Brain Injury Peer Support Groups Improve Experiences on the Ward

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Brain Injury Rehabilitation Service
Background

- A brain injury rehabilitation inpatient peer support group was established in 2003.
- The focus of this group was unstructured to allow patients to talk freely about the impact of their brain injury.
- This group ceased in 2005 due to funding and perceived value to the rehabilitation process.
- The peer support group was re-established in 2011 by Social Work and Neuropsychology.
Literature

- Individuals with a brain injury have to adjust to new roles:
  - within their immediate support network
  - wider social context such as employment and friendships (Chelboun and Hux, 2011)

- Groups have been found to allow participants to have a shared experience (Hibbard et al, 2002)

- Outpatient peer support groups have been found to enhance:
  - better community reintegration
  - occupational activities
  - independent living (Ownsworth et al, 2008)
Current Structure of BIRU Inpatient Peer Support Group
Methodology
Data Collection

• “Patient Experiences Questionnaire” (PEQ)
• The PEQ developed as a five point Likert scale
• A focus group was also conducted to explore the perceived benefits from the participants experience.
Data Analysis
Ability to share experiences with others in the inpatient peer support group
Ability to share and discuss the various ways of adapting and coping with my difficulties in the inpatient peer support group.
Ability to discuss problems and explore possible alternative solutions in the inpatient peer support group

- Strongly disagree: 10%
- Disagree: 14%
- Neutral: 23%
- Agree: 31%
- Strongly agree: 22%
Perception around relevant information and education discussed in the inpatient peer support group

- Strongly agree: 39%
- Agree: 19%
- Neutral: 19%
- Disagree: 9%
- Strongly disagree: 5%
## Peer support and ward experiences

<table>
<thead>
<tr>
<th></th>
<th>Mean (sd)</th>
<th>t</th>
<th>p</th>
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</thead>
<tbody>
<tr>
<td>I feel I am able to share my feelings and experiences with other patients</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Positive</td>
<td>4.20 (.87)</td>
<td>5.51</td>
<td>&lt;.001</td>
</tr>
<tr>
<td>Less positive</td>
<td>3.21 (1.21)</td>
<td></td>
<td></td>
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<tr>
<td>I feel I am able to share my experiences and feelings with staff</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Positive</td>
<td>4.24 (.88)</td>
<td>4.03</td>
<td>&lt;.001</td>
</tr>
<tr>
<td>Less positive</td>
<td>3.54 (1.13)</td>
<td></td>
<td></td>
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<tr>
<td>I feel I am able to discuss my problems and concerns with other patients</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Positive</td>
<td>3.78 (1.12)</td>
<td>4.86</td>
<td>&lt;.001</td>
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<tr>
<td>Less positive</td>
<td>2.86 (1.15)</td>
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<tr>
<td>I feel I am able to discuss my problems and concerns with staff</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Positive</td>
<td>4.28 (.77)</td>
<td>4.39</td>
<td>&lt;.001</td>
</tr>
<tr>
<td>Less positive</td>
<td>3.65 (.94)</td>
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Peer support and ward experiences (2)

<table>
<thead>
<tr>
<th>Description</th>
<th>Positive</th>
<th>Less positive</th>
<th>Significance</th>
</tr>
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<tbody>
<tr>
<td>I feel encouraged and supported by other patients</td>
<td>3.95 (.95)</td>
<td>3.00 (1.03)</td>
<td>&lt;.001</td>
</tr>
<tr>
<td>I feel encouraged and supported by other staff</td>
<td>4.32 (.88)</td>
<td>3.89 (.97)</td>
<td>.007</td>
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<tr>
<td>I feel I am able to cope with the difficulties I face</td>
<td>4.38 (.65)</td>
<td>3.71 (.99)</td>
<td>&lt;.001</td>
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<tr>
<td>I feel I am able to problem solve through difficulties I face</td>
<td>4.24 (.64)</td>
<td>3.79 (.95)</td>
<td>.002</td>
</tr>
<tr>
<td>When I need information, I feel I am able to talk to staff or other patients</td>
<td>4.42 (.69)</td>
<td>4.03 (.97)</td>
<td>.006</td>
</tr>
</tbody>
</table>
Key Learnings

• Provide information on different processes or avenues where patients can receive further support in regards to exploring current problems/issues
• More able to cope with adjustment to injury
• Feel able to ask and access information
• Feel more supported by fellow patients
Translation impact of research

• The team are supportive of the program and have been able to:
  – Redirect patients to discuss their emotional distress within the inpatient peer support group
  – The Team encourage patients to attend as they identify the group as a valuable part of their rehabilitation program
  – The peer support group allows other health disciplines to focus on their specific therapeutic interventions rather than psychosocial issues
Acknowledgements

Thank you to Dr Annerley Bates, Simone Cahill, Vivien Houston, Harriet Bodiemeade, Amy Seymour-Jones, Wilma Schouten, Bonnie Palmer, Felisa Golingi, Edgar Chan for their contribution to this research over the years.
References