

Do Mutual Help Groups Effectively Support Recovery From Illicit Drug Use Disorders?

The Public Health Problem

Untreated substance use disorders create a substantial burden on healthcare systems. Many people with illicit drug use disorders (IDUDs) face limited access to treatment and recovery support. Mutual help groups (MHGs) which are free and do not require appointments, insurance, or identification, represent a widely accessible option, but their effectiveness for drug use recovery is less studied than for alcohol use.

Background

MHGs have become a prominent recovery resource for people with illicit drug use disorders. Most follow the 12-step model popularized by Alcoholics Anonymous, while others, like SMART Recovery and Wellbriety, offer alternative approaches.

Research on Alcoholics Anonymous is robust, but there is a gap in the literature on how MHGs support recovery from illicit drug use.

Understanding the effectiveness and accessibility of MHGs is key to improving recovery support for diverse populations.

What This Article Addresses

This review examines whether mutual help groups for illicit drug use disorders benefit participants. It focuses on peer-reviewed literature published between 2019 and 2024, assessing the role of MHG type, format, and cultural adaptation in recovery outcomes.

What They Did (Methods)

The authors conducted a structured review of studies published from July 2019 to July 2024, identifying 287 studies from databases including PubMed, Medline, and Web of Science.

They ultimately analyzed 21 studies that met the inclusion criteria to evaluate the effects of MHG participation on drug use and addiction severity.

What They Discovered (Findings)



MHG involvement reduces drug use: Greater engagement with mutual help groups is associated with positive outcomes for individuals with illicit drug use disorders, though the benefits appear more modest compared to those seen in alcohol-focused groups.



Online and culturally tailored groups show promise: Digital MHGs and those adapted for cultural relevance may better reach and retain individuals from diverse backgrounds, though more rigorous studies are needed.



Stigma around medications limits access: Some traditional MHGs express stigma toward medication use, particularly opioid agonist treatments like methadone or buprenorphine, making it harder for some individuals to engage or feel welcome.

Opportunities for Action

The study findings highlight opportunities for:

Health care leaders and providers

- Engage with patients to discuss appropriate types and levels of MHG participation
- Refer patients using medications for opioid use disorder (MOUD) to MHGs that are more accepting of medications

Policymakers and payors

- Improve care coordination for individuals with opioid use disorder
- Address structural barriers such as healthcare access and insurance coverage that limit MHG and medication access, especially for racial/ethnic minority populations

Researchers

- Address stigma toward MOUD within MHGs
- Study cultural adaptations to increase MHG accessibility and effectiveness among diverse populations
- Evaluate the effectiveness of online MHG delivery models

Patients and families seeking recovery

- Consider MHG participation as a supplement to formal treatment
- If using MOUD, seek out MHGs that are accepting of this approach