

SELF-HELP GROUPS EFFECTIVENESS IN MENTAL HEALTH

•Petrini, F., * Meringolo, P., * Vannucchi, S., ** Pini, P.

sandra.vannucchi@alice.it meringolo@psico.unifi.it

* Department of Psychology University of Florence

** Mental Health Europe Executive Committee

INTRODUCTION

Self-help groups cannot be considered as a replacement for health treatments but rather as a cultural phenomenon, able to reduce bio-psycho-social harms and to modify the attitude of delegating the care of one's own health problems.

In an empowering perspective, self-help is a way for going beyond dependence from therapy, promoting social skills and participation in local community.

Despite this, there are relatively few studies on the effectiveness of these experiences, especially as regards mental diseases (Brown, Shepherd, Wituk & Meissen, 2007).

Campbell (2005) led a review of studies about self-help programs in psychological disorders. Results underline that self-help programs can promote empowerment and functional recovery (Dumont & Jones, 2002; Van Tosh & Del Vecchio, 2000) and have effects on perceived social support (Forquer & Knight, 2001; Yanos, Primavera & Knight, 2001).

Solomon(2004) highlighted that self-help experiences encourage less use of emergency services and hospitalization.

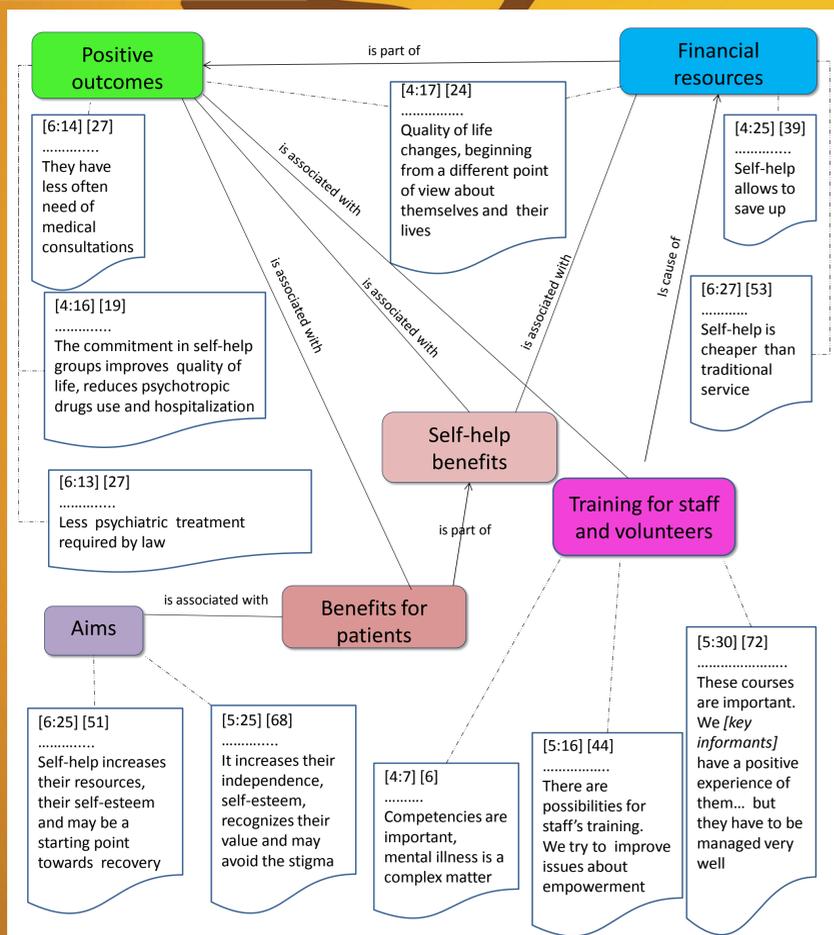
AIMS

The aim is to analyze whether participation in self-help activities can positively influence psychological wellbeing and quality of life. We try also to investigate how self-help could have a benefit outcome in decreasing inappropriate use of psychiatric emergency services, compared with only a traditional medical treatment.

The first step was a qualitative research, led by means of focus groups and interviews addressed to key informants in order to collect information about:

- Relationship between participation in the self-help group and quality of life;
- Effects of participation on frequency of medical consultations and on objective indicators of health (emergency services, prescribed psychotropic drugs...);
- Effects of participation on relationship with general practitioner and/or psychiatrist/psychotherapist in charge.

RESULTS Key Informants



Key Informants underline that participation in groups improves quality of life and perceived well-being through sharing their problems.

Groups appear able to promote less use of psychotropic drugs, fewer psychiatric treatments required by law, fewer relapses and less use of services. This can represent an advantage also for services. Another relevant issue is the training about self-help culture for professionals and volunteers, that appears necessary for positive outcomes.

CONCLUSION

Interviewees perceive the participation in groups effective to improve quality of life and well-being, through a better knowledge of problems and the sharing of experiences. According to the literature (Riessman, 1965; Skovholt, 1974; Leugh & Arthur), these groups appear to perform psychological functions, such as perceived social support and increasing coping strategies, through the comparison with other members. Participants feel themselves increasing self-esteem and self-fulfillment. Moreover, self-help experiences may promote empowerment, in accordance with community psychology and psychotherapy theories (Oliva, 1995). Finally, to attend a group seems to increase the well-being.

Both Key Informants and group members (Professionals and Patients) perceive advantages in improved quality of life, greater well-being, and mitigation of disease. They also report a lower use of "pills", fewer hospitalizations, a better socialization, which are thought as basic objectives for self-help groups.

PARTICIPANTS

4 Self-help groups (professionals and patients)

4 Key informants, involved in self-help experiences in the Region Tuscany.

INSTRUMENTS

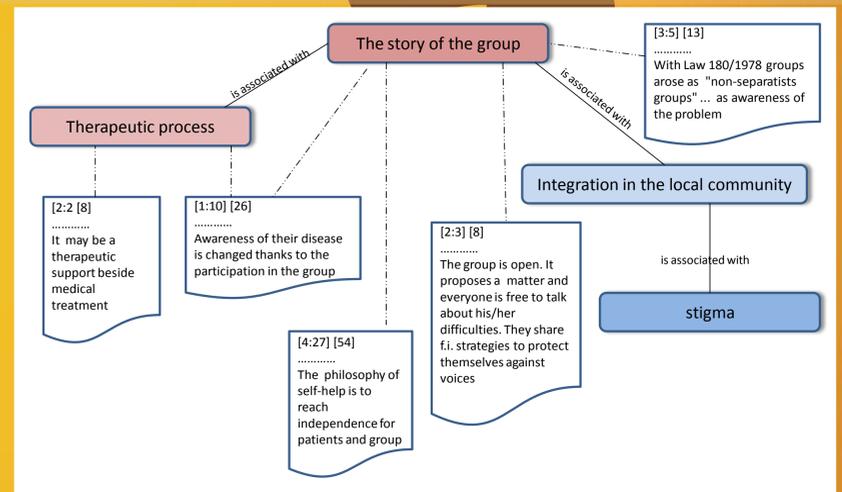
Semi-structured interviews and focus-group.

Data were analyzed with a qualitative approach inspired by a Grounded Theory perspective, by means of the Atlas.ti software for qualitative analysis.

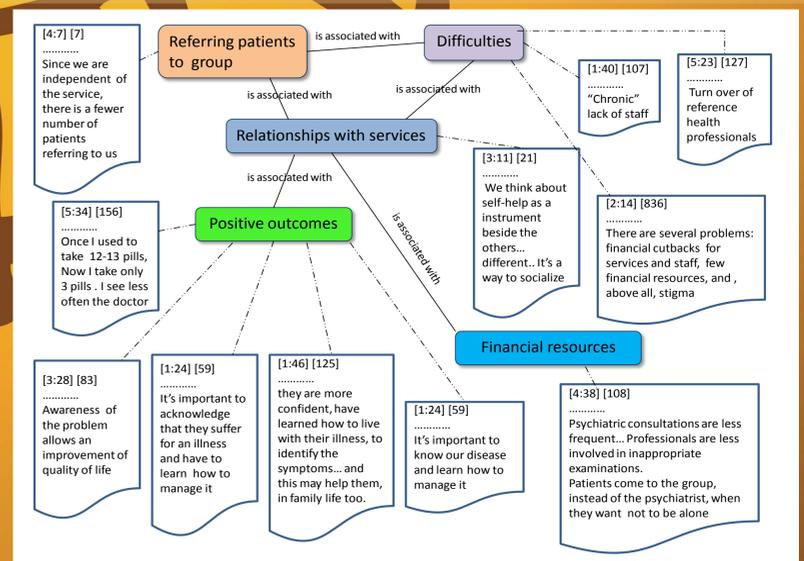
RESULTS Professionals and Patients

Results show how the Italian movement "Democratic Psychiatry" influences the values of the groups. This topic is embedded in the history of some groups since 1978 (Law 180 for the closedown of the mental hospitals) and led the groups and professionals attitudes and behaviors. We are now in a "second generation" of professional involvement: most of the topics are related to historical change, linked to new aims for group and individuals.

An interesting issue seems to be the organization of activities to promote greater integration within the local community and to prevent stigma. Some groups perceive it as a key element, whereas some others perceive activities as a misrepresentation of self-help methodologies.



The relationship with services agree positive outcomes for both the service and the patients, about saving financial resources, avoiding unnecessary medical consultations or inappropriate use of psychiatric emergency services.



REFERENCES

- Brown, L.D., Shepherd, M.D., Wituk, S.A., & Meissen, G. (2007). How settings change people: Applying behavior setting theory to consumer-run organizations. *Journal of Community Psychology*, 35, pp. 399-416.
- Campbell, J. (2005). The historical and philosophical development of peer-run support programs. In: S. Clay, B. Schell, P.W. Corrigan, & R.O. Ralph (Eds.), *On our own, together: Peer programs for people with mental illness* (pp. 17-64). Nashville, TN: Vanderbilt University Press.
- Dumont, J. M., & Jones, K. (2002). Findings from a consumer/survivor defined alternative to psychiatric hospitalization. *Outlook*, Spring, 4-6.
- Forquer, S., & Knight, E. (2001). Managed care: Recovery enhancer or inhibitor? *Psychiatric Services*, 52, pp. 25-26.
- Leung, J., & Arthur, D.G. (2004). Clients and facilitators' experience of participating in Hong-Kong self-help group for people recovering from mental illness. *International Journal of Mental Health Nursing*, 13, 232-241.
- Oliva, F. (1995). Il movimento di auto-aiuto. Storia, contenuti, caratteristiche e processi. *Animazione Sociale*, 12, 10-16.
- Riessman, F. (1965). The helper therapy principle. *In Social Work*, 10, 2, 27-32.
- Skovholt, T.M. (1974). The client as helper: A means to promote psychological growth. *In Counseling Psychologist*, 4, 58-74.
- Solomon, P. (2004). Peer support/peer provided services underlying processes, benefits, and critical ingredients. *Psychiatric Rehabilitation Journal*, 27 (4), pp. 392-401.
- Van Tosh, L., & del Vecchio, P. (2000). Consumer/survivor-operated self-help programs: A technical report. Rockville, MD: U.S. Center for Mental Health Services.
- Yanos, P.T., Primavera, L.H., & Knight, E.L. (2001). Consumer-run service participation, recovery of social functioning, and the mediating role of psychological factors. *Psychiatric Services*, 52, pp. 493-500.