

Evaluation of the East Sussex Resilient Therapy Community of Practice

Executive Summary

1 Introduction

- 1.1 Resilience is the ability to achieve good outcomes despite serious threats to adaptation or growth. Resilient Therapy (RT) (Hart, Blincow & Thomas, 2007) is a way of working with disadvantaged children and young people that offers a coherent framework for finding the best ways of helping them to bounce back when life is particularly tough. RT translates theory into practice so that parents, practitioners and young people can use the method in their daily lives.
- 1.2 A Community of Practice (CoP) approach has been widely advocated within vocational education as a means to integrate and share academic, practice and research knowledge (Berry 2011, Hughes et al 2007). It aims to move individuals from accepted to transformed knowledge; that is a transformed way of understanding, interpreting or viewing something.
- 1.3 The East Sussex CoP included practitioners, based in a range of statutory and third sector organizations, and foster parents, who wanted to develop their use of Resilient Therapy (RT) in their work with disadvantaged young people and families. Fourteen participants commenced the programme with eleven completing it. The CoP met once a month (approximately 3 hours) for a total of fourteen months. The meetings offered a facilitated space to explore practice in relation to building resilience and understanding how resilient mechanisms work.
- 1.4 The aim was to:
- Offer an opportunity for a group of experienced and reflective practitioners and parents, who share an interest in working with disadvantaged young people, to develop their own areas of work with the addition of an RT approach.
 - Create a vehicle for knowledge exchange to embed the learning and strengthen the capacity of both the university and community sectors to tackle entrenched inequalities and develop further work together.
 - Improve the health and well-being of local disadvantaged young people and their families.
- 1.5 Learning about resilience and RT and using the RT method in practice was captured in 4 themes of becoming more:
- i) resourceful – developing knowledge of resilience and RT as a method or framework or guide for thinking differently about practice;
 - ii) responsive – using RT to develop an approach to practice;
 - iii) reflexive – critically reflecting on learning, being in a CoP, the method, the evidence base and practice;
 - iv) resilient – the impact of RT on participants and their organizations.
- 1.6 RT was not envisaged as a new intervention or a complete alteration to the way practitioners work; instead it offers a strategic series of practices to enhance current practice that is rooted firmly in the resilience evidence base (Hart et al 2007).
- 1.7 The final evaluation report (of which this is a summary) is based on a process evaluation which included observations of 12 CoP meetings, held between January-November 2010, and 13 one to one, semi-structured interviews with participants following the completion of the programme.

2 Becoming Resourceful

- 2.1 RT complemented practitioners' own philosophies and those of their organisations or validated or confirmed solution focused approaches to practice.
- 2.2 RT was said to provide the means to think strategically or tactically. It offered flexibility, but provided a shared language, a consistent set of strategies or actions to promote or build resilience.
- 2.3 The RT framework promoted more thoughtful and less defensive practice. This clarity of direction and approach greatly increased participants' feelings of efficacy.

3 Becoming Responsive

- 3.1 Using RT allowed practitioners to act or respond differently and in ways which were more conscious, certain and focused.
- 3.2 RT was a flexible, creative tool for working with clients at their own pace; it encouraged working *with* people rather than doing things *to* them and tended to focus on what people could do for themselves.
- 3.3 RT became a shared resource in consultations with children, young people and families and this generated improved discussions and responses.
- 3.4 Examples of 'resilient moves' were cited, demonstrating different ways of thinking about and doing practice that were more solution-based services and not top down or expert led.
- 3.5 For a few, it was more difficult to incorporate RT into practice because of dominant policy or organisational objectives and priorities. Increased workloads, the loss of jobs and changing roles also prevented further use of RT.

4 Becoming Reflexive

- 4.1 Resilience and RT ideas were seen as both controversial and conservative, focusing on the individual to adapt or change and not the system or surrounding structures. A broader strengths based approach and whole systems change was felt to be constrained by current target driven, outcome focused practice and cultures.
- 4.2 Contact with the University and access to research articles meant learning had 'some weight to it'. Most participants wanted to learn more and several asked for another CoP. They said they would recommend the programme to others. One or two would have liked more depth and more time to explore and develop their understanding of the academic literature.
- 4.3 Reflections on learning within a CoP revealed the following:
 - a) Protected time and the programme length helped the learning to 'stick' or made practitioners really consider and think about how they were going to make use of RT.
 - b) The mix of participants, learning about each other's roles, getting to know each other personally was found to enhance networking.
 - c) The inclusion of foster carers was seen by many as one of most unique and highly prized aspects of the programme.

- 4.4 Participants felt valued and found the CoP meetings a haven away from the day-to-day realities and gave them space to share ideas and permission to think, learn and reflect.
- 4.5 The RT Projects and resources developed by individuals were a useful method for integrating theory with practice, for promoting partnership working, and for implementing RT in daily working practices and organizations.
- 4.6 A few found the beginning sessions slow, or expected it to be more goal orientated, with more course work. Some particularly wanted RT and the programme given university accreditation and introduced into educational curricula and professional specialist CPD programmes. Others greatly appreciated the less formal structure.

5 Becoming Resilient

- 5.1 RT was argued to be beneficial, personally and professionally and in some cases, organisationally.
- 5.2 Most participants were able to identify how learning about RT had improved their own personal resilience, learning, motivation and was morale building.
- 5.3 Active dissemination of the learning was limited, hence the broader impact on organizational or workplace practices and cultures was difficult to ascertain. For some, the challenge of disseminating RT within their respective organisation was directly linked to changes and uncertainty over work remits and roles.

6 Recommendations for Future research

- 6.1 To explore the longer term use of RT in practice, to assess its impact and sustainability as a solution focused, or strength based approaches to health and well-being.
- 6.2 To explore service users and carers perspectives, views and experiences of RT.
- 6.3 To assess the feasibility of RT for specific groups of services users.
- 6.4 Develop participatory research, working with young people to create or model a bespoke range of RT interventions accessible and acceptable to them.
- 6.5 To explore, develop and research learning in practice through a CoP approach, using work based learning assessment methods e.g. learning contracts, portfolios, project planning, change management tool and evaluative strategies.

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