

Short Communication





Rebalancing the scales: from asset-based to asset-balanced practice

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Strengths-based and asset-based practice has been a popular concept for practice across health care, youth work, community work and social care. Asset-based approaches grew in popularity to counter the dominant deficit based approaches epitomised by focussing on 'need', 'issues' and 'deficits'. The danger of this approach is two-fold. On the one hand it communicates to clients that they are 'useless', 'broken' and in need of help perpetuating issues.1 This has been described by some as perpetuating and even cultivating vulnerability² On the other hand practitioners can unintentionally 'rescue' by helping too much which is disempowering, further reinforcing the helpless position of the client. A response to counter this deficit approach has been to adopt an asset-based or strength-based approach. This focuses on the capabilities, qualities, strengths and assets of the client and on their ability to sort things out for themselves.³ Whilst this might at first seem a sensible counter-hegemonic position, it too is prone to issues. On the one hand clients may find it hard to talk purely about their strengths when they feel at their wits ends, they may feel that no one is listening to them or empathising with how they feel, and practitioners Volume 2 Issue I - 2018

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may unintentionally place all the onus on the individual leaving them to feel responsible or 'to blame' for their situations and issues. This is such a significantly different way of thinking that some have called it a 'paradigm shift.²

The issue with both of these positions is that they are situated in opposition to one another as binary terms in a duality. This is demonstrated by the table below.

| Deficit approach | Asset approach |
|---|--|
| Assess what people can't do - needs led | Assess what people can do - strengths based |
| Setting goals for people | People setting own goals |
| Plan interventions for people | People select own interventions |
| People are labelled as issues | Circumstances are blamed for people's issues |
| Rescue, over supportive, providing relationship with practitioner power | Facilitative, empowering relationship with client held power |
| Gains made by the practitioner / organisation measured for the person | Gains made by the person measured by the person |
| Enabling people to conform to society | Supporting people to be who they want to be |
| Welfare state | Wellbeing state |

Stuart & Brownin.1

A more nuanced one alone is unrealistic and skewed, it is important to focus on both if we are to support the understanding of the situation is that strengths and weaknesses co-exist, assets and deficits co-exist. Focussing on wellbeing of clients. The solution is not to take one approach at the expense of the other, but to tread a balanced line where practice works with assets and deficits and offers support and challenge where necessary. I have worked extensively with youth work organisations to overcome the deficit approach, and have myself spent time 'cleansing' organisations of their deficit practices. I have cleared out wait rooms and toilets removing all 'warning' and 'at risk' posters. I have changed the language of assessments of need to focus instead on strengths assessments, and I have worked on end of programme evaluation forms to ensure they document the gains that clients have made as opposed to those made by the service. These are all well intentioned developments and changes, and yet, I

had to ask myself, what about the needs that still exist? What about the information young people need to be sign-posted to? What about the role of the service in facilitating change? What about the young people who need support as well as challenge? This reflective work⁶ has led me to a position where asset-based and deficit-based practices need to co-exist in an asset-balanced form of practice. To this end I have revised my understanding of how youth environments should be structured and decorated, reconsidered the role of the practitioner to be that of a skilled helper,⁷ I have carefully examined the ways in which interventions are planned and articulated,⁸ and investigated what kinds of practices may both support and challenge creating opportunities for empowerment.^{9,10} As a result of this work I feel better able to articulate such a balanced approach to work with people as demonstrated in the revised below.



| Deficit approach | Asset-balanced practice | Asset approach |
|---|---|--|
| Assess what people can't do – needs led | Balanced needs and strengths assessment | Assess what people can do – strengths based |
| Setting goals for people | Goal setting with people | People setting own goals |
| Services designed by experts | Service design with people | Services designed by people |
| Plan interventions for people | Planning interventions with people | People select own interventions |
| People are labelled as issues (structure view) | People seen as having issues linked to life circumstances (structure and agency view) | Circumstances are blamed for people's issues (agency view) |
| Rescue, over supportive, providing relationship with practitioner power | Balanced fit for purpose support and challenge | Facilitative, empowering relationship with client held power |
| Gains made by the practitioner / organisation measured for the person | Equal efforts of the service and the person measured and evidenced with appropriate attribution | Gains made by the person measured by the person |
| Enabling people to conform to society | People supported to be who they want to be within the norms of society | Supporting people to be who they want to be |

These are initial thoughts, in need of grounding in practice and proving through research and I welcome responses from the field.

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None.

Conflict of interest

The author declares no conflict of interest.

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