A systematic mapping review of peer mentoring interventions for people with acquired brain injury including stroke

Key Findings

- There is a lack of high-quality published evidence for the effectiveness of peer mentoring after ABI.
- Seven studies were conducted in the United States and one in Canada.
- All were published from 1996-2014.
- Two randomised controlled trials (Struchen et al, 2011; Hanks et al, 2012), one pre-post design (Kolakowsky-Hayner et al, 2012), one mixed methods study (Hibbard et al, 2002), two case studies (Fraas, Bellerose, 2010; Kessler et al, 2014) and two service descriptions (Moreci, 1996; Coles, Snow, 2011).
- Studies differed in primary goals, outcome measures and peer mentoring models.
- Important information was provided on key implementation factors, such as logistical problems, matching criteria, mentor training and staffing requirements.
- One study looked specifically at social peer mentoring, with no significant increases in social activities or social network size for mentored participants (Struchen et al, 2011).
- Two studies showed significant improvements in a measure of participation (Kolakowsky-Hayner et al, 2012; Fraas, Bellerose, 2010) with other significant results evident in measures of quality of life Hanks et al, 2012, disability management (Kolakowsky-Hayner et al, 2012) and behavioural control (Hanks et al, 2012).
- The vast majority of participants reported positive, enjoyable experiences and high levels of satisfaction with the programme.

Project aims

The aim of this research was to complete a systematic review of published evidence to support the use of peer mentoring interventions for people with acquired brain injury.

The review was designed to answer the following questions:

- What has previous research told us about the design and implementation of a peer mentoring intervention for brain injury survivors?
- What is the evidence of peer mentoring’s effectiveness for enhancing participation in activities among people with acquired brain injuries?
- What is the evidence of peer mentoring’s effectiveness for enhancing quality of life, mood, behaviour management, confidence, resilience and other outcomes for brain injury survivors?

Background

Acquired brain injury (ABI) includes traumatic brain injury (TBI), stroke, brain tumours, meningitis and many other conditions. Approximately 350,000 people sustain ABIs annually in the United Kingdom, equating to one every 90 seconds (Headway, 2016).

People with ABI require support to resume an active and fulfilling life. Sadly, access to specialist ABI rehabilitation services is inadequate in many areas of the UK (Pickard et al, 2014). ABI survivors often receive little or no help to manage the effects of their injury.

It is important to investigate new ways to help people with ABI participate in personally valued activities. Peer mentoring is one such approach, defined as "a relationship in which two individuals share some common characteristic or experience and one provides needed assistance or support to the other" (Sherman et al., 2004).

This systematic review sought evidence for the effectiveness and design of peer mentoring between ABI survivors.
Methodology

Searches were developed using subject headings and text words relating to ABI and peer mentoring. We searched 12 medicine, health and social science databases, including MEDLINE, EMBASE, CINAHL and PsychINFO, up to early November 2016. Two trials registers and the PROSPERO database were also searched for ongoing research.

Two reviewers screened all titles and abstracts independently, before assessing full texts for final inclusion. A third reviewer resolved discrepancies. The reference lists and citations of selected studies were hand searched.

Two reviewers independently extracted data on study design, participants, intervention components and outcomes. Studies were assessed for quality and risk of bias using the Mixed Methods Appraisal Tool (MMAT) (Pluye et al., 2011). Meta-analysis was inappropriate because the papers used a variety of research designs.

The full systematic review protocol is available from: http://www.crd.york.ac.uk/PROSPERO/display_record.asp?ID=CRD42016050395

Conclusion

The evidence available comes from small-scale studies conducted in North America. Differences in methodology, goals and outcomes mean it is difficult to draw conclusions, while brief interventions and follow-up periods limit information on long-term effectiveness.

Many of the results are encouraging, particularly the overwhelmingly positive feedback from participants. Also, the information on key implementation factors, such as mentor training, staffing requirements, and logistical challenges, can usefully inform further research.

The potential for ABI peer mentoring to enhance long-term participation in activities, and the optimum design of the intervention, remain unclear. This is a promising area for further research in order to determine the acceptability and effectiveness of peer mentoring for ABI survivors in the UK.

Publications


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References


