

The genesis of asset-based approaches to health care

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Liverpool



**Asset Based
Consulting**

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Fallen angels

“I’ve a patient who needs a ‘chat’... have you got anyone who’s completed the ‘verbal communications with patients in a lighthearted, supportive, but not disempowering manner’ course?”



Appreciative Interviewing



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 telling stories about how you have worked together as equal partners to achieve your dreams of a healthy community.
What would these stories be?



‘Social prescribing’

An oxymoron – surely?



social

'səʊj(ə)l/

adjective

1. relating to society or its organisation / relating to rank and status in society.
2. needing companionship and therefore best suited to living in communities.

prescribe

prɪ'skrɪb/

verb

gerund or present participle: prescribing

1. (of a medical practitioner) advise and authorise the use of (a medicine or treatment) for someone, especially in writing. Recommend (a substance or action) as something beneficial. State authoritatively or as a rule that an action or procedure should be carried out.



The WHO definition of health - 1948

~~“Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.”~~

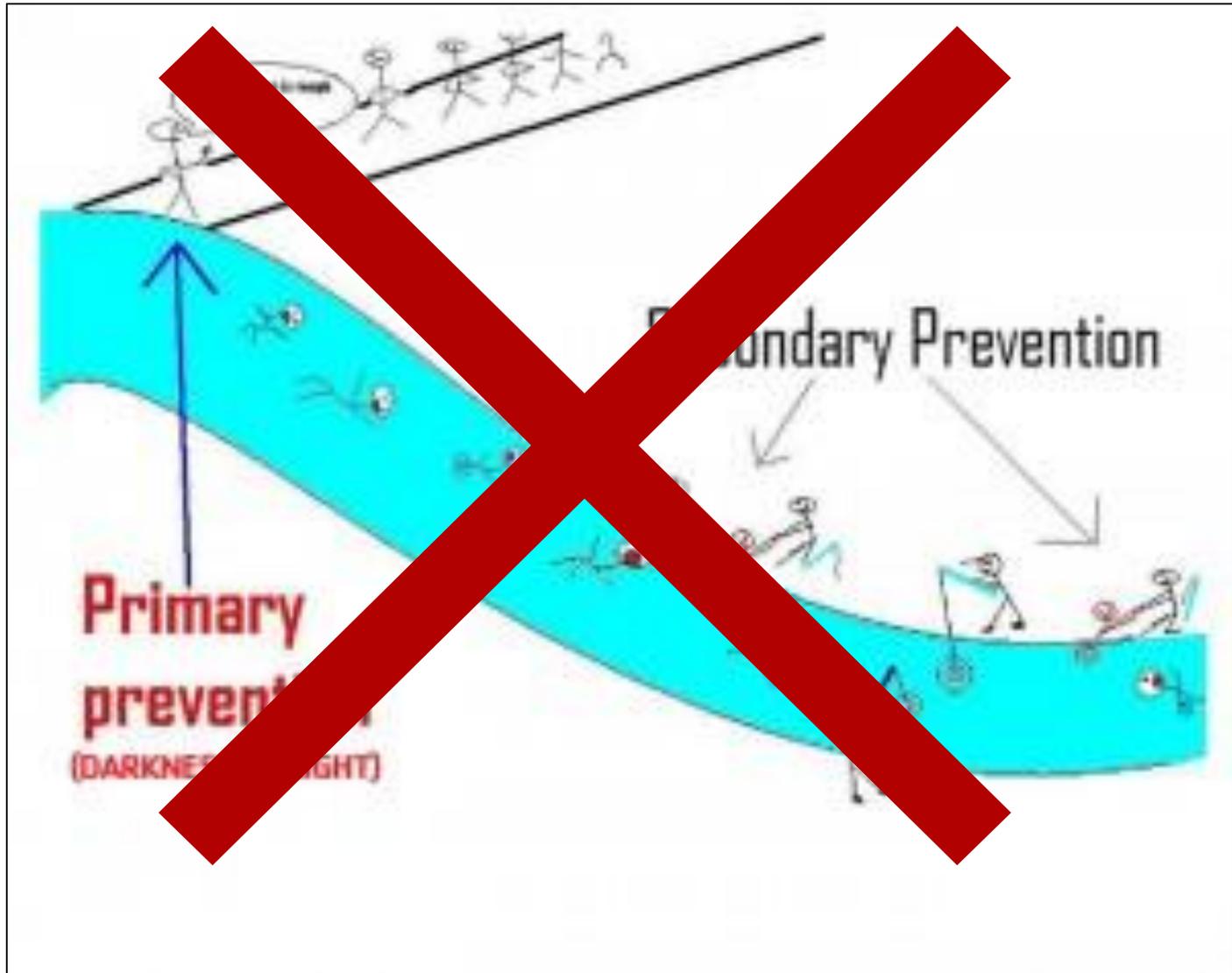


The Ottawa Charter - 1986

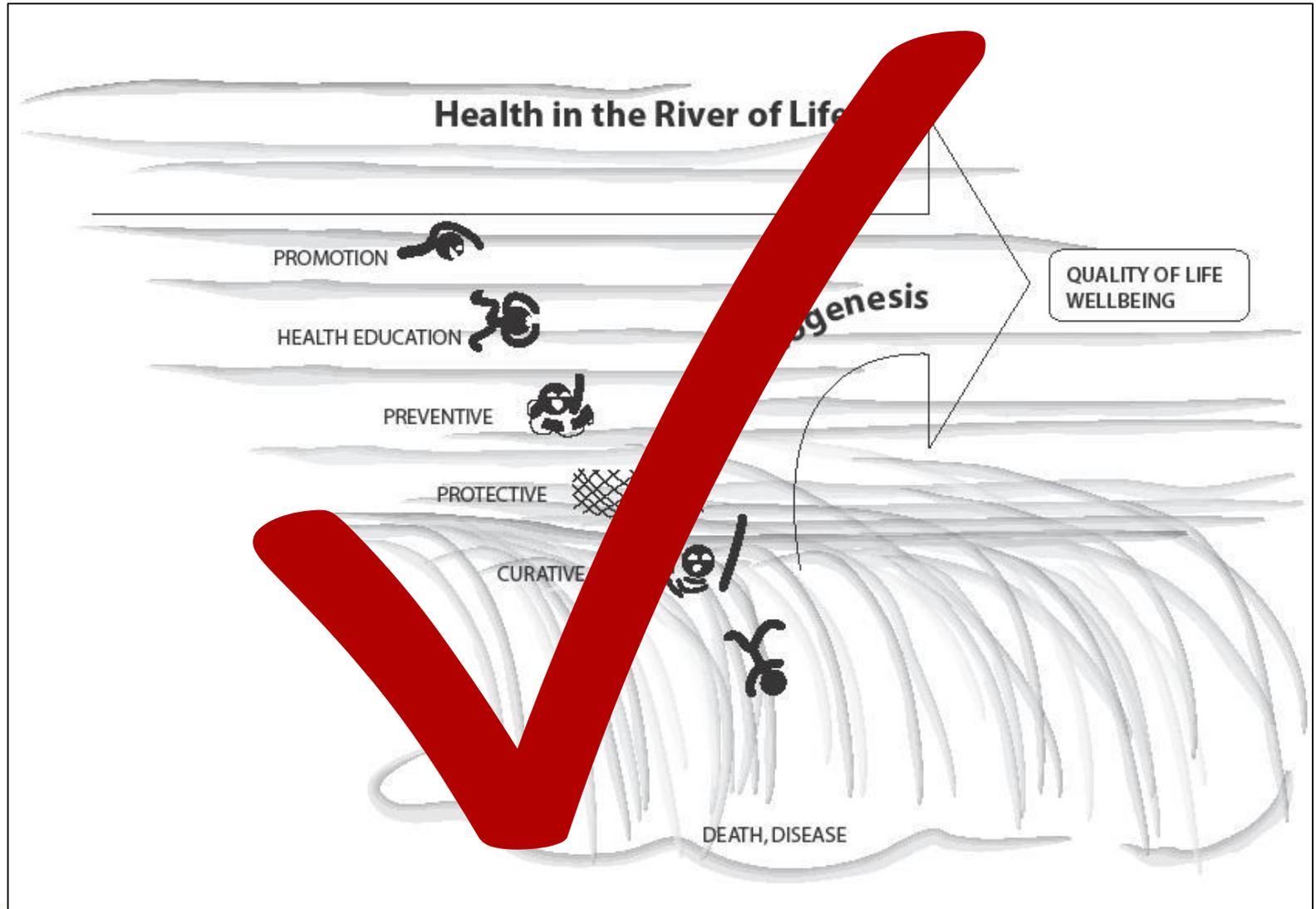
“Health is a resource for everyday life, not the objective of living. Health is a positive concept emphasizing social and personal resources, as well as physical capacities.”



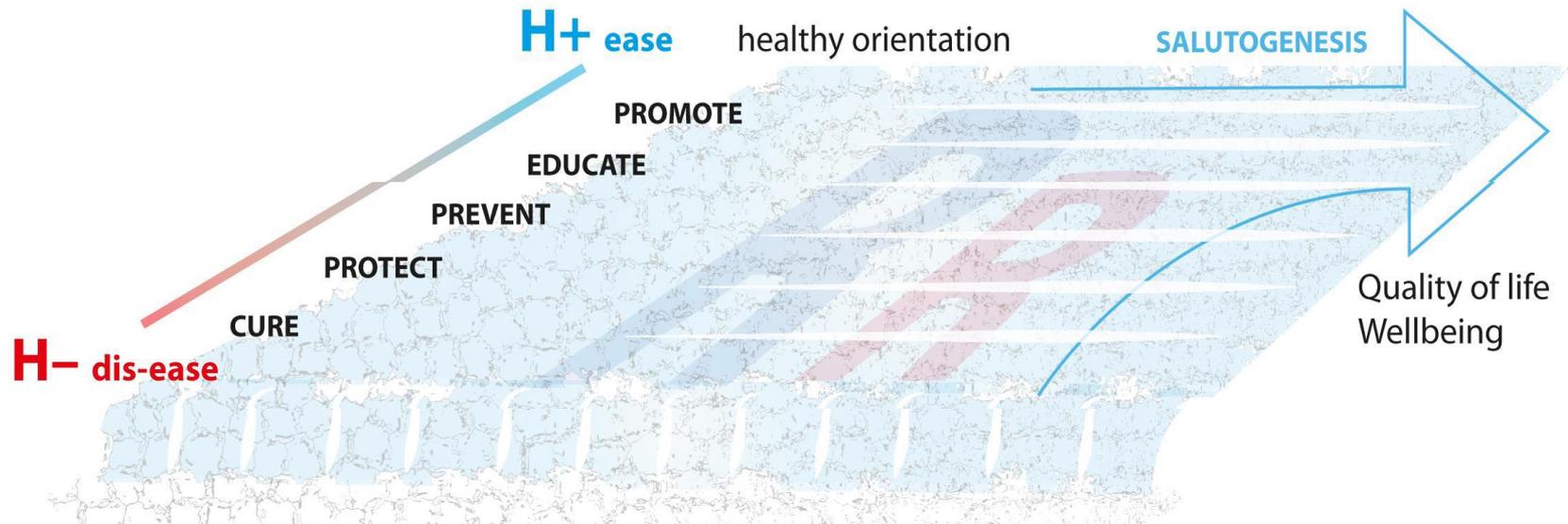
The 'River of Life'



The 'River of Life'



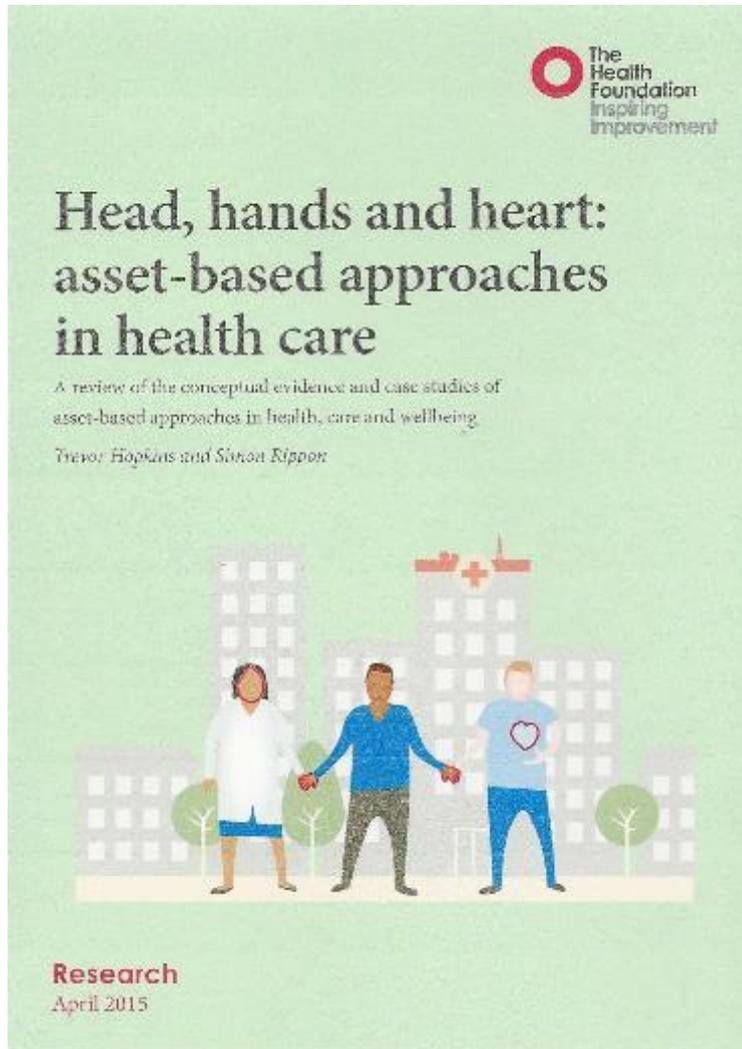
Health in the 'River of Life'



© Bengt Lindström, Monica Erikson, Peter Wikström



“Head, hands and heart: asset-based approaches in health care”



- Theory and evidence
- Asset-based approaches in action
- Recommendations



What is asset-based practice?

There is a wide base of activity that can be described as asset-based.

Broadly, asset-based working draws on three related strands of theory, evidence and practice:

- Salutogenic theory and the idea of positive health and wellbeing
- The concept and evidence for health assets
- The principles and practice of Asset Based Community Development and related approaches



Salutogenic Theory

- Developed by American/Israeli medical sociologist Aaron Antonovsky from the 1970s
- Working with women who were holocaust survivors
- Health is not a “state” as defined by the World Health Organization - it is a continuum and a resource for life.
- Health in the ‘river of life’
- Sense of Coherence (SOC) 1992
- Generalized Resistance Resources (GRRs) 1987



Sense of Coherence

- Comprehensibility
- Manageability
- Meaningfulness



Generalized Resistance Resources

- Found within people as resources but also to their immediate and distant environments and of both material and non-material qualities
- The key factor is not what is available but to be able to use and re-use them for an intended purpose
- GRRs provide a person with meaningful and coherent life experiences as resources at their disposal. They are genetic, constitutional and psychosocial.
- They include material factors, knowledge/ intelligence, ego identity, coping strategy (rational, flexible, far sighted), social support, ties, commitment (continuance, cohesion, control), cultural stability, magic, religion/philosophy/ art (a stable set of answers) and a preventive health orientation.



The concept of health assets

- Developed mainly in Scandinavia over the last 20 years
- Based on salutogenic theory
- First presented in the UK in 2006 by Antony Morgan and Erio Ziglio
- Health assets are any factor or resource which enhances the ability of individuals, families and communities to maintain and sustain health and wellbeing
- This refers as much to mental, social and other resources as it does to material and physical resources.
- More recently is being applied to ideas about resilience*



Asset Based Community Development...

- Formalised by John McKnight & John Kretzman – Northwestern University, Chicago (1993)
- A method of community and network building that starts by locating the assets, skills and capacities of citizens and local organisations, rather than focusing on their needs and deficits.
- The aim is to help people to improve their resilience, independence and wellbeing by focusing on what can be done through communities working together.



...and related approaches

- Appreciative interviews
- Asset Mapping
 - Individual
 - Organisational
 - Community
- Appreciative Inquiry
- Community conversations
- Peer support & mentoring
- Community 'connectors'
- Community development to tackle health inequalities



Commonalities between salutogenesis, health assets and asset-based approaches

- They all share a focus on working with peoples' capacities and resources. Health is seen as a product of the mobilisation of a range of community and individual assets and resources
 - The assets that McKnight & Kretzmann value align closely with the resources that salutogenic thinkers have demonstrated to be the sources of health and wellbeing.
 - These approaches are interested in mobilising the whole community to create health – rather than limiting the subjects of health promotion to those deemed to be at risk, or unhealthy.
 - They see health and well-being as a product of social action.
 - They reinforce the case that health inequality is a product of income and other structural inequalities.
-

Commonalities between salutogenesis, health assets and asset-based approaches

- All put a high value on a sense of belonging, capacity to control, finding meaning and self-worth – these psychosocial assets promote well-being and health but they also bring connected individuals and flourishing communities.
 - Each puts a high value on social relationships – the informal and formal networks and connections that reduce isolation and vulnerability to shocks.
 - All three have concluded that strong communities – whether of geography, identity or interests – generate resources, through fundraising, mutual aid, lobbying power, voice and empowerment.
-

ABCDEFGH

- Bengt Lindstrom is now proposing an approach based on salutogenic theory that combines the evidence for health assets and the practice of community development that is asset based:

Asset Based Community Development and Evidence for Good Health

Evaluation – ‘A Theory of Change’

Theory of Change is about the central processes or drivers by which change comes about for individuals, groups or communities. This is well suited to asset-based approaches given the iterative and collaborative nature of the process.

A ‘Theory of Change’ to describe and evaluate asset based practice has four key stages:

- reframing towards assets: *thinking goals and outcomes*
- recognising assets, *going beyond asset mapping*
- mobilising assets: *using assets for a purpose*
- co-producing assets and outcomes, *on the pathway to long-term goals*

The stages are not linear, but may be ordered to suit the particular situation and context of the initiative.



Figure 2: The four elements in a theory of change approach for asset-based working

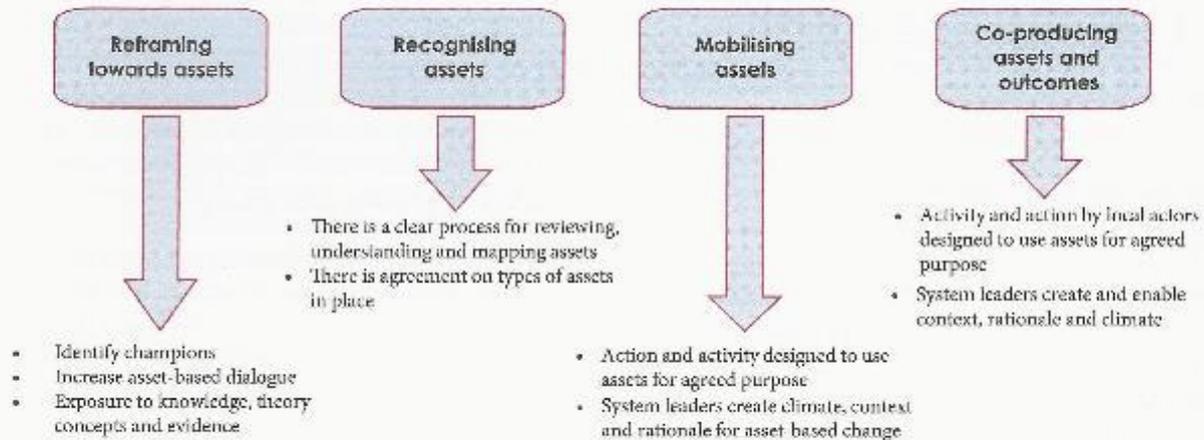
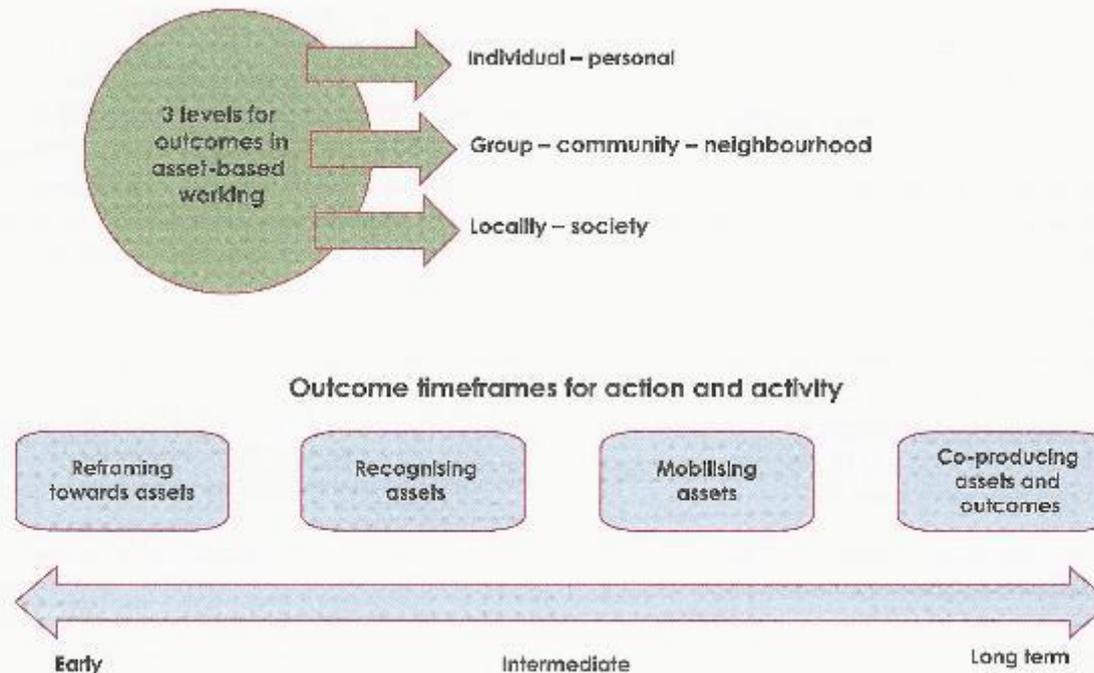


Figure 3: A theory of change for asset-based working – key elements and stages

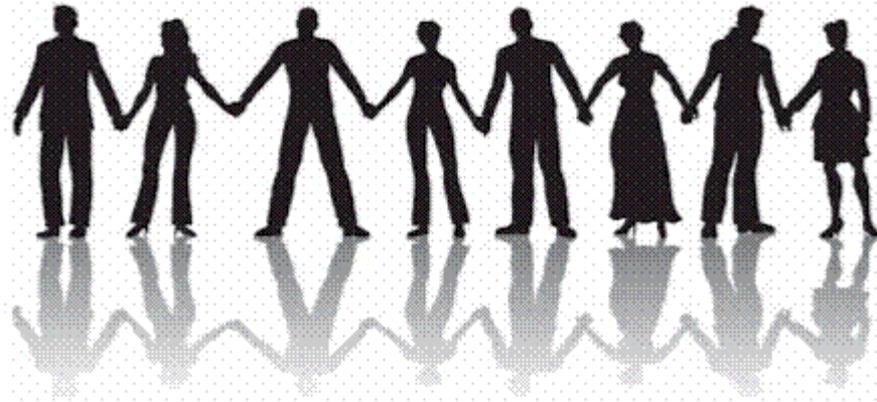


Criticism of asset-based approaches

- The absence of strong evidence to suggest that a focus on assets or asset-based approaches are effective means of improving health or reducing health inequalities.
- The practice of using asset-based approaches either unwittingly or deliberately disregards the power dynamics in society, and its emphasis on empowerment overshadows a necessary conversation about rights and social justice.
- The idea of asset-based approaches has been around for nearly 50 years and the fact that people are still learning about it means that we are not presenting it in such a way that connects with wider practice.



“The asset approach is a set of values and principles and a way of thinking about the world.”



It takes everyone to build healthy, strong and safe individuals, families and communities.

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