

Box 3.5 Comparison of Deficit Model and Strengths Perspective

Deficit Perspective	Strengths Perspective
Cumulative symptoms = diagnosis	Individual uniqueness, abilities, talents, resources = strength
Interventions focus on the diagnosis of "problems."	Interventions focus on possibilities
Practitioner doubts client stories and becomes the "expert" in client's life	Practitioner views the client as the expert in his or her life and comes to know the person from the inside out
Adult problems are rooted in childhood traumas	Childhood traumas are not predictive of later life events
Treatment is directed by a treatment plan devised by the practitioner	Interventions are directed by client's aspirations
Client's possibilities in life are limited by his or her pathology	Life possibilities are open
Resources for therapeutic work reside in the knowledge and skills of the practitioner	Resources for therapeutic work reside in client, family, and community
Therapeutic work is focused on reducing symptoms and their negative impact on client	Therapeutic work is focused on moving the client forward in living into his or her possibilities and vision for his or her life

Source: Adapted from Saleebey's (1996) comparison of pathology and strengths.

individuals, families, and communities, it is all too easy to slip into a deficit model of practice. Box 3.5 provides a contrast of pathology (inherent in the medical model) with a strengths perspective.

When using a strengths perspective in practice, social workers use a wide range of practice principles, ideas, skills, and techniques to promote and draw out the resources of clients and those in their environments to initiate change, energize the change process, and sustain change once it has occurred (Milley et al., 2013).

It is not uncommon to automatically fall into a deficit perspective when in contact with individuals who have obvious physical challenges. Using the cultural competence case study below, identify how you might begin to transcend the "deficits" perspective and reframe challenges into strengths.

Developing Cultural Competence

Michael is a new student in the social work program, having recently transferred from another university in another state. He shows up in your social work practice class at the beginning of your second semester of your junior year. You have been in social work classes with most of your classmates for over a year now, and everyone is familiar and chummy with each other. Michael is new and an outsider. In addition, he has obvious differences with others in the class: he is wheelchair bound, significantly overweight, and of Haitian descent, speaking with a heavy accent and making it difficult to understand him. After one class together, you notice that Michael is eager to participate in class, seems well-read, and sports a big smile much of the time. From a culturally competent strengths perspective, how might you frame Michael's cultural differences around mobility, weight, ethnicity, and speech as strengths and/or resources? Use the strengths perspective demonstrated in Box 3.6 to guide you in your deliberations.

Box 3.6 Personal Power: A Case Study

Sylvia perceives herself to be self-sufficient and holds an expectation that she can and will take care of herself. She does this by accessing resources from 1) her friends, such as support, socializing, and fun, and borrowing items when needed; 2) her family, such as information on the pros and cons of owning a home, a place of comfort to return to for visits, referrals to family contacts when trusted information is needed; or a loan for a down payment on her new condo, and 3) the community, such as locating retail stores to purchase her needs and community agencies that will support her in meeting life and role expectations (i.e., a tax preparation firm or gaining membership into the local YMCA, where she develops an exercise routine to support her health). Sylvia may

experience interpersonal power in persuading her father to give her a loan or her knowledge that she is highly regarded by her peers and colleagues at work, which is affirmed by positive feedback and acknowledgments of her contributions to the work community. To the extent that Sylvia can access and gain control over resources in all areas of her life, she possesses political power. For example, Sylvia's ability to negotiate a raise with her boss at work, vote her opinion at a town meeting and influence local policy on how to spend town funds, or sit as a board member on a local social service agency in her community are just a few ways in which she and others can exercise political power. In each of these examples, access to and control over resources are actualized.

To intervene from a strengths perspective effectively, practitioners must first examine their own underlying perspectives and resulting language about problems in society. Do you fundamentally believe that people are powerful and able to direct their own lives in positive ways, or do you believe them to be powerless and in need of repair? Your perspective will be communicated in your language. For example, do you see people as having "problems" or facing "challenges" that, while difficult, can transform their lives? Problems bring a way of demoralizing us, making us feel like victims or failures, and generally bringing us down. Challenges are viewed as opportunities for growth and inspire us to pull on our internal and external resources to meet the challenge and attain our goals. Challenges lift us up. For example, an immigrant from Haiti with limited English-speaking skills may struggle with finding her place in a new country and community, but the external resource of strong family connectedness of her culture (even from a distance) can be used to move her forward toward stability and create the life she envisioned when she left her home country. When you see unusual behaviors, do you see pathology or strengths? When social workers focus on pathology as the central point in working with clients, it may block their ability to see the strengths that lie within the client or to use techniques in the helping process that will uncover client strengths. When designing interventions, are you focused on undoing the past or creating a future? A "past" perspective in treatment assumes that something in the past happened that caused the client to be "not okay" today. Overemphasis on the past prevents the use of the present in exploring resources and options and planning for the desired future. Shifting our focus to the present and future can have the power of releasing the past and giving up negative assumptions about ourselves that keep us stuck in positions we would rather not be in (Milley et al., 2013). Yes, problems exist, as do pathologies and past events that stop us in our tracks. We cannot ignore these realities, but we can redirect our thinking in ways that see beyond these negative and deficit interpretations of clients' lives. Dennis Saleebey captured the challenge in transition to a vision of strength in practice:

We are not asking you to forget the problems and pains that people may bring to your doorstep. Rather, we are asking that you honor and understand those dilemmas, and