

**“ More than 80% of participants [family physicians in Ontario] identified sharing experience and information, overcoming isolation, and feeling understood as specific positive effects of cancer self-help groups.”**

Gray, R., Orr, V., Carroll, J., Chart, P., Fitch, M., & Greenberg, M. (1998). Self-help groups: Family physicians' attitudes, awareness, and practices. *Canadian Family Physician, 44*, 2137-2142.

**“... Peer-led support groups improve communication between patients and physicians and increase medication compliance.”**

Sheffield, A. (2003). Referral to a peer-led support group: An effective aid for mood disorder patients. *Primary Psychiatry, 10*(5), 89-94.

**“Physicians should inform patients about the benefits of support groups and patients... should seek the involvement of physicians in their communities.”**

Sheffield, A. (2003). Referral to a peer-led support group: An effective aid for mood disorder patients. *Primary Psychiatry, 10*(5), 89-94.

**“The programme [educational/support group programme] increased knowledge about osteoporosis and increased self-reported adherence to pharmacological treatment over a two year period [in comparison to the control group].”**

Neilsen, D., Ryg, J., Nielsen, W., Knold, B., Nissen, N., & Brixen, K. (2010). Patient education in groups increases knowledge of osteoporosis and adherence to treatment: A two-year randomized controlled trial. *Patient Education and Counselling, 81*(2), 155-160.

**“People living with a problem have the capacity to develop experiential knowledge and wisdom about their situation by participating in self-help/mutual aid. This experiential perspective is different from that of the involved professional or lay bystander, partly because of the different relationship each has to the problem”.**

Borkman, T. (1999). *Understanding self-help/mutual aid: Experiential learning in the commons*. Piscataway, NJ: Rutgers University.

**“Perspectives on recovery have changed dramatically over the past few years. It is increasingly plausible that not referring patients to recovery and rehabilitation-oriented groups - to self-help groups, supported employment, supported education, and other similar community participation and consumer run programs - may now raise liability issues, whereas such referrals may have been viewed as risky decades earlier.”**

Salzar, M., & Kundra, L. (2010). Law & Psychiatry: Liability issues associated with referrals to self-help groups. *Psychiatric Services, 61*(1), 6-8.