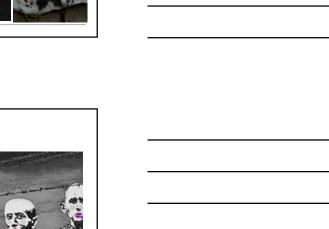


Trevor Hopkins Asset Based Consulting

Asset Based Consulting



www.assetbasedconsulting.net





It was shortly after the British Red Cross arrived, though it may have no connection, that a very large quantity of lipstick arrived... and I don't know who asked for lipstick. I wish so much that I could discover who did it, it was the action of genius, sheer unadulterated brilliance. I believe nothing did more for those internees than the lipstick. Women lay in bed with no sheets and no nightie but with scarlet red lips, you saw them wandering about with nothing but a blanket over their shoulders, but with scarlet red lips. I saw a woman dead on the post mortem table and clutched in her hand was a piece of lipstick. At last someone had done something to make them individuals again, no longer merely the number tattooed on their arm.

Extract from the diary of Lieutenant Colonel Melvin Willit-Gonin DSO

ß

AB

"... in spite of everything, I still believe that people are really good at heart. I simply can't build up my hopes on a foundation consisting of confusion, misery, and death. I see the world gradually being turned into a wilderness, I hear the ever approaching thunder, which will destroy us too, I can feel the sufferings of millions and yet, if I look up into the heavens, I think that it will all come right, that this cruelty too will end, and that peace and tranquillity will return again."

Anne Frank

Assets and deficits

- Much of the evidence base available to describe and address health inequalities and improve health is based on a deficit model of health and wellbeing.
- Deficit models focus on identifying problems and needs of populations requiring professional resources, resulting in high levels of dependence on services
- In contrast: Asset models accentuate positive ability, capability and capacity to identify problems and activate solutions which promote the self esteem of individuals and communities leading to less reliance on professional services

Features of a deficit approach

- Policymakers see systems or institutions as the principal tool for the work of society
- The structure is designed to permit a few people to control many other people
- · People are seen as the clients or consumers

6

B

- This approach produces a great deal of the same thing, whether goods or services, but to overcome this...
- Services are targeted at specific needs & problems, communities and individuals become 'segmented'

Features of an assets approach

Changing from servicing people's needs to facilitating their aspirations

- · A move from targeted to universal approaches
- Redressing the balance between needs and assets or strengths
- A shift in emphasis from the causes to 'the causes of the causes'
- Solutions that are developed by people and communities not by specialists and professionals

Appreciative interviewing

• Can you tell a story of a time when you made a positive change to improve your own health and wellbeing?

• What do you believe is now the single most important thing that positively influences your own health and wellbeing?

• Now turning to your work; can you tell a story of how you involved others as equal partners in bringing about real and sustainable change?

• Imagine your community, your friends, your family, your colleagues and the wider community telling stories about how you have worked together as equal partners to achieve your dreams of a healthy community. What would these stories be?



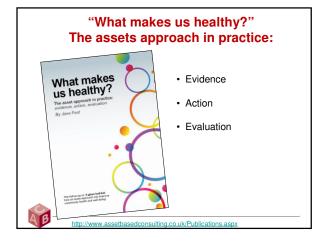
The Principles

- Assets: any resource, skill or knowledge which enhances the ability of individuals, families and neighbourhoods to sustain health and wellbeing.
- Instead of starting with the problems, we start with what is working, and what people care about.
- Networks, friendships, self esteem and feelings of personal and collective effectiveness are good for our wellbeing.

"Focusing on the positive is a public health intervention in its own right" Protestor Santi Stewar-Brown, Protestor of Polici Health at Warwick Medical School speaking at a conference on Measuring Wei-Berg 19 January 2011 a Kengs Calego

B







Key messages 1.

- Asset principles help us to understand what gives us health and wellbeing in a new way.
- The theoretical and research evidence for the positive impact of community and individual assets is well known and at least comparable to that of more familiar social and life-style determinants of health
- Asset thinking challenges the predominant framing of health as the prevention of illness and injury rather than the promotion of wellness.
- Asset working can promote mental well-being which is both a cause and a consequence of inequality and
 physical ill health.

B

B

Key messages 2.

- Work to improve health enhancing assets has not only to focus on the psychosocial assets such as resilience and confidence, but also on the social, economic and environmental factors that influence inequalities in health and well-being.
- Asset based approaches complement services and other activities that are intended to reduce inequalities in life chances and life circumstances and which meet needs in the community
- The shared themes of asset based approaches are that they are asset based, place based, relationship based, citizen led and they promote social justice and equality.
- Assets are simultaneously an input, a measure and an outcome. This has implications for the design and evaluation of asset based working.

Evaluation

- To evaluate health asset based activities requires a new approach. Instead of studying patterns of illness, we need ways of understanding patterns of health and the impact of assets and protective factors.
- Methods that seek to understand the effects of context, the mechanisms which link assets to change and the complexities of neighbourhoods and networks are consistent with the asset approaches.
- The participation of those whose assets and capacities are being supported will be a vital part of local reflective practice.

Stories

"Stories are woven into the fabric of our lives: they shape our sense of self, our sense of belonging to community and our sense of how the world works."

> Geoff Mead, Centre for Narrative Leadership http://hermesconsulting.wordpress.com/

Narrative

B

2

- Stories talk of the 'how and why' of change and help people realise what has been achieved and what has still to change.
- Stories are accessible to a wide range of participants, especially using visual and arts methods.
- They are collective and participative they embed shared learning and create links through shared experiences.
- Communities or families can create their own narrative of what is happening. Positive stories can counteract the stigmatising and marginalising stories from outside.
- Shared stories make meaningful connections between different sections of the community whether that is across generations or between different ethnic groups.

Values for an Asset Approach

- Identify and make visible to health-enhancing assets in a community
- See citizens and communities as the co-producers of health and well-being rather than the recipients of services
- Promote community networks, relationships and friendships
- · Value what works well
- Identify what has the potential to improve health and wellbeing
- Empower communities to control their futures and create tangible resources

Key themes

The defining themes of asset based ways of working are that they are:

- Place-based
- · Relationship-based
- Citizen-led

AB

...and that they promote social justice and equality

