



## Strengths-Based Social Work: Proposing Protective and Engagement Practice with Older Adults

Vishal M. V.<sup>1</sup>

**ABSTRACT:** This article proposes Strengths-Based Protective (SB-P) and Strengths-Based Engagement (SB-E) social work practice model with older adults with particular reference to living in older care homes. Strengths-based social work practice emerged as an alternative paradigm in social work practice based on the philosophy of individual's strength as the vital tool for helping them to overcome psychosocial problems (Salleebey, 1996). Strengths perspective focuses the individual's inherent abilities and resources that allow them to cope effectively with the challenges of living (Rothman, 1994). The strengths perspective is especially pertinent in work with older adults since they have lifetime rich experience which could be addressed for overcoming many of the current difficulties (Kaplan & Berkman, 2016). However, inapplicability strengths-based social work practice not much widely used in social work practice owing to the presumption that high skill is required for carrying out it in general social work practice context. In this regard, this paper is trying to elicit applicability and friendliness to use strengths-based social work practice in older care home setting through the proposed models (SB-P and SB-E).

**Keywords:** Strengths-Based Social Work Practice, Older Adults, Protective, and Engagement practice



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### 1. INTRODUCTION

Social work practice with older adults covers a broad range of functions with the primary goal of addressing the specific challenges of the aging process by promoting independence, autonomy, and dignity in later life through micro or macro practices (NASW, 2018). Though there are different approaches used to address their psychosocial problems of older adults, strengths-based social work practice is distinct approach among them. Strengths-based social work focuses on the promotion of quality of life of older adults through helping them to realize need and resources available in their environment to overcome their psychosocial needs. For that, social work practitioners relay on various methodological approaches to reach optimum outcome for their intervention. The strengths-based approach is one among them and regarded as a paradigm shift in social work practice. Strengths perspective focuses on the individual's inherent abilities and resources that allow them to cope effectively with the challenges of living (Rothman, 1994).

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<sup>1</sup> Medical Social Worker, Department of Community Medicine, ESIC Medical College, Gulbarga

The strengths perspective is remarkably pertinent in working with older adults since they have a lifetime rich experience that can be used in addressing current difficulties (Kaplan & Berkman, 2016). This approach is rooted in the belief that capacity (resources- strengths) throughout the process of helping, pathology has to have an essential point of interest (Salleebey, 1996). Strengths-based social work practice allows the social workers to look at the older adults' psychosocial issues with the lens of resources rather than pathological. General principles of the strengths that pertain to older adults include the following (Chapin, Nelson-Becker, Macmillan, & Sellon, 2016):

1. All individuals have strengths.
2. All experiences, even the negative ones, may present opportunities for growth.
3. Practitioner's diagnosis and the assessment process in direct practice often make assumptions that limit rather than expanding the capacity.
4. Collaboration rather than coercion leads to highly motivated and engaged clients.
5. All environments have resources.
6. Civil society engages in care for all of its members

Since it is a joint activity with the client and the social worker, the social worker is getting enough room to explore the client strengths and planning the appropriate course of intervention (Kaplan & Berkman, 2016). So that the strengths perspective can utilize to alleviate the trauma in old age and improve the mental health in multiple settings with a diverse group of older adults (Chapin R., 2014). It can be used to help educate and provide individuals with dementia and their family caregivers, new skills (Judge, Yarry, & Orsulic, 2010). Strengths approach has been used with older adults living in the community to reduce symptoms of depression and increase the quality of life (Chapin, 2001). However, enlisting strengths of older adults in social work practice is a challenge to social work as it is more abstract rather concrete. This conceptual paper is made out of authors' professional engagement with older adults during research activities in older care homes in Kerala, India.

## **2. Assessing Strengths of Older Adult's**

Assessing strengths is the epitome of strengths-based social work practice. In common parlance, the vast amount of life experience is the critical strengths of older adults. People make the stereotyped view on them as inactive and dependent due to physical decline. The strengths-based social approach gives the social worker to see the client from system theoretical perspective. It helps the social worker to provide more light to resources (strengths) available within and around the older adults. Social workers employ various techniques to assess the strengths of the client such as interview, group discussion, strengths- chat, inventories, and checklist, etc. Indeed, Graybeal, (2000), outlined a ready reckoner called ROPE model of strengths assessment. The ROPE model is based on bio-psych-sociocultural and spiritual domains. For the purpose of easy understanding, client strengths can be classified into innate strengths, acquired strengths or learned strengths and supportive strengths. Therefore, exploring three domains of strengths is the foremost step in the strengths-based social work practice (S-SWP) with older adults.

*Innate strengths:* Innate strengths are the capacities endowed in older adults by birth. Such strengths include physical capabilities, mental capabilities, intelligence, personality, special talents, skills, etc. These strengths are the critical resource for individuals which make them unique. However, a decline of these strengths may be possible along with aging due to an associated decline of sensory organs.

*Learned strengths:* Learned strengths are those acquired from socialization and lived experiences such as education, vocational knowledge and expertise, professional relationships and learned skills in peculiar activities. Moreover, coping strategies style (e.g., religiosity, spirituality, etc.) can also be included in this category.

*Supportive strengths:* The supportive strengths are the older adults' direct personal relationships (significant others) such as family, friends, professional and social organizations, government organisations, etc. Besides these economic supports, such as income from work, life insurance, health insurance and government pensions, and social security measures, are coming under this category. The above-conceptualized strengths are interconnected and support each other.

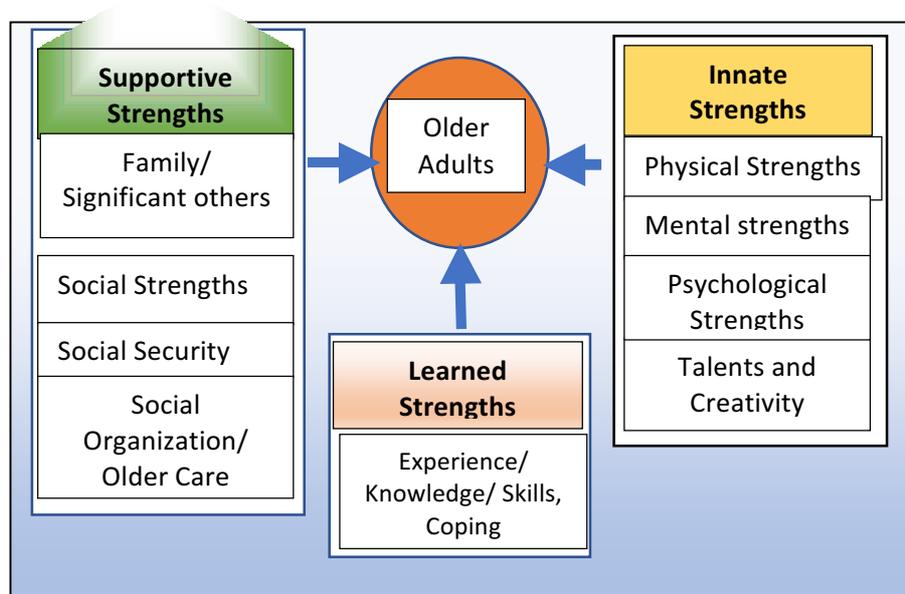
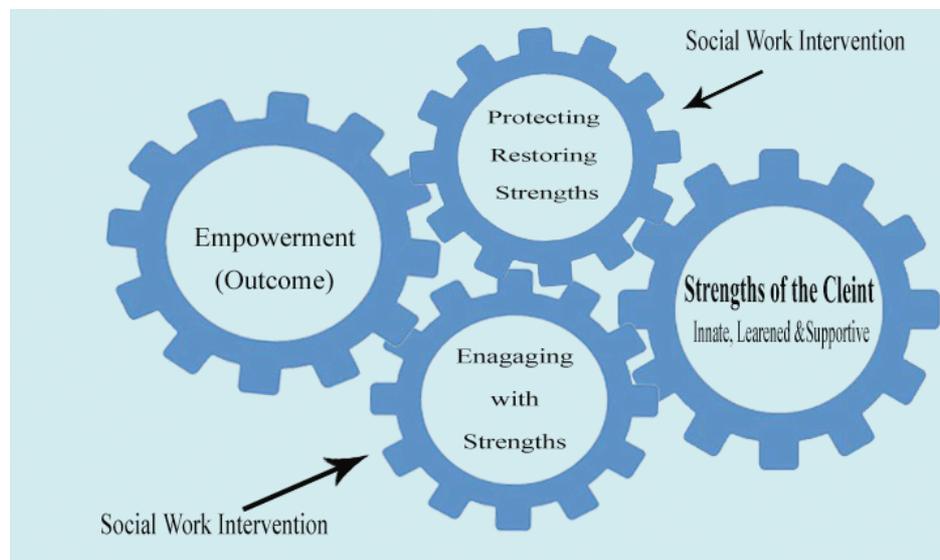


Figure: 1 Conceptual Diagram: General Domains of Strengths

### 3. Strengths-Based Protective and Engagement Practice

The present proposed social work intervention practice outlined here is the outcome of author's working experience with older adult living older care homes across Kerala, India. Based on that strengths-based social work practice is made into Strengths-Based Protective Practice and Strengths-based Engagement practice. The primary focus of protective practice is to preserve the available strengths of older adults to continue or improvise their daily living. The engagement practice aims to bring the older adults to be productive through engaging with their strengths to overcome their psychosocial problems. The outcome of these approaches is to empower the client with their available strengths. Both of the practices are interconnected, akin to a gear (see figure - 2). A comprehensive assessment of the client and their life experiences are crucial for a better result in strengths-based practice. So, use of positive language with the client that conveys the

social worker's belief in the client's abilities and work in order to build on the client's inherent abilities. Focus on the client's hopes and dreams are also central to the strengths perspective success (Arnold, 2008).



*Figure 1: Strengths-Based Social Work- Protective and Engagement Practice in Action*

The main wheel (Client strengths) is connected to two wheels which are engaging wheel denoting the social work intervention process is being carried out by the social worker. Social worker judiciously engages the appropriate wheel (protective and engaging practice) for getting the maximum outcome from the intervention. The ultimate outcome is expected to be the empowerment of the client as equal to the client before the problem status. More specifically, the social worker should creatively rotate the client's strengths for promoting quality of life and ultimately empowerment of the client

#### **4. Strengths-Based - Protective (SB-P) Practice**

Utilization of older adults' strengths to protect their internal and external capacities is the primary aim of this practice. After the assessment of the available strengths of older adults (client), the social worker is doing an assessment on what is the need and applicability of available strengths to meet the need with the collaboration of the client. Based on the assessment, with the help of available strengths, social worker plan intervention to protect the available strengths from declining. Consider the below case excerpt.

##### *Case-1 (Excerpt):*

75- year- old Janaki has been living in an older care home for two years. Recently, she faced health problem and made her pessimistic about herself. She thought that she would be a burden for all other living along with them. The positive sign she showed that she wants to recover from her disease soon, so she observed medication under a strict rule. After facing the health problem, she reduced her interaction with other inmates and avoided her religious belief. According to her, "...none is there to help me out, even God, which I had been relayed on...." Caretaker described

her as the mother of divine insight as she used to use religiosity and spirituality as the major power of her life. Though she does not have a formal education, she likes to read books especially religious. After affected by the disease she has been worried about reading books. She used to remind others about some other books she wants to be read before the death...

*Strengths Assessment:* Religiosity was the client active strength (AS) (learned strengths) Which channelized for keeping psychosocial emotion under control. The onset of health problem made the client be rebellious on religious belief (learned strengths). It implies that the religious and spiritual strengths are decaying after the health problem. It has been found that religiosity was associated with her strong will to overcome problems (innate strength). Besides the living environment (older care home) are rich with resources, such as caregivers, inmates, social supports other social agencies (hospital, NGOs) and the community at large (supportive strengths).

*Social work intervention:* In this case, a social worker can plan an intervention to promote the active strengths, i.e., religiously and spirituality. However, it shows decline trend due to the impact of psychosocial trauma. Therefore, the immediate attention should be paid on using the supportive and active strengths to make the client back to the normalcy. Casework, Group work, Supportive counseling, Mindfulness-based therapy may be used as the main components of the intervention program to protect the available strengths and reviving the inactive strengths of the client.

*Strengths-based – Engagement (SB-E) Practice:* Through strengths-based engagement practice (SEP), social worker connects the older adults with the available strengths and the supportive strengths of the client system. Here, a social worker looks at client present problem itself as an opening to help the client with his/ her strengths. Consider the below-given case excerpt for better understanding.

*Case -2 (Excerpt):*

75-year- old Govindan, a sculptor by profession accidentally came into the older care home after suffering from a health problem. According to him, he got a narrow escape from death call. After recovery from illness, he decided to go back to his normal life. However, the fear of relapse of the disease pulled him back and now he has completed one year of older care home life. The inmates and older care home staffs are so hopeful that he can make more beautiful sculptures even now and ready to give all support to him to do that.

*Strengths assessment:* client's psychological barrier to having a traumatized life situation completed him to withdraw from natural social life. He is afraid to continue with his regular engagement (sculpture) even though it has supported by the older care home. This may be due to the unfamiliarity of the present social environment (older care home). His profession (sculpturing) is the prime strengths of the client (learned strengths), and still, he is physically able (innate strengths) to carry it out. Besides that, the client is in the midst of supportive strengths (older care home environment, inmates, and older care home staffs).

*Possible intervention:* Here, social work role is to engage the client in the present older care home environment with client's strengths. The possible social work intervention is breaking his psychological construct of relapse of disease and inhibition to engage in the present social environment. Social group work intervention with the client is to be a better tool to make the client being engaged into the older care home environment (Duyan, Kara, & Duyan, 2017).

## **5. Discussion**

The proposed strength-based social work practices conceptualized as a ready reckoner for the professional social worker who is engaged in generic social work as well as specialist social work practice with older adults living in older care homes. Both the practices stem from general assumptions and principles of strength perspective emphasizing empowerment of the client (Benard, 2006). The assumption of the existence of strengths even in the midst of problems is utilized to formulate the protective engagement strength-based practices model.

The strength-based protective practice, focus mainly on restoration or protection of client strengths from further decline through social work intervention through helping the client to take action to protect from its further decline so that the client uses the available strengths around him/her as main resources. It accepts that that decay of key strengths as the cornerstone of psychosocial problems. Indeed, it can reduce the client's active strengths too.

The strength-based engagement practice is the continuation of protective practice, but it differs slightly in its aims to empower the client through engaging them with their key strengths which are blocked due to psychosocial and physical reasons. This practice focuses not only protecting the key strengths but also finding opportunities to engage with the most suitable physical engagement. So that this practice is more oriented towards the physical engagement of the older adults with his key strengths which once ceased due to psychosocial or physical problems. In this practice, client strengths seemed to be intact, but psychological barriers stop the client to use the strengths productively so that breaking the barriers is crucial. For that, the social worker can utilize available strengths to activate the key strengths to overcome psychological barriers of the client.

Strengths-based social work practice is the outcome of positive outlook of social work practice. It allows the social worker to make a close look at the different domain of strengths, which were operated in the client's environment. The main problem faced by the older adults in older care homes is the feeling of worthlessness, and it speeds up decaying of their strengths due to psychosocial disengagement. This will create the feeling of being a burden to the family and the society. Therefore, ensuring engagement with the older adult's strengths is sought in the proposed strengths-based social work practice. So, strengths-based social work approach is a better tool for social workers to tackle the mental construct of being a burden to being a productive person for the family and the society.

The assessment of older adults' strengths is the crucial step in strengths-based social work with older adults. Effective utilization of older adults' strengths can bring positive changes in the mental well-being. The strengths harvesting is to be critical in practice. Here, the social worker is the potential strength in strengths-based social work practice. Hence, the social worker who is venturing into strengths-based social work practice should be skilled in strengths assessment and creative to frame appropriate social work intervention collaboratively with the client. The conceptual representation of older adults' strengths such as personal strength, learned strengths and supportive strengths vary from person to person. So that the principle of individualization should always be undertaken throughout the practice. The strengths-based protective and engagement practice can be used either single or in combination in a single case to get a better outcome.

## 6. Conclusion

Generic social work methods and approaches are built on the philosophy of human potential and its effective utilization to improve the client's quality of life. The strengths-based social work practice is, therefore, an extension of generic social work practice philosophy. The strengths perspective search for the individual capacities and finding the way to use it fruitfully. Older adults are bestowed with capacities which can make drastic positive changes to the well-being of them. The proposed strengths-based social work protective and engagement practice are intended to the professional social worker who likes to use different methods in their social work practice toolbox.

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#### *How to cite this article:*

##### APA:

M V, V. (2018, July). Strengths-Based Social Work: Proposing Protective and Engagement Practice with Older Adults. (A. Paul, Ed.) *Journal of Social Work Education and Practice*, III(3), 46-53.

##### MLA:

M V, Vishal. "Strengths-Based Social Work: Proposing Protective and Engagement Practice with Older Adults." *Journal of Social Work Education and Practice* III.3 (2018): 46-53.

##### Chicago:

M V, Vishal. 2018. "Strengths-Based Social Work: Proposing Protective and Engagement Practice with Older Adults." Edited by Arun Paul. *Journal of Social Work Education and Practice* III (3): 46-53.