

Peer Group : A New Approach Of Nursing Intervention

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Abstract

Background: the development of nursing, especially related to the nursing intervention approach, is running so fast. This can be seen from the use of peer group support in nursing interventions in individual humans. The purpose of this literature is to find the impact of implementing nursing interventions using a peer group support approach.

Method: this literature review method uses JBI and Prisma on 120 articles taken from journal databases, namely Scopus, PubMed and Sciendirect.

Result: From the articles analyzed, it was found that the application of peer groups can improve individual abilities both in psychological and behavioral aspects.

Conclusion: the application of the peer group approach is able to be one of the approaches in the world of nursing in carrying out nursing actions today.

Keyword: Peer group support, peer group education and technology.

INTRODUCTION

Paradigma keperawatan terdiri dari kesehatan, keperawatan, lingkungan dan Manusia . One of the main components in the nursing paradigm is human. Humans are social creatures, where humans cannot live alone. Nurses with the role of care providers should re-realize the concept that humans are social creatures. In some cases where nurses have to provide intervention, it cannot be done only with an individual approach, but there is a need for a peer group support approach (1). One limitation of using an individual approach, especially in cases closely related to psychology, such as social isolation (2).

The limitations of the individual approach need other solutions that can be used by nurses in carrying out nursing actions. The peer group support approach can be one solution to these limitations. This is based on the fact that peer group support emphasizes togetherness among group members, especially seen from the same feelings towards what is being experienced (3).

The use of the peer group support approach can be used to improve individual behavior in the group. The peer group support approach can improve welfare, increase self-efficacy (3). Peer group education can also improve health, physical, emotional, and social well-being, reduce depression, and have a better future perspective (2). Various forms of peer group support are used, among others, the use of face to

face peer groups, the use of technology, and the use of peer group education. The purpose of this literature review is to see the application of peer group support in improving aspects of psychology and patient behavior.

METHODS

The method used in this literature review uses the JBI and PRISMA protocol (4). Articles were obtained by writing keywords in 3 database journals, namely Scopus, Pubmed and Science Direct. The keywords included are peer group support, peer group education and technology peer group. The inclusion criteria in this study are articles that appear selected from the year of publication, starting from 2019-2021, qualitative and quantitative research designs, and research areas in both hospitals and communities. Based on the PRISMA and JBI guidelines and inclusion criteria, 7 articles were obtained.

RESULT

The results of a review of 7 articles obtained from the journal database are as follows:

1. "Effectiveness of Technologically Enhanced Peer Support in Improving Glycemic Management Among Predominantly African American, Low-Income Adults With Diabetes".

Aims of research is to determine the impact of application of electronic health education combined with peer coaching. This study used a two armed randomized controlled trial. The intervention was given for 6 months. The inclusion criteria included patients with diabetes mellitus who were hospitalized, HbA1C 8.0% with age less than 70 years. There was no difference in the increase in the value of HbA1C. The limitation of this study is number of sample and only one place. The conclusion of this study is that there is no difference between the use of e health education technology compared to peer coaching(5).

2. "Examining the effect of peer-support on self-stigma among persons living with HIV / AIDS"

This study discusses differences in stigma ratings of HIV / AIDS sufferers between peer support groups. This study used cross sectional study with inclusion criteria of HIV / AIDS patients. The results showed that peer groups can reduce stigma in HIV / AIDS patients even though it is not enough to reduce stigma (chime). The limitation of this research is that a facility-based study of PLHIV has been conducted previously, the data for PLHIV who are members of the support group community was not included in this study. Another limitation is about sample is not a clear representation of the small PLHIV population. This study shows that although peer groups have not been able to significantly reduce the stigma of society, having a peer group can increase the confidence of HIV / AIDS patients with the support of peer groups of HIV / AIDS patients (6).

3. "Peer-support: a coping strategy for nurses working at the Emergency Ambulance Service"

The Purpose of this research is about the experiences of nurses in using a peer supporting model. This research design is qualitative with the number of participants as many as 14 emergency room nurses. In order to prioritize prevention, the peer support model is deemed necessary in particular among peers and can be a adobt to be activated basiclly in situations considered to big emotional effect, just like pediatric patient management or suicide. The results of this study need peer support in reducing emotional stress in the emergency room (7). This study is very interesting that nurses in the emergency room with work pressure that create emotional stress need peer support which is expected to reduce the emotional stress experienced by these nurses.

4. "Perceived social support and quality of life among adolescents in residential youth care: a cross-sectional study"

Adolescents who have experienced family problems, behavior problems in residential institutions need social support in improving their quality of life. This study focuses on the relationship between social support and adolescent quality of life. The study design was cross sectional with 400 adolescents in residential institutions with an age range of more than 18-23 years. The results show that there is a relationship between social support and adolescent quality of life. The limitations of this study include the cross-sectional design, variables that are more background to the respondents and instrument. This will provide more insight into the roles of different social support providers in improving the quality of life of adolescents. This study is important because adolescents who are in residential institutions need the importance of a lot of social support in their lives to improve their quality of life (8).

5. "Those People Motivate and Inspire Me to Take My Treatment." Peer Support for Adolescents Living With HIV in Cape Town, South Africa"

This study examines the views of adolescents with HIV and caregivers regarding peer support. The study design was qualitative in 35 adolescents aged 12-19 years who received treatment and 35 caregivers. The results of this study found that there are benefits to having peer group support, especially in improving communication between adolescents with HIV. A weakness of this study is the possibility of bias in peer group participants where they may not want to criticize their friends who are in the same group (9).

6. "Mobile Peer-Support for Opioid Use Disorders: Refinement of an Innovative Machine Learning Tool"

The use of information technology in implementing peer support needs to be developed. This study aims to create a peer group support-based platform for someone who experiences disorders due to drug use. 40 respondents were involved in this study. The results of this study are in the form of a platform which is the development of peer group support. In this research, we have not looked for the impact of this platform. This research is very good by combining information technology based on peer group support for someone who has a drug use disorder. In the future, there needs to be scientific evidence of the effectiveness of this platform (10).

7. "The outcomes of peer-led diabetes education in comparison to education delivered by health professionals in Iranian patients"

Patients with diabetes mellitus need to be educated. This study wants to compare the impact of education provided by health workers with peers on the self-care behavior of diabetes mellitus patients. The research design used clinical RCTs. A total of 40 respondents were included in this study, with inclusion criteria consisting of age 40-65 years, people with type 2 diabetes, had a history of diabetes more than 6 months and were willing to participate in this study. Limitations of this study were among other participants selected from the same clinical setting and the possible interactions between participants. The study was carried out in urban areas of Iran, which limits the generalizability of the findings to non-urban areas of Iran. The results of this study found that peer education can improve the self-care behavior of diabetes mellitus patients. The limitation of this study is that because the respondents were taken from the same hospital, it was possible that there was interaction between these respondents (11).

DISCUSSION

peer group is not an intervention, but peer group is an approach whose goal is to provide motivation, education and a community that supports each other (12). In its application, peer groups can be carried out into three approach activities, namely peer group support, peer group education and the use of peer group-based information technology. Peer group support is the most frequently used approach. The use of the peer group support approach tends to improve psychological and emotional aspects, although it cannot be separated from the behavioral aspects (3). Peer support can be done in the intensive care room where nurses can take this approach which is carried out on patients and families after leaving the intensive care room (13). Peer support can also improve the quality of life in patients with lupus. This happens because social support from peer groups can increase understanding of self-care management for lupus (1). The development of a peer group exercise model can also improve mental and physical health in cancer patients (14). The application of peer groups to mothers was also able to improve behavior to reduce obesity in their children (15). The peer group support-based sister breastfeeding program provides proven resources for black women in urban communities in the south to deal with critical resources, including peer and breastfeeding support, and receiving essential pregnancy, breastfeeding, and postpartum education(16) . The peer support approach for type 2 diabetes patients appears to be valued, as participants relate well to community health workers, who are ideally positioned in the health care system to provide services (17). Various research results regarding peer group support can be used as a reference that peer group support can be used in various types of diseases and patient conditions.

Peer group education can be applied to adolescents, the elderly, diabetes patients, and nurses (18). Education using a peer group approach can improve self-care behavior in adolescents with asthma . For adolescents with peer led, they feel comfortable to have discussions with their peers. This is a factor that makes it easier for adolescents to apply self-care behavior (19). The application of peer led cancer with a peer support approach is also able to increase students' knowledge and self-esteem about cancer. This study used students' peers as group leaders in the cancer patient education process (20). Diabetes mellitus patients improve their quality of life with the peer group education approach (21)(22). Peer group education can be used in diabetes education, this is because the two methods are both able to increase patient understanding of blood sugar and lipid control (23). Peer group education measures can increase knowledge about dementia and have a small but positive impact on the support received from nurses to elderly people with dementia (24). Peer-assisted learning-based actions were able to increase knowledge of medical students (25). Peer education measures are effective in reducing non-adherence to taking antiretroviral therapy. This study can be a basis for further studies to be carried out in other areas, because peer education can be influenced by sociodemographic and economic factors (26). Peer education is proven to be able to increase knowledge, understanding, and application of patients in terms of chemotherapy complications they experience (27). The prevention program using the Peer education strategy the more effective the more effective targeted at youth and youth and provided interactive and action-oriented interventions (28).

Peer group-based technology applications have been developed just like virtual peer support for family can improve wellbeing of their family that have a chronic illness (29). One of them is the implementation of a peer support intervention program which is able to reduce the risk of postnatal depression (30). The use of peer group-based text message can use short messages with an online approach where the results are that the use of online peer groups is more efficient (31). The use of social media with a peer group approach can provide emotional support and increase empowerment in diabetics (32).

CONCLUSION

peer group as an approach Nursing action needs to be done in both hospital and community services. Peer group support and peer group education, both conventional and technology-based, can be applied to patients with breast cancer, diabetes mellitus, HIV AIDS. This can have an impact on the increasingly varied approaches that can be taken by nurses in carrying out nursing actions.

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