

P188

P188 - 'PEEER' project- building Patient Empowerment, self Esteem, Employability and Resilience. A cost effective project:

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Background: Studies show that young people (YP) with chronic kidney disease do less well than their well peers in terms of mental health and employability. In the UK 31% of YP on renal replacement therapy (RRT) have mental health issues compared to 15% of the general population. More YP on RRT are unemployed compared to their well peers. Many of the issues start in childhood as studies show that children with chronic kidney disease have significant psychosocial issues including:

Depression

Anxiety

Educational difficulties

Relationship issues

Low self esteem

Social isolation, family dependency

Professional restriction

To address these issues we developed the PEEER project to help improve Patient Empowerment, self Esteem, Employability and Resilience.

PEEER brings YP together to participate in fun activities to help build self esteem develop an "I can do" attitude, build a peer support group and reduce the sense of isolation patients feel

PEEER offers a formal peer support mentorship and peer ambassador programme for those who wish to participate. Helping others will help the mentors and their peers by improving self esteem and psyche of both parties. PEEER offers the Duke Of Edinburgh Award and ASDAN to provide a range of nationally approved qualifications based around the development of individual and social skills leading to improved chances of employment.

Volunteering - an integral part of PEEER helps to strengthen and improve self-esteem.

PEEER directly supports YP learn digital skills so they can develop appropriate information resources to help other young people, families and healthcare professionals

Methods: Between January 2019 - April 2019 YP with kidney disease, their siblings and friends aged 11 years - 17 years were invited to 2 activity sessions. Session 1: rock climbing (taught by trained instructors) and learning digital skills (taught by a volunteer university lecturer), Session 2: Co-producing a game with researchers from Southampton University and attending a Premiership Football match. Feedback was obtained after each of the sessions on enjoyability of activities, self esteem, building friendship, improved mood and confidence. Parents were also asked the same questions about their children. The cost of each session was also recorded

Results: Session 1 N=19 costing £124.00; Session 2: n=9 costing £113.00 100% enjoyed the sessions. 100% scored 4/5 or 5/5 when asked if they thought they were now part of a friendship group and the sessions allowed them to socialise with their peers, felt more confident and more independent; 80% felt more energetic and good about themselves. One was physically unfit so scored 3/5 for energy and activity. Comments from the parents were their children were happier, pleased with what they had achieved and that they all benefited from the social interaction. The parents enjoyed meeting each other and have started to form a support group for themselves.

In summary the PEEER project is a cost effective programme to help build confidence, self esteem, peer support, reduce sense of isolation, and develop independence and support networks. More long term evidence of the benefits and sustainability of PEEER need to be collected.