UWA – The McCusker Centre for Citizenship Internship Program
Love House (corner of Broadway and Cooper)
The University of Western Australia
35 Stirling Highway, Crawley WA 6009
Tel (+61) 6488 7873
http://www.mccuskercentre.uwa.edu.au/

ConnectGroups
10 Almondbury Rd, BOORAGOON, WA 6153
Tel (08) 9364 6909
Fax (08) 9364 4471
http://www.connectgroups.org.au/

THE UNIVERSITY OF WESTERN AUSTRALIA | McCusker Centre for Citizenship

Literature Review: Effectiveness of Self Help and Support Groups in Health Promotion

Particularly in Mental Health

ConnectGroups
helping support groups & individuals

Commissioned by ConnectGroups Support Groups Association WA Inc.

Author: Stephanie Lu

Through the McCusker Centre for Citizenship

Completed: 9/05/2016

Literature Review: Effectiveness of Self Help and Support Groups in Health Promotion

1. Executive Summary

1.1 AIM

The aim of this literature review is to examine the literature on and provide evidence for the effectiveness of Self Help Groups and Support Groups, in particular ConnectGroups, in Health Promotion and in contributing to the physical and mental wellbeing of community members. This review was commissioned by ConnectGroups to advocate support groups as a vital and crucial corner stone of a cohesive and empathetic community through its valuable health promotion activities specifically in the areas of mental wellbeing and drug and alcohol addiction, both of which are interlaced.

1.2 OBJECTIVES OF LITERATURE REVIEW

The objectives of this literature review include providing evidence:

1) That Support Groups do conduct health promotion activities
2) That Support Groups contribute to the physical and mental wellbeing of those affected adversely by health and mental health conditions or emotional/traumatic events

These objectives are intended to align with the long term vision of ConnectGroups which is to make Self Help and Support Groups recognised and valued for the contributions they make to individuals and communities. This will be further explored throughout this review.

1.3 METHODOLOGY

Searching generated numerous titles and websites of which 14 out of 43 were utilised as evidence throughout this review. The basic understanding of health promotion was obtained from the Australian Charities and Not-for-Profit Commission (ACNC) website whilst a more extensive comprehension of mental health and drug and alcohol addiction was acquired through the Mental Health Commission (MHC) website. A large proportion of literary content in this review is centred on local Western Australian or national studies and data. However, in order to reinforce this evidence, international studies and understanding were sought. A range of qualitative and quantitative data was collected along with scientific studies that contribute in favour to the persistence of support groups in society. Crucial information was extracted and compiled into the related sections of this review. Other sources included the research engines and resources from the University of Western Australia (UWA) and also other useful links from the Australian government website as well as those from registered organisations and charities involved with support groups, mental health and drug and alcohol addiction. This information was compiled over seven weeks.

1.4 STRUCTURE OF REVIEW

Findings are presented under four headings. '*An Overview of Health Promotion*' which discusses the presence and benefit of Support Groups in promoting health through both international and local studies; '*Necessity and Value of Support Groups in promoting Mental Health and Wellbeing*', which evaluates the contribution of Support Groups to the physical and mental wellbeing of those affected adversely by mental health conditions as well as their families and the wider community; '*Evidence for the use and success of Support Groups in the Professional Healthcare Sector*', which presents studies and findings that place Support Group guided assistance at the centre of recovery and treatment of mental illness; "*Building a Compassionate and Charitable Community through Support Groups*', which considers the current and future successes of support groups to revive the notion of a supportive and unified community and providing assistance through foregrounding health awareness. The important issue of health promotion and how support groups effectively convey and promote this is addressed throughout this review.

1.5 GENERAL FINDINGS

The research conducted found evidence to support the case for self-help and support groups (particularly looking at ConnectGroups) in successfully promoting health through fulfilling the criteria required by the ACNC. There was much evidence in support of the effectiveness of support groups both locally, nationally and internationally. Much of the research suggests that support groups not only aid burdened individuals through educating, accepting, empowering and elevating hope but their reach extends further to families and friends. Evidence also suggests that Support Groups should be implemented in conjunction with the traditional mental health services to enhance and improve the reach of their services whilst also providing an alternative to traditional methods.

This literature review commissioned by ConnectGroups therefore concluded that support groups and self-help groups are effective health promotion services and are vital in creating a sense of cohesion and in integrating adversely affected individuals, their families and friends into the community.

2. Background Information

2.1 OVERVIEW OF HEALTH PROMOTION

Health promotion has attracted increased attention over the last few years and continues to grow as a relatively recent sector in health. Due to the success of campaigns such as the *Slip Slop Slap campaign* launched by the Cancer Council, *Go for 2 & 5* which is heavily advertised by the Australian Department of Health and Ageing and *Swap it Don't Stop* endorsed by the Western Australian Government has sky-rocketed health promotion to the foreground in fields such as psychology, education and medical research in Australia. Health promotion is now recognised as essential and important in reducing the prevalence of health illnesses and diseases in Australia.

Health promotion's fundamental aim is to '*enhance the health and wellbeing of population groups and their members"*. It seeks to assist community members to lead and life healthier lifestyles by encouraging and mediating between people and the environment through personal choice. Health promotion focuses greatly on reducing the mortality and morbidity rates worldwide.

A health promotion charity is defined by the Australian Charities and Not-for-Profit Commission (ACNC) as '*a charitable institution whose principal activity is to promote the prevention or the control of diseases in human beings*' and whose purpose is to '*advance health*' [1]. The word "disease" often entails multiple definitions and meanings. According to the Oxford Concise Medical Dictionary, "*disease is a disorder with a specific cause (which may or may not be known) and recognisable signs and symptoms; any bodily abnormality or failure to function properly, except that resulting directly from physical injury (the latter, however, may open the way for disease)'*.[2] This definition is most widely accepted but with the rapid decrease in mental health, most likely due to the increased demands and pressures of current society, the application of the term 'disease' now spans beyond physical ailments. Hence, disease can be broadly defined as '*a term that encompasses both physical and mental illnesses'*.[3]

Furthermore, in order to understand the activities these charities and/or organisations develop and engage community members in; the word 'promotion' must be defined. For a charity or organisation to promote they must aim to develop and grow the knowledge and understanding of community members and actively encourage participation in health promotion activities.

2.1.1 International Approach

There are numerous ways to further define "Health Promotion". The World Health Organisation (WHO) 2005 Bangkok Charter for Health Promotion in a Globalized World revealed:

" *Health promotion is the process of enabling people to increase control over their health and its determinants, and thereby improve their health*" [9]

The Ottawa Charter for Health promotion further states that:

"*Health is a positive concept emphasizing social and personal resources, as well as physical capacities. Therefore health promotion is not just the responsibility of the health sector, but goes beyond healthy life-styles to well-being.*" [9]

These approaches and definitions emphasise the individual as a central component in health promotion activities and organisations. Health is therefore maintained and improved through collective collaboration of individuals and communities.

2.1.2 Successful Health Promotion

The ACNC requires charities and organisations to show that the foundation of their health promotion activities is based on the promotion, prevention and control of disease.

Some examples include:

Activities that promote the prevention and control of a disease may include activities that raise awareness in the community in terms of a particular disease or illness whilst educating members about the causes and devising prevention strategies. Another means by which activities promote health is through the education of carers and through providing aids that allow them to strengthen the services they provide people who are struggling with a particular disease or illness.[1]

2.1.3 Objectives and Principles of Health Promotion

In order to develop effective health promotion methods and strategies, the principles and objectives of health promotion must be understood. Health promotion as mentioned earlier, involves the collaborating of the individual, communities and organisations to raise awareness, provide support and educate individuals. Health promotion is practiced in almost all countries and can be undertaken in many different environments and settings.

Health promotion principles include:

- o   Addressing concerns and aspects of health (physical, mental, emotional, etc.)

- o   Collaborating with the local community and beyond to tackle issues on health

- o   Emphasising positive aspects of health and health maintenance

- o   Through education, training and guidance, building the capacity of individuals

- o   Being innovative and addressing challenges as a group [9]

Furthermore, these principles are enhanced by the objectives of health promotion:
- To promote equity
- To advocate for improved population health outcomes
- To promote community engagement
- To promote sustainability
- To support empowerment [10]

These are vital in sustaining a strong and valued health promotion service and are the underlying objectives and principles sought by health promotion charities.

2.1.4 Health Promotion Strategies and Activities

In health promotion, organisations and charities can choose from a wide variety of approaches to promote health and these approaches are used to enhance community health.

The commonly used strategies in health promotion involve:

1. **Raising Awareness**
   - Activities that raise public awareness regarding a disease, causes, and measures that can be taken to guard against it
   - Undertaking medical research into the cause of a disease or how to prevent a disease
   - Promoting means by which a disease or condition can be prevented
   - Running projects or charity events that draw attention to an increasingly prevalent disease or condition

2. **Educating**
   - Promoting healthy lifestyles in a general sense (Importance of healthy eating and regular exercise)
   - Activities intended to increase a person's 'wellbeing'
   - Providing skills and techniques to cope and manage a disease or condition for the individual, family and carer in terms of stress management and adjusting to the demands of the disease or condition

3. **Mediating**
   - Providing a balance between educating the individuals, families and carers and providing an environment where they feel safe and comfortable enough so they are willing to share their knowledge and personal experiences (in terms of Support Groups)
   - Guiding discussions on health promotion in order to gain a snapshot into the current knowledge within the community about a disease or condition
   - Balancing the differing interests and views of individual in seeking improved health

4. **Provide resources and services**
   - Development of resources and activities to promote good health
   - Providing a means of access to information that aim to enhance their health [9]

2.1.5 The Essence of Health Promotion

Hence in essence, health promotion involves:

- ➢ Enabling individuals and to take control of their health and the determinants
- ➢ Empowering individuals and communities with the skills, confidence and techniques to gain control over and make informed decisions about their health
- ➢ Providing a supportive and sympathetic environment complimented by strategically informing and education individuals and their families [10]

2.2 SUPPORT GROUPS

Support Groups (also known Self Help Groups, Peer Support Groups and Mutual Aid) *"are groups of people who provide mutual support for each other. In a self-help group, the members share a common problem, often a common disease or addiction. Their mutual goal is to help each other to deal with, if possible heal or to recover from, this problem"* [24]

In essence, the characteristics of Support Groups are as follows:

1) The groups are made up of peers who are people that are directly affected by the same illness or circumstance and/or are facing similar challenges

2) They are often smaller sized groups in order for people to have a more intimate experience which allows them to understand and interact with each other more easily

3) There is usually a facilitator who is either a professional or volunteer who guides the discussion in the group

4) Attendance and involvement in such groups is completely voluntary [4]

Self Help/ Support Groups provide a caring and support environment for community members to share knowledge, experiences and skills whilst engaging in health promotion activities. They also offer a "safe haven" for people to mourn, discover and socialize and in doing so allow these individuals to reconcile with themselves and continue to find meaning in their lives, bringing comfort and understanding. They not only assist those adversely affected by diseases or illnesses but also encourage the engagement of family and friends creating a more cohesive and harmonious environment. This interaction increases reliance on the community and thus contributes to the notion of a unified society.

2.2.1 ConnectGroups

ConnectGroups is a not-for-profit organisation and is the peak body for Self-Help and Support Groups in WA that provides *"practical assistance to both new and established groups to support their effective management and role in the community"* [6]. The mission of ConnectGroups is to help people help each other. ConnectGroups also creates links to community networks and information, assists with group management and development through conducting capacity building activities.

Since 1983, ConnectGroups has been funded by The Government of Western Australia's Department of Local Government and Communities whose vision is *"better services, better communities"*. Since then, ConnectGroups has continued to make valuable contributions to the local community in terms of support and health promotion through community projects and assisting Self Help and Support Groups. ConnectGroups, has further been supported and funded by the Mental Health Commission of Western Australia (MHC) since 2014 which has allowed them to expand their reach through the creation of projects such as the Pay it Forward Plan and their current project, Dream it Forward (DIF) which addresses the social and mental wellbeing of Aboriginal and Torres Strait Islander people and

more recently has been recognised by the Western Australian Government Department of Health for its health promotions around chronic conditions (LIFT).

In 2015, the customer perception survey indicated the 97% of respondents were satisfied with their service and 98% would recommend their services to others. They also have 59 new members in 2015 bringing the total up to 706 members by the end of the financial year.[6] Furthermore, with the increase in the social media, ConnectGroups has been able to reach out to more support groups and community members to motivate them to be active members.

The future goals of ConnectGroups includes making Self Help and Support Groups more "*widely recognised, supported and valued for the benefit they bring to the community*"[6] whilst also maintaining an esteemed service that emphasises good health and wellbeing and the need to support others especially seemingly isolated and adversely affected individuals. ConnectGroups also aims to uphold and maintain the priority of Health Promotion acts throughout all its activities and programs.

2.2.2 Other Support Groups

2.2.2.1 GROW

Grow is an Australian national organisation that provides mutual help group services to local communities where "*participants share life's challenges without judgement and obtain practical, genuine support for recovery from mental health issues*". Grow is conducted in local communities and offers its support to the youth, carers, prisons and people from multi-cultural background. Grow is unique in that the organisation was started in the late 1950s by individuals with a mental health illness. In 2014-2015, Grow provided support to 216 groups across Australia. Grow also supports orientation groups in psychiatric hospitals to patients that were about to be discharged. [25]

Research that has been carried out through Grow will be further explored and discussed in the Findings Section of this review.

2.2.2.2 Together – for Mental Wellbeing

Together was formed in the UK in 1879 based on the belief that *'people with mental health issues have the right and the abilities to lead independent, fulfilling lives as part of their communities"*. In 2014, Together supported more than 4500 people each month and the advocates of Together helped more than 1600 people a month to have their views and wishes heard. Furthermore, their accommodation services supported 260 people each month to live more independently and their criminal justice services helped 500 people a month tackle difficult issues in their lives and prevent recidivism. [26]

Together UK's findings and research will be further explored in the Findings section of this review.

2.2.3 International Presence of Support Groups in the Community

The charities and organisations mentioned above are only a snippet of the larger picture of Support Groups but even through these examples, the international reach of Support Groups is evident. This worldwide presence allows for an even great number of people to be aided and supported. Further still, by comparing and contrasting models used in a variety of countries, specifically in terms of Support Groups, improvements can be made to the model used in Australia and hence, enhance the effectiveness of health promotion and delivery of services to the local Australian community.

Again, this will be discusses in more detail further on in this review. Additionally, the findings and contributions to the case for Support Groups by charities and organisations including Grow and Together will be further investigated in the Findings Section of this paper.

2.3 MENTAL HEALTH

The Western Australian Association for Mental Health (WAAMH) defines mental health as "*a state of wellbeing in which the individual realises his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community*". [12]

In a rapid and fast-paced society, individuals are more likely to be exposed to stressful life events and situations that can lead to mental health problems. Hence, the maintenance of good mental health in all age groups is vital to maintain a healthy and flourishing society. Australian statistics from the Australian government stated that 1 in 5 Australians will be affected by a mental health disorder each year and in Western Australia the life expectancy gap between individuals with and without a mental illness increased from 13.5 to 15.9 years for males and from 10.4 to 12 years for females between 1985 and 2005. Furthermore, the Western Australia suicide rate was 36% higher than the national average in 2005 and has been consistently higher than the national average since 2006. These statistics highlight the necessity of health promotion and assistance services in the Western Australian community. [11]

The Western Australian government has taken action to bring mental health to the foreground in the WA health sector by presenting a mental health, alcohol and other drug services plan implemented in 2015 that will span to 2025. This plan was devised in response to the rising suicide rates in people who had been discharged from mental health services in Western Australia.

There are a great number of mental health services available for individuals to look to such as support groups and mental health intervention organisations such as ConnectGroups, Headspace, Beyond Blue, Black Dog Institute, Lifeline WA, Even Keel, Rise, Youth Focus and PIR programs. These organisations look to reduce the stigma associated with mental health and educate community

members about staying healthy through health promotion activities such as programs that encourage community engagement and interaction.

2.3.1 Causes of Mental Illness

There are many causes of mental illness ranging from personal to environmental. Some of the major causes include domestic violence, drugs and alcohol, neglect and eating disorders.[7]

2.3.2 Summary and Support Groups tackling Mental Illness

Both cases of alcohol/drug abuse and domestic violence are interwoven in a vicious cycle that lead to or are caused by mental illnesses. It is often difficult to identify if individuals with such problems had the mental illness first or lead to mental illness. In either case however, it is important that each aspect is addressed and individuals receive appropriate support.

This is where Support Groups come in. Support Groups, such as ConnectGroups, provide a supportive environment for these burdened individuals, allows for interaction with others for these often isolated individuals, allows for the sharing of experience between members, conducts structured discussions about improvements to their methods of coping and educating individuals about managing their condition. In this way, Support Groups are able to not only provide a method of health promotion but an accepting and social space for these individuals. For example, Families 4 Families provide assistance to adults and their families who have acquired brain injuries through social and recreational activities, regional Support Groups and online groups discussions.

The impact of Support Groups in terms of health promotion and mental wellbeing will be further investigated below.

3. Findings

3.1 CONTRIBUTION OF SUPPORT GROUPS TO THE PROMOTION OF GOOD MENTAL HEALTH AND WELLBEING

According to Psychologist Martin Seligman, the notion of good mental health is dependent on five dominant aspects known by the acronym of PERMA; positive emotions, engagement, relationships, meaning and purpose and accomplishments. [17]

Good Mental Health and wellbeing is crucial in living a well-balanced and satisfying life. With the perpetual decrease in mental wellbeing, action has been taken globally to tackle the prevalence of mental illness in society.

Good mental health is beneficial in a number of ways:

1. Good mental health improves an individual's quality of life

2. Good mental health strengthens an individual's ability to have healthy relationships, make good life choices, cope with the ups and downs of life and maintain physical health and wellbeing

3. Good mental health also allows for an individual's to achieve their full potential (self-actualisation) [11]

3.1.1 Reducing Stigma associated with Mental Illness

According to the Mental Health Commission (MHC), Stigma is *"when a person is labelled by their illness"* and *"is seen as part of a stereotyped group"* [27]. This kind of stereotyping is often negative and can lead to prejudice and discrimination.

Stigma can cause victims to experience feeling s of shame, distress and reluctance to seek or accept necessary help. Families are also affected by stigmatisation and this can lead to stigmatised individuals lacking support.

The stigma that is associated with mental illness is a major barrier between affected individuals and community engagement. Despite all the available support services, the individual must be the first be willing to seek support and help on their own. This is a major issue that is addressed in The Western Australian Mental Health, Alcohol and Other Drug Services Plan 2015-2025.

According to Larry Fricks (2010), evidence demonstrated that lived experiences of recovery and competent recovery skills gained from peer support group training can be a means by which the underlying negative connotations associated with mental illness can be diminished along with the negative self-image that can lead individuals into a state of despair and hopelessness.[28]

Ochocka et al. (2006) reported that members of peer support groups we less likely to see the mental illness stigma as an obstacle for employment and often this lead to a greater proportion of their members gaining employment positions. This is an obvious outcome as Support Groups provide a supportive and open environment where *"peers embody acceptance and success"* and hence, through this atmosphere they become empowered and more confident in their ability and success. Often self-stigmatisation is an internal anticipation of discrimination that prevents individuals from socializing and entering the workforce. Through regular discussions and sharing of experiences in a support group setting where they are surrounded by like individuals, breaks the barrier preventing them from utilising their personal skills and abilities. [29]

Furthermore, Mowbray, Moxley and Colliins (1998) found that through engaging in peer support, peer support workers had altered attitudes to mental illness which allowed them to foster hope in peers they worked with and therefore, breaking the social stigma of mental illness. [29]

12

Through a study of five peer support groups, Faulkner and Bassett (2010) found that peer support through the sharing of information, discussions and debate about mental illness within the peer group allowed them to challenge stigma and discrimination and hence improving their individual self-confidence. [30]

According to the Mental Health Commission (MHC), stigmas can be changed by:

- Getting to know people with personal experiences of mental illness
- Talk openly of your own experience of mental illness
- Learn and share the facts about mental health and illness
- Offer the same support to people when they are physically or mentally unwell
- Don't discriminate when it comes to participation

From these strategies mentioned, it is evident that Support Groups allow for all these aspects to be addressed.

1) Getting to know people with personal experiences of mental illness and talking openly of your own experience of mental illness
   - This is achieved through Support Groups members coming together and discussing lived experiences
   - Also in this environment, it allows the adversely affected individual to open up to the group hence reducing isolation

2) Learn and share the facts about mental health and illness
   - Through Support Groups, peer support members and workers gain skills and knowledge about mental health and illness with the aim of changing their attitude toward mental illness
   - Through altering their attitudes, this can reduce the social and internal stigma associated with mental illness

3) Offer the same support to people when they are physically or mentally unwell
   - This occurs when the peer support members discuss and communicate with each other; sharing information, thoughts and experiences
   - The skills also learnt through support groups will equip individuals with the ability to help others and provide them with the self-confidence to voice against the stigmatisation of individuals with mental illness

3.1.2 Empowerment of Individuals

Empowerment means "*give power or authority to*".[35] In terms of mental health and illness, empowerment means giving the affected individual, power and control over their mental condition and giving them confidence in their abilities and potential.

The results collected by Ochocka, Nelson, Janzen and Trainor (2006) showed that by participating in peer support as either a provider and/or recipient resulted in an increased sense of independence and empowerment. They found that a consistent engagement in peer support groups increased their stability in work, education and training which gave individuals this sense of empowerment. Further still, participants felt they had better control over their symptoms and problems through the research they conducted independently and shared within the group. [29]

Peer support has also found to improve self-esteem and confidence by Davidson et al. (1999) which has been attributed to the shared exploration of feelings and emotions as well as the mutual aid in creating solutions to their problems and conditions. In traditional health care, expression of such emotions are discouraged and seen as crises. [29]

Another report produced by Faulkner and Kalathil commissioned by Together UK (2012), concluded that during each interview, members talked of finding empowerment and they felt a sense of acceptance and respect. They also emphasised the restoration of dignity, confidence as well as self-esteem. They believed that being a part of their Support Group gave them hope and optimism and provided a sanctuary in which they could form friendships, hence reducing their isolation. [31]

One member stated: "… *being part of a group that understands and watches out for each other gives me a sense of belonging"*

Furthermore, it was found that peer workers became role models for women who were recently released from prison and were try to assimilate back into the community. It enabled them to see that it is possible for them to acquire a job and start a new life and that these things were not out of their reach and thus, empowered their perspective on life. [29]

3.1.3 Social Support

Social support for individuals with mental illnesses is essential as these experiences and difficulties often place barriers between the individual and their community. Social isolation is one of the most prevalent factors that determine whether the affected individual will seek support and help or not.

Ochocka et al (2006) in a longitudinal study stated that during a 9 to 18th month follow up session, individuals who had been involved in a Support Group reported having more friends and an increased social support network, not only from their support group but from other relationships and settings in comparison to those who had not received Support Group services. Furthermore, Forchuk et al. (2005)'s evidence supported their study as it was reported that participants in Support Groups showed enhanced social skills and received better social support.[29]

When presenting evidence for the effectiveness of Support Groups in providing social support it is critical that the services and functioning of the group is compared to the support provided by traditional medical health services.

It was reported in a cross-sectional study conducted by Yanos, Primavera and Knight (2001) that individuals involved with Support Group services showed improved social functioning in comparison to those that only received traditional health care. One explanation for this improvement was stated by Kurtz (1990) who suggested that it was due to the exposure of these individuals to varying perspectives and through engaging in peer support, allowed them to develop coping and problem-solving skills. Kurtz suggested that it was also due to the successful role modelling of Peer Support Workers which gave them hope and direction through hearing their advice and experiences. [29]

3.1.4 Empathy and Acceptance

According to Davidson et al (2004), a sharing relationship is a notable aspect of Support Groups as it promotes acceptance and real empathy for group members.[29] For adversely affected individuals they often experience a lack of self-acceptance and perceive themselves to be rejected by community members. Support Groups allows for like individuals to come together and share lived experiences and form long-lasting relationships.

A survey study conducted by Together UK further provided evidence for the contribution of support groups to creating an empathetic and accepting community. It was found that being a part of a peer support group gave members a sense of belonging, allows for mutual understanding as well as shared identities and experiences. The study noted that the groups discussed group goals and achievements such as challenging the status quo and collectively taking action. The discussions led them to issues about mental health and questioning the medical model of intervention. By sharing their knowledge and experiences, it aided members in expanding and reshaping their knowledge about mental illness as well as formulating new knowledge. [30]

Additionally, Faulkner and Basset (2010) argued that by sharing common lived experiences with similar individuals often forms the foundation for campaigning and activism through the acquisition of new knowledge.[30]

Coatsworth-Puspokey, Forchuk and Ward Griffins (2006) discovered that Support Group members valued the experiential knowledge of Peer Support Workers and Facilitators which evoked a feeling of mutual understanding of challenges that they had faced and was the basis on which a 'bond' within the group was created. In a similar way, a qualitative study carried out by Paulson et al (1999) concluded that the greatest strength of group membership in Support Groups is the understanding and accepting nature of group facilitators and workers. [29]

It was also demonstrated by Sells et al. (2006) that Support Groups members experience having greater feelings of likeness, acceptance and understanding than patients who engaged in traditional mental healthcare over 6 months. This provides evidence for the fact that Support Groups can potentially provide better healthcare and health promotion than traditional medical support. [29]

Therefore, an accepting and understanding environment for individuals suffering from mental health problems and illness is a key factor in improving their condition with less reliance on medical intervention. According to Sells, Davidson, Kewell, Faizer and Rowe (2006), the unique role of trust allows peers to connect in Support Groups as well as the fostering of hope in this mutual help setting is *"a key transformational factor in mental health services"*. [29]

3.1.5 Hope

A key emotional factor when coping and improving mental health problems and illness is a sense of hope which is the belief in a better future. This aspect is heavily promoted by Support Groups and is central to the purpose and atmosphere of Support Group settings. Often hope is not a priority in traditional mental health settings, rather the focus is recovery. However, hope and recovery are interlinked; recovery is a much greater challenge without the presence of hope.

Davidson et al (2006) found that hope is fostered through the interaction and regular meeting with like individuals who have overcome their difficulties and challenges such as Peer Support Workers and other Support Group members. This is such a crucial advantage that Support Groups have over traditional health care.[29] Ratzliff et al. (2006) further discovered that individuals newly exposed to the unique supportive environment of Support Groups were very pleasantly surprised by the vast extent of support provided through the interaction with others who describe their own similar experiences.

3.1.6 Impact of the Assistance provided by Support Groups to Families and Friends

Support Groups not only support individual with lived experiences but also their families and friends. Support Groups recognise the stresses and lack of understanding that occurs in familial and friendship bonds which renders them helpless and distraught at not being able to help their loved one.

One example of Family Support Groups is Family-to-Family Peer Support (F2F) which is conducted in the USA and delivers support for families with children and youth with mental health challenges. The goals of the F2F Support developed from various studies into peer support are:

- Increasing the acceptance and appreciation of the child's challenges whilst increase their ability to work with formal and informal supports
    - Help families care for their children through understanding and developing abilities to collaborate with treatment providers
- Promoting the increased realisation of self-care for parents
    - It is important for parents to not only care for the affected child but themselves as well
- Decreasing internalized blame
    - Families often blame themselves for not provided proper care for their children before they experience mental illness
    - Decreasing the feelings of stigma

- Decreasing isolation
  - Helping families identify and access help and resources
- Promoting health and knowledge
  - Learning how to support and take action to reduce mental illness through increased knowledge and actively engaging in peer support services

In a report compiled in October 2011, F2F services evaluated its effectiveness in the community. According to Koroloff et al (1996), F2F outreach to low-income families needing mental health services for their 4-18 year old children saw positive effects. It was also found that parents who engaged in F2F support services were more motivated to be involved with other parents, community volunteer activities and advocacy. [23]

Similarly Kutash et al. (2010) found that there were reports of positive effects on children and youth. The study found that through the involvement of parents in school settings, resulted in higher rates of children and youth attendance and was demonstrated in a change in reading score. This demonstrated better care and reduction in social isolation of the youth with mental illnesses.

Furthermore, in formal studies that were conducted to measure the level of satisfaction with F2F services found that parents involved considered the F2F programs helpful and valuable. [23]

The F2F pear support programs are quite a new addition to the methods by which mental health in youth is tackled in the USA. But nevertheless demonstrates the importance of providing support for family members of affected individuals and the positive outcomes for the family wellbeing and the affected individual.

3.1.7 Support Groups for Carers

Carers face many confronting experiences and often have heavy burdens in caring for negatively affected individuals both psychologically and emotionally.

A report conducted by Schizophrenia Ireland, stated the importance of providing Support Group assistance to carers. It listed the potential benefits of Support Groups suggesting that their help should be directly linked to the carers' perceived needs.

The first aspect addressed by the report is the benefit of gaining education and information for carers in the Support Group context. It is essential that the conditions (in this study, schizophrenia) are demystified so that the knowledge of carers can be expanded. Furthermore this increase in knowledge capacity allows for carers to improve their problem solving skills. Carers also gain referral knowledge about the services available for patients and other carers. Support Groups also provide new ways to think feel and deal with life experiences discovered. It also provides carers with practical advice and

suggestions for coping with difficult behaviour that are likely to encounter when dealing with the community and their patient.

The second aspect is the wellbeing of the carer. By involving them with Support Groups it allows carers to share experiences, compare predicaments and form friendships. This is of high importance to the wellbeing of carers who are surrounded by lived experienced individuals on a daily basis. In some cases, carers can be individuals who have lived experiences as well and through providing Support Group access, it can help to reduce the potential for relapse.[32]

3.1.8 Accounting for Cultural Differences

Faulkner and Kalathil (2012) in a study commissioned by Together UK investigated marginalised community Support Groups. They found that the essential purpose of Support Groups in providing mutual understanding, collective action and having a shared identity was particularly beneficial to marginalised groups. This study emphasised the importance of Support Groups in multiple contexts and the necessary consideration of different perspectives and identities.[30]

It is important in Support Groups to take into account cultural differences and understand that the support group environment is not suitable for all individuals.

A simple example of this is the Indigenous culture of Australia. In indigenous culture, Aboriginal individuals have their own traditions such as Yarning Groups which is an indigenous alternative to Support Groups. In these yarning groups, indigenous members discuss spiritual healing, good health and share their stories. [33]

ConnectGroups has shown awareness of cultural differences through their Dream It Forward Program, aimed to aid Aboriginal communities in improving their mental health by providing support and education.

3.2 EVIDENCE FOR THE USE AND SUCCESS OF SUPPORT GROUPS IN THE PROFESSIONAL HEALTHCARE SECTOR

3.3.1 The Effectiveness of Support Groups in Recovery and Treatment

Studies by Lawn et al (2008) and Forchuk et al. (2007), found that Support Groups reduced inpatient bed use and Bates et al. (2008) and Cook et al. (2009) saw improvements in the physical health of people suffering from mental health issues. Further still in recent studies, Trachtenberg et al (2013) suggested that there is evidence to support that by employing peer workers in mental health services, it can result in cost savings in terms of reducing psychiatric inpatient bed use.[30]

Repper and Carter (2010) advocated that the sense of mutuality provided by Support Groups has the potential to be effective in enhancing hope of recovery to patients. Similarly, McClean et al. (2009) observed that the often prevalent unequal power dynamic in a staff-patient relationship is addressed in the involvement of peer support workers who create open and caring relationships to patients.

Additionally, Raiff (1984) found that Support Groups members had a greater acceptance of their mental illness, lower levels of worry, improved coping abilities and had an overall higher health satisfaction. Powell and his associates (2001) also noted improvements in illness management and daily functioning as a result of self-help participation. [34]

Crepaz-Keay and Cyhlarova (2012) discovered that Support Groups have been used to improve effectiveness of self-management skills.

It was also found that individuals who become employed as peer support providers have higher self-esteem, sense of empowerment and hope as well as an increased confidence in personal skills and coping abilities. Salzer (1997) further established this fact by determining that due to the increase in self-efficacy gained from the individual's involvement with Support Groups gives them the power to combat stigma. Also by becoming a peer support provider, the lived experience individual feel a sense of purpose and respect and provide a positive role model for others they intend to help. [34]

3.3.2 The Benefits of Support Groups in the Professional Healthcare Sector

According to the Psychiatric Rehabilitation Journal, there are multiple major benefits of Support Groups in the mental health care sector. [34]

Firstly, it potentially produces cost-saving methods. This is evident from the multiple sources that consistently state that Support Group assistance decreased hospitalisation, in particular inpatient bed use or a shortened hospitalisation time. As hospitalisation is one of the most expensive mental health services, it is likely to improve financial savings significantly. Furthermore, Support Groups generally don't involve extensive costs to run and with the financial savings from reduced hospitalisation, the funds can be put into the health promotion activities provided by Support Groups.

Secondly, Support Groups and Self-help programs can reduce the overutilization and reliance on traditional mental health services. This would further reduce the expenses of the mental health system. Support Groups tend to provide an effective alternative to traditional methods of treating and reducing mental health issues. Gould and Clum (1993) compared self-help group services with therapeutical services in a research study and found no difference between the two. In fact, they found that self-help had better outcomes when facing mental health issues such as depression.

Thirdly, Davidson and colleagues (1999) concluded from observing uncontrolled studies of individuals with severe mental illness in self-help groups that being involved in such groups showed an increase in communication and social networking of these individuals, an improvement in symptoms and overall, an increase in quality of life. This was further supported by the evaluative studies of Kurtz (1988) who look specifically at the National Depressive and Manic Depressive Association and Kennedy's (1989) who assessed GROW. Both studies found support for decreased hospitalisation of patients who attend Self-Help groups and/or Support Groups regularly.

Furthermore, Support Groups are also beneficial to support group providers and facilitators to help them in their journey through their own lived experiences. Often providers and facilitators are individuals who have experienced the benefits of the Support Group environment and wish to become more involved in the experience. Salzer (1997) carried out qualitative research into Support Group providers and found that by taking on this role, it allowed them to increase their self-confidence in their ability to cope with their illness, their self-esteem and increase their sense of empowerment and hope. These feelings increases control and contribute to an increases self-efficacy which equips them with the tools to combat stigma associated with mental illness. Furthermore, on multiple occasions (Gottlieb (1982), Humphreys (1997), Moxley and Collins (1998), Salzer and Shear (2002)), research concluded that the role provided opportunities to positively fill their time, put their own recovery into practice and build their job skills to increase their professional growth. These skills allowed them to integrate better into the workforce post-recovery.

3.3.3 Support Groups as a Essential, Recognised and Complementary Body for Recovery and Treatment

As stated by Jacobs and Goodman (1989):

"The new member, who frequently has felt stigmatised and criticised (or at the very least isolated and not understood), frequently finds immediate acceptance as a member of the group. That sometimes stunning experience seems to be a vital step toward making the cognitive, emotional and behavioural changes necessary for more effective functioning and improved quality of life" [32]

Research has found that the coupling of traditional mental health services with Support Group involvement strengthens and enhances recovery process.

According to Segal et al. (1998), Support Groups and Self-Help Groups allows for isolated individuals both geographically and financially as well as individuals who oppose the traditional mental health system to gain help and form strong connections with others that have similar lived experiences. It has been found that these groups allows them to engage better with similar individuals and hence, is more effective in improving their health and increases their feeling of acceptance. [34]

There has also been much evidence to support the positive effective of Support Groups when coupled with traditional mental health services (Felton et al (1995), Edmundson et al (1982), Klein et al. (1998), Kaufman (1995)). It was found to enhance the outcomes in patients and hence, added significant value.

Further still, Christensen and Jacobson (1994) gathered evidence to suggest that professionals don't have a far enough reach to provide assistance to the vast number of people who need support and treatment. They also pointed out that only a small number of diagnosed cases receive treatment. Support Group services aid this reach by enhancing the delivery of mental health services to the less

easily attainable community. This not only allows for mental health services to meet the needs of the community but also provide alternative approaches to treatment.

3.4 BUILDING A COMPASSIONATE AND CHARITABLE COMMUNITY THROUGH SUPPORT GROUPS

A community is defined as "*a social group of any size whose members reside in a specific locality, share government, and often have a common cultural and historical heritage".* [21]

Psychologists McMillan and Chavis (1986) foregrounded the importance of a sense of community which is important for self-definition and creating a cohesive society. A sense of community is defined as "*a feeling that members have of belonging, a feeling that members matter to one another and to the group and a shared faith that members' needs will be met through their commitment to be together".* This is highly relevant to the instance of Support Groups which seek and embody this sense of community. [19]

3.4.1 Importance of a Cohesive Community

A healthy and cooperative community *"reflects a sense of mental and physical wellbeing and is the foundation for achieving all other goals".* [20]

In recent years, the community structures have changed due to an increase in technology which has redirected the attention of community members to social networking rather than face-to-face communication and engagement in community activities. The family structure demographics have changed with an increase in single-parent families and mixed-member families. These familial structures can create a distance between family members.

Hence the presence of support groups is crucial in bringing a community together and sharing experiences, emotions and engaging in positive activities. The very essence of Support Groups tackles the issues associated with a disintegrating sense of community which can potentially improve health promotion in terms of socialising and being actively involved in the community.

3.4.2 Benefits of Support Groups for the Community

The presence of Support Groups in the community is a beneficial to ailed individuals because it provides reassurance that they are not alone through their struggles, it provides them with new skills and advice that aids them in coping and producing strategic plans whilst strengthening their motivation to persevere. Support Groups are not only beneficial to the individual but to their family and friends. By creating Support Groups for the family and friends of the adversely affected individual, it presents an opportunity for them to become more involved constructively in the individual's recovery. Not only does this strengthens familial bonds and friendship but allows for them to reach out strategically and empathetically to these individuals and lessens their isolation and insecurity. [5]

The study carried out by Faulkner and Kalathil (2012) further provided evidence for the contribution of Support Groups to creating a unified community. It was found that being a part of a Peer Support Group gave members a sense of belonging, allows for mutual understanding as well as shared identities and experiences. The report noted that the groups discussed group goals and achievements such as challenging the status quo and collectively taking action. The discussions led them to issues about mental health and questioning the medical model of intervention. By sharing their knowledge and experiences, it aided members in expanding and reshaping their knowledge about mental illness as well as formulating new knowledge. [31]

Furthermore, McKenzie (2005) stated that the mutuality and reciprocity that occurs in Support Groups builds social capital which is associated with resilience and well-being. The report commissioned by Together UK, defines social capital as *"the skills, networks and resources that support individuals to be connected to their communities"*. The report further stated that through supporting community members, it builds the capacity of that community. [30]

3.4.3 Support Groups and a Sense of Community

As mentioned previously, McMillan and Chavis' Sense of Community model is highly relevant to the structure and value of support groups. According to McMillan and Chavis, there are four aspects to a sense of community.

The first is membership which includes boundaries, emotional safety, a sense of belonging and identification and personal investment.

The second aspect is influence which is bidirectional (i.e. members of a group are empowered to contribute to the group and group cohesiveness us dependent on the group having influence over the members). A key component in this aspect is trust, which encourages individuals to voice their opinions and experiences.

Third is integration and fulfilment of needs. In this aspect, individuals must feel they are rewarded for their participation. In the case of Support Groups, members are rewarded with social opportunities and skills to cope with their condition.

Lastly is shared emotional connection and McMillan and Chavis stated that this is the definitive element of a true community. A shared emotional connection occurs in a Support Group through the sharing of lived experiences and knowledge. It allows for members to intimately connect with each other on a personal level and as Support Groups often occur in community settings, within the community, they strengthen and enhance the cohesiveness of the local community.[19]

In this way, by paralleling this model of a cohesive community with the health promotion activities of Support Groups it is evident that Support Groups effectively "tick all the boxes" to improving this sense of community. Furthermore, the improvements in technology and health promotion techniques allow

health promotion to be more widespread and allows for a greater awareness of the importance of good health.

4. Recommendations

4.1 Recommendation #1

- Implementing support groups as a recognised addition to the recovery journey of patients for the prevention and control of disease and/or illnesses around the world

4.2 Recommendation #2

- Conduct ongoing research into the benefits and value of Support Groups to those impacted by mental illness and bolster research into other conditions

4.3 Recommendation #3

- Integrating Support Groups into communities as a vital source of unity

4.4 Recommendation #4

- To inspire and encourage the creation of more Support Groups locally and nationally

4.5 Recommendation #5

- The inclusion and development of Support Groups that are tailored to the beliefs and cultures of a community

5. Conclusion

5.1 CONNECTGROUPS IN SUCCESSFUL HEALTH PROMOTION

ConnectGroups promote the use of self-help as a strategy to bolster self-reliance and self-confidence whilst providing them with the skills to "*increase control over their health*". They successfully promote health through the programs and activities conducted that align with the criteria stated by the ACNC. Support Groups continuously contribute to the physical and mental wellbeing of those affected adversely by mental health conditions or emotional/traumatic events.

The local, national and international research evidence is strong in emphasising how effective Support Groups and Self-Help groups are in health promotion, for adversely affected individuals, their families and friends as well as in building a cohesive community.

In the future, it is hoped that Support Groups will be recognised as a complementary body for recovery and treatment in the mental health sector. As seen from the success of international structures and programs, it can be said that Support Groups and Self-Help Groups are vital to the community and the evidence presented in this literature review suggests that they should be endorsed and promoted both locally and nationally.

REFERENCES

---

1. What is a health promotion charity? [Internet]. ACNC.gov.au. 2016 [cited 16 March 2016].Available from: http://www.acnc.gov.au/ACNC/FTS/Fact_HPC.aspx

2. Disease [Internet]. TheFreeDictionary.com. 2016 [cited 9 May 2016]. Available from:

http://medical-dictionary.thefreedictionary.com/disease

3. Health and Illness. Australian Institute of Health and Welfare [Internet]. 2014 [cited 9 May 2016];(14). Available from:
    http://www.aihw.gov.au/WorkArea/DownloadAsset.aspx?id=60129547576

4. Chapter 21. Enhancing Support, Incentives, and Resources | Section 2. Creating and Facilitating Peer Support Groups | Main Section | Community Tool Box [Internet]. Ctb.ku.edu. 2016 [cited 30 March 2016]. Available from: http://ctb.ku.edu/en/table-of-contents/implement/enhancing-support/peer-support-groups/main

5. Support groups - Support groups - Getting help - Black Dog Institute [Internet]. Blackdoginstitute.org.au. 2016 [cited 30 March 2016]. Available from:
    http://www.blackdoginstitute.org.au/public/gettinghelp/othersupportgroups.cfm

6. ConnectGroups | helping support groups & individuals [Internet]. Connectgroups.org.au. 2016 [cited 30 March 2016]. Available from: http://www.connectgroups.org.au/

7. Causes of Mental Illness [Internet]. WebMD. 2016 [cited 30 March 2016]. Available from:
    http://www.webmd.com/mental-health/mental-health-causes-mental-illness?page=2

8. Mental health (AIHW) [Internet]. Aihw.gov.au. 2016 [cited 30 March 2016]. Available from:
    http://www.aihw.gov.au/mental-health/

9. Royal Automobile Club of Victoria (RACV) Ltd. Health Promotion and Health Education in Schools - Trends, Effectiveness and Possibilities [Internet]. RACV; 2006 p. 2-5. Available from:
    https://www.racv.com.au/wps/wcm/connect/fadf2a004da9bb7aa2c9fa54a1b45993/Health+Promotion+and+Health+Education+in+Schools.pdf?MOD=AJPERES&CACHEID=fadf2a004da9bb7aa2c9fa54a1b45993

10. Health Promotion: Strategic Framework (2011-2015) [Internet]. Northern Territory Department of Health; 2011 p. 3-4. Available from: http://www.healthynt.nt.gov.au/

11. The Western Australian Mental Health, Alcohol and Other Drug Services. The Western Australian Mental Health, Alcohol and other Drug Services Plan 2015-2025. Perth, WA: The Western Australian Mental Health, Alcohol and Other Drug Services; 2015.

12. Western Australian Association for Mental Health [Internet]. Waamh.org.au. 2016 [cited 30 March 2016]. Available from: https://waamh.org.au/

13. Together UK. 'The Freedom to be, the Chance to Dream': Preserving User-led Peer Support in Mental Health. Together UK; 2012 p. 27-30.

14. Together for Mental Wellbeing - Annual Review 2014-2015 [Internet]. Together-uk.org. 2016 [cited 4 April 2016]. Available from: http://www.together-uk.org/ouryear/

15. Drugs and mental illness [Internet]. Sane.org. 2016 [cited 4 April 2016]. Available from: https://www.sane.org/mental-health-and-illness/facts-and-guides/drugs-and-mental-illness

16. Importance of Mental Health [Internet]. Ripsych.org. 2016 [cited 4 April 2016]. Available from: http://www.ripsych.org/importance-of-mental-health

17. Corporation A. What is good mental health? - Health & Wellbeing [Internet]. Abc.net.au. 2014 [cited 4 April 2016]. Available from: http://www.abc.net.au/health/features/stories/2014/09/11/4085497.htm

18. Design V. What is stigma? [Internet]. Mentalhealth.wa.gov.au. 2016 [cited 4 April 2016]. Available from: http://www.mentalhealth.wa.gov.au/mental_illness_and_health/mh_stigma.aspx

19. Community Psychology: Psychological Sense of Community [Internet]. Wright-house.com. 2016 [cited 4 April 2016]. Available from: http://www.wright-house.com/psychology/sense-of-community.html

20. Prescription for Wellness: WHY IS COMMUNITY HEALTH IMPORTANT? [Internet]. Canatx.org. 2016 [cited 4 April 2016]. Available from: http://canatx.org/health/PrescriptionForWellness/CommunityHealth/WhyImp.htm

21. The definition of community [Internet]. Dictionary.com. 2016 [cited 4 April 2016]. Available from: http://www.dictionary.com/browse/community

22. Families4Families ABI support network [Internet]. Families4Families ABI support network. 2016 [cited 18 April 2016]. Available from: http://families4families.org.au/

23. Issue Brief - Family-to-Family Peer Support: Models and Evaluation Outcomes Roundtable for Children and Families [Internet]. New York: ICF Macro; 2016. Available from: https://ffcmh.org/sites/default/files/Issue%20Brief%20-%20Family%20to%20Family%20Peer%20Support%20Outcomes%20Roundtable%202011.pdf

24. What is a Self-Help Group? [Internet]. Psych Central.com. 2016 [cited 9 March 2016]. Available from: http://psychcentral.com/lib/what-is-a-self-help-group/

25. Grow - Community based Mental Health Support | A Proven Program for Mental Wellbeing [Internet]. Grow.org.au. 2016 [cited 9 May 2016]. Available from: http://www.grow.org.au/

26. Together: A leading UK mental health charity [Internet]. Together: A leading UK mental

health charity. 2016 [cited 9 May 2016]. Available from: http://www.together-uk.org/

27. Design V. Mental Health Commission, Government of Western Australia [Internet]. Mentalhealth.wa.gov.au. 2016 [cited 9 May 2016]. Available from: http://www.mentalhealth.wa.gov.au/Homepage.aspx

28. Fricks L. Peer Support Services and the Expanding Peer Support Workforce. 2010

29. Repper J, Carter T. A Review of the Literature on Peer Support in Mental Health Services. Journal of Mental Health. 2011;20(4):392-411.

30. Together UK. Mental Health Peer Support in England: Piecing Together the Jigsaw. 2013.

31. Faulkner A, Kalathil J. 'The Freedom to be, the Chance to Dream': Preserving User-led Peer Support in Mental Health. Together UK; 2012.

32. Reay-Young R. Support Groups for Relatives of People Living with a Serious Mental Illness: An overview. International Journal of Psychosocial Rehabilitation. 2000;5:56-80.

33. Dreamtime Public Relations. Healing Foundation Gathering 2010: Let's Talk Healing. Dreamtime Public Relations; 2010.

34. Solomon P. Peer Support/Peer Provided Services Underlying Processes, Benefits and Critical ingredients. Psychiatric Rehablitation Journal. 2004;27(4).

35. The definition of empowerment [Internet]. Dictionary.com. 2016 [cited 9 May 2016]. Available from: http://www.dictionary.com/browse/empowerment