The Strengths Model: The Road Travelled and the Journey Ahead

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If we **really** want to do something about “behavioral health” then we need to change structures that create and reinforce inequity, discrimination, poverty, extreme imbalances of power, and oppression.
There has to be a better way!
Strengths Model 1982

Small pilot funded by the State of Kansas

One team of undergraduate and graduate students

One Community Mental Health Center
16 out of 27 Community Mental Health Centers implementing Strengths at high fidelity

Nearly 50% of all peoples receiving community mental health services in Kansas

Source: diynaps.net (c)
<table>
<thead>
<tr>
<th>Strengths Model sites (2016)</th>
<th>Kansas State Average (2016)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• 2% hospitalized</td>
<td>• 6% hospitalized</td>
</tr>
<tr>
<td>• 24% competitively employed</td>
<td>• 16% competitively employed</td>
</tr>
<tr>
<td>• 8% post-secondary education</td>
<td>• 2% post-secondary education</td>
</tr>
<tr>
<td>• 94% living independently</td>
<td>• 88% living independently</td>
</tr>
</tbody>
</table>
Eleven studies have tested the effectiveness of the Strengths Model.

Positive outcomes in the following areas:

- Psychiatric hospitalization
- Housing
- Employment
- Post-secondary education
- Symptoms
- Community involvement
- Social Support
- Social Isolation
- Family Support
- Quality of Life
Evidence for the Strengths Model

11 studies demonstrating effectiveness

Fidelity and Outcome data from Kansas since 2004

Numerous first person accounts of recovery from focus groups
Defining The Strengths Model

• The Strengths Model is both a philosophy and a set of tools and methods designed to help people build or re-build lives worth living, beyond our formal systems of care, that bring meaning, purpose, and a positive sense of identity to the person

• Philosophy
  » The way we view people
  » A way of being in relationship with people

• Tools & Methods
  » Strengths Assessment
  » Personal Plan
  » Group Supervision
  » Field Mentoring
Principles of the Strengths Model

1. People have the capability to recover, reclaim, and transform their lives

2. Focus is on strengths versus deficits

3. The community is viewed as an oasis of potential resources

4. The person is the director of the helping process

5. The relationship with the person is primary and essential

6. The primary setting for our work is in the community
The Context of Strengths Model Work

Engagement
- Understanding
- Hope
- Alliance

Tools
- Strengths Assessment
- Personal Plan
- Group Supervision

Recovery
- Meaning
- Purpose
- Identity
## Types Of Strengths

<table>
<thead>
<tr>
<th>Qualities/Personal Characteristics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Talents and Skills</td>
</tr>
<tr>
<td>Environmental Strengths</td>
</tr>
<tr>
<td>Interests/ Aspirations</td>
</tr>
</tbody>
</table>
Organization of the Strengths Assessment

- Seven Life Domains
- Three Temporal Orderings
- Encompasses both simplicity and complexity
Introducing Elizabeth
Overview of Elizabeth at the beginning of her road to recovery (2010)

33 year old, white, heterosexual woman

Living with mother and step-father.

Mostly isolated from community.

Frequent hospitalization (7 times in 2009)
Overview of Elizabeth at the beginning of her road to recovery (2010)

Frequent calls to crisis services (suicidal ideation)

History of childhood physical, sexual, and emotional abuse.
Overview of Elizabeth at the beginning of her road to recovery (2010)

- Only lived once on her own (lasted 5 months)
- Evicted from apartment and was homeless for two months
- Re-entered the hospital
- Returned to living with mom and stepfather
## Strengths Assessment

**For Elizabeth W. (2010)**

### Current Strengths:
What are my current strengths? (i.e. talents, skills, personal and environmental strengths)

- Currently living with parents (nice to have someone to eat meals with and do things with)
- Has own room: a place to get away if needed
- Grocery store close by
- "I’m able to do almost everything on my own"

### Individual’s Desires, Aspirations:
What do I want in my life?

"I want my own apartment at Hitchcock Towers"

### Past Resources – Personal, Social, & Environmental:
What strengths have I used in the past?

- Had own apartment in Stillwell, OK for 5 months in 2004
- Did my own laundry, cooking cleaning, etc.

### Home/Daily Living
- Has own apartment in Hitchcock Towers

### Assets – Financial/Insurance
- Currently receives $573 in SSI
- Has Medicaid
- "I want to be able to make my own decisions about what I spend my money on"
- Will qualify for food stamps if I get my own place

### Employment/Education/Specialized Knowledge
- Have been searching for a job on my own
- Knowledgeable and skilled around housekeeping responsibilities
- Knowable about basic childcare
- Knows basic first aid
- "I want to get a job in a daycare center or some type of job working with kids"

### Supportive Relationships
- Mom (Sarah) is my biggest support (listens to me and can cheer me up)
- Brother (Roy) can take me places if I need anything
- Friend (Hanna in Oklahoma) – we still talk on the phone occasionally
- "I would like to have more friends here in Kansas"
- "I have always been close with my mom and brother"
- Ex-boyfriend (Kevin) used to be good support ("He helped build my confidence in myself")
### Wellness/Health

- Lamictal helps with the depression – “I don’t feel suicidal as much”
- “Talking to others about how I’m feeling helps with depression”
- “Doing something active helps me feel healthy”
- “I want to continue to be healthy”
- “Going out and doing things made me feel better about myself” (e.g. movies, sporting events, shopping, etc.)

### Leisure / Recreational

- Enjoys music (Country), listing to radio, singing, and dancing (two-step, line dancing)
- Talking on the phone
- “I want to make more friends and spend time with them”
- used to be in girl scouts
- went out for track and basketball in high school
- used to go camping and canoeing

### Spirituality/Culture

- Spending holidays with family is important to me, especially when we visit my mom’s side of the family in Mississippi.
- I have a strong faith in God, which has helped me overcome difficult times.
- “I would like to find a church home where I felt accepted”
- Having the entire family together for Easter, Thanksgiving, and Christmas dinner has always been an important part of our family.
- Going to Sunday church service as a family.

### What are my priorities?

1. I want my own apartment
2. I want a job working with children
3. I would like to have more friends to do things with
4. 

### Additional comments or important things to know about me:

*It is really important to me to have my own place. I still want my family in my life, but I want to show others I can do things on my own. Someday, I would like to have my own family.*

*This is an accurate portrait of the strengths we have identified so far in my life. We will continue to add to these over time in order to help me achieve the goals that are most important to me in my recovery journey.*

*I agree to help this person use the strengths identified to achieve goals that important and meaningful in their life. I will continue to help this person identify additional strengths as I learn more about what is important to their recovery.*
## Critical Components of the Strengths Assessment (Content)

| Written in a context that is meaningful and important to the person | “I want my own place”  
“I would like more friends to do things with” |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Hope-inducing for the person</td>
<td>The process of exploring possibilities and visualizing tangible strengths created an aura of hope</td>
</tr>
</tbody>
</table>
| Thorough, detailed and specific | * Brother (Roy) can take me places if I need anything  
* Lamictal helps with the depression – “I don’t feel suicidal as much” |
| Written from the person’s perspective and using his/her own words | “I want...”  
“I have.....” |
## Critical Components of the Strengths Assessment (Process)

<table>
<thead>
<tr>
<th>Description</th>
<th>As opposed to</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evolves at the person’s pace</td>
<td>a rush to fill out paperwork</td>
</tr>
<tr>
<td></td>
<td>Most important is that person is engaged</td>
</tr>
<tr>
<td>Conducted in a conversational manner</td>
<td>an interview</td>
</tr>
<tr>
<td></td>
<td>Uses the boxes to record, not guide</td>
</tr>
<tr>
<td>Occurs in the person’s natural environment whenever possible</td>
<td>a majority of meeting occurring in the office</td>
</tr>
<tr>
<td></td>
<td>The nature of the goal will often dictate setting</td>
</tr>
<tr>
<td>Part of an ongoing process in which information is updated on a regular</td>
<td>One-time assessment</td>
</tr>
<tr>
<td>basis</td>
<td>You are creating a portrait or building a narrative, not completing a form</td>
</tr>
</tbody>
</table>
Where Elizabeth is now (2017)

- Own apartment for six years
- Sings in a church choir
- Helps out occasionally at nursery during Sunday school classes
- Has a close friend at her apartment complex
- Has a dog
Where Elizabeth is now (2017)

- Has been hospitalized twice in the past six years
- Calls the crisis line periodically (3-4 times a year)
- Still struggles at times with depression, disassociation, voices, and suicidal thoughts, although less frequent
- Is considering employment
What are people recovering from?

Poverty

Loss of Relationships, Identity, Possessions

Dreams that Never Materialized

Isolation from Community

Physical/Sexual Abuse

Addictions

Stigma/Discrimination

Mental Health Systems

Experiences of intense internal states including being overwhelmed, confused, unsafe, helpless, hopeless, etc.
Anchors & Niches
The Concept of ‘Anchors’

Merriam-Webster definition: “Something that serves to hold an object firmly”

• We are all “anchored” somewhere in our life.
• Some of our anchors are more stable or firmly rooted than others.
• Who we are or how we view ourselves is often associated with our anchors.
Definition: “The environmental habitat of a person” (Taylor, 1997)

- The quality of a person’s life is largely determined by the quality of the niches within which a person lives.
- There are two types of niches at the extreme: entrapping and enabling. Most lay somewhere between those two extremes.
Entrapping Niches

- Highly stigmatized; often treated as an outcast by others
- Confirms or reinforces negative views of self
- Social world is often restricted and limited
- Often completely defined by social category
- There are usually no graduations of reward and status; few expectations of personal progress.
- Economic resources are sparse
Enabling Niches

- Not stigmatized; viewed as inclusive member
- Others used for association, support, and self-validation.
- Social world becomes less restrictive
- Not totally defined by social category
- Incentives to set longer term goals and work toward these goals
- Opportunities to learn skills and expectations that aid movement to other niches
My Anchors and Niches

| Family           | • Meaning, purpose, identity (husband, father, son, brother)  
|                 | • Emotional support  
|                 | • Social support  
|                 | • Facilitates learning  
| Work            | • Financial stability  
|                 | • Day time social network  
|                 | • Meaning, purpose, identity  
|                 | • Learning  
| Neighborhood     | • Social  
|                 | • Broadens perspectives on the world  
| Faith Community  | • Personal introspection  
| Recreational Niches (hobbies & interests) | • Fantasy baseball  
|                 | • Beer  
|                 | • Concerts  
|                 | • Sports events |
Aspects of Our Lives We ‘Anchor’

- Meaning, Purpose, and Identity
- Social
- Recreational
- Financial
- Learning & Growth
- Health & Wellness
- Safety & Security
- Spirituality
- Emotional
Social Capital

“Social capital is the sum of the resources, actual or virtual, that accrue to an individual or a group by virtue...of more or less institutionalized relationships of mutual acquaintance and recognition” (Bourdieu, 1992)

• A person’s social capital partially contributes to their ability to ‘purchase’ their way into other niches

• Common phrase: “It’s not WHAT you know, but WHO you know”
Where are the anchors of the people we serve?

- Are they grounded more within natural community settings or within our formal systems of care?
- Are they embedded in enabling or entrapping niches?
- How secure or stable are these anchors?
Shift in Anchors for Elizabeth

**IDENTITY**

- Family, Illness
  - Family, apartment, church, choir, nursery, pet

**SOCIAL**

- Family, friend (long distance), case manager, crisis hotline, hospital
  - Family, neighbor, church, dog

**RECREATIONAL**

- Family, psychosocial groups, case manager
  - Apartment complex, neighbor, choir

**SAFETY**

- Security: family, case manager, crisis services, hospital
  - Dog, family, church, choir, neighbor
How can we identify anchors?

A well-done strengths assessment, developed over time...

...can eventually reveal the placement of people’s anchors...

.....can reveal the essence of who people are and incongruities between what people desire (the active ingredients they seek)...

...and what their niches provide for them.
Use of the Personal Recovery Plan

The Personal Recovery Plan (PRP) is a shared agenda/roadmap between the worker and person with the purpose of helping people achieve meaningful and important goals related to their recovery.

When used regularly, the PRP can help drive the nature of the work, activities, and interventions between the worker and person.

The PRP can help the worker and person celebrate smaller steps of success while making forward movement on larger recovery goals.

The PRP can help clinicians be more purposeful and prepared for their work with people.
Use of the Personal Plan

The Personal Plan is introduced when:

• The person has identified a passionate goal they want to achieve (I want to get a job so I can better support my family).

• The identified goal would more likely be achieved if broken down into smaller steps (I want to receive the benefits that I’m entitled to).

• The goal is vague and needs to be explored further (I want to be happy).
Why Goals are Not Achieved

- Not the person’s goal
- Resources not available or accessible to achieve the goal
- Lack of skills
- Fear of failure/success
- Too many goals
- Costs outweigh the benefits
- Person changes mind
- Passion for achieving the goal diminishes over time
- Person becomes overwhelmed with the goal
Words That Are **Unhelpful**

- **Non-Compliant**
- **Unmotivated**
- **Resistant**
- **Low Functioning**
- **Unrealistic**

These words limit our ability to be creative and help people explore possibilities.
Elizabeth’s
Personal Recovery Plan

Wading into unknown waters.....
## Personal Recovery Plan

**For Elizabeth W.**

<table>
<thead>
<tr>
<th>My goal (This is something meaningful and important that I believe as part of my recovery)</th>
<th>I want my own apartment</th>
<th>Why this is important to me</th>
<th>Yes I can have more freedom and I can move to myself and my family but I can’t do this. Water will not be the only way that I can be responsible for my recovery.</th>
<th></th>
</tr>
</thead>
</table>

### Personal Recovery Plan

<table>
<thead>
<tr>
<th>Item</th>
<th>Task</th>
<th>Completion Date</th>
<th>Who is Responsible</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Talk to landlord at Hackensack Towers and ask if they are aware</td>
<td>Elizabeth</td>
<td>8-4-08</td>
<td>8-4-08</td>
<td>There currently is a waiting list for new residents.</td>
</tr>
<tr>
<td>2. Fill out application for Hackensack Towers</td>
<td>Elizabeth and Evanne</td>
<td>8-7-08</td>
<td>8-7-08</td>
<td>Turned in application. Will be notified when there is a vacancy. Could be at least two months.</td>
</tr>
<tr>
<td>3. Make list of all the things needed for new apartment</td>
<td>Elizabeth and Evanne</td>
<td>8-12-08</td>
<td>8-12-08</td>
<td>See attached list</td>
</tr>
<tr>
<td>4. Talk to parents about time to tell them about your move</td>
<td>Elizabeth</td>
<td>8-14-08</td>
<td>8-15-08</td>
<td>Mom will be able to help with necessary items (clothes, cup, stove, etc.)</td>
</tr>
<tr>
<td>5. Call Mr. Parker to see what used furniture he has</td>
<td>Elizabeth and Evanne</td>
<td>8-18-08</td>
<td>8-19-08</td>
<td>She has a small table, chair and lamp on the 2nd floor.</td>
</tr>
<tr>
<td>6. Talk to someone about purchasing furniture set</td>
<td>Elizabeth and Evanne</td>
<td>8-18-08</td>
<td>8-19-08</td>
<td>Mom is more with purchasing furniture of the first place to keep is</td>
</tr>
<tr>
<td>7. Talk to broker about renting apartments in a nearby apartment building</td>
<td>Elizabeth</td>
<td>8-19-08</td>
<td>8-20-08</td>
<td>Broker is willing to show furniture. He wants help cleaning space.</td>
</tr>
<tr>
<td>8. Get to St. Marks to purchase furniture</td>
<td>Elizabeth, Evanne</td>
<td>8-25-08</td>
<td>8-25-08</td>
<td>See attached list for what new furniture they have available.</td>
</tr>
<tr>
<td>9. Pick up furniture</td>
<td>Elizabeth and Evanne</td>
<td>8-25-08</td>
<td>8-25-08</td>
<td>Furniture is in Evanne’s garage</td>
</tr>
<tr>
<td>10. Make a list of what support will be needed when moving to new apartment</td>
<td>Elizabeth and Evanne</td>
<td>8-25-08</td>
<td>8-25-08</td>
<td>Thyne &amp; Evanne need; furniture</td>
</tr>
</tbody>
</table>

The goal listed above is something important that I see in achieving as part of my recovery.

---

All Signatures: [Signature]

Date: [Date]

Gerrie Parker’s Signature: [Signature]

Date: [Date]
<table>
<thead>
<tr>
<th>No.</th>
<th>Task Description</th>
<th>Responsible</th>
<th>Start Date</th>
<th>End Date</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
<td>Update crisis plan</td>
<td>Elizabeth</td>
<td>4-8-08</td>
<td>10-4-08</td>
<td>Moving, will continue to work slowly as it comes.</td>
</tr>
<tr>
<td>12</td>
<td>Call landlord to check terms of applications</td>
<td>Elizabeth</td>
<td>4-2-08</td>
<td>5-1-08</td>
<td>Not returning phone, has been sent to voicemail.</td>
</tr>
<tr>
<td>13</td>
<td>Update crisis plan</td>
<td>Elizabeth</td>
<td>4-8-08</td>
<td>P-4-08</td>
<td>Elizabeth identified several issues, will need to cover all terms to ensure understanding. Taking to landlord, making notes with her info, meeting on Sunday, etc.</td>
</tr>
<tr>
<td>14</td>
<td>Make copy of crisis plan for Elizabeth</td>
<td>Elizabeth</td>
<td>3-8-08</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Call landlord at least two times this week</td>
<td>Elizabeth</td>
<td>4-15-08</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The goal listed above is something important for me to achieve or part of my recovery.

Signature

Date

Service Provider’s Signature

Date
PRPs and Treatment Plan

The Treatment Plan is an overarching roadmap that is communicated primarily at the program and funding levels.

The Personal Recovery Plan is a navigational tool that is primarily communicated at the practice level between the worker and the person.
## Critical Components of the Personal Recovery Plan (Content)

| Goal that has meaning and is important, and relevant to the person | “I want my own place”
| | “I would like more friends to do things with”
| Statement of the active ingredient(s) behind the goal | “I want to prove to others and myself that I can do it.”
| | “I want to be around people who sincerely want to be around me and accept me for who I am. I am tired of feeling lonely.”
| Small, measureable, steps that can be accomplished either by or at the next meeting with the person | Go to Stevens Furniture and ask for an application for employment
| | Make a list of items that will be needed for new apartment

for medical necessity
Group Supervision
Purpose of Strengths-Based Group Supervision

• Provide Support and Affirmation
• Generation of Ideas
• Learning
Nuts and Bolts of SBGS

Once a week

90 minutes to two hours

Small team of practitioners who are using Strengths Model tools/methods and their supervisor

Place free of distraction
KU Strengths-Based Group Supervision
Process Description

Step 1: Distribute Strengths Assessment

Step 2: State client’s goal and help needed

Step 3: Thumbnail sketch/What’s been tried

Step 4: Questions of Clarification

Step 5: Brainstorming

Step 6: Plan of Action
What to present at SBGS?

*Situations where:*

- People are having difficulty achieving or making progress toward meaningful and important goals
- There is difficulty engaging or developing a working relationship with a person
- Workers are having difficulty helping a person identify a goal or aligning with a person on a goal
- Ideas are needed to generate multiple options to achieve a goal or overcome a barrier or obstacle
- The group can benefit from mutual learning
Summary of What is Needed to Make SBGS Work

- An obnoxious supervisor who is recovery-oriented and has decent, or preferably strong facilitation skills
- Strengths Assessments for all client situations being presentation
- Leadership support for carving out the time needed for SBGS (90-120 min per week)
- Willingness to remove spirit breaking language and behaviors from the team
- Willingness to invest in the recovery journey of each person present and to be creative in thinking
What is the Goal?

“Help people build or re-build lives worth living, beyond our systems of care, that bring meaning, purpose, and a positive sense of self-identity”
Nothing Breeds Complacency
More than Success
Thank You!