

EDITOR'S COMMENTARY

Dear Colleagues and Readers

Our *Journal's* compass points in many directions—while its central thrust is clear: “real people with real problems sharing and supporting one another”—this happens necessarily within a context of some complexity and ambiguity. We reflect that macro-issues, the nature of knowledge and emotional energy shared, and the organizational, institutional, and governmental forces that are at work often receive less attention than what happens in a given self-help group or practical program. Therefore, to provide scope and balance, the *International Journal of Self Help & Self Care*, 4(3) opens by addressing some of these broader and indeed salient topics.

Deborah A. Davis (“*CURVES: The Creative Abode of Vibrant Science*”) notes that “To have a better understanding of helping the self and self care, a better understanding of our culturally situated knowledge of science is proposed and elaborated upon.” Here she considers “a democratic model of the heart,” and while adducing and contrasting physics and biological concepts, focuses, with both Eastern and Western philosophic viewpoint, on themes as gratitude, forgiveness, compassion, imagination, and the nature of helping knowledge itself.

Mike Magee (“Home-Centered Health Care: Leveraging Technology, Prevention, and Lifespan Health Planning”) in light of evolving trends in society, by institutional analysis, points to the importance of *home* centered (italics ed.'s) health care as self-help venue.

Thomasina Borkman and colleagues address an intriguing question: “How do two varying culture areas—the U.S. and U.K. differ in their modes of supporting self-help?” The nature of the social philosophic positions and their historic roots evidently need to be considered and the answer takes account both of differences and similarities in cultural milieu.

Todd Shaggott and his associates (“Member Characteristics of Consumer Run Organizations and Service Utilization Patterns”), by hands-on empirical method,

examine in detail CRO (Consumer Run Organization) members as relates to their service utilization, social interaction, involvement, and demographics. Shagott et al. find, among other conclusions, that 20% of CRO members identify “their CRO as their only means of psychological support,” and that in U.S. society CROs are particularly attractive to minority populations. Thus, the CRO evolves as a key supportive social network in recovery and community integration.

In David Groh and colleagues “The Effects of Twelve-Step Participation on Social Support: A Longitudinal Investigation within a Recovery Home Sample”) the authors study residents of recovery homes—the U.S. Oxford House, Ohio. The approach is longitudinal, challenging, and difficult based on a substantial sample, $N = 897$. It is worth noting that Ohio Oxford House residents may remain in the facility indefinitely if “they pay rent, abstain from alcohol and drug use, and avoid disruptive behavior,” and that here Oxford House “is completely devoid of professional therapists . . .”—Groh (et al.) conclude that “As predicted, AA/NA attendance (is associated) . . . with general social support over a one year period,” and that, although counterintuitive, it is possible that 12-step groups impact *general* support more than recovery-specific types of support.

Isaac D. Montoya (“An Assessment of Welfare Recipients’ Abilities to Meet Employers’ Demands: Can Self-Sufficiency Be Achieved Under TANF?”) tells us (separately) that following intensive analysis, this is the last publication derived from his extensive data set. TANF: Temporary Aid to Needy Families, is significant as in our society “the focus has shifted away from . . . entitlement . . . toward a strategy that favors self-sufficiency” through “work first.” Montoya draws on interview protocols for a sample of 252 female TANF recipients, and application of cluster analysis. Importantly, he concludes (again: simplistic leaps don’t work) that while “‘Work first’ is a successful strategy for *some* (italics ed.’s) recipients . . . for many it is an unrealistic goal. Other strategies (also) must be developed to address many problems (as experienced by) recipients.” An agenda for work ahead.

Irene Carter (“A Consideration of Ambivalence and Advocacy in Self Help: The Case of Autism”), in studying 22 parental advocates involved in self-help groups for autism concludes that “social workers need training on how to avoid creating (perceived) disempowerment while trying to promote individual and collective empowerment.” Even the best intentions alone do not suffice!

It is clear, noting scope and content of the seven contributions to this volume, that the self-help field manifests its own panorama of complexity . . . varied assumptions about science and knowledge, cultural differences, organizational dynamics, variations in strategy for giving help—among other factors to be considered.

Lessons learned . . . the need for comprehensive reflection on people and settings involved . . . not taking for granted even that which first seems obvious . . . and (this is your editor's special plea) a wide and deep base of research and systematic inquiry to probe more extensively the experiences and events giving meaning to self-help.

Fred Massarik
Editor