

Understanding Your Participants

Peer health coaching can be extremely rewarding, but also challenging at times.

Peer health coaching is participant-led. The participant will select their goals for health self-management. You, as the coach, may have insight into some barriers that are preventing your participant from achieving their goals.

If it seems like a participant isn't making progress towards their goals, you may feel like blaming the participant (*"They must not have read the resources I sent them," "Are they even trying?" "They don't take me seriously,"*) or blaming yourself (*"I didn't learn anything from training!" "What am I doing wrong?" "I can't connect with my peer"*). This is not usually the case.

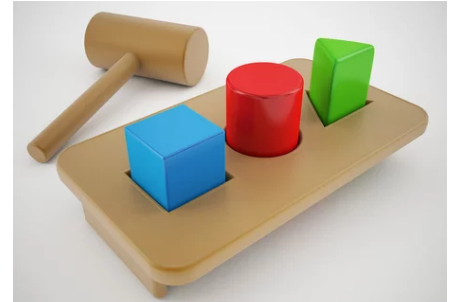
There are lots of reasons people don't do what they say they're going to do.

Think of all the times in your life you set a goal for yourself. Did you achieve it everytime?

Sometimes we lack the motivation or knowledge. Sometimes there are elements that are out of our control. Sometimes the goal isn't a right fit.

So what can we do?

The PEG Approach



Maybe you've heard the saying, **"You can't fit a square peg in a round hole"**. This phrase is used to describe a person or thing that is in a situation or doing something that does not suit them.

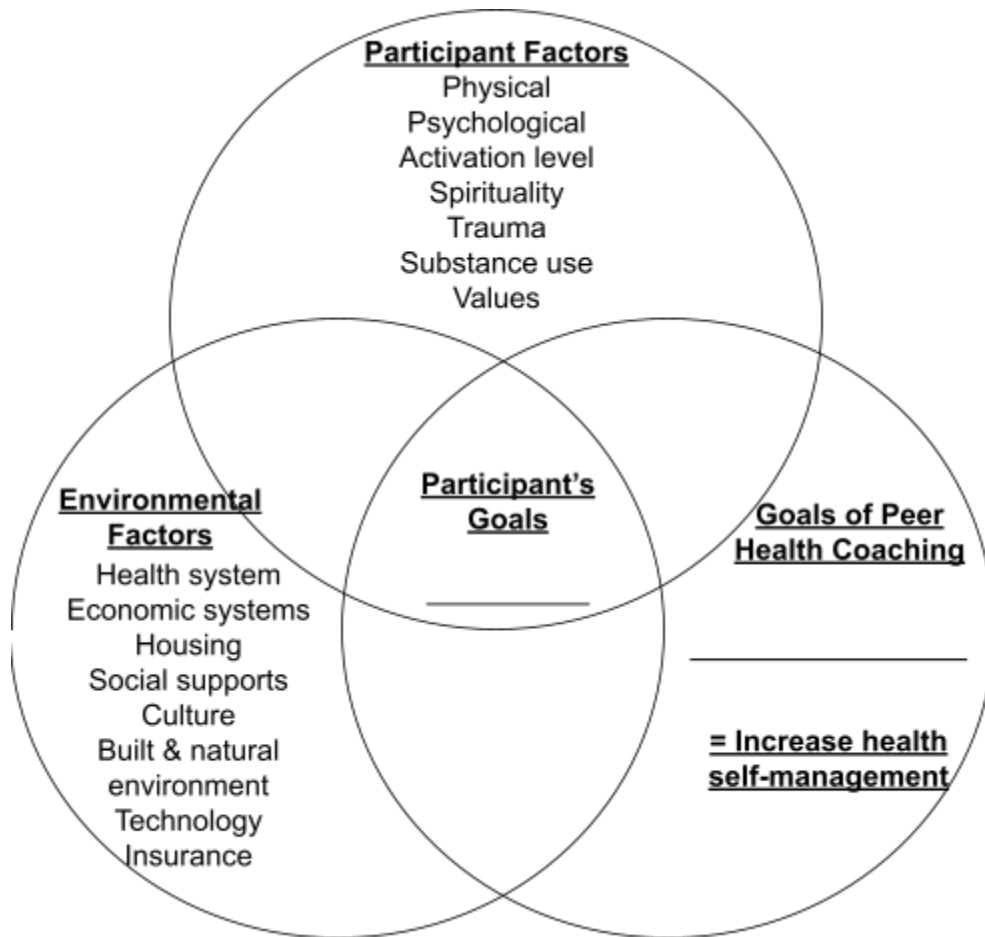
The PEG approach is all about understanding the factors that are affecting your participant. With an understanding of the participant factors, environmental factors, and the participant's goal, you can select the coaching tools and resources that are the right fit.

When you use the PEG approach, you're asking yourself, **does this fit?**

What is included in each lens?

PEG stands for

- **P**articipant Factors
- **E**nvironmental Factors
- **G**oals of Peer Health Coaching



What are participant factors?

- Participant factors are the skills, qualities, roles, knowledge, and abilities of the individual participant.
 - **Physical**- sensation and motor abilities
 - **Psychological**- emotional and behavioral health
 - **Activation level**- active behavior in self-management
 - **Motivation**- internal state that propels individuals to engage in goal-directed behavior.
 - **Self-efficacy**- an individual's belief in their abilities
 - **Spirituality**- deep experience of meaning.
 - **Trauma**- exposure to an incident or series of events that are emotionally disturbing or life-threatening with lasting adverse effects on the individual's functioning and mental, physical, social, emotional, and/or spiritual well-being
 - **Substance use**- the use and effects of selected substances, including alcohol, tobacco products, drugs, inhalants

- **Values**- principles, standards, or qualities considered worthwhile by the person who holds them
- **And more**

What are environmental factors?

- Environmental Factors are factors that exist outside of the individual. The environment is made up of the physical, social, cultural, institutional and socio-economic domains. (Law et al., 1996).
 - **Health System**- the processes, structures and institutions that are in place to oversee and manage a country's healthcare system. It manages the relationships between different actors and stakeholders involved in healthcare, including government agencies, healthcare providers, patients and their families, people and communities, civil society organizations and private sector entities.
 - **Residence**- the place in which a person lives (e.g. a home, SNIF, incarceration facility)
 - **Social support**- the assistance and connection a person has from others (i.e. family, friends, pets, neighbors, coworkers, organizations).
 - **Economic systems**- government policies, private sector actions, societal norms, and cultural practices that influence the allocation and utilization of resources that shape the social, physical, and cultural environments in which people live and work, thereby impacting their health and well-being.
 - **Culture**- the shared beliefs, values, and practices of a community or society.
 - **Built environment & technology**- the human-made physical structures and devices that can facilitate or impede mobility and accessibility to a person's surroundings.
 - **Natural environment**- the naturally occurring landscapes, ecosystems, climate, and biodiversity in a person's surroundings.
 - **Insurance**- the various types of coverage designed to mitigate financial risks associated with medical conditions and related expenses (e.g. health insurance, disability insurance, workers' compensation, etc.)
 - And more

What are the Participant's Goals?

- The participant's goals are the goals explicitly stated by the participant for what they want to achieve and get out of peer health coaching.

What are the Goals of Peer Health Coaching?

- The goals of peer health coaching are always set and led by the participant, but PHCs can have goals for coaching. The goals of peer health coaching are selected to help fit the goals of the participant.
- These goals may be to increase activation, to build a trusting relationship, or to develop problem-solving skills.
- The goals should always be a means to the ultimate goal of SCIPHC: to increase health self-management.

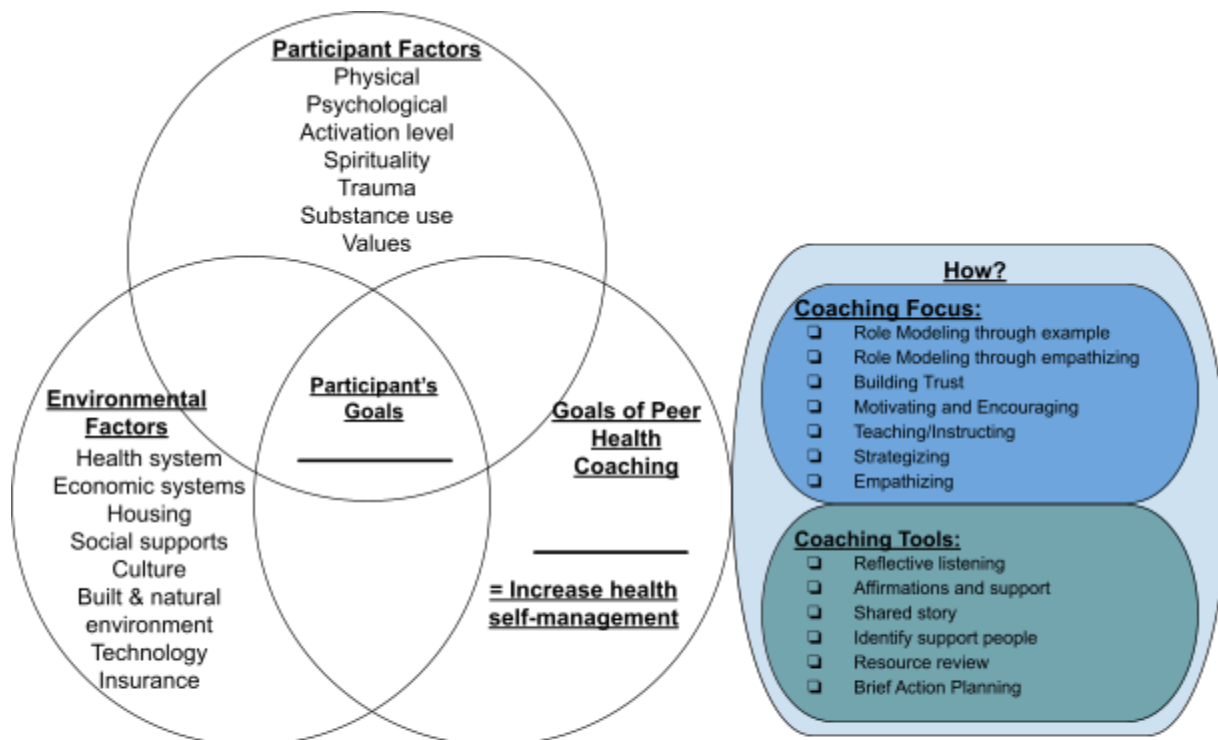
How to Achieve Goals of Peer Health Coaching?

1. **Coaching Focus**



2. **Coaching Tools**





Coaching Focus	Purpose
Role Modeling Through Example	Using reflective listening and sharing a story (of your experience or someone else's experience) to provide examples of people successfully managing their health. To promote inspiration, empowerment, and insights into effective strategies for navigating similar situations. 'I learned that there were a lot of people out there that go through the same things that I went through and are able to do fine in life after having something like that happens'.
Role Modeling Through Empathizing	Using reflective listening and sharing a story (of your experience or someone else's experience) to provide validation, a sense of understanding, and develop a bond.

Building Trust	To establish a foundation of mutual respect, understanding, and reliability between the peer and PHC. Trust fosters an environment where the peer feels comfortable sharing their experiences, challenges, and aspirations, allowing for more open communication and effective support. Additionally, trust enhances the peer’s confidence in the PHC’s guidance and advice, facilitating a deeper connection and increasing the likelihood of positive outcomes in the coaching relationship.
Motivating and Encouraging	To provide positive reinforcement for success, increase a sense of empowerment and accomplishment, and motivate a peer to maintain or initiate action.
Teaching/Instructing	To share knowledge, skills, and strategies through reflective listening, resource review, and support between sessions to reinforce learning.
Strategizing	To assist peers in setting goals and developing action plans through reflective listening, shared stories, identifying supports, and brief action planning. As well as to remind peers of their goals and action plans with reminders between sessions.
Empathizing	Using reflective listening and shared stories to bond with the peer over common encounters.

Coaching Tool	Purpose	Process
Reflective Listening (RL)	To ensure the PHC is listening attentively, understands a peer correctly, and acknowledges the peer’s perspective.	The peer shares his/her experience, and the PHC reflects the experience back to the peer in a non-judgmental way.
Affirmations	An essential MI skill. Providing support and reinforcing knowledge acquisition through encouragement to continue	The PHC makes a statement affirming or supporting something the peer says, without adding

	working through any resistance to taking action on addressing an issue.	personal opinion or advice.
Shared Story (SS)	A method of sharing specific experiences to support, exemplify, empathize and strategize with a peer.	After getting approval from the peer that they want the PHC to share, the PHC shares their own experience about an identified issue with the peer in a way that is relevant to the peer.
Identify Support Systems (non-expert & expert)	A method of figuring out support people, services and/or organizations that can help in any given situation.	The PHC asks the peer who they think can help them with any given issue, and if the peer can't identify anyone, the PHC helps them generate a list with contact information where necessary.
Resource Review	Using available information to provide education and resource referral.	The PHC asks a peer to share what they learned from reviewing a specific piece of information and reflects this back to the peer using affirmations to reinforce and solidify learning.
Brief Action Planning	Specific goal-setting method using SMART goals.	Very specific process in which PHCs received formal training and, eventually, certification.

Why use the PEG Approach?

Sometimes coaching comes naturally and it flows and you know what to do. Other times, you may feel stuck or unsure of the best options. The PEG approach is a helpful option to be used during challenging situations. It provides a model to organize information and a checklist for making sure you've thought about the options available.

The PEG model breaks down the natural steps of coaching into its basic steps of interviewing the participant to gain information of the situation, identifying the participant's goals, then determining your coaching plan to support the person achieving the goal.

To break down the process of coaching:

1. Identify the participant's goals
2. Identify the personal and environmental factors that support (+) and challenge (-) the participant's goals.
3. Determine a coaching goal in support of the participant's goal
4. Analyze all the information to select the coaching skills and coaching focus that is a good fit.

The PEG approach does not offer one right answer to any but instead, demonstrates the range of actions available for coaches.

The PEG approach CAN:

- CAN be used to understand and analyze problematic areas that challenge participant's ability to achieve their goals.
- CAN be used to understand and analyze strengths that support a participant's ability to achieve their goals.
- CAN be used to identify what person or environmental factors can be changed
- CAN be used to identify available coaching actions
- CAN support your unique coaching style

The PEG Approach CANNOT:

- CANNOT provide one right answer

You may be saying, "*But what if I want one right answer?*"

Let me introduce you to the term **equifinality**.

What is Equifinality?

The **Equifinality Principle** is the idea that there are many ways to achieve a goal. The theory of equifinality states that any given situation has more than one possible outcome and no single solution will work for all situations.

It's important to keep this principle in mind when trying to achieve goals because it means that there is more than one way of doing so—you have options other than just one solution to a problem. That includes the goal of successfully peer health coaching.

There are multiple paths to positive coaching outcomes (i.e., equifinality). There are multiple coaching styles, actions, and skills that may be a good fit for the participant. Coaching styles are unique to the coach- based on personality, life experiences, and peer health coaching experience, etc. Coaching styles are highly individualized and may evolve through trial-and-error.

The PEG approach encourages coaches to hone their reasoning and use it to guide the application of their PHC training and their unique coaching style.

Practice Case Instructions

Please read the case description.

Based off the information in the practice case, identify

- 1. The participant's goals**
- 2. The participant factors**
- 3. The environmental factors**

Based on that information,

4. Identify a **coaching goal** that supports the participant's goal

Based on that goal,

5. Identify a **focus for the session (1-3)**
6. Identify **coaching tools to use during the session.**

At the end,

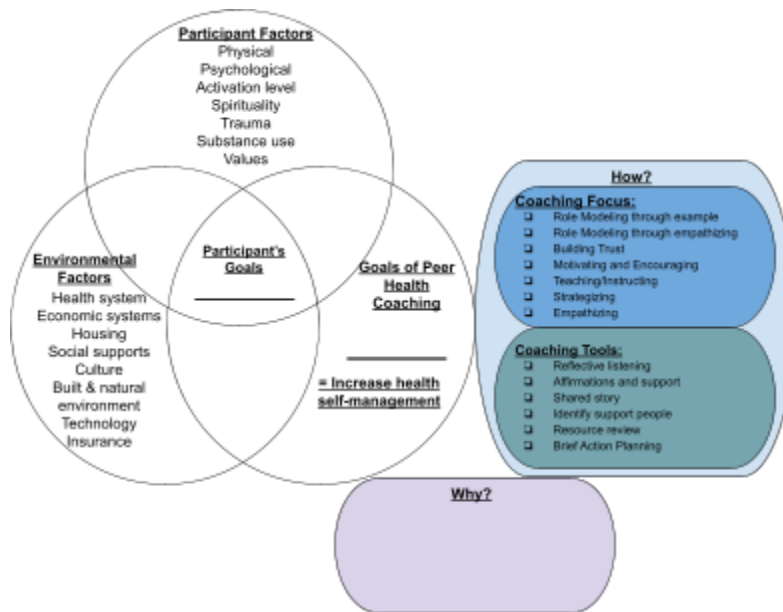
- 7. Explain your reasoning.**

*The blank template is available for you to write your answers in that space. It is an option, but **use whatever medium works for you** (ie. handwriting, typing, voice recording, thinking outloud, talking with someone, etc.).*

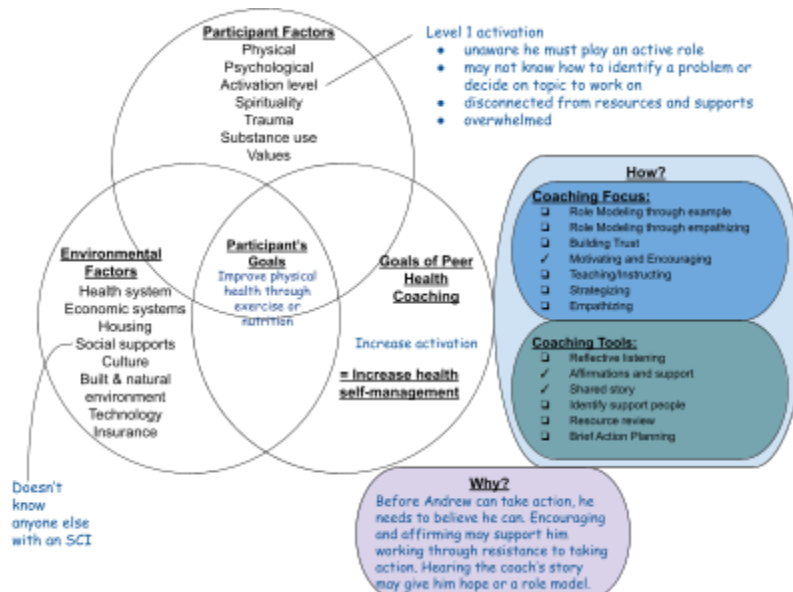
Let's practice

1. Andrew (he/him) has met with his peer health coach a few times and they've established a trusting relationship. When he meets with his PHC, he prefers the coach to lead the session and says he's not sure what he wants to work on. Andrew mentioned he would be interested in improving his physical health through nutrition, exercise, or other means, but doesn't even know where to start. Andrew lives in a small town and doesn't know anyone else who has an SCI.

Here's a template to get you started. Pull the information from the prompt and add it to the PEG model below. There is no one right answer.



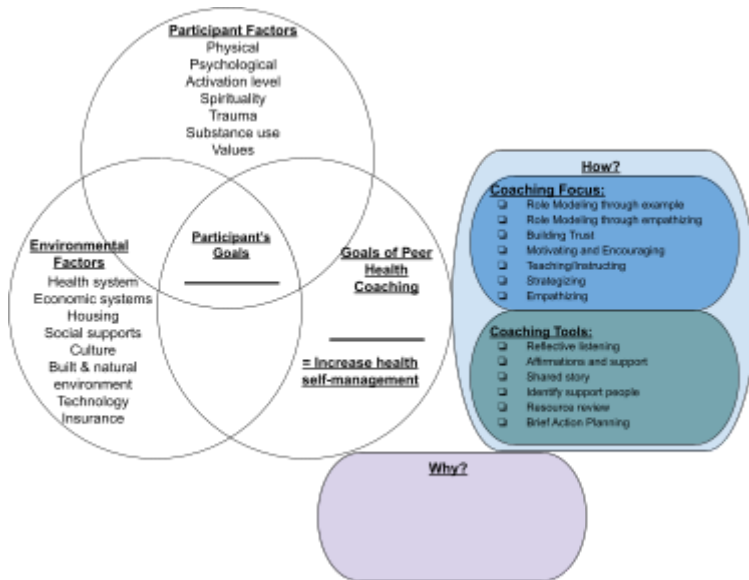
If you would like to compare your thoughts, refer to the filled-in PEG below.



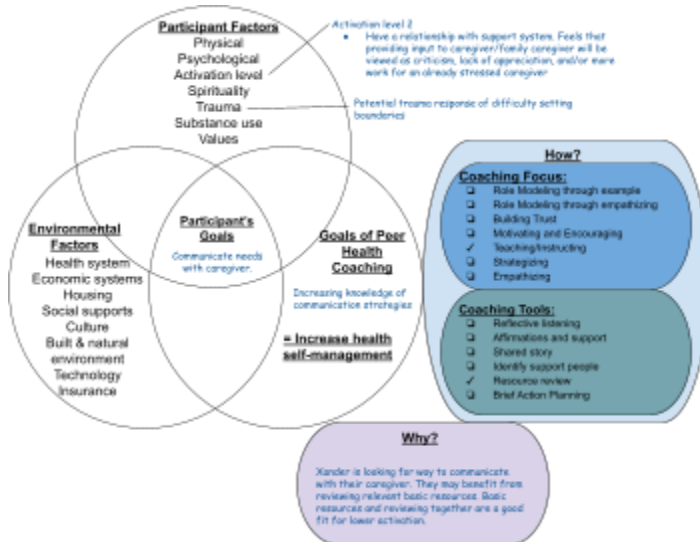
Lets try another!

- Xander (they/them) feels unsafe when their family caregiver transfers them. Xander has expressed to you they already feel guilty about how much their family caregiver does that they want something to change, but they don't want their caregiver to think they're criticizing them. They would like to communicate this to their caregiver, but don't know how.

Here's a template to get you started. Pull the information from the prompt and add it to the PEG model below. There is no one right answer.



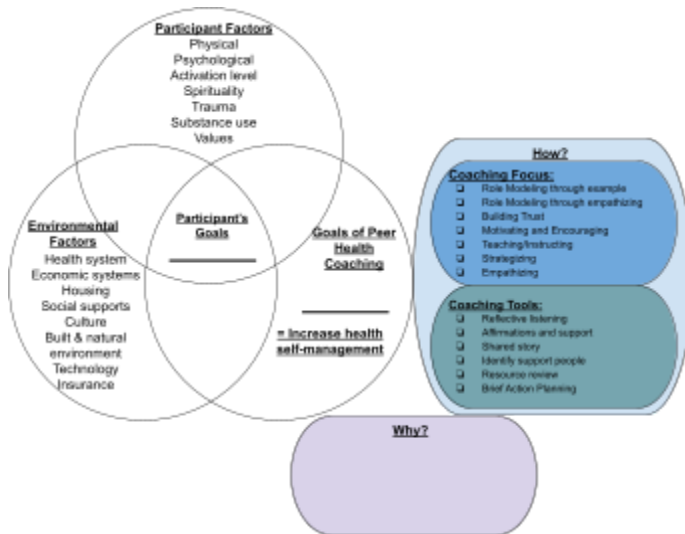
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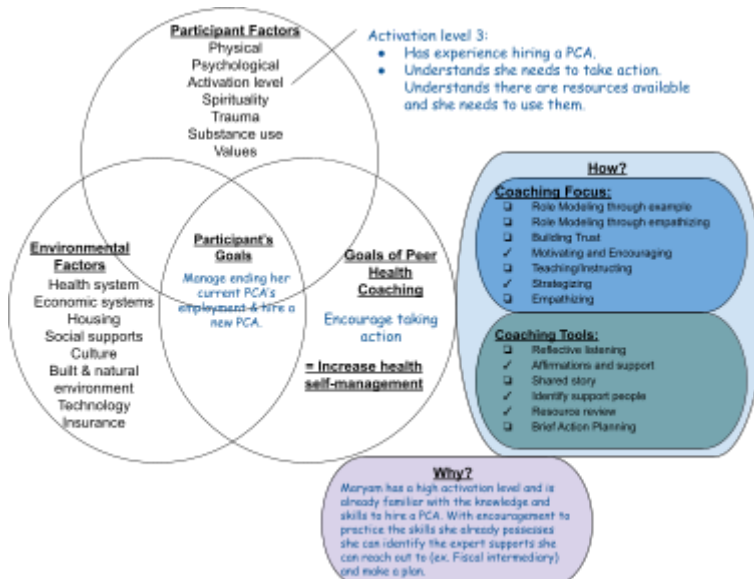
Lets try another!

- Maryam (she/her) has just been informed that her professional caregiver will be moving out of the state in two months. Maryam already has the knowledge for how secure funding for a PCA, but has never had to switch PCAs before. She knows she needs to take action, but hasn't started yet. She is worried that dealing with her insurance and recruiting a PCA could be a big challenge.

Here's a template to get you started. Pull the information from the prompt and add it to the PEG model below. There is no one right answer.



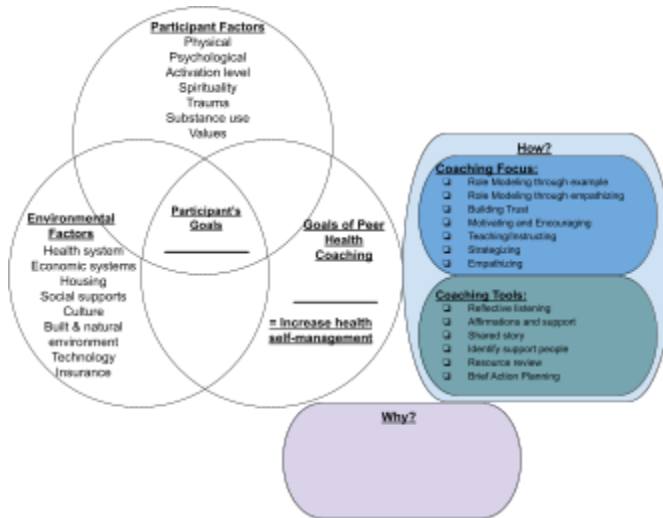
If you would like to compare your thoughts, refer to the filled-in PEG below.



Lets try another!

4. Logan (she/her) tells you her partner is pregnant. Logan is so excited to be a parent and can't wait to learn everything about childcare. She feels like she has developed strong self-management skills and is ready for this new stage of life with her family. Even though she doesn't have experience parenting, she knows how to problem solve and look for resources. She wants to set lots of goals to prepare for the change. In today's session, Logan wants to set a goal to learn and plan for transferring a baby in and out of a cot.

Here's a template to get you started. Pull the information from the prompt and add it to the PEG model below. There is no one right answer.



If you would like to compare your thoughts, refer to the filled-in PEG below.

