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## COMMENTARY

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# A Method in Prevention of Cancer: Peer Education

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### Abstract

Today, cancer is the most common disease in many parts of the world. Choosing a healthy lifestyle and environment can help people prevent cancer development and an important aspect is better communication. Peer education models can provide networks within the context of 'social actions' and 'social ease'. Here we focus on a number of practical examples which have been described in the literature.

**Key Words:** Peer education models - healthy lifestyle - cancer prevention

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### What are Peers and Peer Education Models?

Peers are people who are alike in several respects: age, gender, interests, language, use of time, and aspirations. Peer education respects the influence peers bring to bear on each other and honours informal education. It has grown in popularity and practice in recent years in the field of health promotion. A "Peer education model" is a planned model which is made for the purpose of changing knowledge, behaviors and attitude in groups which have social interaction with each other, equal status, identity, similar language, attitude and behavior (Turner and Shepherd 1999, Family Health International Institute 2006).

The peer group is a social group. Social interaction in groups is also important in creating similar behaviors. According to Hogg and Turner (1987) "social interaction" is the change in someone's behavior, thoughts, and attitudes as result of being influenced by someone else's decision, attitude and thought. Similarities of attitudes and behaviors in perception provide a group social identity, with a consensus of rules determined by the group (Arkonaç, 1992).

Doise, Deschamps and Meyer (1978), social identity theorists, have stated that social behavior becomes similar under conditions where social identity comes to the fore. Sole and his colleagues (1975) believed that social identity paves the way for both cooperation and helping one another among members and Tajfel (1979) stated that common characteristics of group appear as result of identifying with group, identity increasing loyalty. Tajfel and Turner (1979) proposed that an individual's social identity with his/her peers forms his/her group behavior and attitude. Hence, like in any other group, members of adolescence groups show similar behaviors, with common attitudes and actions, manner of speaking, social life, manner of dressing, and in type of music they listen to. The adolescence period is more open to peer group influence than any other development period, and males/

females identify their attitudes and behavior with peers in their groups (Arkonaç, 1992).

It is observed that individual's peer group increases individual's capability and desire in learning behaviors that occurs as result of social interaction and social learning among adolescents. It is also experienced that it is useful for learning if a previously learned subject is repeated within a group. In the concept of "Social ease" an adolescent takes his/her peer as a model and consequently a development is seen in the learning process (Çetin et al., 2001).

According to Bandura (1977), basic concepts of social learning are observation, imitation, and taking someone as a model. Social learning among adolescents is act of forming identity to peers, of taking behaviors approved by peers as models, adoption and imitation of them and consequently reflection of all these concepts in his/her behaviors. Identity and social interaction increase the level of social learning. In developing positive health behaviors for adolescents, being aware of the effect of peer group interaction and identity, and peer education models are clearly important.

### Peer Education Models: From the Past to the Present

Peer health education was begun to prevent Asian influenza epidemic at Nebraska University in 1957. Peer education programmes were continued as important programmes in protecting and developing health in 1970's (Maurer, 1997). During the 1990s peer education has become an increasingly popular way of carrying out health promotion in different age groups. Peer-led measures have been employed primarily as an adjunctive provision of social support, education, and/or experiential knowledge to promote specific health behaviors or to assist others through a difficult life event. (Anderson et al., 1989; Hailey et al., 1992). The goal of the "Peer Education Program" is to provide multi-dimensional approaches to reach

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people about the connection between personal wellness and the wellness of their communities as it relates to a variety of issues (Leylekten Günümüze Üreme Sağı, 2006; Mckinley Health Center, 2007).

Today, peer education model is implemented in protecting from cancer and early detection of it, providing adequate and balanced nutrition, preventing being addictive to any substance for the purpose of helping individuals to have positive health behaviors, protecting public health and developing it. It is stated that peer to peer education is fun and reaches to wide range of group. In peer education programme, peer educators give face to face or inter active consulting services to other people, develop them, help them (Leylekten Günümüze Üreme Sağı, 2006; Mckinley Health Center, 2007).

### **What is Peer Education's Strength?**

The Peer Education Program offers personal opportunities to increase their level of personal wellness, develop awareness about a variety of issues, participate in life skills training, and enhance their personal growth through activities and projects. (Mckinley Health Center, 2007).

It is important to plan peer education programmes systematically with education models and to define the way how peer interaction occurs. (Wolf et al., 2000). To make peer education effective in developing positive health behavior it is required to choose peer educators who are volunteer and who have high level of self-respect, it is also required that peer educator must be a member of group and he/she must ensure consulting and negotiation possibilities to students (Simon, 1993; Maurer, 1997). In peer education; in the end of workshops organized to evaluate the effectiveness of peer educators it was seen that only 4 of 24 peer educators got marks under 85 and the rest 20 peer educators got marks over 90 (Croll et al, 1993). Peer educators's being insufficient for the education they are required to give or their lack of providing effective communication and consulting service can be counted among the factors decreasing the effectiveness of peer education (Simon, 1993).

Peer education has grown in popularity and practice in recent years in the field of health promotion. It is stated that peer education is effective in various efforts made for different cases like to ensure positive health behaviors to people. It was stated that as the result of efforts made, adolescents's being addictive to substance decreased and it was observed that adolescents became stronger in coping with stressors and in struggling against substances creating adictiveness, positive changings were also seen with in 6 months in nutrition related knowledge and behaviors of mothers whose children need sufficient and ballanced nutrition (McAlcavy et al., 1996; Persky et al., 1999; Turner and Shepherd, 1999; Terakye et al., 2000; Taylor et al., 2000).

### **What is Peer Education's Efficacy in Cancer Prevention?**

Peer education involves peers communicating cancer

prevention information and strategies in ways that can lead to behavioural change (Hailey et al., 1992).

Peer group using this model is very common in developing sexual health and preventing contagious diseases. For example, Women's International Network of organization include cervical cancer-screening program with youth peer education group (Women's International Network for Guatemalan Solutions (WINGS) 2006). According to Ford et al (2000) peer education was associated with an increase in the level of AIDS knowledge and in condom usage among women to protect their selves from sexually contagious deseases. Change in the level of knowledge about HIV and hepatitis has also been observed but there has been no change of attitude for protection among males (Ziersch et al., 2000).

One of the areas where peer education model is effective is area of cancer protection programmes. As a result of efforts made with high school students it was observed that there was developing changing in knowledge and behaviors in 6 months, and with peer support it was determined that participation of males in prostat cancer protection programmes increased (Weinrich et al., 1998). As a result of peer education programmes for protection from intestine cancer implemented among workers who were in low sociocultural position it was determined that the knowledge of importance of vegetable and fruit consumption increased ( $p < 0.01$ ), in measurings made in 6 months this level of knowledge decreased ( $p > 0.05$ ) however the daily vegetable and fruit consumption continued ( $p < 0.01$ ) (Buller et al., 1999).

According to another study, skin cancer prevention and sun protection education can successfully be promoted by using peer educators (Wiist and Snider, 1991; Forket al., 1992; Reding et al., 1995).

In a study inspecting peer education and peer support effects in breast self examination (BSE) which is one of the positive health behaviors of women in society for awareness of breast cancer, while in the begining the ratio of BSE practice among women was 55% it became 98% in 6 months and the importance of peer support was proven (Lierman et al., 1994). In another study, regularly practice of BSE among students was 2,66% before training it increased to the percentage of 66% (Tuna and Dicle 2003). Mean scores for performing BSE after training given by peer guides were also increased in a further investigation (Sevil et al., 2005).

As a result, peer education model for protection from cancer is an effective method for adolescents. Health workers can use peer education models for primary prevention, early diagnosis and other aspects of cancer prevention. In addition, they can establish cancer awareness teams with peers.

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