case.
- Including information about both clinical topics and listening, support and facilitation skills was sometimes found to work well.
- Most studies focused on face-to-face training but a small number found that online training or DVDs were equally effective.
- Formally assessing the skills of peer supporters at the end of training helped to check that peer supporters were well prepared.

Ongoing development

- Many studies suggested that ongoing development opportunities and supervision were essential for peer supporters but almost no research compared different approaches.
- A small amount of research suggested that group supervision may be just as effective as group and individual supervision combined.
- Educating health and care workers about the role of peer supporters may be an important part of embedding peer support.



Summary of key points

- The rapid review identified a significant gap in knowledge about how best to develop people to provide peer support. There were many manuals and courses available, but not a lot of rigorous research about what worked well.
- It appeared feasible to train peer supporters using shorter or longer face-to-face or online programmes, but there was no robust evidence comparing whether those who were trained provided better support than those who were not trained.
- Most training improved the self-reported knowledge and confidence of peer supporters. Training with opportunities for practice and follow-up may help to further embed skills.
- Ongoing training, supervision and development was a key gap. People acknowledged that this was important, but few studies explored how to do this well. Filling the gaps may be essential to help peer support flourish in health and social care.