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Self-Help Groups: Moving From Professional Leadership to Mutual Support
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I Introduction

This bulletin is based on content from the Self-Help Resource Centre's workshop, "Passing the Mantle: Transitioning from Professionally-Led to Member-Led Support Groups."

Member-led (self-help/mutual aid) and professionally-led support groups are distinct and complimentary sources of support for individuals facing a life challenge, health issue or lifestyle change. Some professionally-led support groups may employ select self-help/mutual aid strategies (we call these groups "hybrids"). However, the structures and dynamics of an independent member-led group are quite distinct. In general, the characteristics of a self-help/mutual aid group are
* members share a common experience or problem;
* activities focus on sharing experiences, emotional and practical support and information exchange (some groups evolve to include community education and advocacy);
* group leaders share the common experience/problem that links group members;
* decision making is democratic;
* evaluation is directed by members;
* structures are informal and resources used are volunteer or in-kind; and
* duration is ongoing.

Four general steps can guide you in a transition to self-help/mutual aid:
1. Learning about self-help/mutual aid
2. Building a transition team and plan
3. Letting go
4. Remaining "on tap, not on top"
II Step 1: Learning about Self-help/Mutual Aid

Take the time to research and discuss what this transition is about. Is it due to a loss of facilitator funding, a change in program goals or a push from the group membership? Who is eager for the change? Is transitioning to self-help/mutual aid a new idea or was it planted from the beginning? How much will the professional be available to provide logistical or troubleshooting support after the transition? These dynamics will influence the challenges you may face during and after the transition period.

Discuss the meaning of a self-help group. Explore the different types of self-help groups: face-to-face, telephone and online support. Clarify the differences between a professionally-facilitated group and a self-help group. Discuss challenges and benefits of self-help vs. professional support. Explore how this transition in leadership will likely generate other changes in the structure, activities and "flavour" of the group.

It is also important to address member and facilitator fears. As an activity, ask everyone to consider the question "when the paid facilitator leaves, I am afraid that..." Have each person write down as many short responses as they can. Share these responses and explore the grain of truth in the most common fears. Discuss ways to develop skills/resources for dealing with these challenges. (1, 2)

III Step 2: Building a Transition Team and Plan

Start building your transition team as early as possible. One method is to introduce the idea of transitioning during initial phone interviews with prospective members. This can psychologically prepare members and help to identify who is interested in becoming part of the transition team. Ideally, everyone will be a part of this team. Anyone who participates in support group process in even the smallest way should be acknowledged as part of the group leadership.

As a group, list all the roles and responsibilities of the present leader. Don't forget smaller tasks such as keeping phone lists, making coffee, opening the room and welcoming new members. Include everything! A new role will be that of liaison with the former (professional) group leader. Consider which roles can be shared (e.g., discussion facilitators) and match roles with members' interests and skills.

Offer training where necessary and model how each job is done. It may be easier to further subdivide roles. Members can take turns observing a task, practicing and asking questions before volunteering to take on the full role and responsibilities.

Help members to document and share decisions about structures, activities, roles and guidelines. Self-help group structures and guidelines must be transparent so that leadership can be shared. Most self-help groups keep a group book that outlines this information. SHRC's Shared Leadership Workbook can assist your group to prepare this. (3)

In the manual Changing Places, the writers wisely note that "it's more helpful to encourage transition through behaviour than words." (4) The professional position in the group should be
gradually shifting from front and centre, to becoming another member of the circle's rim- preparing to slip out the door and become an on-call resource.

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IV Step 3: Letting go

As the transitioning work starts taking effect, group members will likely feel a combination of excitement and anxiety. Plan a formal closure process over one or two meetings to acknowledge the emotional work of transitioning.

You can devote one of these meetings to reviewing the group's development and highlighting the progress each person has made. Here are some guiding questions:

* What do you remember about the group at its beginning?
* What do you remember about yourself when you joined the group?
* What has changed in the group and in you? (5)

Answers can be shared with a partner or the whole group. The second meeting can be a party to share food and exchange cards.

Another way to let go formally is to ask each person "how do you say goodbye?" Ask group members to consider "if a friend were leaving for another city, what would you do?" Through this exercise, one group found that some members wanted a big send-off, some wanted to write a letter and some wanted to act like goodbye was not happening. Pay attention to cultural and personal differences in this process. Find a way to recognize each person's needs.

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V Step 4: Remaining "On Tap, Not on Top"

A successful transitioning process puts the professional out of one job--and into another. The next step for the professional is to explore the potential of the new job as an outside resource.

After the last meeting, the former leader can still assist the group without leading. For example, they may help to develop a referral list, provide moral support, offer meeting space and free photocopying or refreshments, share information about outside resources and events or act as a troubleshooting consultant. (6) It may also be helpful for the professional to put the group in touch with a local resource centre for self-help/mutual aid (or if none exists, a volunteer centre or network) and share the story of the group with their colleagues to educate other professionals about self-help/mutual aid.

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VI Case Studies

The Toronto Pelvic Pouch Support Group
by Catherine Coulthard, Mt. Sinai Hospital
The Pelvic Pouch Support Group is a large outpatient support network that began at the urging of persons with ulcerative colitis and their families. At the time of inception, no community support programs existed in Toronto for this population, so nursing and social work staff at Mt. Sinai Hospital agreed to help. Original group objectives were education and peer support, and professionals assumed responsibility for all aspects of program planning and service delivery. In this form, the network successfully delivered educational programs for several years.

Self-help, however, was an underutilized resource. We wanted to change this by using social group work principles to increase member involvement. We conducted a program evaluation that
* examined the network in the context of the literature,
* compared the group's historical manner of functioning with new goals of enhanced mutual aid and peer leadership, and
* analyzed member and staff patterns of communication.

We found that members tended to depend on professional leaders to broker interactions. As staff changed their communication style to encourage more interaction, mutual aid among members increased. This shift in communication patterns was a key factor in the emergence of indigenous leadership within the group. Self-identified leaders agreed to participate in a steering committee that began to take ownership of a number of roles previously carried by staff.

The transition of the group leadership continues to be a work in progress. Although staff members continue to play a more active role than occurs in many self-help models, the role of the professional has moved from facilitator to resource person as the peer members assume responsibility for program planning and group facilitation.

Tips from the Family Councils Project
by Pam Bailey, Family Councils Project

Many families are concerned about their elderly relatives when they enter long-term care facilities (L-TCF). Almost all residents living in L-TCF experience some form of cognitive impairment, therefore most residents do not have the mental or physical capacity to advocate for their rights.

In 1997, the Self-Help Resource Centre, in partnership with Concerned Friends, initiated a project to promote and support a self-help group model called the Family Council. A Family Council is an independent group of family members and friends of L-TCF residents who meet on a regular basis to mutually support each other, educate themselves regarding the L-TC system and work together to resolve issues that affect the quality of life of residents. Because staff are most often instrumental in organizing a Family Council, the transition from a staff-led to a family-led council is a common challenge.

The Family Council Project encourages staff to be clear in their own mind about what they are willing and unwilling to do for the council and to speak with members on this subject during early meetings. Staff are encouraged to offer clarification and education to alleviate fears that too much may be expected of family members or that they may be unqualified to perform certain tasks.
Often, well-meaning staff decide to do the work of the council until it gets better organized. A few months pass and the staff finds members are unwilling to assume duties that someone else has been doing for them. This does not mean that a new council does not need staff support. An unfortunate example was a staff person who led a first council meeting, got volunteers for a steering committee and never contacted them again!

There is a distinct difference between helping a council get started and taking over tasks that should be done by members. A Family Council that is autonomous and self-directed will take responsibility for their group and strive to achieve the goals they have chosen for themselves.

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VII Conclusion

Self-help/mutual aid and professionally-led support groups are distinct but complimentary forms of support. Groups may transition from being professionally-led to a self-help/mutual aid structure for funding or goal-oriented reasons. The transition can be successful when professionals support a process of enabling group members to learn about self-help/mutual aid and take on leadership in both decision-making and group maintenance roles and responsibilities. Resources from self-help/mutual aid centres and the field of community development can assist you to facilitate the transition process.

(4) Linda Lawyer et. al.
(5) ibid.