

The Foellinger Foundation prefers to work with nonprofit organizations that promote self-reliance by building on people's strengths (as opposed to concentrating on problems). To explain the concept of strength-based practices, the Foundation asked Indiana University-Purdue University Fort Wayne professor William Utesch to research and write the following summary. Dr. Utesch is associate professor of education at IPFW. His areas of expertise include community mental health administration, clinical supervision, educational consultation and family practice.

From a glass half empty to a glass half full: A review of the Transition from Deficit to Strength-Based approaches.

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Abstract

Approaches to helping have been changing. There has been a shift over the past fifty years from a problem-focused, deficit perspective, to a strengths-based view that emphasizes resources and capabilities (Cohler, 1987; Howard & Dryden, 1999; Keogh & Weisner, 1993; Spekman, Herman, & Vogel, 1993). A review of this transition in helping and its implications follow.

The Deficit Approach

The commonly held view in education, medicine, psychology, and many other disciplines has been a deficit, disorder, problem-oriented paradigm. The emphasis within this paradigm has been on risk factors that define what is wrong, missing, or abnormal. Viewing the world through this deficit lens prohibits seeing strengths, resources, and capabilities. One example of this is the use of the term "At-Risk" to categorize individuals, families and groups in order to determine their potential for vulnerability to negative life outcomes. Risk factors have historically been identified as biological, psychological, cognitive, and environmental conditions impeding normal

developmental processes (Roeper, 2000). Once normal development is delayed, vulnerability is increased. This particular view labels individuals, families, and groups according to their problems or deficits without recognizing strength's or competencies (Kaplan & Girard, 1994). Individuals or families are often seen as being unable to solve their own problems, cope, or achieve their own goals without outside resources. Risk factors have been consistently debunked as predictors of individual success or failure (Swadener & Lubeck, 1995; Werner & Smith, 1996).

The Strengths Approach

A strengths-based approach is characterized by its emphasis upon capacities, competencies, and resources that exist within and outside of the individual, family, or community. The theoretical basis of this perspective cannot be attributed to one source or discipline but is a culmination of work in the areas of developmental resilience, healing and wellness, and constructionist narrative through the professions of social work, nursing, marriage and family therapy, clinical psychology, psychiatry, child development and education (Allen, 1977; Erickson, Tomlin, & Swain, 1983; Warner, 1981; Saleebey, 1996; Karpel, 1986; Waters & Lawrence, 1993). A significant factor in the process of applying a strengths-based model is resilience. The phenomenon of resilience has been studied extensively. Among the populations studied were children born into families with a mental illness (Goldstein, 1990), exposed to divorce (Watt, Moorehead-Slaughter, Japzon, & Keller, 1990), exposed to high levels of maternal stress (Pianta, Egeland, & Stoufe, 1990), addicted to drugs (Newcomb & Bentler, 1990), born at medical risk (O'Dougherty & Wright, 1990), exposed to family violence (Straus, 1983), exposed to early parental death (Brown, Harris, & Bifulco, 1986), and reared in

poverty (Garmezy, 1991). The literature on resilience is divided into two camps with one camp defining resilience as a cluster of an individual's skills and competencies, while the other states that resilience is more about the outcome result of an individual's efforts to overcome adversity (Kaplan, 1999). This false dichotomy between internal attributes and external results does not take into account the interplay between the individual's personality, abilities and developmental level, and the context within which a resilient outcome result is determined. In an attempt to understand resilience outside of context, Anthony (1987) believed there were children who remained competent despite adverse circumstances. He used the term "psychologically invulnerable" to refer to such children. There has been very little research supporting the concept of an "invulnerable child" (Fisher, Kokes, Cole, Perkins & Wynne, 1987; Glantz & Sloboda, 1999; Luthar et al, 2000; Pellegrini, 1990). The successful negotiation of adverse conditions and circumstances is not limited to a single explanation within or outside of an individual (Glantz & Sloboda, 1999). Strengths-based approaches are developmental and process oriented. They identify and reveal internal strengths and resources, (resiliencies), that exist within an individual, family, or group as they occur in specific problem contexts (Egeland, Carlson, & Stroufe, 1993).

Strengths-Based Applications

Several applications have been made of the strengths paradigm across many disciplines. Though intervention methods tend to be unique to specific circumstances, all applications have in common the premise of facilitating strengths over quantifying deficits.

Education

The Center for Research on the Education of Students Placed At Risk (CRESPAR) was funded by the Department of Education to expand the knowledge of resilience in children. Their research projects examined factors and mechanisms associated with specific strategies related to the role of social resources in educational contexts (Nettles, 2000). Their findings support the notion that students traditionally defined by “at-risk” labeling can be helped by implementing two strategies originally suggested by Masten and Coatsworth (1998): (a) increase resources and (b) build on adaptive processes.

Child Development

Supportive adult relationships have been identified as one of the most commonly identified protective factors in promoting the resilience of children (Doll & Lyon, 1998). It is this relational foundation that provides the necessary momentum for overcoming vulnerability to life's problems. Bowman (1998) and Ramey & Ramey (1998) agree that resilience-building for individuals begins at an early age and is dependent upon supportive adult relationships. They recommend, for example that elementary schools utilize systematic and deliberate efforts to build resilience processes. One example of this is their suggestion that “school psychologists move away from documenting failure to enhancing resilience”.

Achievement

Expectations can have a powerful influence on whether an individual's strengths will be mobilized to overcome adversity. In 1968 Jane Elliott, a Riceville, Iowa teacher

discovered this through a lesson on bigotry. She divided her class of all white students into two groups, those with brown eyes and those with blue eyes. She would alternate telling one group they were “superior” and the other group they were “inferior”. The “superior” group would receive special treatment that the “inferior” group did not. She repeated the same lesson every year, and every year the result was the same. The “superior” group was confident and performed better academically than they had prior to the lesson. The “inferior” group was sullen and withdrawn, performing lower academically (Ferguson, 1998).

Family Thriving

Very little has been written on the subject of true family strength and resilience. References to family strengths tend to be limited to individuals within families and not families themselves. The most noteworthy family work has been that of McCubbin and Patterson’s (1983) double ABCX model. Their research has discovered that a number of factors interact to predict family strength and resilience. One key factor they propose, the family schema, suggests that the family’s overall outlook on life impacts their resilience. Specifically, families with a shared belief that adverse circumstances will eventually end positively are most likely to withstand the effects of adversity. They may even thrive under difficult circumstances. Therapists are encouraged to look for family strengths and not allow a problem-focus to dominate the counseling process and negate the potential effect that a strength-based approach might have on family resilience.

Youth Aggression

Studies of youth aggression and violence point to the importance of not limiting explanations for this problem to individual risk factors (O'Toole, 2000). Considerable evidence has been presented that environmental characteristics interact with intra-personal characteristics to shape patterns of aggressive behavior. Traditional responses based upon deficit-focused, reactive and punitive views have been ineffective. Identifying strengths that expose resiliency in the presence of a risk context and using these to create strategies for prevention has been suggested as an alternative method for reducing youth aggression (Skiba & Peterson, 2000).

Limitations when Transitioning to a Strength-Based Perspective

Limitations

Making the transition from a deficit to strength orientation can be difficult (Pianta & Walsh, 1998). There is a tendency to rely upon programs to create resilience instead of using programming to facilitate strengths that capitalize on resilience factors that already exist. Building skills in order to enhance the outcome results of individuals labeled "high-risk" without addressing individual or contextual factors can be another obstacle in making the transition from deficits to strengths a successful one.

Summary

Individuals must be perceived as resilient and having strengths before a strengths-based approach can be successfully implemented. By emphasizing strengths, the innate resilience of an individual is enabled to assist them in their attempts to overcome adversity. In the strengths paradigm all individuals, families, and groups possess

abilities and inner resources that allow them to cope effectively with the challenges of living. Individuals typically seen as hopeless and without resources are presumed to be able to make significant positive strides when their own strengths and abilities are identified, emphasized, and built upon within the context of adverse conditions. Is the glass half empty or half full? This reference implies that the glass never changes. The observer has the option to see the glass differently and make a difference in how the glass will be perceived. When people are seen differently by educators, mental health professionals, and others in the helping profession, they are given the opportunity to see themselves differently. Unlike glasses of water...people respond to their observers.

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