

Peer to Peer Support in Schizophrenia

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Schizophrenia adversely affects life quality and social functionality of patients by deteriorating their emotions, thoughts, and behaviors. It is commonly reported that a therapeutic combination of drugs and psychosocial therapies in schizophrenia increases levels of social functionality and life quality besides reducing the recurrence rates (Kruger, 2000). Psychosocial therapies can't be successfully implemented in the fields due to a lack of specialized personnel, insufficient time for treatment procedures, and insufficient clinic experience (Rose, Mallinson & Walton, 2004; Rummel et al., 2005). The absence of psychological training, which is one of the interventions, in the routine services performed by healthcare workers led to the emergence of peer to peer support programs (Dixon et al., 2001). Mutual support groups may also provide a psychoeducational context for peers to acquire knowledge and information about psychiatric symptoms; gain new perspectives on treatment, wellness, and recovery; and learn skills that may foster improvements such as problem solving and coping skills (Ahmed et al., 2012).

The proliferation of peer support groups in the U.S. and other Western countries in the 1980s is part of the larger social movement of self-help and mutual aid for people affected by a variety of chronic diseases and stressful life circumstances whose needs have been inadequately addressed by traditional health care interventions (Chien, Thompson & Norman, 2008). Peer to peer support interventions are innovations emerging in the spirit of the recovery movement. Peer to peer interventions include mutual support/self-help groups, consumer-operated services, and peer support. There is clear impetus for peer to peer intervention as these programs have grown in number in the mental health system (Ahmed et al., 2012). Support supplied by peer groups has a positive effect on individuals and plays a protective role against stress and challenges (Solomon, 2004). Studies suggest that peer to peer interventions may be beneficial for people with schizophrenia by decreasing hospitalization risk, improving recovery attitudes, fostering engagement in traditional care, and improving social support (Cook et al., 2012; Rummel et al., 2005; Rummel et al., 2008).

Peer to peer support programs results show that peer moderators have high credibility among other patients and can serve as role models. Because of their own experiences with schizophrenia peer moderators can help other patients in coping with schizophrenia. Peer to peer supports group have positive therapeutic outcomes, such as a return to work, enhancing self esteem and providing new insight into individuals own problems (Rummel et al., 2005). In the randomized control study by Cook et al. (2012) on peer to peer support program for the schizophrenic patients, it was concluded that peer to peer

support interventions decreased the recurrence of the disease and the readmission of the patient and decreased psychiatric symptoms of patients and increased hope and quality of life. The evidence base for peer to peer support interventions is limited by the paucity of studies.

In conclusion, it was established that peer to peer support programs administered to schizophrenia patients have a favorable impact. Peer to peer support programs for schizophrenic patients should be more common and patients with chronic schizophrenia should be involved in the rehabilitation process.

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