Towards an asset-based approach to living with aphasia: exploring the relevance and implications for people with aphasia and families

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Round table overview

- Background to asset-based approaches
- COST CATs WG5 background and overview of the six projects
  - Reflections and key findings
- Round table discussion
- Summary and take-home messages
Asset-based / -focused approaches: an overview

• Individual and community strengths and capabilities as a foundation for improving health and wellbeing
  • Identify and build assets within a community

• ‘Salutogenesis’: ‘salus’ = health; ‘genesis’ = origin
  • Orientation towards creating health rather than preventing illness
  • “What makes you healthy?”; “What makes you feel good / well?”

• Individual’s capacity to comprehend, find meaning and manage their situation

• Internal and external resources available
Theory of asset-based change (Hopkins & Ripon 2015): key components

- Reframing thinking, goals and outcomes
  - Starting point for further exploration and change
- Recognising the assets available to achieve the change
- Mobilising assets for a purpose
- Co-producing outcomes - on the pathway to the long-term goal
How we developed our approach: COST CATs WG5

• COST CATs meeting London, March 2015
  • Introducing an asset-focus
• COST CATs meeting Cyprus, September 2015
  • Readings; WG5 approach discussed and agreed
  • Work plan set out for members to action
• COST CATs meeting Finland, February 2016
  • Reporting on four pilot studies exploring the potential of asset based approaches for people living with aphasia and family members in different contexts
  • Cultural; organisational; stages of aphasia
• Two further studies initiated
  • Trinity College, Dublin
  • University of Southern Denmark, Odense
Six studies

• Premise for our projects
  • “What makes you feel good / well / healthy?” (glass half full)

• Methods
  • Individual interviews (PWA & family members)
  • Facilitated group discussions
  • Participatory methods and appreciative inquiry
  • Reflective conversations

• Imagination and creative use of resources
Reflections on taking an asset-focused approach

- Re-framing thinking towards assets can be hard and may need time, but many people connected easily to and embraced this approach
- A powerful tool for empowering people with aphasia & carers
- This approach helped to shift conversations & interactions more specifically towards assets & possibilities
- Being flexible, getting the terminology & resources right is key
What people highlighted in our studies

• Being proactive: doing things for myself and by myself
• Personal strengths and inner assets
  • People with aphasia: positive outlook; humour; “I’m not shy”; self-belief; courage; determination
  • Family members: lifestyle changes; flexibility
• Making connections
  • To your previous life and self
  • To others through family or other people with aphasia
  • To places, activities and things
  • ...and making the most of opportunities
• There may be mountains to climb every day, but connections help to
  • Restore meaning and confidence
  • Establish friendships and relationships that make more things possible
Questions for discussion

1. What is the relevance and potential of an asset-focused approach for people with aphasia and their families as a means for promoting living well and successfully with aphasia?

2. How could an asset-focused approach complement other (e.g. clinical / therapy) approaches?

3. How could this approach be developed and implemented in a collaborative partnership?

4. Timing - when is the optimum time to introduce this approach?
IARC asset-focused approaches round table: some considerations

• Highlighting relevance of asset-focused approaches
  • How to start the conversation and stimulate discussions with people with aphasia, family members and clinical colleagues?
  • What resources could be used to support asset-focused initiatives?

• Do asset-focused approaches replace or complement existing practices?
  • How could asset-focused sensibilities enhance existing approaches?

• What changes might be needed (individuals, systems, resources) to implement asset-focused approaches where you are?

• Who are potential partners? e.g. health or community organisations

• Is there an optimum time to introduce this approach?
  • Possibly deploy different aspects at different times e.g. helping PWA ‘make connections’ early on; supporting community organisations to develop new resources
References


• Morgan A (2014) *Revisiting the asset model: a clarification of ideas and terms*. Global Health Promotion

• The King’s Fund. Transforming our healthcare system. Ten priorities for commissioners. 2015. London: The King’s Fund.