

**INTRODUCTION TO SPECIAL ISSUES ON
CROSS-CULTURAL ASPECTS OF
SELF-HELP/MUTUAL AID**

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The special call for papers on the cross-cultural aspects of self-help/mutual aid began in mid-2007 with the solicitation of manuscripts from a variety of social science listservs and professional associations including ones in anthropology, sociology, public health, and community psychology. Ten interesting papers have survived the blind peer review and revise and resubmit process and will be published in three special issues of this journal. The issues are truly international as we have authors from Australia, Canada, Germany, Japan, Norway, Sweden, and the United States; their research includes those countries as well as Malawi, Africa.

My vision for these special issues was inspired by several papers presented at the International Conference on Self-Help/Mutual Aid in Ottawa, Canada in 1992. First, Benjamin Gidron and Mark Chesler's (1994) paper "Universal and Particular Attributes of Self-Help: A Framework for International and Intranational Analysis" was and remains the first broad and inclusive framework for investigating self-help/mutual aid comparatively and globally. While the research on self-help/mutual aid during the last three decades has increased our understanding of its variety, its internal processes and its benefits to participants, most research known to us and our readers has been conducted within one country, especially the United States, Canada or Europe. In contrast, the systematic comparative study of self-help/mutual aid in different cultural, social, and health care contexts which Gidron and Chesler advocated is in its infancy. These special issues address those lacunae.

Gidron and Chesler conceptualized self-help/mutual aid in broad terms that would apply globally as: “The recruitment and mobilization of peers in an informal and non-hierarchical setting, and the sharing of their common experiences as the basic building blocks for almost all forms of self-help in all nations and cultures” (1994, p. 3). The *universal* aspects of self-help/mutual aid come from viewing contemporary self-help groups as a non-geographic form of community with similar functions as the geographic community: a place for the development of culture and a sense of identity, a mechanism to provide social support especially in times of crisis, and an empowering mechanism in which participants are emboldened, gain skills, and confidence among other benefits (p. 8). Gidron and Chesler’s elaboration of self-help and mutual aid resonate with others found in the literature. Mutual aid refers to peers who share the common issue coming together voluntarily to interact and problem solve within a context of reciprocal aid. Self-help and mutual aid are linked together because each is integral to the distinctive process. “Self-help” implies assuming responsibility for resolving one’s issues and the drawing on inner resources—i.e., the “self” becomes stronger, gains hope, courage, and resources to contend with and problem solve the troublesome situation within the context of the mutual aid of the collective (Riessman & Carroll, 1995). With reciprocal mutual aid each person becomes both a recipient and helper who contributes to and receives from the support and other benefits (see Riessman’s [1965] helper therapy principle).

“Different civic/political cultures, different social and economic histories, and different health and welfare systems mean that both communities and self-help groups will develop differently in different nations, in different ethnic, class or demographic groupings within nations, and around different issues” (Gidron & Chesler 1994, p. 22).

The *particular* aspects of self-help/mutual aid, according to Gidron and Chesler, that affect the variability in how self-help/mutual aid is organized, structured, and relates to professionals and the helping system are from three sources:

1. the societal context including the social, cultural and economic facets of the nation;
2. cultural or demographic factors within a nation such as gender, social class, age, or racial/ethnic differences; and
3. the problem issue around which the group is organized such as a chronic disease versus a temporary situation like premature babies.

A second related idea which was suggested by Frank Riessman’s address at the Ottawa conference was an expansion of the issue of who is the “self” in self-help. While self-help/mutual aid researchers usually mean the “self” is an individual person, and Gidron and Chesler, among others, imply that the “self” could be a community, Riessman pointed out (Lavoie, Borkman, & Gidron, 1994, p. xiii) that public policy and political scientists often speak of the self as

lower levels of government such as the city, county or state, e.g., the federal government expects the states to practice self-help, that is to take responsibility for resolving their problems by themselves. In the three issues we will have papers in which the “self” of self-help is a community rather than an individual.

The three papers in this first issue deal with the relatively new and less studied internet online groups, a contemporary development in the expression of self-help/mutual aid with a distinctive form of organization. The first paper, Gesine Hearn’s “Illness without a cause—Patients with a Cause: Online Self-Help/Mutual Aid Organizations for Functional Syndromes in the United States and Germany” is the only truly comparative cross-cultural paper in these special issues. Hearn looked at equivalent websites in the United States and Germany of sufferers of such functional syndromes as fibromyalgia which are ambivalently diagnosed and treated by physicians in both countries; she found that in addition to the social and informational support and identity provided to participants, the groups had extensive advocacy activities on a national level. Hearn is an ideal researcher for this project as she grew up with the German language in Germany and has extensive time in and knowledge of the United States as a medical sociologist.

The second paper by Sherida Ryan of the University of Toronto in Canada titled “Trust and Participation in Online Usenet Self-Help Communities,” considers a fundamental process in self-help/mutual aid—the development of trust. Without trust, the identification with peers, the willingness to expose one’s vulnerability in emotional sharing or to receive and give support is thwarted; yet, most research takes trust as a given. Ryan found an ideal venue to study the development of trust: she compared Usenet online groups of sufferers of a chronic disease in a moderated group to an un-moderated group of sufferers with a similar chronic problem. In un-moderated Usenet groups a few contentious individuals who deliberately disrupt the communication are allowed whereas the moderator in the alternative group prevents such disruptive people from participating.

The third online paper is contributed by Trond Bjerke from Norway who studied two international online groups of Alcoholics Anonymous. His paper “Cross-Cultural Gateway to Recovery: A Qualitative Study of Recovery Experience in International Online AA Groups,” asks if alcoholics from different countries around the world identify with each other in an online group? Do AA members who participate in online groups also attend face-to-face groups or prefer online meetings primarily? In effect, Bjerke is asking if identifying as an alcoholic transcends cultural and international boundaries and the role of online versus face-to-face groups in recovery from alcoholism.

In developing the call for papers for international and cross-cultural research, I reviewed recent research on self-help/mutual aid and was struck by the parochialism of much of the research; researchers seemed to be familiar with a very narrow range of the research available worldwide. Delving further by conducting my own research, I found that four traditions of research on

self-help/mutual aid had developed in the quarter century from 1975 to 2000. The traditions have been relatively separated from each other, i.e., they publish in separate journals, reference one another but rarely reference authors outside of their own tradition and have developed different foci (see Borkman, 2008a, 2009). I named the four traditions: North American psychosocial, European psychosocial, Addictions & SHGs, and Economic Development.

The North American psychosocial tradition is the most familiar and is often dated from the 1976-1977 spate of works by Katz and Bender (1976), Gartner and Riessman (1977), the special issue of the *Journal of Applied Behavioral Science* (Lieberman & Borman, 1976), Caplan and Killilea (1976), and Borkman (1976) among others. This tradition emphasizes the psychological level of individual analysis because many of its American and Canadian researchers are community psychologists, social workers or nurses. The major research question that has been asked is: what are the benefits to individuals of participating in SHGs? The group mechanisms that produce benefits have been of some interest. How professionals will react to SHGs has been a frequent research topic. Self-help organizations or consumer-run organizations for mental illness, are an emerging research concern (see Brown [2008] regarding the September 2008 issue of the *American Journal of Community Psychology*). The North American psychosocial tradition has largely ignored economic issues and the 12-step groups such as Alcoholics Anonymous, while it has emphasized research on health and social issues, studying groups in one country, their internal processes and the benefits received by participants.

The European psychosocial tradition has also emphasized health and social issues but has been more likely to study the impact of self-help/mutual aid on the community, not just on individuals. This tradition is more likely to ask how SHGs contribute to social capital and civil society or what are various national policies on self-help, if any (see Humble & Unell, 1989). More comparative work has examined how self-help/mutual aid is shaped and organized in different societal and cultural contexts in the European psychosocial tradition. This tradition was bolstered by the World Health Organization (Copenhagen, Denmark) who funded conferences of researchers and clearinghouse personnel in the 1980s and early 1990s (see Humble & Unell, 1989; Katz, 1984; Matzat, 1989; Robinson & Henry, 1977; Trojan, 1989). In contrast to the North American concern about what professionals think about SHGs, the European perspective is more likely to be Judy Wilson's (1995) *How to Work with Self-Help Groups: Guidelines for Professionals* which asked SHG leaders and members how professionals could helpfully behave that would not be threatening or damaging to their groups.

The Addictions & SHGs tradition has two branches both of which study Alcoholics Anonymous (AA) and other SHGs for addictions: the scientifically oriented branch emphasizes the most rigorous and positivistic methods in grants funded by the United States' premier research organization, The National

Institutes of Health; randomized trials of clients in addictions treatment follow clients to see who goes to AA or not, and what are the differences in alcohol/drug use with varying amounts and kinds of exposure to AA (or other SHGs such as Narcotics Anonymous or Dual Recovery) (see Pagano et al., 2004; Tonigan et al., 2002). SHGs are often erroneously regarded as analogous to professionalized addictions treatment. The tradition has a second, mostly qualitative branch, that focuses on AA and other addiction SHGs as self-help/mutual aid groups. Hundreds of research studies on AA have been published, many of them qualitative case studies of individual groups—favored topics have been: the way AA functions as an organization, identity change among AA members (e.g., see Denzin, 1993), commitment processes in AA, the 12 steps as a recovery process, discourse analysis of meetings, and user's preferences for AA or other groups such as Women for Sobriety (see Kaskutas, 1992). A signal event for this tradition was the 1992 conference that addressed "Should and Can Research on AA be Conducted?" funded by the National Institute of Alcohol Abuse and Alcoholism (NIAAA) and from which the book *Research on Alcoholics Anonymous: Opportunities and Alternatives* (McCrary & Miller, 1993) was published. Probably the most extensive cross-cultural research on any self-help group has been the eight country study of AA by Makela and 17 other researchers (1996).

A fourth tradition of international economic development researchers have looked at micro-finance groups and other economic and material self-help/mutual aid in developing countries (e.g., see Ardener & Burman, 1995; Tesoriero, 2006). Microfinance as a tool to alleviate poverty in developing countries has developed since the 1970s. The United Nations declared 2005 as the Year of Microcredit; and, Mohamed Yunus and the Grameen Bank he founded in 1983 were awarded the Nobel Peace Prize in 2006. One type of microcredit group in India is actually named "self-help groups" which are defined as: ". . . a small voluntary association of poor people, preferably from the same socio-economic background. They come together for the purpose of solving their common problems through self-help and mutual help" (Krishnamurthi & Suresh, 2007, p. 49). These SHGs seem to be essentially like the ones studied in the other three traditions other than the focus being on economic and material aid rather than psychosocial support. Research questions asked are: Do microcredit SHGs reduce poverty? When do SHGs empower women? When do empowered women participate in local community betterment projects (i.e., clean water)? This has been the most separate of the four traditions, not referencing researchers from other traditions, and publishing primarily in economic and international development journals.

Before 2000, few researchers published in more than one tradition; these include Alfred Katz, Keith Humphreys, and myself. Alfred Katz, founder of this journal and a major contributor to the North American psychosocial tradition

(e.g., see Katz, 1961, 1993; Katz & Bender, 1976), helped catalyze the European psychosocial tradition with a prominent leadership role in the first International Conference on the Role of Self Help and Mutual Aid in Contemporary Society held in Dubrovnik, Yugoslavia (now Croatia) with participants from 16 countries and four continents in 1979 (Katz, 1984). Keith Humphreys has contributed extensively to the North American psychosocial tradition (Humphreys & Noke, 1997; Kennedy & Humphreys, 1994, Isenberg et al., 2004) and to the scientific addictions (see Humphreys, 2003, 2004; Humphreys & Moos, 2007). I have published in three traditions but not in economic development (for North American psychosocial see Borkman, 1976, 1999; Borkman & Schubert, 1994; for European psychosocial see Borkman, 1997; Munn-Giddings & Borkman, 2005; for Addictions & AA see Borkman, 1998, 2008b).

Examination of the authors featured in this journal since its maiden issue in 1999-2000 indicates that authors from three of the four traditions have been published here; of course many authors are from the North American psychosocial tradition but they have been joined by authors from the European psychosocial tradition (e.g., Matzat, 2001-2002) and from the Addictions & SHGs (Cloud, 2003-2004). My impression is that the first three traditions (excluding economic development) are becoming more porous and receptive to the others' work. Perhaps the earlier crossover publishing as well as the influence of this international journal is hastening the cross-fertilization among the traditions.

In conclusion, I think these special issues contribute to expanding our cross-cultural knowledge of self-help/mutual aid and to showing how variable self-help/mutual aid can be in different national, cultural and social contexts. Hopefully, this will stimulate much more research that takes into account the cultural and societal context of self-help/mutual aid so that the journal can continue to become increasingly international.

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