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ABSTRACT

This paper demonstrates how the professional and self help groups can cooperate in offering direct client assistance. The author discusses the potential uses of the self help group by the professional counselor, and then examines these three dimensions of organized self help groups which should be considered: (1) their basic posture with respect to integration with society and collaboration with the professional community; (2) the manner in which they define a particular problem, and (3) actual program activities. He also discusses some benefits of self help program. (Author/HMV)

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15 63 While the names of groups such as: Parents Anonymous, Smoke Watchers, Alcoholics Anonymous, Synanon, Gamblers Anonymous, Recovery Incorporated, Weight Watchers, and Neurotics Anonymous, are familiar to nearly everyone, the organizations themselves, have not been widely accepted or integrated with the professionalized human service system. Part of the difficulty may be that they are thought to be passing fads, or that they are epiphenomenal with respect to more fundamental events. The point can be made, however, that self help groups have made a long standing and substantive contribution to human services. They do so because they meet basic human needs and because they are instruments fashioned to exploit powerful principles of personal change and reform. A major emphasis of the paper is to discuss the therapeutic aspects of self help groups and to consider how the professionalized system of human services might be more effectively related to them.

Self help groups, supportive communities, and mutual aid societies, or friendly societies as some of their predecessor organizations were known, go back a long time. Of particular note are the mutual aid societies of the Afro-American which reach as far back as the eighteenth century. These societies designed as quasi-insurance and burial societies were among the first organized expressions of black community life. In recent times, a comprehensive but not exhaustive 1960 survey turned up 265 self help organizations. Undoubtly the number is several times larger now, with a fair amount of the increase attributable to the fantastic growth of locally oriented peer counseling programs. Numbers wise,



A A alone, claims a membership of 500,000 and the membership of Recovery Incorporated is estimated to have now reached, a hundred thousand. Even allowing for a good deal of inaccuracy in the individual figures and estimates, the overall number of members, perhaps rivals the number of clients served in professionalized programs.

A separate line of development also points to the significane of self help groups. During the fifties and early sixties, there existed a tremendous faith in the power of the psychotherapeutic process. This process, skillfully employed, could bridge the social distance which arose between client and therapist because of major status differences in terms of social class, race, age and sex. An equally exaggerated counter-reation gave rise to the sloganeer's and publicists for indigenous nonprofessionals, ethnic therapists, peer counselors, and feminist therapists. Another variation on status difference is the distiction between personal familiarity with the problem and professional interest in it. In this respect substance abuse programs created a worthwhile innovation in their use of rehabilitated drug users as counselors in formal programs. But even here, a shift seems to be underway toward a more balanced service program offered by professionals and ex-addict counselors. Taken together, the points about the self help movement's roots, magnitude, and connection to contemporay trends indicate that it is a force to be seriously reckoned with by the professional community.

Before taking up the potential points of collaboration between



the self help group and the professional, it may be useful to present a more precise idea of what is intrinaic to a self help group. This provisional definition is intended to focus attention on the core groups included under the heading rather than to draw forceful lines at the margins. A self help group is an organization of individuals who are personally affected by a distressing psychological or social condition. Membership is voluntary, and is restricted to those who, either presently or in the past, have suffered the distressing condition. Common activities of the membership include fellowship, crisis assistance mutual aid, self development, and social action!

Although the major effort of this paper is to show how the professional and the self help group can cooperate in offering direct client assistance, there are several somewhat discrete potential uses of the self help group which should be kept in mind as the discussion proceeds. 1) A professional may use a self help group as a source of information about the potentially supportive community available to a particular client. In this format key members of the self help group operate as consultants to the professional for the purpose of identifying social opportunities and discussing issues of concern to the client. 2) Some clients are either unsuitable, or do not wish professional assistance. reluctant client has an alternative in the self help group and it can prove to be a first demonstration of the practical and meaningful assistance a professional can provide. 3) In many situations the preferred means of collaboration will take the form of professional treatment service accompanied by active participation in a



self help group. 4) A final pattern of collaboration between the professional and the self help group may take the form of consultation and program development assistance offered to the self help group. This form of assistance has great potential and can be incrementally approached through a series of helpful encounters with particular clients known to the self help group.

Three Organizational Dimensions of the Self Help Group Experience Whatever the professional's interest in the self help group, and especially if the referral of a particular client is being contemplated, there are three dimensions of the organized self help group that should be considered. The first dimension refers to the self help group's basic posture with respect to integration with the dominant society and the derrivative issue of collaboration with the professional community. A continuium exists which extends from opposition to cooperation with the dominant society and professionals. With a client, for whom it is important to remain involved with the dominant community and continue treatment with a professional, it is important to weigh carefully the probable effect of affiliation with groups such as Synanon or various Patient Liberation Groups. Likewise affiliation with a group such as the Gay Liberation Front (depending on the extent of politicization in the local group) may also tip the balance in favor of opposition to participation in larger community activities including formal human service agencies. Conversely, membership in a group like Parents Anonymous, given its built in feature of a professional



sponsor, is likely to atrengthen whatever existing inclination there is to participate in treatment. It is important to note, however, that these comments about integration are not to be interpreted as a judgement of the probable positive or negative value of various self help groups. Instead the intent is to identify the issue of cooperation with the larger society as a key variable to consider when contemplating the suitability of a self help group for a particular client; in certain circumstances, withdrawal and opposition to the larger society may be helpful, while in others it may be equally important to maintain existing ties.

A second dimension which must be considered is the problem or the way in which a particular problem is defined. For example, ostomy clubs or the Reach to Recovery program in the health field obviously will appeal only to a restricted population. But even in the broader social field, groups such as Weight Watchers, the Mattachine Society or the Welfare Rights Organization tend to define their interest in somewhat narrow terms. Problems defined more generally are likely to be integrated into the programs of groups such as Neurotics Anonymous, or with associations of parents of mentally or emotionally handicapped children for example. While it is difficult to make meaningful distinctions about the matter of problem definition, especially when there is so much variablility among local chapters, the issue remains an important one to consider in particular circumstances (Parents Without Partners vs Singletarians).

Considerable variation is also associated with the third dimension of organized self help groups, namely the actual activities of



the program. For example, A A and Recovery Incorporated, to an even greater extent, operate highly structured programs. On the other hand, Parents Without Partners is quite flexible about its program, may choose to become involved in only selected aspects of the program. For some, a highly structured pattern may be useful in taking the first step to make a connection with the program and allaying anxiety about the nature of demands that may be placed on the individual by the group. This is most evident in a group like Recovery where some very anxious individuals are enabled to participate by the emphasis on everyday events and by the use of ritualized techniques of spotting and endorsement to comment on these everyday events. The stylized A A program also operates in this direction although, in this instance, there seems to be more opportunity for extra group contacts which add ambiguity to the demands the individual potentially encounters. Both of these self help programs contrast with Parents without Partners which places few restrictions on the ways in which individuals might interact. For some this will appeal as a potentially individualized and realistic approach to the problems of single parents while for others it may seem to spotlight their vulnerability; and indeed for some it seems to invite the possibility of exploitation by other more dominant members of the group.

The Benefits of Self Help Group Experience

The benefits of self help group experience may be compared to those derived from what has been variously called a support group



or a supportive community. The group supports a change in the individual's life style as it affects the individual's ability to cope with a particular problematic condition. The methods used to achieve the benefits can be conceptualized in terms of the operations that bring about a change in the individual's normative reference group. In place of groups whose ideas, ideals, and modes of conduct support the problematic condition, the objective is to substitute a group frame of reference that will support a more constructive resolution of the problem. The question becomes: what events or operations in the new reference group support more constructive courses of action. In the following discussion six general patterns of operation which benefit the individual will be identified.

- 1) A person with a problem often experiences a deep sense of alienation and isolation from a group that can support a sense of self worth, esteem and respect. Moreover there maybe a feeling of separation and outright opposition from familiar family, friends, others in one's social circle. Through affiliation with a group, the person can share an experience with others, who find themselves in a similar struggle and yet are able to maintain a measure of respect for themselves, as they pursue the task of finding more satisfying solutions to their problems.
- 2) Relevant information is furnished through many self help groups. The single parent, for instance, learns about some of the complexities and some of the potential solutions to the problems of securing financial credit and child care services. The recovering surgical patient may learn about sources and techniques of health



- care. Gay persons or ex-mental patients may acquire needed information about important civil rights related to housing and employment. Such information has a dual benefit; the information is, of course, intrinsically useful, and it also may become the foundation stone of a new source of self respect.
- 3) In contrast to simplistic assumptions prevailing in the dominant society, the self help groups are aware of the setbacks 2 that a person may experience before recovery is successful. In short, there is a greater understanding that progress usually does not follow an unbroken pattern of upward movement. This understanding leads many groups to make provision for crisis related services.

 The A A sponsor for example, makes himself available to the alcoholic in danger of relapse. Similar provisions are available to the potential child abuser through Parents Anonymous or to the "nervous" person from Recovery Incorporated.
- 4) Modification of the individual's problematic life style or what some have termed resocialization does not come easily or without cost. The self help group can function as a realistic antidote to any facile notions that meaningful change can be brought about without committment and sacrifice on the part of the 11 individual. The envisble position of the group stems from the fact that the long term and successful members have already made the committment and accommodated to the cost in terms of personal restriction and sacrifice. This feature of the self help group experience seems inevitable since the goal is fundamental congnitive and behavioral change. The alcoholic, in accepting the creed and



following the twelve step program commits himself to a radically different set of cognitions about alcohol consumption. These in turn mandate a radically altered course of conduct with respect to alcohol and all of its associated experiences. Likewise the person in Recovery Incorporated is furnished with a highly structured set of cognitions about "nervousness" which in turn specify a different course of action to allay anxiety.

- from the participation of people who have successfully overcome their problem, a thousand words cannot convey the impact made by the person who is a living demonstration that problems can be overcome. This is not to discount the presence of inevitable distortions and misplaced emphases as the individual encounters a successful member "who has been there before". But perhaps this is what makes it so real and credible. There is little that the successful member doesn't know about, and little that will strike him as surprising, and still there is hope. The individual with all of his "horrendous" experiences and problems can still aspire to be like the successful member someone who has largely overcome his problem.
- 6) A final feature of the self help group is responsive to the changed time economy of the individual. Heretofore the individual spent considerable time with those who supported rather than opposed them in their problematic life style. As efforts are made to disassociate onself from an earlier life pattern, an inevitable hiatus is experienced. Unstructured time is copiously available; large amounts of it can be the occassion for relapse;



not only because the temptation lies in that direction - but because there is nothing else to do and familiar patterns of behavior once again become dominant. By providing a leisure time and recreational program the self help group can deal with this problem. In so doing the self help group does much r re than fill time, it increases the overall intensity of the program directed toward change in the 28 problematic condition.

Enhancing the Appeal of a Self Help Group

Having considered certain dimensions and benefits of self help group experience, we can take up the matter of referral. The question is: how can an effective referral be made to an outside group? The question takes on added salience when we contemplate that uncertain committment to resolve the problem may place the matter of participation in a self help group in an ambivalant context. In formulating a response to this question, once again we draw heavily reference group theory and research has to offer on how individuals come to adopt a reference group. The client's concerns about whether he wishes to accept a particular group as a point of reference for his conduct can be dealt with under four headings. Is it a socially approved thing to do; will he find similar people there; do they have ideas compatible with his about the nature of the problem and its resolution; and lastly is the group accessible? Let's elaborate on each of these in its turn.

1) An immediate demonstration of social approval is, of course, reflected in the workers management of the referral process. As



the worker demonstrates knowledge and enthusiasm about the self help group, a measure of social approval is conveyed. If this extends to concrete assistance in connecting the individual to the group the message of approval is strengthened. When appropriate, the worker might choose to comment on any endorsements the group has received by outside persons who would be considered prestigious by the client. If there are members of the group who are likely to be held in esteem by the prospective member, this also should be noted. Any favorable comment the group has received from the media would be still another way to suggest that membership in the group is socially desirable. In short any aspect of the group which suggests favorable attention to the group, might be mentioned at this time.

- 2) Status similarity has been found to be an extremely important factor influencing affiliation with groups. Are the people there like me? The client will wish to know: are there people about my age, of the same or different sex, in a similar socioeconomic status? Also important, are matters of ethnic and religious affiliation. It is not that there needs to be an identical fit with respect to these characteristics, indeed too much homogeneity can be stifling. Instead the client is looking for some indication that he will not be out of place given his set of status characteristics. This points up the importance of interpreting the composition of the group in a way that the prospective member will feel that he is among his natural associates.
- 3) Another aspect of the feeling of belonging is derived from a sense that we share similar ideas about the nature of the problem



and its resolution. The therapist making the referral, should discuss the similarities and differences between the ideas of the individual and prevailing ideas in the group about potential courses and remedies for a particular problem. Once again it is not a matter of an identity of ideas; for if the group were not somewhat different with respect to both the ideas and remedies it had available, there would be little to gain from membership. Rather the aim should be to present the group's interests as an extension and elaboration of the individual interests: Where substantial differences are likely to occur, they should be faced directly, since some anticipation of them may enable them to be placed in proper perspective rather than viewed as overriding factors militating against affiliation.

4) Social research 19,22,23,24 has repeatedly demonstrated the importance of accessibility or propinquity as a determinant of both membership in voluntary organizations and in the formation of individual relationships. In simple terms, this means it is highly desireable for the individual to be able to meet the gatekeepers with minimum effort and attend meetings without serious inconvenience. It is especially important to avoid the feeling one is taking an initative which may not be favorably received. The worker can ease these anxieties by indicating he has talked with key gatekeepers about the individual's interest. Sometimes it may also be useful to arrange some contact with the gatekeeper, sponsor type person before the first meeting. If this is impossible some indication that the worker is familiar with some of the members and the procedures of the group can go a long way toward offering assurance that the reception is



more likely to be warm and welcoming than otherwise. Obviously the mundane matter of transportation will require some attention since the quality of propinquity - the quality of nearness or accessibility - exerts such a key influence on affiliation with groups.

Once the decision has been made to seek out the self help group, the process by which the individual is introduced to the group requires careful consideration. Earlier it was indicated that it might be desireable to meet with gatekeeper or temporay "sponsor" type persons before the first group meeting is attended. Obviously this implies the worker has a roster of potential sponsor people, much as one might cultivate a set of persons in other agencies for the purposes of making referrals and offering mutual assistance. This simply recognizes the commonplace that people like to be introduced to a new group rather than "break into it cold".

Another aspect of the process of gradual introduction to the group has to do with expectations about how quickly and comprehensively the individual is supposed to become involved in the group. Committment to participate should be sought in modest amounts.

The general monthly meeting, for example, maybe an easier way to begin, than to expect to participate in all the meetings of a single week. The point is particularly valid for the more social meetings which might be expected to be a bit overwhelming to new individuals. For these reasons, it seems wise to select the more highly structured general meetings for an individual's introduction to a self help group.

A related principle of introduction differentiates among the various components of the self help program. The following example



may be the best way to make this point. Parents Without Partners tends to have a weekend program that runs approximately as follows. The Friday night meeting is likely to be oriented to an educational theme of interest to the single parent. Saturday night is adult recreation and frequently this involves a dance or similar adult social activity. Sunday is geared to the parent and child unit and may involve an outing or other social event the parents and children can enjoy together. Of the three types of activity the sequence of participation might proceed from attendance on Friday to gradual participation in the parent child events and finally to the more personally demanding and potentially threatening social events. The general point is any self help group is likely to have several program components and these can and should be used selectively by the therapist.

Throughout the therapists role in supporting affiliation will be crucial. When a recommendation to explore a particular self help group has been made it should be accompanied by an explicit agreement to discuss the individual's experience as it develops over time. This means there is joint planning by the therapist and client about how the group is to be used, and additional opportunities are planned in order to review expectations, experiences, disappointments and even set backs that occur in conjunction with the self help group. It should be remembered that a recommendation to explore a self help group does not guarantee a uniform and consistently helpful experience. It is only a probability statement that it is likely to be helpful and the professional should expect



to help the individual to negotiate the peaks, troughs, and troubled currents also likely to be part of the self help experience.

A final comment is related to the process by which the therapist can acquire sufficient information to become an effective user of the potential available in self help groups. A review of this paper and some of the materials on the reference list marks a beginning. Alfred Katz a faculty member at the UCLA School of Public Health has compiled an extensive annotated bibliography on self help groups. A number of regional and national meetings now have display booths operated by self help groups. These are sources of literture, and more important, conversation with the people in the booth. While this writer was in San Francisco for a national meeting, he stopped for conversation and it led to an invitation which was accepted to attend a local A A meeting that evening. Another means available to local chapters of professionals is to invite members of self help groups to present a program at their meetings. Similar presentations would be appropriate in many courses during an individual's basic professional education.

These will be most effective if they stimulate the professional to attend meetings of self help groups in his or her local community. In this way, one can acquire first hand knowledge of the variability at the local level, and a roster of personal contacts in the self help group. To do this comfortably, however, we must come to terms with the limitations as well as the potentials of both the professional therapeutic experience and the self help experience. This is no mean task since the field as a whole is struggling with



what is an appropriate balance between the status based helper and the professional who utilizes a somewhat better defined therapeutic process. To the list of indigenous, feminist, and ethnic helpers, now we can add another status based resource - the self help group.



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