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Changing the focus and varying the intensity of work: Health- and social-care professionals as supporters of a mothers' peer group

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ABSTRACT

In Nordic countries, peer groups commonly gain support for their actions from health- and social-care professionals. When these professionals support the actions of peer groups, they can also support group members at the individual level. However, little is known about this individual-level support as part of these professionals' work. In this article, I explore the support that health and social care professionals provide to both the members of the peer group and the group action. I examine how support for group action and support for the members of the peer group are linked in the work of health- and social-care professionals. I conduct this examination by studying the experiences of the members of a mothers' peer group. This Finnish peer group is open and consists of mothers who are willing to assemble with other mothers. The primary data of the study come from thematic interviews with 23 mothers participating in peer group activities. The supplementary data include written participant observation notes taken during 12 group meetings, two outings and a summer camp. I analysed the data by utilizing a six-step model. The findings reveal that support for group action and the support for group members are linked through the intensity of professionals' work. When professionals support the action of the group at a high level of intensity, they support its members at a low level of intensity. The findings yield a new perspective on work with peer groups but also prompt us to consider professionals' coping and resources.

KEYWORDS

Health- and social-care professionals; peer groups; self-help/mutual aid groups; professional involvement; mothers

Introduction

In Nordic countries, it is typical for peer groups to be supported by health- and social-care professionals (Nylund 2000; Adamsen 2002; Karlsson 2006). Groups often cooperate with not only professionals but also statutory services (Stokken and Munn-Giddings 2012). Nevertheless, their actions are characterized by the leading position of peers, voluntariness, and reciprocity (Borkman 1999). Illustratively, these groups are also referred to as self-help groups and self-help/mutual aid groups (e.g. Seebohm et al. 2013; Boyce, Munn-Giddings, and Secker 2018). AA (*alcoholics anonymous*) – a movement that started in the 1930s – is often regarded as an exemplar of modern peer groups, in which it is essential that peers in similar situations support one another (Mäkelä et al. 1996). In countries with a strong welfare state, members usually join groups because they provide support that is qualitatively different from that provided by family or services (Munn-Giddings 2002).

The special nature of groups makes working with them a topical issue. As Munn-Giddings et al. (2016/17) stated, current political and economic contexts affect relationships between groups and professionals. Since the recession in Finland of the 1990s, there has been public debate related to the

strong interest in helping oneself and others, which falls directly within the scope of group action (Hokkanen 2014). For example, the role of peer relations as a protector of welfare has been stressed repeatedly in child and family policies (The Ministry of Social Affairs and Health 2004;

2016 Finnish Government 2019). This emphasis is manifested in the work of health- and social-care services that aims to support organizations and the action of peer groups (Pietilä-Hella and Viinikka 2006; Pietilä-Hella 2006, 2010).

In practice, professionals can support group action in various ways. Whereas early definitions of group action were used to emphasize the independence of professionals (Katz and Bender 1976), the changing and wide-ranging nature of support received from professionals has recently been stressed (Munn-Giddings et al. 2016/17). A number of studies have described self-help supporters who assist groups in various phases of development (Borkman 1999; Oka and Borkman 2011). These professionals play several overlapping roles to support group action (Munn-Giddings et al. 2016/17). Their work does not necessarily involve individual-level support for group members, but it does give them the opportunity to provide such support (Seeböhm 2013). However, little is yet known about this individual-level support as a part of the work of professionals who support peer group action.

In this article, I explore the experiences of members of a Finnish mothers' peer group with the support health- and social-care professionals provide to both them and their action. I examine *how support for group action and support for the members of a peer group are linked in the work of health- and social-care professionals*. I analyse two types of data by utilizing Vagle's (2006, 2018) six-step model. I use thematic interviews with mothers who participated in the peer group to obtain primary data, as well as written notes gathered during participant observation as supplementary data. Based on this analysis, I continue a social-scientifically oriented discussion of professionals' work with peer groups (Stewart 1990; Wilson 1995; Salzer, Rappaport, and Segre 2001; Ben-Ari 2002; Oka and Borkman 2011; Seeböhm 2013; Munn-Giddings et al. 2016/17).

At the border between two worlds: working with peer groups

Professional practices and peer groups' courses of action can appear to be highly dissimilar. According to Wilson's (1995) well-known description, the difference between them is so considerable that one could describe professionals and groups as acting in two separate worlds. Based on her study of relationships between health- and social-care professionals and peer groups, it seems that professionals work in a world where formal structures and hierarchical decision making are foundational. In contrast, peer groups are part of a world in which action is informal and based on participative decision making. (Ibid.) While professional practices are inevitably regulated and time-delimited, groups act as communities, in which it is possible to make friends and stay in touch outside of meetings (Oka and Borkman 2011).

A significant difference between the two worlds is that their actions are based on different bodies of knowledge (Wilson 1995). Group action relies on experiential knowledge, which is grounded in personal experiences and develops by considering those experiences. In contrast, professionals' work is guided by professional knowledge, which draws on formal training. (Borkman 1976.) Although professional knowledge is a subject of contention, it provides the central reasoning behind professional authority (Liljegen, Höjer, and Forkby 2018; Hultman, Forkby, and Höjer 2020). However, in groups such knowledge is clearly subordinate to experiential knowledge, which prepares participants to decide on their own practices and principles of action (Boyce, Munn-Giddings, and Secker 2018).

Differences between the worlds also become understandable when their cultural histories are considered (cf. Hester 2011). One factor at play in the development of peer groups is criticism of the service system. People want to support themselves and one another when professional help is determined to be unsuitable or inadequate. (Adams 1996.) Thus, it is relatively common to perceive practices that draw on experiences and professionalism as mutually exclusive and contrary to one another. This is also illustrated by the ease of associating human neediness solely with the role of the receiver of help and denying its meaning as a part of professionalism. (Hyväri 2001.)

Although the two worlds differ greatly, they can benefit from cooperation. First, working with groups gives professionals an opportunity to obtain experiential knowledge (Munn-Giddings et al. 2016/17). Equivalent knowledge cannot always be obtained outside groups, as it is formed as a result of collective and sometimes very long-lasting processes (Noorani, Karlsson, and Borkman 2019). Second, the involvement of professionals can be important for groups, even if their actions are principally autonomous. Support from professionals can even prevent the break-up of a group (Seeböhm 2013). In general, it is typical for phases of crisis and change in a group action to correspond to a high need for support (Adams 1996, 106–115).

Thus, a group's position is clearly more needy in cooperative relationships with professionals. Not all groups need professional support, but some have support needs that vary from arranging recreational facilities to assisting with networking and resolving conflicts (Munn-Giddings et al. 2016/17). In practice, a professional may encounter strong neediness in a group, which is fundamentally autonomous. Several scholars (e.g. Wilson 1995; Oka and Borkman 2011; Munn-Giddings et al. 2016/17) have shown that respecting this autonomy is a necessary condition for meeting a group's needs. Otherwise, a professional may reduce the agency of the group when (s)he is supposed to support it (Adams 1996).

Tension between autonomy and neediness in a group places limitations on the agency of the professional working with that group. Assisting group members in accordance with their decisions requires not only skill, but also time and willingness to learn to understand actions that are often unfamiliar to professionals (Wilson 1995; Oka and Borkman 2011). There are numerous examples of successful work with groups, but they appear to be strongly related to professionals' personal capabilities and willingness to unravel traditional power relations (e.g. Örvulv 2012; Seeböhm 2013). Thus, it is not surprising that relationships between groups and professionals can also remain distant and characterized by misunderstandings (Hensley and Dawson 2017).

On the other hand, the opportunities for and the limitations on a professional agency are related to the unique characteristics of each group. Working with a peer group of mothers can easily raise a contradiction, which is often remarkably stark, between experiential knowledge and norms based on professional knowledge (Hays 1996; Ennis 2014). In practice, it can be very difficult for professionals to question instructions and codes related to mothering, which are rooted in a body of knowledge that they apply. However, these instructions and codes may not have a firm foothold in a group whose action is based on participants' experiences (Williams 2004). According to Hester (2011), this contradiction can lead to practices that pull in different directions and make cooperation very difficult.

In the context of groups, resolving this contradiction requires adjustment to what the mothers say they want and need. This requirement forces to unravel the dominant position from which professionals conventionally define means to support motherhood. It is central to acknowledge the professional power of definition because it can be linked to, for example, fears of child protection interventions among mothers (Buckley, Carr, and Whelan 2011). Furthermore, professionals cannot know beforehand what kind of experiences mothers have regarding professional work and how these experiences have shaped their stances on it. This knowledge is possible to obtain only by familiarizing oneself with mothers' experiential knowledge, which can help to understand group members' individual needs (Eronen 2020) and problems that have been overlooked in a service system (Borkman 1999; Oka and Borkman 2011).

Data and methods

Methodologically, this study uses a phenomenological-hermeneutic approach, which is based on Heidegger's ((1927) 2010)) and Gadamer's (1960) 2013) philosophy in particular. This approach has been applied extensively in studies in which the interpretation and description of experiences is emphasized (e.g. Eriksson and Janlöv 2020; Riahi, Thomson, and Duxbury 2020; Trangsrud et al. 2020). A strength of the approach is that it enables an understanding of human life through the scholar's interpretation (Smythe 2011). This interpretation can be described using the concept of

the hermeneutic circle, which Heidegger's ((1927) 2010)) and Gadamer's (1960) 2013) philosophies applied. The hermeneutic circle describes interpretation as a circular process in which a scholar's preconceived understanding encounters a scrutinized phenomenon. From this encounter, a new type of understanding of the scrutinized phenomenon may eventually be constructed in a hermeneutic fusion of horizons (Gadamer (1960) 2013).

I conducted the study with an open peer group of mothers in Finland. The group is an unregistered community that operates in the third sector. Its objective is to support motherhood by operating as a self-regulating group. Group members choose a member to maintain the group's operations. Other mothers participate in organizing group activities according to their willingness and resources. Health- and social-care professionals who help maintain operations in their own way are also involved in the group. In addition, volunteers take care of the mothers' children during most activities. The group does not have a host organization, but it does work in cooperation with national NGOs and the local Christian parish. The professionals who work at these organizations and support the group do so partly within the scope of their paid employment and partly on a volunteer basis.

The group meets weekly, with the exception of school holidays. In the meetings, mothers participate in activities that they have planned, such as discussions, exercise, and cooking. In addition, the group arranges outings and an annual summer camp. The group is open to all mothers. Therefore, motherhood may be the only common denominator among the group members. It is typical for mothers to have different levels of involvement in activities. Some of them participate actively, whereas some mainly follow activities via social media. During data collection, three health- and social-care professionals were working with the group. One of them had been involved in the group for 27 years, another had been involved for 23 years, and the third had been involved for 1 year, before which she had been a group member and one of the group coordinators for several years. They participated in the group operations to varying degrees.

The supplementary data were gathered via written notes gathered during group observation sessions. I conducted the observation sessions between February and July 2015. The sessions took place during the group's 12 meetings, two outings and a summer camp. After each session, I wrote notes on my observations and conversations with the mothers. In addition to watching the group, participating in group activities was central to my observations (Jorgensen 2015). I participated as actively as possible in accordance with the mothers' terms. Therefore, the level of my participation in the activities varied depending on how much the mothers wanted to accommodate an outside researcher. I often participated actively in functional programmes, whereas in emotionally laden discussions in particular, I instead took an observational role. It is possible that being the same gender and in the same age group as the mothers helped me perceive the appropriate level of participation. Nevertheless, the limits of my participation had to be re-evaluated in each situation.

The primary data were gathered via thematic interviews with 23 mothers involved in the group activities. I interviewed the mothers individually between February and September 2015. I conducted the interviews in places of the mothers' choosing, such as their homes. I recruited interviewees by presenting oral and written interview requests to the mothers during my observation sessions. In addition, involved professionals conveyed the requests to mothers who were not involved in the group activities at that time. The interviews explored the mothers' participation in the group operations through two themes that were formed based on my observations: (1) group activities and (2) support provided by the group. With the interviewees who acted as coordinators, I also explored themes from the perspective of their unique position. I sought to facilitate an open dialogue by, for example, posing plenty of open-ended questions, such as, 'What sticks in your mind about the group meetings?' The interviews ranged from 35 min to 2 h 16 min. I taped the interviews and transcribed them verbatim.

The interviewees represent mothers involved in the group's activities. They had participated in the group for anywhere from 4 months to 20 years, with an average of 7.5 years. Over the course of the data collection, 9 of the mothers were actively involved in the group's activities. Three of them

had acted as the group's coordinator. The majority of them had found their way to the group through friends and acquaintances, but a small number had discovered it through professionals. All had at least one child below school age when they joined the group. Some of the mothers lived with the father of their children, or with a new partner. Some of them had social networks outside the group, but some described having insufficient support networks. Many mothers indicated that they had completed only basic education and did not work, whereas others reported working or studying. Some of them recounted that they had lived in stressful conditions due to, for example, intrafamily violence or mental distress. Part of the mothers have had their firstborns when they were young (under 20 years old) and came to the group in the next few years after the birth of the child.

In the analysis, I applied the model of Vagle (2006, 2018), a phenomenologist, which enabled me to gradually deepen my interpretation of the data. In the first phase of analysis, that is, (1) a holistic reading of the entire text, I selected extracts concerning professionals' work from the corpus of transcribed interviews. I then moved to (2) the first line-by-line reading, in which I scrutinized the selected data, taking notes and marking excerpts that appeared to involve initial meanings. Next, I reviewed my notes and crafted (3) follow-up questions based on them. After that, I performed (4) a second line-by-line reading, during which I discerned a dimension representing the focus of the professional's work (*a focus on supporting group action – a focus on supporting group members*) from the data based on my markings, notes and follow-up questions. I implemented the next phase (5), a third line-by-line reading in the same manner, and I discerned another dimension, this one representing the intensity of the work (*low intensity – high intensity*). Finally, I conducted (6) subsequent readings, during which I compared the dimensions with observational data and the original interview data to perceive how these dimensions are manifested in various areas of professionals' work (see Figure 1).

I conducted the study in compliance with the guidelines of the Finnish National Board on Research Integrity TENK (2019). At every stage I ensured the privacy and anonymity of the informants. The group members agreed to participate in the study on the basis of the information provided to them. During the data collection, I specifically ensured that the study was not intrusive to the mothers. This required respecting the practices of the group and adapting to them (Watts 2011; Hammer, Fletcher, and Hibbert 2017). Each mother gave her informed consent prior to the interviews. According to the guidelines of the Finnish National Board on Research Integrity TENK (2019), conducting the study did not require formal research ethics approval.



Figure 1. Health- and social-care professionals' work supporting the action and members of a peer group.

Findings

Next I present the findings, which represent the intensity of professionals' work as a factor through which the acts of supporting group action and supporting group members are linked. I introduce each area of the professionals' work with a reflective note based on the data marked in italics (cf. Trangsrud et al. 2020). Furthermore, I utilize extracts and excerpts from observational data to explore the findings. In the extracts, names are replaced with pseudonyms, nonrelevant material that has been omitted is represented by dashes, and explanatory text is indicated by square brackets. References to observational data are marked as OD.

Focus on supporting group action, low intensity: providing behind-the-scenes assistance

I am in the group meeting. I look at the mothers around me and think that the programme seems to be realised in its own way without professionals. Most likely, one can participate in the group for some time without knowing that professionals are involved in it. When one is involved in these meetings, one does not necessarily see what kind of resources are in the background.

While providing behind-the-scenes assistance, the professionals support group action in the background. They do not take part in organizing or attending the activities. This means that their work in providing behind-the-scenes assistance is occasionally imperceptible to the mothers. Because the professionals 'never show up' (Heidi), it seems that the group operates independently of them. In the following, Ida notes that there is no need for professionals:

Look, we didn't need any counsellor there. There was no need, as the doors were open [on premises]. – – We tended to ourselves; we made coffee and took care of other things, so there was no need for any worker. (Ida)

Although the group operates naturally when the professionals are absent, their behind-the-scenes assistance may become visible in an indirect manner (OD). New members joined the group based on information from the professionals, especially in the early days of operation, because the professionals judge whether to provide information about the group to their clients and thus ensure the group's continuity. As Jenna recounts, the group has expanded due to the information shared by the professionals:

I think it [the group] expanded a little bit – – there started to be [more of] us mothers anyway. I think that [some new members] came from there, via Erika's work. (Jenna)

Providing behind-the-scenes assistance can also sometimes be more straightforward, as it includes a readiness to respond to the mothers' calls for assistance. From the perspective of some mothers, this readiness is of very little importance, as the idea of utilizing it is alien to them. There is no need to contact professionals about issues related to the group if the mothers are not resolving them. However, especially for group coordinators, the opportunity to obtain advice from professionals is important. As Heidi, a former coordinator mother, notes:

At the time when I was there [in the group], Erika was my support and protection. Yeah, I always, when we were up the creek, I called and asked what we should do, and we hold joint meetings every now and then. Really, although Erika was away, she was in the background all the time anyway. She occupied herself with these things, she was a bit of help and support. (Heidi)

The ability to contact professionals is like an invisible safety net that is available as needed, particularly when facing problems. Professional work is necessary to maintain this safety net, although it is reactive and sometimes casual by nature. On the other hand, because the professionals remain in the background, practical tasks related to the group's activities completely remain the responsibility of the mothers. This is especially visible regarding the amount of work required by the coordinators, which is occasionally so large that they are unable to participate in activities of the group themselves (OD).

Focus on supporting group action, high intensity: organizing action

I am in the summer camp and am pondering the wide set of duties of the professionals who are working there. I sit again until midnight, following along as they scrutinise the arrangements that are made and awaiting the action of the coordinator. This must be an example of their work, which informs my understanding of group action.

Periodically, providing behind-the-scenes assistance may transform into organizing action. This work includes participating in arranging the group action, which occasionally requires having a physical presence in the group. First, professionals help arrange individual activities and thus diversify the group's activities. This may mean, for instance, guiding an activity requested by the mothers. In the following, Ellen recounts how she has hiked with one of the professionals:

I remember when we started to talk to Elias – – that it would be infinitely brilliant to go for a hike. Then, Elias, who really has hiked a lot and led all kinds of trips, asked if we would be ready to go. We said that yes, we would. And, that same fall, we went for a hike with a bunch of mothers, Elias took us. It was precisely because we wanted to do these things that they were done. (Ellen)

Second, the professionals help arrange the groups' outings and summer camps. In these events their participation is crucial. To the mothers, it is a matter of course that the events should not be conducted without the help of the professionals. In particular, it is difficult to imagine the organization of the camp without their help. This was also apparent when a former coordinator, Heidi, told me about the limits of her own resources:

There [in the camp] were professionals who busied themselves with it. There were, like, professionals. – – If I had started to run it, I would have pushed too far. Primarily, I was a little bit involved there in the camp and always participated in the arrangements when needed. (Heidi)

If necessary, organizing action can include more than just arranging activities and events. The mothers recalled that the professionals played a central role when the group was founded and when it faced potential closure. In both situations, their work has included significant responsibility for the group action. If they had not taken on this responsibility, the continuity of the group action would have been uncertain. As Anna, who was the coordinator during a period in which the group was at risk of closure, recounts:

Well, certainly in every group there comes such a drop. There comes the feeling that "help, is this dying, is this falling through". And, then, it arises in a new way. Yeah, then the place of the group changed, it begins to start again on new premises, when I left it. In my opinion, Erika started to build it again. (Anna)

However, the professionals' responsibility for the group action is temporary, even in difficult times. They withdraw into smaller roles after the group's situation stabilizes. Changes in responsibility seem to happen naturally and even unnoticeably, as they mostly came up when the interviewees were recounting their own work in organizing the group action. During the observations, it was difficult to imagine that the division of labour had once gone through such considerable changes (OD).

Focus on supporting group members, low intensity: being available

I observe one of the professionals wander into a canteen at the camp and talk with the mothers who are sitting there. One mother casually touches the professional's arm. In my opinion, a touch can indicate a convivial relationship and trust. I think that the professionals are clearly not in the group just for its action but also for the mothers who participate in it.

The professionals are available as part of their work while simultaneously organizing action. Being available includes being ready to respond to the mothers' need for help, but no specific actions are designated as part of that assistance. Instead, the professionals inform the mothers about options for

obtaining help. This happens when they meet with the mothers to help arrange the operations of the group (OD). For instance, Hanna recounts hearing that help can be requested from professionals for any reason:

When we see each other, Erika sometimes emphasises, especially for new [group members], that you can always ... that you can always ask for help with basically anything that comes your way. (Hanna)

Being available also means making observations and maintaining relations with the mothers. When the professionals are present in the group, they take part in the conversations, make jokes, and catch up with the mothers (OD). Occasionally, they also see and hear things that worry them and force them to intervene in the conversation. As Joanna recounts in the following, such an interjection may still end quickly should the mother wish it:

I don't have any impression of what I did. Maybe I have said some nasty things to children, I have probably at least raised my voice or something, as she [professional] said are you tired, but it led nowhere. I was probably someone who could not say anything, so probably I was like, "No, no, everything is fine". (Joanna)

However, refraining from discussing an issue at one point does not mean that a mother is unwilling to return to it later. Many mothers noted that they approach the professionals when they feel that it is necessary. This can happen naturally by, for example, making a request while in a smoking area: 'Come here, I have an issue'. Furthermore, it is possible to agree about a discussion beforehand with a single professional (OD). For instance, Julia describes one of the professionals as a person whom one can easily ask for help:

I completely have the feeling that if there is some situation or matter, or anything, it would be possible [to ask for help] from Erika, and then Erika would find out about things and help. She is just like that. Well, and she has certainly helped a lot. (Julia)

Mothers' trust in the help of professionals requires long-term work. It is difficult to imagine that a mother would describe the professionals as 'like mates' (Ida) if they had not been involved in the group for a long period of time. In addition, building trust requires the active presence of professionals, although it also occurs during the course of organizing action. Additionally, participating in the group and engaging in light socializing are important.

Focus on supporting group members, high intensity: giving help

I sit in a cottage on one bed, and on the opposite bed sits a mother on a bathrobe. We have agreed that we do an interview after the evening programme at the summer camp. She wants to tell me about how much help one professional involved with the group has given to her: "Oh, if only [she herself] could help others in the same manner sometimes."

In giving help, the professionals' readiness to respond to the mothers' needs takes the shape of concrete actions based on the needs that the mothers express. Therefore, the nature of the help given varies greatly. For instance, it can be a question of reassuring a crying child during a group activity (OD). However, it should be noted that the help provided to the mothers is not strictly limited by the boundaries of the group. In the following, Nina notes that she has invited a professional to her home:

So, I have asked Erika, I asked once when I moved in together [with my spouse], when those big boys [children] had messed something up. I asked her to visit our place. (Nina)

However, the flexibility involved in giving help does not guarantee its sufficiency. As it is possible to ask for help with practically anything, a range of problems encountered by professionals inevitably test the limits of their competence. There are situations in which a predominant part of giving help

requires searching for appropriate support. If a professional cannot help by her- or himself, the mother needs somebody who can. For instance, for Hanna, help with mapping out suitable services has been important:

I sent a message to Helena that I have this kind of situation, [asking whether] they have some tips on where I can ask for support. And, Helena, I think she called me, yeah, probably she called, and she had looked for some places and I could decide which one was best for me. (Hanna)

However, steering group members towards services does not mean that the helping relationship between the mother and the professional is severed. This relationship is maintained by, for example, spontaneous discussion between group activities (OD). Occasionally, steering group members towards services is itself an essential part of maintaining the relationship. In some situations, performing this has required significant time and resources. In the following, Olivia describes the help that she received when she was depressed:

I don't know if Erika gets how much she really has done for me. Maybe she has saved a life of my children's mother. -- You know, one can't get comprehensive help like this anywhere in the municipal services. -- She makes sure that you make those phone calls. And, then, if you don't understand that piece of paper from Kela [the Social Insurance Institution of Finland], she fills in it on your behalf and explains how it must be filled in so that you can do it next time. There are so many of these things. I can probably tell you later how many good things Erika has done for me when they occur to me again in the evening. (Olivia)

The help given is most intense in life-threatening situations. It may be difficult to ask for this kind of help, and therefore, talking about it is not always possible, even when one wants to. However, Olivia and other mothers who had been in similar situations conveyed a clear message about the necessity of obtaining help. The mothers' need for help is clear, but alternative ways to find that help are difficult to imagine.

Discussion

In this article, I have scrutinized the experiences of members of a Finnish mothers' peer group with the work of health- and social-care professionals to support both the group members and group action. I discovered *how support for group action and support for the members of the peer group are linked in the work of health- and social-care professionals*. The findings reveal that support for group action and support for the group members are linked through the intensity of the professionals' work. When professionals provide highly intense support for group action, they provide less intense support to group members.

The intertwining of support for group action and support for group members provides an interesting perspective on Wilson's (1995) argument about the separate worlds of professionals and peer groups. Based on this study, these worlds are different, but not separate from each other. It seems that, in particular, support for group action at a high level of intensity brings the two worlds closer to one another. As the professionals participated in organizing group action, they began to help mothers who needed it by providing them with a low level of support. It is already known that the duties of professionals who work in a group can expand to wide-ranging (Munn-Giddings et al. 2016/17). According to the findings, this scope of work appears to be even more wide-ranging because individual-level support can be meaningfully included in it.

When professionals work in a group, they inevitably carry the practices and principles of their own world. It is known that professionals' work can involve a demanding balancing act between, for example, the autonomy of the group and professional ethics (Munn-Giddings et al. 2016/17, 120). Based on my study, the professionals conducted this balancing act, at root, by adapting to the principles of the group action. Within Wilson's (1995) concepts, they worked according to the principles of the world of groups also when they performed the practices of their own world, that is, did individual work with the mothers. The findings reveal that the group members had considerable authority regarding, for example, the amount, content, and timing of the support provided by the

professionals. This is probably an explanation for why the relationship between the two worlds remained conflict-free, also in situations in which the professionals did individual work with the mothers. According to the findings, practices that draw on experiences and professionalism can be integrated into a group but principles of the world of groups guide both of them.

Balancing acts between the two worlds places great demands on a professional agency. As Oka and Borkman (2011, 178) stated, a self-help supporter assists the group in accordance with the wishes of its members. However, this is not enough when individual-level support is a part of the work. A position as a self-help supporter is more like a starting point for building the trust that is required in individual work. Based on this study, professionals only have opportunities for meeting individual-level needs when they have intensively supported group action. At the same time, the requirements for dismantling the dominant professional position of the self-help supporters (e.g. Wilson 1995; Oka and Borkman 2011; Munn-Giddings et al. 2016/17) double, as they must also be extended to individual work. A group is an especially demanding environment for this work, as professionals may face strong support needs that they cannot meet within the conditions of their professional status. Furthermore, it is probable that meeting group members' needs in a manner that is wrong from their point of view would not only damage professionals' opportunities for individual work but also their action as self-help supporters.

The nature of professionals' work points to the need to consider the conditions under which they work with groups. Previous research has shown that professionals' lack of knowledge (Hensley and Dawson 2017) and critical stance on group action (Boyce, Munn-Giddings, and Secker 2018) can hamper this work. However, based on this research there is, at the root, a scarcity of resources that endangers the success of this work. The findings show that support for group action and for group members is strongly affected by individual professionals. The work of these professionals requires notable flexibility and adaptation, and it is partly done outside working hours. At its best, this work both promotes group members' independent actions and connects them with the sphere of professional help and services. It is also possible that working in a group is a means to reach people with whom professionals otherwise have difficulties connecting. The work of the professionals can have far-reaching consequences for the lives of families with children, but individual workers' flexibility and commitment do not guarantee its sustainability.

However, there are certain characteristics of the data and methods that need to be acknowledged when interpreting the findings. In accordance with the phenomenological-hermeneutic approach chosen, the author constitutes both a limitation and a strength of the study (see Smythe 2011). The fact that I conducted the study closely with a single group has enabled me to become thoroughly familiar with the mothers' actions and has thus supported the development of my understanding. On the other hand, this has also meant that the context formed by the group is clearly displayed in the findings. First, it should be noted that a large number of the mothers and professionals had been involved in the group action for a long time. Since they had plenty of time to become familiar with one another, the threshold for asking for and providing support had probably become lower over time. Second, some of the mothers' weak socioeconomic positions and stressful living conditions likely affected their need for professional help. Third, the group's actions and needs for support varied throughout its history, which presumably influenced the professionals' work.

Despite these limitations, the findings enable the consideration of solutions for supporting professionals' work with peer groups. Unlike some Western countries (Munn-Giddings et al. 2016), Finland has no infrastructure for facilitating peer groups, such as self-help clearinghouses. These types of support centres found elsewhere assist groups with issues regarding their action and thus lighten the burden of professionals. On the other hand, it is known that a few 'sympathetic' professionals can have a significant influence on support groups in countries where these organizations have been established (Wilson 1995; Oka and Borkman 2011). Hence, especially in the current societal situation in which there are strong expectations for peer groups, there is reason to carefully contemplate the means used to ensure functional responsibility sharing. Based on the findings, this is especially important because duties that are ordinarily carried out at the sphere of service system

can be meaningfully included in work with groups. Thus, in the future it is important to study professionals' work with such groups from the viewpoint of professionals and their resources.

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