ATATÜRK ÜNİVERSİTESİ YAYINLARI ATATURK UNIVERSITY PUBLICATIONS

Research Article *Araştırma Makalesi* DOI: 10.17049/jnursology.1502527

The Effect of Peer Counseling on Individual, Social and Academic Adaptation of Nursing Students: A Randomized Controlled Trial

Akran Danışmanlığının Hemşirelik Öğrencilerinin Bireysel, Sosyal ve Akademik Uyumu Üzerindeki Etkisi: Randomize Kontrollü Bir Çalışma

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ABSTRACT

Objective: The study aimed to determine the effect of peer counseling on nursing students' individual, social, and academic adaptation.

Methods: The study was a randomized controlled trial design. A total of 80 1st-year students, 40 in the intervention and 40 in the control group were determined to be peers. Peer Counselor Selection Form, Peer Selection Form, Peer Counselor Information Form, Peer Information Form, University Life Adaptation Scale, Individual Development Initiative Scale, Peer Follow-up Form were the data collection tools in the study. Quantitative data were analyzed in SPSS 21.0. Document analysis was used to analyze the statements in the Peer Monitoring Form.

Results: In the study, a significant difference was found between the mean scores of the Personal Adjustment sub-dimension of the Adjustment to University Life Scale before, after, and six months after the completion of peer counseling, while no significant difference was found between the mean scores of the Academic and Social Adjustment sub-dimensions of the peers in the intervention and control groups. There was significant difference between the mean scores of the peers in the intervention and control groups on the Individual Development Initiatives Scale before and after peer counseling and six months after the completion of peer counseling.

Conclusion: According to the results obtained from this study, organizing activities that will reveal the importance of peer counseling in individual, social, and academic adaptation, preparation for the profession, and increasing students' knowledge and awareness, formal structuring of peer counseling in line with the process, evaluation the results.

Keywords: Peer counseling, peer counselor, peer, academic adaptation, social adaptation, individual adaptation, nursing student

ÖZ

Amaç: Araştırmada, akran danışmanlığının hemşirelik öğrencilerinin bireysel, sosyal ve akademik uyumlarına etkisinin belirlenmesi amaçlanmıştır.

Yöntemler: Araştırma, randomize kontrollü araştırma tasarımındadır. Girişim grubunda 40 ve kontrol grubunda 40 olmak üzere toplam 80 1. sınıf öğrencisi akran olarak belirlenmiştir. Araştırmada veri toplama araçları olarak Akran Danışmanı Seçim Formu, Akran Seçim Formu, Akran Danışmanı Bilgi Formu, Akran Bilgi Formu, Üniversite Yaşamına Uyum Ölçeği, Bireysel Gelişim İnisiyatifi Ölçeği, Akran İzleme Formu kullanılmıştır. Nicel veriler, SPSS 21.0'de analiz edilmiştir. Akran İzleme Formundaki ifadeleri analiz etmek için doküman analizi kullanılmıştır.

Bulgular: Araştırmada akran danışmanlığı öncesi, sonrası ve altı ay sonrası Üniversite Yaşamına Uyum Ölçeği Kişisel Uyum alt boyutu puan ortalamaları arasında anlamlı bir fark bulunurken, girişim ve kontrol gruplarındaki akranların Akademik Uyum ve Sosyal Uyum alt boyutları puan ortalamaları arasında anlamlı bir fark bulunmamıştır. Girişim ve kontrol gruplarındaki akranların akran danışmanlığı öncesi, sonrası ve akran danışmanlığının tamamlanmasından altı ay sonra Bireysel Gelişim İnisiyatifleri Ölçeği puan ortalamaları arasında istatistiksel olarak anlamlı bir fark bulunmuştur.

Sonuç: Elde edilen sonuçlara göre, akran danışmanlığının bireysel, sosyal ve akademik uyum, mesleğe hazırlık, öğrencilerin bilgi ve farkındalıklarının artırılmasındaki önemini ortaya koyacak etkinliklerin düzenlenmesi, akran danışmanlığının süreç doğrultusunda formal olarak yapılandırılması, sonuçlarının değerlendirilmesi önerilmektedir.

Anahtar Kelimeler: Akran danışmanlığı, akran, akran danışmanı, akademik uyum, sosyal uyum, bireysel uyum, hemşirelik öğrencisi

This study was derived from a master's thesis and was presented as an oral presentation at the 2nd International & 8th National Nursing Education Congress, held in Kuşadası, Aydın, Turkey, on November 24–26, 2022.

Geliş Tarihi/Received	19.06.2024
Revizyon Talebi/Revision Requested	26.02.2025
Son Revizyon/Last Revision	02.06.2025
Kabul Tarihi/Accepted	27.06.2025
Yayın Tarihi/Publication Date	14.09.2025

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Cite this article: Sözer NÖ, Şenyuva E. The effect of peer counseling on individual, social and academic adaptation of nursing students: a randomized controlled trial. *J Nursology*. doi: 10.17049/jnursology.1502527

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INTRODUCTION

Nursing education is a process that consists of theoretical and practical knowledge, attitudes and skills and requires new students to be supported with different practices and methods in terms of their academic, social and career development. Students who are new to nursing education may experience problems in adapting to the changes they will experience individually, socially and academically in this process.[1-5] Today, changes and developments in information and technology affect nursing education as socio-cultural and political areas and require students to have skills such as active participation, creative and critical thinking, assuming responsibility, creating environments where peers can work together, learning from each other, helping each other learn, learning by teaching, and taking responsibility for learning.[6-8]

Peer counseling is one of the methods that play a role in ensuring students' adaptation to university life and institutional culture, encouraging their participation in socio-cultural and sports activities, supporting their multifaceted development, ensuring that they have basic life skills, and facilitating their individual, social and academic adaptation.[6-8] In related studies, it is emphasized that peer counseling can be used to eliminate the problems of nursing students' adaptation to theoretical courses and clinical practice, facilitating their learning, and preventing conflicts that they cannot resolve individually or between groups.[9-12]

In nursing education, peer counseling is also used effectively in laboratory and clinical applications due to the fact that students cannot allocate enough time, especially in clinical applications due to the low number of qualified instructors, the low number of nurses who are expected to guide them, or their work intensity, thus supporting students' active participation in the learning process and the development of independent and creative thinking skills.[3,6,9-12] In the literature, it is seen that peer counseling is mainly used in nursing education to eliminate students' problems of adaptation to theoretical courses and clinical practice, facilitating their learning, preventing conflicts that they cannot resolve individually or between groups, ensuring the adaptation of some individuals who need special support (patients with diabetes, individuals with mental disabilities, alcohol and substance addicts), and facilitating/ensuring the individual, social and academic adaptation of students studying especially in the first year of university education.[4,6,9-12] However, although existing research has focused on certain aspects of mental counseling, no research has been found that does not reveal its effect on facilitating nursing students' individual, social and academic adjustment. In this context, this study aims to fill this gap.

AIM

The study aimed to determine the effect of peer counseling on nursing students' individual, social, and academic adaptation.

Study Hypotheses

- H_1: Peers in the intervention group have a higher score of adaptation to university life than peers in the control group.
- H_2: The individual development initiative score of peers in the intervention group is higher than those in the control group.

METHODS

Design and Setting

The study is a randomized controlled trial design.

The study population consisted of all first-year students (N: 281) newly enrolled in the Faculty of Nursing of a state university in Istanbul.

A power analysis was performed to determine the sample size of the 1st-grade students who would be peers in the study (the margin of error (α) = 0.05 and the power of the test (1-β) = 0.80 with a margin of error (α) = 0.05 and the power of the test (1-β) = 0.80, assuming an effect rate of 95% in the intervention group and 70% in the control group). A total of 80 first-grade students, 40 in the intervention group and 40 in the control group were identified as peers.

According to the literature, a peer counselor must counsel 1-2 peers to carry out the peer counseling process effectively and efficiently.[2,13-16] In the study, it was deemed appropriate for a peer counselor to provide peer counseling to two peers. A total of 40 3rd year students, 20 in the intervention group and 20 in the control group were peer counselors.

Determination of Intervention and Control Groups

In the study, the Peer Counselor Selection Form was applied to all 3rd grade students (N: 286) and the Peer Selection Form was applied to all 1st grade students (N: 281), and they were asked to fill out the relevant forms by writing a nickname.

After evaluating the completed forms, 3rd grade students (n: 113) who met the inclusion criteria were identified as peer counselors (voluntarily participating in the study, willing to be a peer counselor, willingly choosing the

nursing profession, and participating in socio-cultural and sportive activities). First-year students (n: 124) who met the inclusion criteria were identified as peers (newly enrolled in the Faculty of Nursing in the 2021-2022 academic year, voluntarily participated in the study, willing to be a peer, never received peer counseling, studying at a university for the first time, and having difficulties in adapting to the university, faculty, city, etc.).

The pseudonyms of the identified 3rd year and 1st year students were listed in a table and each was given a random sequence number. They were asked to write their contact information in a separate list opposite their nicknames in order to determine which student the written nicknames belonged to. The pseudonyms on the list were sorted in a mixed order. The selection of the students who would constitute the sample group (peer counselors and peers in the intervention and control groups) was carried out randomly by lottery method without knowing which pseudonym belonged to which student (www.random.org). After randomly assigning numbers to the groups, nicknames corresponding to the numbers were listed.

The first 20 3rd grade students were selected as peer counselors and 40 1st grade students were selected as peers for the intervention group. The second 20 3rd graders were placed in the control group as peer counselors and 40 1st graders as peers.

Homogeneity between the groups was ensured by testing the students' age, gender, graduated secondary education institution, and place of residence during the education period. Mean, standard deviation, independent sample t test and R-Project program were used to evaluate the homogeneity of both groups. As a result of the comparison, it was found that there was no statistically significant difference between the variables of the intervention and control groups (P>.05). According to the results, the intervention group [(peer counselor (n: 20) peer (n: 40)] and the control group [(peer counselor (n: 20) peer (n: 40)] showed homogeneous distribution.

Intervention group: Peers who received counseling from peer counseler
Control group: Peers who did not receive peer counseling

Data Collection Tools

Peer Counselor Selection Form, Peer Selection Form, Peer Counselor Information Form, Peer Information Form, University Life Adaptation Scale, Individual Development Initiative Scale, Peer Follow-up Form were the data collection tools in the study.[12,17]

Peer Counselor Selection Form: This form was developed by the researchers in line with the literature to determine the 3rd-year students who will be peer counselors.[2,3,9,10,15,16] The form included 15 questions to determine the characteristics of students, such as age, sex, graduated secondary education institution, participation in social, cultural, and sporting activities outside and within the faculty, willingness to be a peer counselor, etc.

Peer Selection Form: This form was developed by researchers in line with the literature to determine the first-year students who will be peers.[3,9,10,18] The form included 18 questions to obtain the characteristics of students, such as age, sex, secondary education institution graduated from, university, faculty, city, etc., in case of difficulty adapting, such as people to receive help/support/counseling, etc.

Peer Counselor Information Form: This form was developed by the researchers in line with the literature.[6,19,20]The form includes 16 questions to determine the characteristics of students, such as age, sex, participation in the social/sports activity in the faculty, etc.

Peer Information Form: This form was developed by researchers in line with the literature.[9,10,21]The form included ten questions to determine the characteristics of the students, such as age, sex, university, faculty, city, etc., in case of difficulty in adapting, the people to whom counseling will be received, and the subjects desired to receive peer counseling, etc.

Adaptation to University Life Scale: This scale was developed by Aslan[22] to determine the adaptation status of students to university life. It consists of 60 items and three sub-dimensions; personal adaptation (20 items), social adaptation (20 items), and academic adaptation (20 items). The five-point Likert-type scale answer options were (5) I totally agree and (1) I disagree. There are no items in the scale that are reversed and scored. Cronbach's alpha reliability coefficients of the sub-dimensions of the scale were 0.92 for social cohesion.89 and.93 for academic adaptation.[22]In the study, Cronbach's alpha reliability coefficients of the sub-dimensions of the scale were 0.901 for personal adaptation, 0.921 for social adaptation, and 0.903 for academic adaptation.

Personal Growth Initiative Scale: The scale was developed by Akın and Anlı[23] to determine the personal growth initiatives of the students. The answer options of the scale prepared in the six-point likert type are as follows: (6) Strongly agree to (1) Strongly disagree. There are no items in this scale that are reversed and scored. Cronbach's alpha reliability coefficient of the scale was 0.83, while the test-retest reliability coefficient was 0.94.[23] Cronbach's alpha

reliability coefficient of the scale was 0.853 in the study.

Peer Follow-up Form: It was developed by the researchers in line with the literature in order to monitor the problems that the peers conveyed to the peer counselors during the peer counseling process and what the peer counselors did/planned to solve these problems.[3,24-29] The peer counselors completed the form in the intervention and control groups after the interviews with their peers. The form included the problems communicated by the peer, the actions taken by the peer counselor, and the plans made by the peer counselor.

Peer Counseling Training

The aim of the peer counseling training;

- the peer counseling training aims to inform the newly enrolled first year students (peers) about the city, university, faculty, education system, socio-cultural, sportive, scholarship-guidance, etc. opportunities, effective communication, problem-solving process, etc., and to ensure that they have knowledge, attitudes and skills on these issues,
- counseling peers in line with the knowledge, attitudes, and skills they have acquired,
- to ensure their individual, academic, and professional adaptation,
- to put forward an effective and efficient peer counseling process.

To achieve these goals, the responsibilities of peer counselors and peers and the counseling process (interviews, etc.) were first shared with peer counselors. Then, the city, university, faculty, education system, and all the faculty facilities (socio-cultural, sports, scholarship guidance, etc. opportunities) were introduced. Afterward, information was shared about the skills (communication skills, problem-solving, etc.) that peer counselors should have to carry out the process efficiently. The training was held online by researcher on 07-08 September 2021 (two days) between 12.00 - 18.00 (8 hours in total).

During the training, lecture, question and answer, brainstorming, discussion teaching methods and techniques; barcovision/slide, video display teaching materials were used. At the end of the training, the participants were verbally evaluated on the topics covered. The evaluation of the training program was made with the "Peer Counselor Training Evaluation Form".

Peer Counseling Process

Peer counseling started at the beginning of the 2021-2022 academic year (September 2021) and continued until the end (December 2021).

First, peer counselors in the intervention group were given online Peer Counseling Training by researcher on September 07-08, 2021 (two days) between 12.00 - 18.00 (total 8 hours). The peer counselors in the control group did not receive any training. Only a brief explanation/information about peer counseling, its purpose, etc., was given.

Peer counselors and peers in the intervention group held regular online/face-to-face meetings every month (October - November - December). Meeting days and times were planned during the current meeting or via WhatsApp. During the interviews, the peers asked the peer counselors questions about the faculty, education and training process, courses, clinical practice, clubs, social/sportive activities, etc. Peer counselors tried to answer these questions in line with their knowledge and experience and received support from instructors when necessary. Peer counselors and peers in the control group were not directed to meet regularly.

In this process, especially in the control group, there were peer counselors/peers who wanted to leave peer counseling. In this case, the researchers interviewed them about why they wanted to leave, and their expectations were primarily taken by using motivational techniques. In order to motivate them to continue, they were reminded of the purpose of the study and the contributions of their participation in the study. The benefits that peer counseling would provide them and the contributions of the information they gained from the experiences of peer counselors to their adaptation processes were explained in detail to the peers. In the same way, the benefits of peer counseling for themselves and their contributions to their peers were explained to the peer counselors, and they were encouraged to empathize with their peers. As a result of this sharing, peer counselors/peers who wanted to leave were allowed to continue.

Data Collection Process

The data were collected between 15 September 2021 and 15 June 2022. In the study, all 3rd-year students completed the Peer Counselor Selection Form, and all 1st-year students completed the Peer Selection Form. Peer counselors and peers were determined according to these forms. Those who participated in the intervention and control groups were selected from the determined peer counselors and peers. Peer counselors in the intervention and control groups completed the Peer Counselor Information Form, and peers completed the Peer

Information Form. Peer counselors in the intervention group received Peer Counseling Training. Peer counselors in the control group did not receive any training. Only brief explanations/information about peer counseling, its purpose, etc., were given. Peer counselors and peers in the intervention group held regular online/face-to-face interviews every month (October - November - December). The Adaptation to University Life Scale and Individual Development Initiative Scale were administered to the peers in the intervention and control groups before (September 2021), after (December 2021), and six months after the peer counseling was completed (June 2022).

Data Analysis

The data were analyzed in version 21.0 of the SPSS (IBM SPSS Corp., Armonk, NY, USA) package program. Quantitative data were analyzed with the mean, standard deviation, independent sample t-test, and chi-square tests. The level of statistical significance was set at <.05.[17]

Document analysis was used to analyze the statements in the Peer Monitoring Form. The opinions and evaluations of the peer counselors regarding their follow-ups after the interviews with their peers were converted into written text in the computer environment without any changes. The data obtained were grouped under two main themes: strengths and weaknesses.

Ethics Statement

Ethics committee approval of the research was from the Istanbul University - Cerrahpaşa Social and Humanities Ethics Committee (Date: 01.12.2020 Number: 74555795-050.01.04). Institutional permission (Date: 31.08.2020 Number: 74311748-302.08.01) was obtained from the Dean of the Faculty of Nursing of the state university where the research took place. Written consent from peer counselors and students selected as peers was obtained.

RESULTS

Descriptive Characteristics of Peers

The mean age of the peers in the intervention group was 20.85 ±0.83 (min 20-max 23). 72.5% of the peers are women, 87.5% are Anatolian high school graduates, and 63.3% live in private dormitories. On adaptation to the university, faculty, and city, 50% stated that they could obtain support and counseling from their families, 47.5% from their classmates, 45% from their peer counselors, and 42.5% from the psychological counseling, guidance, and social support unit of the faculty.70% stated that they want to receive peer counseling on the education process, 60% on the professional development process, 55% on the adaptation to the faculty, and 52.5% on social and sports activities.

The mean age of the peers in the control group was 20.85 ± 0.83 (min 20-max 23). 80% of the peers are women, and 82.5% are Anatolian high school graduates. 55% live in a state dormitory. On adaptation to the university, faculty, and city, 60% of them stated that they could obtain support and counseling from their classmates, 42.5% from their families, 37.5% from upper classes, 32.5% from peer counseling, and 30% from the psychological counseling, guidance, and social support unit of the faculty. 60% of them stated that they wanted to get support and counseling about adaptation to the faculty, 60% of them on an education process, 57.5% of them on getting a professional development process, 55% of them on adaptation to the university, 45% of them on adaptation to Istanbul, and 40% of on social/sportive activities.

University Adjustment Scale of Peers

A significant difference was found between the mean scores of the Personal Adjustment sub-dimension of the University Adjustment Scale among peers in the intervention and control groups before the peer counseling, one month after the peer counseling, and six months after the peer counseling (t=2.163, *P=.034*). It was observed that the mean score obtained by peers in the intervention group six months after the peer counseling was higher than those obtained before the peer counseling and one month after the peer counseling. However, no significant difference was found between the mean scores of the Academic Adjustment and Social Adjustment sub-dimensions of the University Adjustment Scale among peers in the intervention and control groups before the peer counseling, one month after the peer counseling, and six months after the peer counseling (*P*>.05) (Table 1). In light of these results, the H1 hypothesis (H_1: Peers in the intervention group have a higher score of adaptation to university life than peers in the control group) was rejected.

Individual Development Initiatives of Peers

A significant difference was found between the mean total scores of the Individual Development Initiatives Scale among peers in the intervention and control groups before the peer counseling, one month after the peer counseling, and six months after the peer counseling (t=2.207, *P*=.031*). It was observed that the mean individual development initiative scores of peers in the intervention group increased one month after the peer counseling but decreased six months after the peer counseling (Table 2). In light of these results, the H2 hypothesis (H_2: The individual development initiative score of peers in the intervention group is higher than those in the control group) was rejected.

Table 1. Comparison of total and subscale mean scores of adjustment to university life in intervention and control groups

Adaptation to University Life		Intervention Group (n:40) Mean ±SD	Control Group (n:40) Mean ±SD	Total Mean ±SD	Min-Max	Test	P
Personal Adaptation	BPC[a]	72.40 ±9.58	73.30 ±11.18	72.85 ±10.35	45-96	0.387	.700
	1APC[b]	73.60 ±11.20	73.08 ±10.33	73.34 ±10.71	45-96	0.218	.828
	6APC[c]	76.30 ±11.97	81.55 ±9.62	78.93 ±11.11	47-96	**2.163**	**.034**
	F	2.652	**14.740**	**14.413**			
	P	.085	**< .001**	**< .001**			
			a,b<c	**a,b<c**			
Academic Adaptation	BPC[a]	78.33 ±7.86	78.40 ±10.33	78.36 ±9.12	56- 100	0.037	.971*
	1APC[b]	79.13 ±8.95	78.05 ±9.64	78.59 ±9.26	56-100	0.517	.607
	6APC[c]	79.55 ±12.15	81.70 ±9.99	80.63 ±11.10	48- 100	0.865	.390
	F	0.258	2.465	1.980			
	P	.667	.116	.158			
Social Adaptation	BPC[a]	82.08 ±7.49	83.63 ±9.68	82.85 ±8.64	61-100	0.801	.426
	1APC[b]	74.28 ±8.20	75.70 ±7.86	74.99 ±8.01	54-90	0.794	.430
	6APC[c]	86.35 ±9.47	87.88 ±10.29	87.11 ±9.86	61-100	0.690	.493
	F	**33.760**	**34.424**	**69.055**			
	P	**< .001**	**< .001**	**< .001**			
		b<a<c	**b<a<c**	**b<a<c**			

P < .05; *P* < .01; SD: Standard Deviation; BPC: Before Peer Counseling; 1APC: One month After Peer Counseling; 6APC: Six months After Peer Counseling

Table 2. Comparison of the total and subscale mean scores of the intervention and control groups in the individual development initiative

Personal Growth Initiative	Intervention Group (n: 40) Mean ±SD	Control Group (n: 40) Mean ±SD	Total Mean ±SD	Min-Max	Test	P
BPC[a]	39.68 ±5.51	38.50 ±7.72	38.98 ±6.63	16-54	0.944	.347
1APC[b]	40.90 ±4.49	37.92 ±8.08	39.31 ±6.59	16-54	**2.207**	**.031**
6APC[c]	35.78 ±5.98	33.53 ±7.75	34.53 ±6.93	19-45	1.629	.107
F	**13.724**	**6.672**	**18.463**			
P	**<.001* a,b>c**	**.008 a,b>c**	**<.001 * a,b>c**			

**P* < .01; SD: Standard deviation; BPC: Before Peer Counseling; 1APC: One month After Peer Counseling; 6APC: Six months After Peer Counseling.

Peer Follow-up

When the data recorded by the peer counselors on the Peer Monitoring Form after the regular interviews (October - November - December) between the peer counselors and the peers in the intervention group were analyzed (Table 3), peers mainly asked their peer counselors questions about absenteeism, courses and their teaching, Erasmus program, scholarships, places to visit in Istanbul, clinical practice, clubs at the faculty, exams, case assignments and presentations, peer counselors provided information about study methods and appropriate study areas (libraries, etc.), courses and exams, passing the course and letter equivalents of grades, absenteeism, clubs at the faculty, clinical practice, etc., and peer counselors provided information on how to solve these problems. It was determined that peer advisors planned activities such as providing information about 2nd-semester internships, preparing case studies together, introducing Erasmus students, discussing study methods, introducing them to other peers, planning social activities after finals, providing information about midterm-final exams, etc.

It was determined that the peer counselors and peers in the control group did not have many interviews, and only five peers met with their counselors once. When the data recorded on the Peer Monitoring Form by the peer counselors after the interviews were analyzed, it was determined that the peers mainly asked questions to the peer counselors about the courses and their processing, scholarships, clinical practice, clubs at the faculty, exams and that the peer counselors provided information about the courses and exams, passing the course and letter equivalents of the grades, absenteeism, clubs at the faculty, clinical practice, regarding the solution of these problems.

DISCUSSION

Descriptive Characteristics of Peers

In a study investigating the social adaptation levels of students staying in dormitories affiliated with the Republic of Turkey Ministry of Youth and Sports, 58% of the students had moderate, 32.6% had good, 6% had weak, and 3.4% had a superb level of adaptation.[30] According to the results of this study, a high ratio of participants stays in the dormitory. This finding suggests that peers who have started university and transitioned to a new phase in their lives may be affected by adapting to the consequences of living in a collective environment, such as staying in the dormitory, changing living conditions, and having to comply with specific rules. However, in the present study, related to adaptation, peers generally asked for support in terms of adaptation to school, courses, and Istanbul. The number of peers who want support about dormitories is pretty low compared to those who want support on other issues.

Table 3. Peer Monitoring Form (Data obtained from interviews conducted by peer counselors in the intervention group)

Interviews	PROBLEMS reported by PEER	ACTIONS by Peer Counselor	PLANNED ACTIVITIES by the Peer Counselor
October **November** **December**	▪ Library in Avcılar ▪ Class absences ▪ Lessons and teaching ▪ Providing access to course resources ▪ Failing a class ▪ Erasmus program ▪ Social activities of the faculty ▪ Scholarships ▪ Places to visit in Istanbul ▪ Career planning ▪ Clinical practice ▪ Clubs at the faculty ▪ Laboratory applications ▪ Exams ▪ Case assignments ▪ Case presentations	▪ Giving information about study methods and appropriate study areas (libraries, etc.) ▪ Recommending lecture videos ▪ Giving information about courses and exams ▪ Providing information about passing the course and letter equivalents of grades (sharing the university's regulations) ▪ Providing information about absenteeism ▪ Giving information about the Erasmus Commission ▪ Giving information about the faculty career counseling commission ▪ Giving information about the clubs in the faculty and showing the club board and club presidents' information ▪ Showing the interior and exterior of the faculty, giving information about the faculty ▪ Sharing individual experiences of life in Istanbul ▪ Giving information about choosing a career planning course ▪ Giving information about clinical practice ▪ Providing information about the beauties of the profession to make them feel that they belong to the profession ▪ Sharing information about exam repetition with peers in consultation with student affairs ▪ Communicating that he/she can meet with the faculty members at any time when he/she encounters any problem ▪ Providing information that the difficulty level of the exams varies according to the courses and that the questions are asked in parallel with what is explained in the courses ▪ Directing to the Foreign Language and Culture Club at the faculty about foreign languages	▪ Giving information about 2nd semester internships ▪ Preparing the case study together ▪ Introductions with former Erasmus students ▪ Discussion about study methods ▪ Introductions to other peers ▪ Planning social events after finals ▪ Organizing a day trip with peers in Istanbul ▪ Arranging interviews with final year students about careers ▪ Giving information about Midterm-Final Exams

In the study by Ergün et al.[31] students stated that they had adaptation problems when they started university and asked peer counselors for support on issues such as regulations, communication with educators, school activities, and studying. In a study investigating the importance of peer support in healthy high school students, the emotional support perceived by the students was lower than the physical and academic support.[9,32]The problems students face in the adaptation process lead to academic strain, anxiety, decreased interest in the department of education, unrealistic and limited expectations, and some uncertainties in career planning.[4,6] For this reason, adaptation to university is crucial for students' academic and social future, personal happiness, and psychological health. In the research, the subjects' peers would like to receive peer counseling are the adaptation to university, adaptation to faculty, education process, adaptation to Istanbul, social/sports activities, and professional development process. In other words, peers experience confusion and adaptation problems in many subjects, especially at the beginning of university life. This finding, which is similar to the literature, can be evaluated as follows: they are separate from their family, and they have adaptation problems due to limited financial opportunities, staying in dormitories with their friends, living in crowded houses, trying to adapt to the academic environment of the university and trying to fulfill the requirements of the vocational skill acquisition process. In other words, peer counselors' support contributes to their well-being and individual, social, and academic adaptation.

In a study investigating the perception of peer support and self-efficacy of university students, students studying in the nursing department had a higher perception of peer support compared to the students of the faculty of social sciences and nursing students, and the reason for this result was interpreted as the fact that the department included practice increased the likelihood of students applying for each other's support.[4,33] In another study

investigating how students in a university's health program in Australia are affected by the stress of their profession when they receive peer social support, peer support increases emotional expression and emotion-focused coping.[34] In the study, the people and institutions that the peers applied for adaptation support were their friends, senior classes, the psychological counseling, the counseling and support unit of the faculty, their families, and peer counselors. This finding can be considered a satisfactory finding, showing that students in the health field are looking for support due to the stress brought by the profession, and they turn to their peers to find this support. At this point, peer counseling is crucial in providing the help they need to people with weak support from their friends and other sources, so these programs should be given the necessary importance and structured in a planned way.

In the current study, peers stated that they found the peer counseling program beneficial. Peers suggested the program should be expanded, systematic, and accessible to all students. Additionally, peers asked for support from peer counselors on social and personal issues. Considering that many of the students do not have close friends yet and are far from their families to share their personal and social problems, the presence of peer counselors and their availability at times other than interview days contribute to their feeling safer and less stressed.

University Adjustment Scale of Peers

As a result of a meta-analysis examining the studies investigating the effects of peer education on students, there was an increase in the self-confidence and collaborative attitudes of students and peer counselors after the peer counseling. However, there were differences according to the changing practices. In the same meta-analysis study, 4th year peer counselors were more effective in terms of showing positive development than students of the same age.[7] In a review study examining the effects of peer counseling on the anxiety and stress levels of nursing students, peer counseling reduced the anxiety and stress levels of peers and increased their academic, social, and personal adaptations.[24,32] In the study, when the mean scores of the sub-dimensions of the University Life Adaptation Scale before the peer counseling, one month after it, and six months after it in the intervention and control groups were compared, a significant difference was present only between the mean scores of the Personal Adaptation sub-dimension. In the study, it was observed that the mean scores of the peers in the intervention group on the Adjustment to University Life Scale six months after the completion of peer counseling were higher than the mean scores before and after peer counseling (Table 1). This finding suggested that peer counseling contributed especially to their adaptation to university life. Although peer counseling initially contributed to the increase in students' personal adaptation levels, factors such as getting used to the city, faculty, courses, and school and starting to make friends may have played a role in increasing their adaptation in the future. In other words, the personal adaptation scores obtained were controversial because even without the peer counseling program, the levels of adaptation in the natural flow could increase over time. However, the personal characteristics of peers may also play an effective role here because more timid students may have benefited more from peer counselors in adaptation.

Individual Development Initiatives of Peers

Personal initiative refers to the act of making decisions on a subject based on one's own will and judgment. When taking initiative, a person acts voluntarily. Individuals can demonstrate initiative in all areas of life, from professional to personal contexts. By taking initiative, a person assumes ownership of the decision-making process. However, when people make such an attempt, they also take responsibility for the decision, as there will not always be positive results. Taking the initiative and action despite the risks provide an increase in motivation as well as being accepted as a driving force in the success of people. "The study found that the mean total scores of the peers in the intervention group increased in the Individual Development Initiatives Scale after peer counseling but decreased six months after the peer counseling was completed (Table 2). This finding can be considered a worrisome result that peer counseling enables peers to make individual decisions against any subject/event, etc., but that they do not/do not make the necessary decisions individually in the face of any event/situation/issue over time, or that they are not willing to do so, that they will generally accept the existing situation, and that they will adapt to the decisions of others.

In a study investigating the relationship between undergraduate students' personal growth initiative, emotional self-efficacy, and general well-being, a positive relationship was present among these three variables, and it was concluded that general well-being was a strong predictor of personal growth initiative.[32,35] Considering this result, the present study also suggested that the general well-being or emotional self-efficacy of peers may influence the decrease in personal growth initiative scores. Therefore, peers' general well-being or emotional self-efficacy can also be questioned. One of the reasons for this decrease may have been the decrease in the frequency of

interviews over time because some peers stated in the peer counseling evaluation forms that they found the duration of the program and the frequency of interviews insufficient. Especially during exam periods, the frequency of interviews has decreased considerably, and some peers and peer counselors have been unable to conduct any interviews. This may have led to a decrease in the long-term effects of the peer counseling program on personal initiative.

Peer Follow-up

The most desired subject in the study was the adaptation to the faculty and academic adaptation (Table 3). The students requested information from their peer counselors on accessing the course materials, studying for the exams, and absenteeism, especially in some specific courses. One of the topics for which support was requested was internship materials and internship processes. It was beneficial for peers who encountered this situation for the first time to be guided by peer counselors in reducing their stress. Peers also asked for support in adapting to Istanbul. The students stated that they generally had difficulties commuting to school in terms of adaptation to Istanbul and received guidance from their peer counselors on how to reach the school from their location. Students, especially those from outside Istanbul, felt uneasy. In this context, the information obtained from peer counseling follow-up forms gives an idea about what kind of difficulties a student who has just started university may have. Various applications can be developed in faculties and campuses related to these problems.

Limitations of the study

The study is limited to first-year students studying at the Faculty of Nursing of a public university where the research was conducted and who voluntarily participated in the study, as well as their self-reports. Additionally, the fact that the peer counseling process spans only one academic term (6 months); the scope and depth of the training provided to peer counselors; and the researcher's expertise or competence in peer counseling - that is, their knowledge and experience in this field - are limitations of the study.

In the study, a significant difference was found between the mean scores of the Personal Adjustment sub-dimension of the University Adjustment Scale among peers in the intervention and control groups before the training, one month after the training, and six months after the training. However, no significant difference was found between the mean scores of the Academic Adjustment and Social Adjustment sub-dimensions. Additionally, a statistically significant difference was observed between the total mean scores of the Individual Development Initiatives Scale among peers in the intervention and control groups before the training, one month after the training, and six months after the training.

Based on the findings of the study, the following recommendations can be made:

- Identifying the factors affecting the individual, social, and academic adjustment of first-year university students.
- Organizing activities that highlight the importance of peer counseloring in individual, social, and academic adjustment, as well as in career preparation, to enhance students' knowledge and awareness.
- Conducting individual/group interviews (qualitative research method) to determine the perspectives of peer counselors and mentees on the impact of peer counseloring on their individual, social, and academic adjustment.
- Encouraging university students to seek support when they face difficulties in individual, social, and academic matters and informing them about the persons, institutions, and organizations from which they can receive support.
- Increasing the number of peer counselors and encouraging students to participate in peer counseloring to address time-related challenges.
- Identifying common issues among peers in advance and organizing group discussions to overcome time constraints.

Etik Komite Onayı: Bu çalışma, İstanbul Üniversitesi - Cerrahpaşa Sosyal ve Beşeri Bilimler Etik Kurulu tarafından onaylanmıştır (Tarih: 01.12.2020, No: 74555795-050.01.04). Araştırmanın yapıldığı devlet üniversitesinin Hemşirelik Fakültesi Dekanlığından da kurumsal izin alınmıştır (Tarih: 31.08.2020, No: 74311748-302.08.01).
Bilgilendirilmiş Onam: Akran danışmanları ve akran olarak seçilen öğrencilerden yazılı bilgilendirilmiş onam alınmıştır.
Hakem Değerlendirmesi: Dış bağımsız.
Yazar Katkıları: Fikir – NÖS, EŞ; Tasarım – NÖS, EŞ; Denetim – EŞ; Kaynaklar – NÖS; Malzemeler – NÖS, EŞ; Veri Toplama ve/veya İşleme – NÖS; Analiz ve/veya Yorumlama – NÖS, EŞ; Literatür Araştırması – NÖS; Makale Yazımı – NÖS, EŞ; Eleştirel İnceleme – EŞ
Çıkar Çatışması: Yazarlar, çıkar çatışması olmadığını beyan etmiştir.
Finansal Destek: Bu araştırma, kamu, ticari veya kar amacı gütmeyen kuruluşlardan özel bir fon almamıştır.

Ethics Committee Approval: This study was approved by the Istanbul University - Cerrahpaşa Social and Humanities Ethics Committee (Date: 01.12.2020, No: 74555795-050.01.04). Institutional permission was also obtained from the Dean of the Faculty of Nursing at the state university where the research was conducted (Date: 31.08.2020, No: 74311748-302.08.01).
Informed Consent: Written consent from peer counselors and students selected as peers was obtained.
Peer-review: Externally peer-reviewed.
Author Contributions: Concept – NÖS, EŞ; Design - NÖS, EŞ;

Supervision - EŞ; Resources -NÖS; Materials - NÖS, EŞ; Data Collection and/or Processing - NÖS; Analysis and/or Interpretation - NÖS, EŞ; Literature Search - NÖS; Writing Manuscript - NÖS, EŞ; Critical Review - EŞ

Conflict of Interest: The authors have no conflicts of interest to declare.
Financial Disclosure: This research received no specific funding from public, commercial, or non-profit organizations.

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