

How support groups can boost your health and make chronic conditions easier to live with

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Credit: AI-generated image (disclaimer)

People want to look after their own health, and with new technology, there are more tools than ever to help people manage it. But the greatest gains could come from a little help from your friends.



For <u>people</u> living with <u>chronic health conditions</u> such as arthritis, diabetes and cancer, the <u>health</u> system can seem impersonal and impractical.

A large inhibiting factor to patients feeling involved in their own <u>health</u> <u>care</u> is the outdated medical model that sees the patient as a passive recipient of treatment and advice. The clinical nature of medical care doesn't take enough account of how people live their lives or how they'd like to. The focus is on managing disease, not promoting well-being.

Support from peers – people already living with health conditions – could help fill in the gaps. Instead of just helping combat the disease, peer support groups can help improve quality of life.

Promoting peer-based support from and for people living with chronic health conditions has the potential to improve outcomes, increase access and improve efficiency in health care.

What do peer support groups do?

The internet provides endless access to health information to people seeking more involvement in the management of their own conditions. But finding reliable and relevant sources can be difficult without guidance and support.

Peer-support groups offer advocacy, assistance and education; led and managed by people living with health conditions, for people like them. Traditionally peer support groups are location-based groups that meet regularly, but an increasing number of online groups are expanding access to support.

For example, the <u>Young Women's Arthritis Support Group</u> provides links to research, encouragement and "life-hacks" both online and with



regular meetings.

Their Facebook page regularly includes comments seeking information and ideas for living with a range of musculoskeletal conditions, with topics such as work, relationships, pregnancy, exercise and technical questions about research. They talk among themselves and also link to experts who can provide clinical, legal and practical advice.

Peer support groups can offer real, practical advice the medical system is unlikely to bring up. For example, making a cup of tea in the morning to hang on to so the hands can warm up and lose some of the overnight stiffness with arthritis, or how to have a conversation with your boss about a condition they may never have heard of, such as fibromyalgia.

Better disease management

We know wealth affects health – chronic disease prevalence is greater in lower socio-economic populations. We also know health care is heavily influenced by culture, setting and population.

Social interactions have a vital relationship to health outcomes, but medical culture often neglects the importance of social relationships in disease management health and well-being.

The medical model is particularly poor at achieving behaviour change such as diet and exercise. But there's evidence to suggest people who attend "illness-affiliated" peer-support groups better manage their chronic conditions and have better health outcomes than those who solely rely on medical interventions.

For example, <u>a 2013 study</u> showed improved blood glucose management during peer support group attendance among diabetics.



<u>A recent review</u> also found people who attend illness-affiliated peersupport groups better manage their chronic conditions, with research showing:

- better health outcomes than those who solely rely on <u>medical</u> <u>interventions</u>
- improved access and exposure to <u>additional health services</u>, as well as greater confidence in people approaching or going through treatment
- peer-support groups are a cost-effective strategy.

Improving peer support

While all Australian state and territory governments contribute financially in some capacity to peer-support services, there is little consistency between jurisdictions' approaches.

Some state health departments explicitly recognise peer-support services as an essential component of public health strategies and have written policy plans of how to incorporate and build a peer workforce to help organise and lead groups, while others lack a coherent peer support infrastructure. The result is an ad hoc approach with patchy referrals, little quality control and no systemic evaluation.

As chronic disease becomes more prevalent, government and communities should consider a better structure to build upon peer support services to maximise health outcomes. Peer-support has the capacity to provide nuanced assistance and education to those living with chronic health conditions in a compassionate and non-judgemental way.

Government can assist a peer <u>support</u> group for people with arthritis for as little as \$5,000 a year, to allow for things such as venue hire, catering and administration expenses. As the <u>average cost of one knee</u>



replacement is between A\$18-\$30,000, it's likely even small changes in how people manage their diseases will provide a return on investment.

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