

The Behavioral health system has moved toward being strengths based in its approach to prevention, treatment, and recovery.

Session 9

The Strengths Model

Is designed to define the Strengths Model and review the six principles of the strengths perspective.

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The Strengths Model

The Strengths model was first articulated in the 1980's as an alternative to brokerage services in mental health. The Strengths approach focuses upon peer outcomes such as housing, vocational, educational activities, and health and wellness. In the Strength model, the focus is on working in partnership with the peer and their unique strengths for promoting access to informal naturally occurring community resources and developing opportunities where none currently exists. This approach is built on peer empowerment, which has been the key to facilitate treatment in the community, increase the quality of life in the community, prevent crises and relapses, and reduces the likelihood and length of re-hospitalization. People who were once seen as only capable of institutional life, can, with supports from peer support providers live successfully in the community setting of their choice. This is a process unique to all individuals and does not occur on a predetermined timetable.

6 Principles of the Strengths Perspective

The Strengths model is based on 6 principles:

1. People can recover, reclaim or transform their life

Providers must believe that people can and do recover. The way services are provided can significantly improve someone's chance of recovery. The key work in this first principle is "people". Those who we serve are "people", not their diagnosis. "Labels are for cans not people". Those individual's whom we work with are more than their mental illness, they are teachers, brothers, wives, friends, cooks, spouses, runners, etc. Highlighting the uniqueness of each person is an important aspect when working in partnership with the person.

The individuals whom we serve and work with have the capacity to learn, grow and change. As peer support providers, we do not change people. The strengths model emphasizes that the capacity for growth and recovery are already present within the people served. Our job is to help create the conditions in which growth and recovery are most likely to occur.

2. The focus is on individual strengths rather than deficits

Sometimes people tend to focus on illness because they continue to use the “Medical Model” that was developed 100 years ago to treat physical illness. In other words “assess, diagnose, and treat”. This paradigm or model does not translate well into the behavioral health field, especially with community behavioral health direct service. When you work with someone by focusing on their illness they will tend to associate and identify themselves with the disability.

The strengths model does not deny that problems exist – that’s why people receive services. People do not come to providers to receive services with the knowledge that things are going well. As a provider of behavioral health services you want to help make problems become a minor characteristic of their life and place an emphasis in their strengths, dreams, desires, passions, skills, abilities, etc.

When problems/deficits become all that is discussed in team meeting, side conversations with other providers and the focus of the information that we gather, our creativity can be deflated. To move beyond being problem focused, time needs to be spent looking at what promotes recovery. Energy needs to be focused on uncovering people’s strengths.

3. The peer is seen as the director of the helping relationship

Looking at the inverted hierarchy of services, the peer receiving services is at the top of the hierarchy. This emphasizes that the consumer is the “driver” of their services.

4. The relationship is primary and essential

The relationship between the Peer Support Worker and the peer is essential especially during times of crisis. During these times, a crisis plan can act as a buffer and help with reducing the crisis. This relationship is built on trust and honesty. It takes such a relationship to discover a rich and detailed view of an individual's skills, interests, desires, passions, etc. The relationship begins during the engagement phase of providing services when both parties are just getting to know each other. Part of the relationship process includes self-disclosure.

5. The preferred setting for services is in the community

The preferred setting for providing services is in the natural environment of the community. The best way to learn about the people whom we provide services to is to be in their natural community setting. Working within the community may increase one's knowledge (provider and peer) on options to what's available in the community. Assertive outreach corresponds to the next principle that the community is an oasis of resources.

6. The community is an oasis of resources

Not only do individuals have strengths but so does the community in which they live. As a peer specialist, we must find those pockets in the community where strengths lie. To encourage and support people to live independently in the community setting of their choice is to also assist them in identifying naturally occurring resources in their neighborhoods. We also need to help them learn how to access those resources. The six principles outline a framework for practicing from a strengths perspective. They are the core values and beliefs that drive the skills and techniques of providing behavioral health services. The principles work as a whole, not separately.

STRENGTH ASSESSMENT

Understanding How to Identify Strengths

Strengths:

Almost everything imaginable can be strength. Listed below are some of the more common experiences and qualities that peer specialist and participants have discovered as strengths and resources. **In the space provided list what your strengths are in each of these categories.**

What people know. People learn constantly – from experience, books, culture, family, and on their own. Maybe they know how to cook, or they understand how to use computers, or they are experts at sports trivia, or they know how to take care of small babies, or they understand advanced math. People’s knowledge can be in any are – ask about it. Learn from them what they know. List three strengths/things you have learned from others.

1)

2)

3)

What talents people have. People can surprise themselves and you by the skills and talents they have. Playing a musical instrument, juggling, reciting poetry, art, singing, writing, etc. List three talents you can list as strengths.

1)

2)

3)

Personal qualities. A sense of humor, gentleness, strength under pressure, reliability, friendliness etc. List three personal qualities you would list as strengths.

1)

2)

3)

Pride. People do have pride; often, it is “survivor pride.” They have surmounted or are in the process of surmounting great difficulties or barriers. It is this pride which can be summoned to encourage change and growth. (Example: being sober for 1 years, having stayed out of the hospital for 2 years). List three strengths you would list in the area of “Survivor Pride.”

1)

2)

3)

Look in the community for natural resources. Take advantage of what is already out there for participants; let them be the experts, as they often know of resources we have not yet discovered. Remember, too:

- Sometimes people don’t define their talents, knowledge and resources as strengths-you can help them do that.
- Sometimes people have forgotten or let fall into disuse a quality or talent that might be strength.

Session 9 - Review Questions – The Strengths Model

1. What are the 6 Principles of the Strengths Perspective?