
SELF-HELP GROUPS-SPECIFIC IDENTITY AND PERFORMANCE OF THEIR ACTIVITY¹

Svetlina Karapetrova – Student / Specialty Social Work

Department of Public Health and Social Work

University of Ruse “Angel Kanchev”

Tel.: +359888 456 122

E-mail: karapetrova74@abv.bg

Assoc. Prof. Sasho Nunev, DSc of Social Work/ Scientific Supervisor

Department of Public Health and Social Work,

University of Ruse “Angel Kanchev”

Phone: +359886 802 466

E-mail: sasho_nunev@abv.bg

***Abstract:** The Self-help Movement Phenomenon. Self-help groups - essence, target orientation, self-help groups types. Requirements contributing to the realization of the self-help process. Therapeutic factors in self-help groups . Effectiveness of self-help groups. Formed principle of treatment of dividends. Voluntary associations of people who have a similar problem, motivate to gather together to exchange experience. The empowerment of their members, in encouraging them to organize and work together. Self-help groups in Bulgaria*

***Keywords:** Self-help groups, Therapeutic factors, Effectiveness of the groups, Basic models.*

INTRODUCTION

The self-help groups movement is a global phenomenon, and in many countries such groups contribute to coping with a wide range of social, health, behavioural, emotional and other people's issues. They are voluntary associations of people who have a similar problem or motivation to come together to exchange experience. Such groups often occur spontaneously, on the initiative of the clients themselves, and are defined as unprofessional unions. Often, however, they have an initiator, a founder or a core of creators. These are people who have a specific problem but have already coped with it, overcome it and have experience.

EXPOSITION

Self-help groups in Bulgaria began in the late 80s and early 90s of the twentieth century. The first step in this direction is the establishment of the self-help group "Alcoholics Anonymous" in 1989 in Sofia. Gradually, other self-help groups were created with a different scope of support - anonymous drug addicts, self-help groups of parents with children, drug addicts, Self-help groups for women who suffer domestic violence or those living in a violent situation, self- foster families, a self-help groups of people with post-traumatic stress disorder, an online self-help groups for people with eating problems - bulimia, anorexia, overeating, etc. The aim of their members is to change their personal and life circumstances and influence their social and political environment. In meetings, they focus on authenticity, equality and equal rights, jointly held discussions and mutual support and assistance.

¹ Докладът е представен на студентската научна сесия на 10.05.2019г. в секция Социални дейности с оригинално заглавие на български език: ГРУПИ ЗА САМОПОМОЩ – СЪДЪРЖАТЕЛНА СПЕЦИФИКА И ВЪЗПРИЯТИЕ ЗА ДЕЙНОСТТА ИМ

Key points of the therapeutic concepts of self-help group

The therapist concept focuses on key aspects related to achieving a positive effect, defining the roles of assisting self-help group, and facilitating self-help by getting individual and group support from people with the same problems. An essential part of a self-help group is the empowerment of their members, in encouraging them to organize themselves and work together. Members have the opportunity to discover and make sure that others have difficulties and experiences similar to theirs. This brings relief that they are not alone in finding a solution that is related to their experiences. This sensation is defined as the phenomenon "all in one boat". Discussing taboo topics to one degree or another is easier and more successful in self-help groups. Each participant contributes to the group's activities, assumes responsibility for making decisions about their needs, behaviour and activities in the group; honest and open communication, encouraging positive experiences in the group. The requirements define the structural features of. Group leadership is carried out by delegates, and group members are involved in supporting the group's activities by sharing experiences, emerging challenges and opportunities to deal with them. Self-help group have the following characteristics: accessibility, anonymity, social support and mutual help, self-esteem and personal efficiency, introspection (self-observation, self-analysis, depth), advocacy. The group is a structure that performs the function of a mediator and a buffer between members and the surrounding social environment. Processes that are related to the satisfaction of personal and social interests and needs of members, as well as to the creation of a suitable environment characterized by security, openness, honesty and ease, are essential. This list includes the following psychosocial processes: acceptance, approval, good attitude, rehearsing behaviour, desired changes, changes in viewpoints and perspectives of the participants for the world, reduction of anxiety and tension, role modelling, targeting new strategies, mutual validation, compliance the personal goal with the situation, the conditions, the hope of coping with the problems. In a self-help group therapeutic aspects are expressed through the principle of helper therapy principle, which was developed in the mid-60s by researcher Frank Riessman based on the self-help groups observations and studies in the field of social work (Riessman, F., 1965). Through it he reveals the therapeutic effect of the relationship between both helper and assistant in a self-help group. This principle can be defined as a therapeutic concept that explains the usefulness of mutual assistance relations between group members as assisting and receiving help. The view is that when members of the self-help groups help others, they also help themselves.

Exploring the perception of a self-help group

The study is conducted to understand the perception and activity of a self-help group by society. The questionnaire contains 14 questions with the opportunity to express opinions and recommendations in free form from each respondent. The survey involved 79 respondents. The main characteristic of the sample respondents is as follows: gender - women 51 (65%), men - 28 (35%), age - from 18 to 30 years - 25%, from 31 to 45 years - 50%, from 46 years. to 60- 15%, over 60- 10%

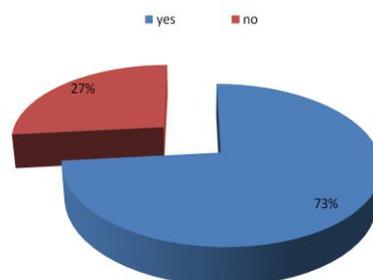


Fig.1 Do you know for the existing of self-help groups (anonymous alcoholics, anonymous drug addicts, parents of children with disabilities, etc.)?

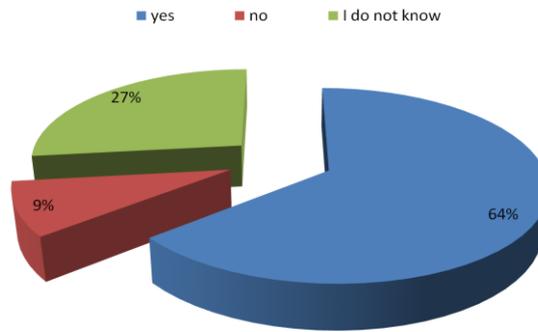


Fig.2 In case you know, do you think that they could be useful with their activity and could help?

Out of 79 respondents, 73.4% were aware of the existence of the self-help groups. These are people mainly in the age range of 31 to 45 years (Fig. 1). From responding to what they think about the usefulness of a self-help group, 64.1% have a positive view for such groups and their help (Fig. 2).

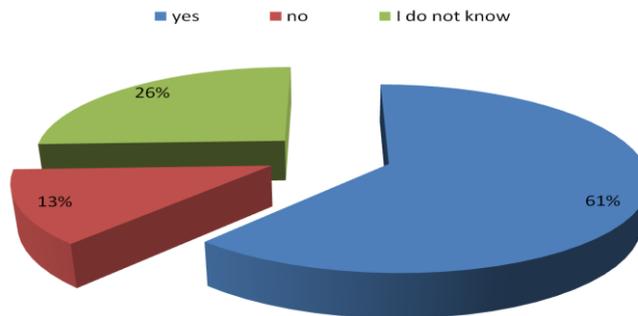


Fig.3 In case of need, are you going to visit such self-help group?

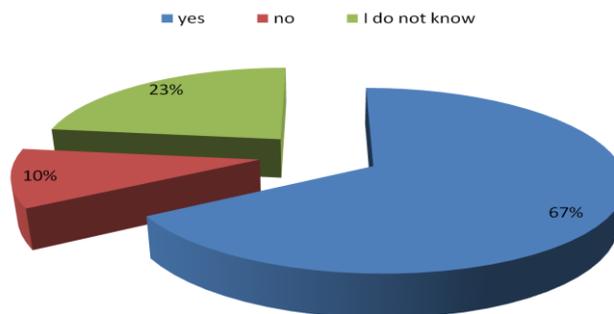


Fig.4 Would you recommend to your relatives and friends?

Percentage of people willing to attend a self-help group, if necessary, are 61.5% (Fig. 3) and are in the age group 31-45 years. Respondents who would recommend joining groups of self-help to their relatives are 66.7% (Fig. 4). This reveals that they have a positive attitude towards the groups and would readily attract their relatives.

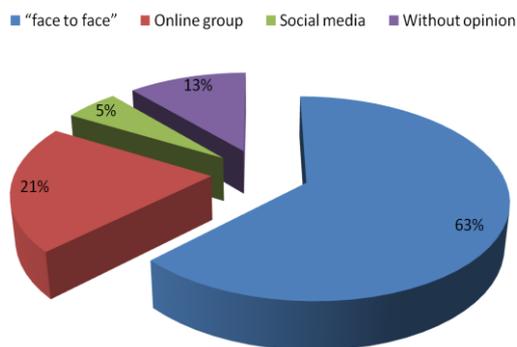


Fig.5 According to you, membership in a group “face to face” or “online self-help group” would give better result?

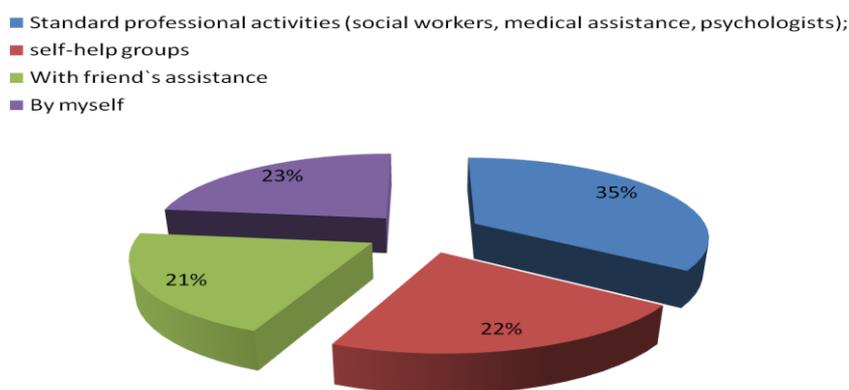


Fig.6 How would you prefer to solve your problem ?

Representatives of age group 31-45 (62%) declare willingness to participate in groups in which participants interact face-to-face, (Fig.5). The advantage is live contact and the opportunity to participate in a discussion. An age group of 18-30 years (20.5%) would prefer to participate in online self-help groups. This can be explained by the impact of modern information technologies, ensuring a higher degree of anonymity. Different answers are given to the question of how to deal with a problem (Fig. 6), with 34.6% preferring medical intervention, followed by 21.8% self-help groups, experience and help from a person overcome same problem.

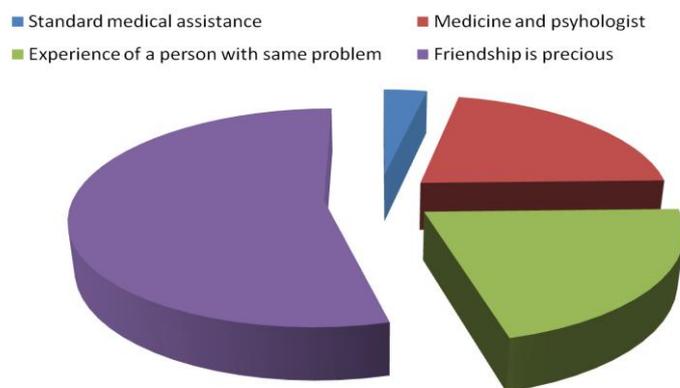


Fig.7 Why do you consider, that the chosen possibility to solve the problem is suitable? Please give arguments for your reference.

Compared to other low-value responses, the highest rate - 21.5% - has been the chosen option to deal with the problem of experiencing and overcoming by another person, as well as providing appropriate advice and assistance. (fig. 7). This is the answer given by the respondents - a friend's help, a friend's advice, a hearing that is a good sign for the development of human relations and communication in our society today.

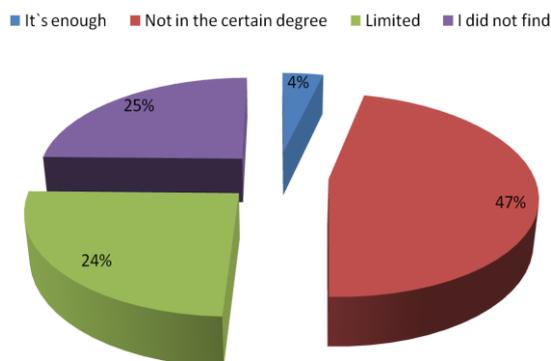


Fig.8 According to you, is the available information for such groups enough in the public space and medias?

Less than half - 46.8%, are unaware of the self-help groups, which requires their popularization. Only 24.7% are familiar and whether an argument about public-sector activities is the opportunity to provide more information (fig.8).

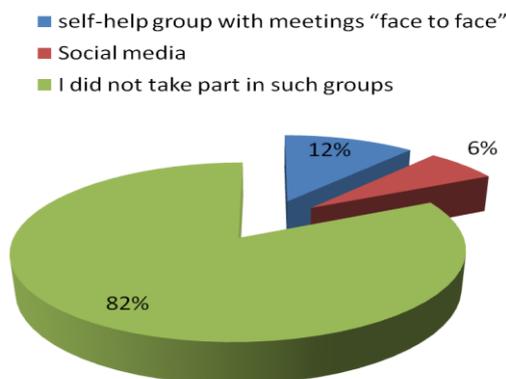


Fig.9 In which self-help group do you take part?

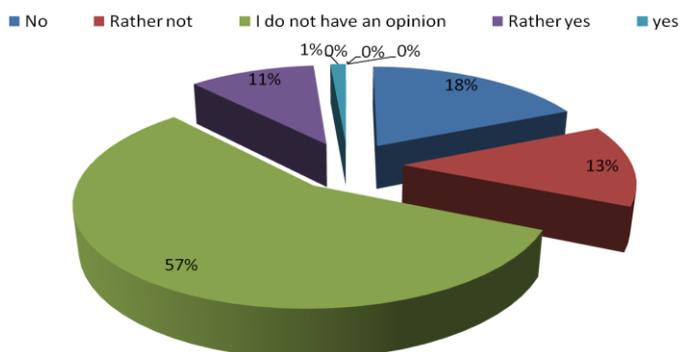


Fig.10 In case you are a member of such group, do you consider the information and help, enough for you?

Of the participants in the study, nobody has indicated that they are part of a self-help group -82.1% (Fig. 9). This demonstrates the need to be informed about the usefulness and assistance that membership can make in such a group. 56.6% of the respondents have the view that if they are members of a self-help group, the information would be insufficient and, given their expectations and perceptions, may or may not receive information (Fig.10).

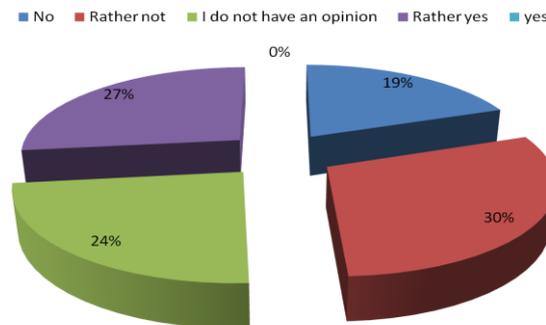


Fig.11 Would you take part in creating or to create such self-help group for a problem, that you have?

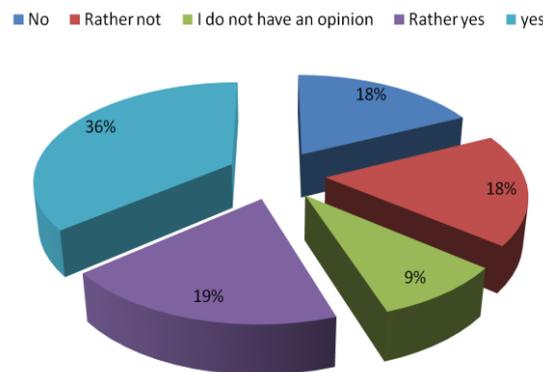


Fig.12 Do you know that the self-help groups can be led by non-professionals, as a person solved a particular problem and having particular experience?

When asked whether they would be involved in setting up or whether they would create a self-help group on issues they face, a significant share of 25.6% think they would not join such a group because of insufficient information and negative adjustment (Fig. .11). With regard to the query issue, it is known that groups can be led by a non-professional, 35.9% have given a positive answer that they know. This shows that experiences and surrender are useful in self-help group (Fig. 12).

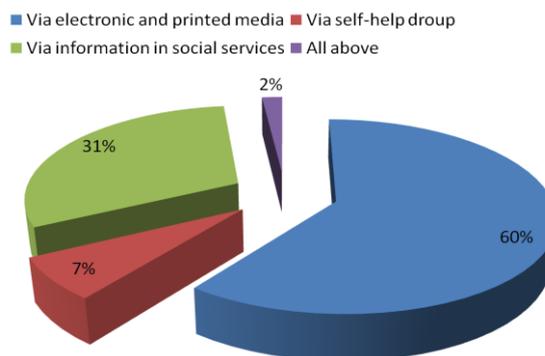


Fig.13 What is your opinion about how can be promoted the activity of such self-help groups?

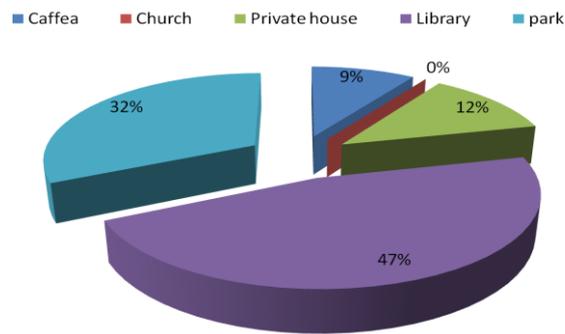


Fig.14 Which is the place suitable for meetings of one self-help group?

The largest percentage of respondents - 60.3% who responded to the question of what their view of how the self-help group were being promoted - indicated that it was done through electronic and print media, because the information would reach more people in the community (Fig. 13). Relatively equal percentages indicate a library - 44.9%, and a park - 30.8%, as a suitable place for group for mutual assistances to meet, because this would greatly preserve the anonymity of each participant (Fig.14).

Discussion and conclusions of the study

On the basis of quantitative and qualitative analysis of the survey data, the following conclusions can be drawn:

Most people are aware of and believe in the usefulness of the self-help groups - these are people mostly in the age range of 31 to 45 years. Regarding the usefulness of the self-help groups, a positive view of utility and help has a very high percentage of respondents. If necessary, they would visit a self-help group and recommend to their relatives if necessary. This reveals that there is a positive attitude towards the self-help groups and would be willing to attract close relatives to the participants. The 31-45 age group is willing to participate in groups in which participants interact face-to-face, as the advantage is live contact and the opportunity to participate in a discussion. An age group aged 18-30 preferred to participate in online self-help groups, which is determined by the impact of modern information technology and the higher degree of anonymity of self-help group. Different answers are given to the question of how to deal with a problem, but the preference is for the help of medical intervention, following the self-help groups, the experience and the help of a person who has overcome the same problem. The experience and overcome by another person is a choice for an opportunity to deal with the problem. Nobody has indicated that they are part of a self-help group. This demonstrates the need to be informed about the usefulness and assistance that membership can make in such a group. A large majority of respondents see that if they are members of a self-help group, the information would be inadequate and, given their expectations and perceptions, they may or may not receive one. Asked if they would be involved in creating or themselves would create a self-help group on issues they face, a significant proportion of them have a view that they would not join such a group due to insufficient information and negative adjustment. As far as knowing that groups can be led by a non-professional, ie not a social worker / psychologist, they have given a positive answer that they know. This shows that the experience and passing on from a person experiencing such a problem is useful in a self-help group . A large percentage of respondents have answered the question of what their views are about how to promote a self-help group. They have indicated that through electronic and printed media the information would reach more people in the community. Relatively equal percentages indicate a library and a park as a suitable place for meetings of the self-help groups as this would greatly preserve the anonymity of each participant. On the basis of the conclusions presented, we can summarize that the purpose of the interview was achieved.

CONCLUSION

The self-help groups includes except self-help and mutual help. By helping others, we help ourselves. The groups express the desire and will of a person to change and deal with "insoluble problems". The self experience of a person who passed through same problem is useful in self-help groups. There is a positive attitude towards self-help groups inside the community, and everyone would readily take their relatives, who are in need. Inside self-help groups, people are open to share, discuss, give necessary information, provide self-experience, show their concern to other members, promote others to share and motivate everyone's self-confidence.

REFERENCES

- Anonymous alcoholics. History of Thousands Men and Women How They Recovered From Alcoholism. Fourth edition, translation from English. http://aa-bg.dir.bg/_files/5292105.pdf
History of Alcoholics Anonymous in Bulgaria, http://aabg.dir.bg/_wm/basic/?df=12
- Kasl, C. D. (1992). *Many Roads, One Journey: Moving Beyond the Twelve Steps*. New York: HarperCollins.
- Luks, A. (1988, October). „Helper's high: Volunteering makes people feel good, physically and emotionally.“ *Psychology Today*, 22(10), 34-42.
- Maton, K (February 1988). „Social support, organization characteristics, psychological wellbeing and group appraisal in three self-help populations“. *American Journal of Community Psychology* 16 (1): 53–77. doi:10.1007/BF00906072
- Nunev., S.(2001) *Methods of Social Work - Part II (Social Work with Groups)*, Ruse.
- Nunev, S.(2001) *Foundations of Social Work*, Ed., Anthous, Shumen.
- Pagano, M. E., Friend, K. B., Tonigan, J. S., & Stout, R. L. (2004). Helping other alcoholics in Alcoholics Anonymous and drinking outcomes: Findings from Project MATCH. *Journal of Studies on Alcohol*, 65 (6), 766-773.
- Riessman, Frank (1965). "The 'helper' therapy principle". *Social Work* 10 (2): 27–32.
- Rogeness, G.A., & Badner, R.A. (1973). Teenage helper: A role in community mental health. *American Journal of Psychiatry*, 130, 933- 936.
- What is Al-Anon?, <http://www.al-anon-bg.info/>.
- Wink, P. & Dillon, M. (2007). Do generative adolescents become healthy older adults? In S.G. Post (Ed.), *Altruism and health: Perspectives from empirical research* (pp. 43-54). Oxford University Press.