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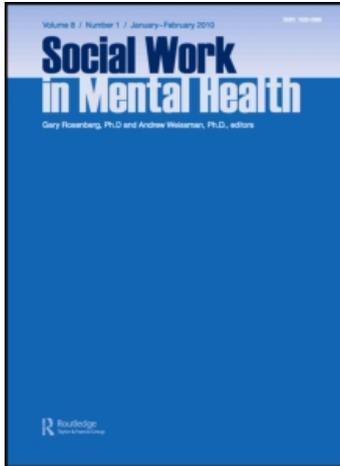
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## Using the Strengths Perspective in the Social Work Interview With Young Adults Who Have Experienced Childhood Sexual Abuse

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*Social work has a long history of problematizing and pathologizing clients, including young adults who have experienced childhood sexual abuse (CSA). Traditional approaches in social work have focused on working with clients to overcome obstacles, solve problems that stand in their way, and connect clients with resources that they do not possess. Strengths-focused social work interviewing offers an opportunity to reframe the experiences of young adults who have experienced CSA. While there is a gap in the literature on strengths-focused work with young adults who have experienced CSA, we propose that the strengths-focused interview offers an effective shift in thinking for social workers through the use of environmental support, exception, and possibility questions. We conclude that the profession best serves clients when we discover and use strengths, assets, and resources, rather than focusing on problems.*

*KEYWORDS* childhood sexual abuse, young adults, strengths perspective, interview

Social work has a long history of problematizing and pathologizing behaviors, which is deeply rooted in the development and legitimization

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of the profession. Traditional approaches in social work have focused on working with clients to overcome obstacles that threaten their lives, to solve problems that stand in their way, and to connect clients with resources that they do not possess. While these traditional approaches have been useful in distinguishing the profession's role (social workers are the largest provider of mental health services in the United States [National Association of Social Workers, 2009])—our *modus operandi* of problem-making and problem-solving cannot continue to effectively serve clients. “Preoccupation with problems, human deficits, what is broken, gone wrong, or failed” (Blundo, 2001, p. 297) no longer effectively serves clients.

The profession's obsession with what has gone wrong is a harmful and traumatic approach for working with young adults who have experienced childhood sexual abuse (CSA). Traditional treatment approaches for people who have experienced traumas such as CSA have framed the discussion in terms of the damage that has been done. The focus of therapeutic attention has historically been on correcting cognitive disturbances, such as self-blame or self-denigrating beliefs; curbing self-damaging behavior, such as suicide attempts, self-mutilation, substance abuse, or eating disorders; and interpersonal problems, such as isolation, insecurity, or relationship discord (Jehu, 1991). Recent trends in the treatment of CSA include techniques like Eye Movement Desensitization and Reprocessing (EMDR) therapy. EMDR is an integrative psychotherapy approach that encourages the individual to attend to or re-experience past traumatic experiences and memories that have purportedly laid the “groundwork for pathology” (EMDR Institute, 2004). EMDR has enjoyed relative popularity and has promising reports of efficacy (Shapiro, 2002a), but its corrective focus reinforces pathology-focused models of care in the treatment of young adults who have experienced CSA. Young adults who have experienced CSA often come to the social work profession feeling broken and damaged, rather than strong and capable. Tallman and Bohart (2000) have described the client as the primary agent of change or self-healer, yet the social worker's obsession with problem-making hinders the client from harnessing the environmental supports, exceptions, and possibilities that she or he *already possesses*.

The strengths-focused social work interview is an opportunity for social workers to exploit the resources that clients already possess. Strengths-focused social work moves us toward envisioning the survival and growth capacity that clients already possess (Munford & Sanders, 2005), envisioning a better future, a future that abandons the profession's obsession with pathology (Saleebey, 2009b). In this discussion, we explore how the strengths-based social work information gathering interview can be used to exploit the strengths of young adults who have experienced CSA. We will examine a practice case scenario as an example of how the strengths-focused social work interview can be effectively used to better serve this

population. A brief overview of the conceptual framework informing the strengths-based approach follows.

## CONCEPTUAL FRAMEWORK

To begin our discussion of young adults who have experienced CSA, it is important to understand the theoretical frameworks that inform strengths-based social work. Theories of resilience inform an understanding of the strengths-based perspective (Fraser, Kirby, & Smokwoski, 2004). Rather than assume all children exposed to trauma, such as CSA, will develop behavioral and or developmental problems, resiliency theories suggest that some may not. "Resilience is a dynamic construct that includes a broad class of phenomena involving successful adaptation in the context of significant threats to development and other life course outcomes" (Masten et al., 1999, p. 143 as cited in Fraser, Richman, & Galinsky, 1999). Resiliency theories promote a shift away from pathology to a means of successful adaptation (Fraser et al., 2004). Dissatisfaction with pathology-focused research and practice prompted mental health, child welfare, and other professionals to align with public health professionals in identifying resiliency in children. In social work, this work is embodied in the strengths-based perspective.

Saleebey's (2009a) formation of strengths-based social work practice provides a useful framework for working with young adults who have experienced CSA. Nearly ever "deficit" can be viewed from a lens of resources, of possibilities. We never know the limits of a young adult CSA survivor's capacity for change. The strengths-based perspective in social work suggests that individuals who endure terrible atrocities have an innate ability to rebound from those experiences. It promotes the idea that they inherently have a wealth of resources to draw on, to overcome terrible events that seemingly threaten their ability to cope.

The social work interview can be a place for drawing upon assets and resources that CSA survivors already possess. The social work interview has a variety of meanings, and can vary depending on the practice context. Kadushin (1990) describes the general purposes of the interview as being informational, diagnostic, and/or therapeutic. While the strengths-focused social work interview can conceivably fulfill all three of these purposes, for the purpose of this discussion, information gathering will be the primary objective of the interview. The information gathering social work interview focuses on obtaining an account of the individual, family, group, and/or community's social functioning, to obtain knowledge about the client's situation, and to gain an understanding of the client's situation. The informational social work interview seeks to obtain "both objective facts and subjective feelings and attitudes" (Kadushin, 1990, p. 12), and, when strengths-focused,

seeks out the resources, capacities, and assets at the individual, family, group, and/or community's disposal. A brief historical review of the social work interview and its contribution to the development of a problematizing orientation in the profession follows.

## BACKGROUND

### Development of Problem-Making Casework Approaches

The tendency to think in terms of client problems versus client strengths in the social work interview has a long history in the social work profession, and has received considerable attention in the literature. Foremothers of social work, notwithstanding the contributions of pioneers in the settlement house movement such as Jane Addams, sought to clarify and standardize the profession's method of providing help to people in need. The mission of social work was conceived by Mary Richmond of the Charity Organization Society to extend beyond benevolence and charity for the poor (Kemp, Whittaker, & Tracy, 1997). Social work had the potential for addressing individual problems using a systematic, organized, and standardized method of Richmond's conception of casework (Wenocur & Reisch, 2001). Casework tended to be individually focused, with attention to the psychological problems that necessitated a professional social work intervention. Casework was a process of problem-solving, broadly defined as problems in daily living that impede the level of satisfaction clients experience in their daily lives (Turner & Jaco, 1996). Many early social casework agencies operated on the presumption that problems were largely based on the individual's moral or character defects (Morris, 2000). The social casework approach sought "to learn the facts of what the *problem* is as it exists, seems, and feels today" (Perlman, 1957, p. 116, emphasis added), to probe an individual's history to arrive at a social diagnosis (Morris, 2000).

Identifying client problems has since been the trend in social work assessment, which many scholars have tied to the historic alignment of social work to psychiatry during those early casework years. Social work struggled for a professional identity, and psychiatry's medically driven model of diagnosis seemed to represent a good fit for the emerging identity of social workers. Rapp and Gosha (2006) have noted that the mental health field generally and social work specifically have been "preoccupied with illness because of the dominance of the 'medical model'" (p. 56), geared toward assessment, diagnosis, and treatment of an individual's problems. Problems and maladjustment, in many ways, have historically served the function of justifying the need for the involvement of social workers and of inviting the worker to treat the individual's presenting problems (Margolin, 1997).

Identifying problems and appropriate ways of intervening have become staples of the social work interview. Kadushin (1990) described the skills

necessary in the information-gathering social work interview for the professional social worker to help the client “communicate the nature of the *problem*” (p. 154, emphasis added). Social workers have expressed some concern about problematizing behaviors and diagnosing maladjustment in the social work interview, yet diagnosis and the *Diagnostic and Statistical Manual of Mental Disorders* (DSM) have enjoyed relative widespread use among social work professionals (Newman, Dannenfelser, & Clemmons, 2007). The most recent DSM-IV-TR (APA, 2000) provides diagnostic coding of problems that are the focus of clinical attention, such as physical abuse of a child, victim focus (995.54), and sexual abuse of a child, victim focus (995.53). Diagnostic coding of presenting problems has been useful for social workers who need to categorize problems for the purpose of insurance reimbursement and medically focused interventions, yet the diagnostic problematizing of client issues has further complicated the social work interview. Social work’s connection to the problem-based, pathology-based thinking of the medical model has arguably enabled social work to carve out its professional niche of helping people in need.

Many social work scholars who espouse the strengths perspective have criticized the profession’s over reliance on problematizing client behaviors. Saleebey (2009b) has criticized problem-focused work, and asserts that “every individual, group, family, and community has strengths” (p. 15). A departure from problem-focused work, solution-focused social work recognizes that clients are assumed experts in their own lives and that they have a multitude of interpersonal and psychosocial resources from which they draw to construct solutions (Oko, 2006). The strengths perspective in social work recognizes that people experience barriers in life that they may perceive as “problems,” but that people have innate strengths that enable them to grow and construct solutions to challenges they face in their environment (Rapp & Gosha, 2006). The strengths-focused social work information gathering interview draws on the resources that clients already possess, and potentially provides the space for clients to envision a reality that is less distressing and problematic. An examination of selected pathologizing research and strengths-focused theoretical writing and research on CSA follows.

### Strengths-Based Social Work and Research

In the early years of the second wave of feminism, stakeholders struggled to document the existence of violence in women’s lives, including CSA (Gilfus, 1999). In an effort to confront the denial of CSA from the public and professional domains, researchers in the 1970s sought to study its incidence and the prevalence. Subsequent research throughout the 1970s and leading up to the present have supported this agenda. Additional studies have updated the varying levels of CSA incidence and prevalence (Bolen & Scannapieco, 1999), its psychological outcomes and its impact on

psychological adjustment for individuals who have experienced it (Jumper, 1995; Neumann, Houskamp, Pollock, & Briere, 1996), and varying treatment methods and modalities for those who have experienced it (Reeker, Ensing, & Elliot, 1997). These studies have added to the growing literature on violence in women and children's lives and forged a new body of literature focused primarily on the negative outcomes of CSA for those who have experienced it (Murthi & Espelage, 2005).

While these studies have contributed to the growing body of CSA knowledge, critics, including social work practitioners, have noted that they are problematic in that they pathologize those who have experienced CSA and often present them as victims of traumatic events. Gilfus (1999) notes that while "This was a refreshing alternative to the victim-blaming stance of more traditionally psychoanalytically informed explanations" (p. 1240), it failed to consider the potential skills and strengths in those who have experienced CSA. As Saleebey (2009a) argues, "trauma and abuse, illness and struggle may be injurious, but they may also be sources of challenge and opportunity" (p. 16). Research and practice that incorporate the strengths-based perspective reframe traditionally pathologized behaviors into potential survival skills, resources, and possibilities; promote the idea that individuals who endure terrible atrocities have an innate ability to rebound from those experiences; and contend that each individual has a wealth of resources to draw on to overcome terrible events that seemingly threaten her or his ability to cope (Saleebey, 2009a).

Sullivan and Wodarski's (2006) theoretical work suggests redefining clients' skills as a means of reclaiming pathologized traits and reframing them as strengths. For example, they note that individuals who have experienced abuse are often hypervigilant. Using a strengths-based perspective, hypervigilance is reframed as an effective asset for use in avoiding dangerous situations. They also discuss reframing social isolation, often treated as a deficiency in social skills and or depression, into a normal reaction to a traumatic event, such as sexual abuse.

In a qualitative study on experiences of adults who were physically or sexually abused as children, participants identified several factors that positively contributed to their recovery after discharge from inpatient trauma treatment (Harper, Stalker, Palmer, & Gadbios, 2005). Participants identified practical, day-to-day concrete support from family and friends; emotional support from friends, particularly friends made while in the program who had a shared experience; the development of a social network unrelated to the abuse and the importance of participating in everyday activities apart from the abuse; and the continuation of treatment manifested in self-care strategies learned in the inpatient program. Participants identified social support and ongoing self-care as strengths that helped them in their recovery.

In another qualitative study, Nelson-Gardell (2001) asked a group of adolescent girls who had experienced CSA what they believed services designed to help them should look like and to describe how they perceived others, such as family and other supportive people, helped them deal with the abuse. She found that the participants identified the individuals who believed their reports of sexual abuse as a source of help and support and those who did not believe them as unhelpful. The adolescent girls appeared to equate being helpful with believing their report. This theme of being believed is important in light of the literature that proliferated in the 1980s regarding the reliability of child and adolescent reports of sexual abuse and the caution embedded in this literature to dissuade practitioners from believing and acting on reports of CSA. It suggests that practitioners' belief in a client is an essential component to the relationship and may enhance strengths-based work through rapport building in clinical work. The youth also identified talking about what had happened and associated feelings as important parts of the healing process, both of which can be viewed as strengths (i.e., the *ability* to talk about what happened and the *ability* to talk about feelings).

In her theoretical work, Anderson (1997) suggests combining the strengths-based perspective with resiliency theories in creating guidelines for uncovering the survival strengths of children who have experienced CSA. Through the process, childrens' survival skills are honored, helping them to realize that they have power in areas where they did not realize their power existed. By doing so, practitioners can help uncover strengths and build on them by focusing on the child's resiliency manifested in their ability to survive the abuse. In a qualitative study, Anderson and Hiersteiner (2007) highlight the importance of turning points in the narratives of adults in treatment who were sexually abused as children. These pivotal moments, when life as the participants knew it took a turn, can be viewed and exploited as moments of strength when the participant resisted being defined by others and took ownership of their own lives. Findings from this study suggest that strengths-based work grounds mental health services in clients' needs rather than shaping the clients' needs to fit within an existing pathological framework or service approach.

As the selected literature shows, the strengths-based perspective can inform effective research and practice with those who have experienced CSA. The strengths-based perspective deemphasizes pathological framing in CSA research and practice, allowing those who have experienced CSA to identify factors that positively contribute to their recovery, to talk about and express their feelings about their CSA experience, and highlights turning points in which participants took ownership of their experience. In addition, strengths-based practice with individuals who have experienced CSA facilitates the identification and exploitation of survival skills, helps identify

a course of action that is strengths-based and not pathology-based, and provides the foundation for recovery through the identification of strengths that bolster social support and self-care.

### CASE EXAMPLE

Our discussion of the strengths-focused information gathering interview continues with a case example that illustrates the potential for applying environmental support, exception, and possibility questions. Meredith (a pseudonym based on a composite of several former clients), a 24-year-old woman, has just come in for her first appointment at the university mental health clinic. Her intake information indicates that she is suffering from intense moments of anxiety and dread throughout the day that are contributing to her inability to leave the dorm and leading to her having trouble sleeping at night. She opens the session by admitting that she feels “on-edge” today as a result of unsettling dreams from last night. When probed, she indicates that she often has dreams that are unsettling and that remind her of uncomfortable moments in her youth. After a long pause, she blurts out that her uncle sexually abused her as a child and adolescent. She goes on to state that the abuse caused significant turmoil in her family. Her immediate family believed and supported her but her extended family, particularly her uncle’s family, was enraged. She states that her parents’ and siblings’ support was extremely helpful but that she feels rejected by her extended family, which makes her feel sad.

At this point Meredith begins to cry, stating that she does not know why she feels this way. She asserts that it all happened so long ago and that she has moved forward. She is going to college, has a boyfriend, and yet sometimes she just feels so alone and isolated. She feels confused by her emotions. She questions whether being isolated is bad and if it is okay. She states she often wonders how she should feel. She had a counselor when she was younger who used to express concern about Meredith spending too much time by herself. As the session winds down, Meredith indicates that she does not want to live her life this way—she dreads these moments of anxiety, sleeps poorly, and worries about her isolative behavior. She states that there are moments when she does not think about her experiences of CSA and is “just another college senior preparing to graduate.”

### APPLICATION OF THE STRENGTHS-BASED PERSPECTIVE

Strengths-focused interviewing can be applied to young adults who have experienced CSA, such as Meredith. Table 1 provides a number of helpful strengths-based questions to use in the information gathering social work

**TABLE 1** Strengths-Focused Questions for the Social Work Interview

Environmental support	Exception	Possibility
What people have given you special understanding, support, and guidance?	When things were going well in life, what was different?	What now do you want out of life?
Who are the special people on whom you can depend?	In the past, when you felt that your life was better, more interesting, or more stable, what about your world, your relationships, your thinking was special or different?	What are your hopes, visions, and aspirations?
What is it that these people give you that is exceptional?	What parts of your world and your being would you like to recapture, reinvent, or relive?	What people or personal qualities are helping you move in these directions?
How did you find them or how did they come to you?	What moments or incidents in your life have given you special understanding, resilience, and guidance?	What are your special talents and abilities?
What associations, organizations, or groups have been especially helpful to you in the past?	How have you managed to survive (or thrive) thus far, given all of the challenges you have had to contend with?	What fantasies and dreams have given you special hope and guidance?

Adapted from Saleebey (2009b, pp. 93–107).

interview. The literature suggests that strengths-focused questions that draw on environmental support, exception questions, and possibility questions, are the most germane to the social work research and practice with young adults who have experienced trauma (Anderson & Hiersteiner, 2007; Nelson-Gardell, 2001).

### Identifying Strengths in the Environment

Fraser, Kirby, and Smokwoski (2004) argue that environment plays a significant role in resiliency, arguing that social and environmental contexts facilitate poor functioning through exposure to traumatic experiences and facilitate higher functioning through exposure to supports, such as familial support or opportunities for growth. In their framework, the symbiotic relationship between individual attributes and environmental assets produce childhood resilience. As described in the case example, young adults who have experienced CSA may view their environment through a lens of anxiety, sadness, isolation, and confusion about how and when to regulate their thoughts and feelings in relation to their environment. The strengths-based perspective supports an assessment of the environment that highlights strengths and supports and deemphasizes deficiencies.

Kemp, Whittaker, and Tracy (1997) note that all environments have exploitable client identified strengths that can be explored collaboratively and then utilized for change. They note that the environment is multidimensional, incorporating the overall environment (resources used and or underutilized by client), physical environment (sources of safety, security, and shelter), perceived environment (influence of race, gender, class, and ethnicity), social environment (assessment of social networks), institutional/organizational (supports to relationships with larger systems), and political/cultural environments (possibilities for political and cultural agency). As Saleebey (2009b) notes, clients' environments are rich "physical, interpersonal, and institutional terrain(s)" (p. 100), waiting to be mined for their potential strengths.

Kemp, Whittaker, and Tracy (1997) describe environmental assessment as: An ongoing process in which client and worker, in partnership, gather and critically analyze information on the client or the client system in transaction with multiple levels of the environment, including strengths, resources, potentialities, and opportunities, as well as risks, challenges, and issues of concern, and with attention to the meaning of these environmental experiences for the client. (p. 85)

Framing the environmental assessment are aspects of the environment including whether or not the environment meets an individual's basic needs (i.e., income, health care, and housing); the environmental strengths and resources, including internal and external resources and concrete social supports; and the presence of environmental hazards, including conditions or toxins in the environment that may cause risk or harm. Kemp and colleagues (1997) suggest beginning an environmental assessment with the social network mapping tool (Tracy & Whittaker, as cited in Kemp et al., 1997), contending that it "enables collection of information on the total size and composition of the network and the nature of the relationships within the network as perceived by the client completing the map" (p. 109).

In applying the social network mapping to the case example, the social worker would ask Meredith to list network members from her household, family, friends, people from school or work, clubs she may be involved in, organizations, her neighbors, and any agencies or service providers she may be working with. In Meredith's example, these people might include her parents and siblings, boyfriends, and perhaps other forms of social support discovered in the process (such as friends from school, professors, counselor). The social worker would then ask Meredith questions regarding the nature of the relationships, types of support available, reciprocity of the relationships, closeness of relationship, frequency of interactions, and duration of relationship. Through this process Meredith and the social worker can identify her network structure within her environment and identify patterns

of support and existing or potential conflict and apply them to the social network map, thereby providing a visual representation of Meredith's social network.

### Identifying Exceptions

Young adults who have experienced CSA have a multitude of interpersonal resources within their social environments from which they draw on for support. Strengths-focused interviewing draws on exceptions in our client's life, instances where the trauma does not take center stage, and instances where things were going well. Practitioners of the solution-focused therapy, a therapy model that is strengths-focused, use exception questions routinely to draw on times in the person's life that were different, better, interesting, or even happy (De Jong & Berg, 2002). Exceptions often happen spontaneously, without conscious intention, and represent times in the individual's life when "problems" have had no critical impact (Institute for Solution-Focused Therapy, n.d.). Exceptions are reminders of strengths from which clients can draw on, and are helpful tools for encouraging clients to see that they already possess the ability to find experiences that are not traumatic and not hurtful.

When assessing Meredith, the social worker should help her reach for exceptions to the trauma that she already possesses in her life. Strengths-focused interviewing is an opportunity for Meredith to examine areas of her life that have worked for her before this recent trouble with anxiety. Her anxiety clearly has not interfered with her college life until this point in time. How has she managed? Have there been friends or significant others at college that have helped her when she is anxious? Additionally, Meredith mentions that she has a boyfriend—the social worker might explore whether that relationship is an exception. The social worker might also look to the times where Meredith did not feel overwhelmed by anxiety. What has changed? How might she garner the skills that she had in place prior to this episodic anxiety? Strengths-focused interviewing is an opportunity, not only to gain relevant information about exceptions, but for the social worker to model "strengths-talk" versus "problem talk," a skill that Meredith can ultimately harness to manage her anxiety.

### Identifying Possibilities

Exception questions naturally progress to possibility questions in the strengths-focused interview. Possibility questions help the young adult who has experienced CSA explore the question, "What happens next?" Young adults who have experienced CSA have futures where they may realize

their dreams and where they are not defined by their identity as “victims.” Possibility questions help clients explore how they might harness their talents and abilities to achieve their goals and aspirations—for they already possess the interpersonal environmental resources and exceptions needed to realize their potential (Saleebey, 2009a). Possibility questions in the strengths-focused interviewing encourages clients to revisit childhood dreams that may have preceded (or co-existed with) the traumatic experiences that have challenged their hopes for the future.

Strengths-focused interviewing, used with Meredith, is an opportunity to explore her hopes and aspirations for the future. Meredith is a bright young woman and is working toward completing her college education. She has been successful at maintaining relationships with her boyfriend, friends at the University, and her family of origin. The strengths-focused social work interview would focus on the dreams and goals that have sustained her throughout her life. How does she envision her future? What motivates Meredith? How have her friends and family members supported her in reaching her goals thus far? How might they continue to support her in her future? The strengths-focused social work interview encourages Meredith to remember a time that she felt good with the world, and less overwhelmed by her anxiety. Strengths-focused interviewing urges Meredith to remember the dreams that have sustained her, and to embrace her possibilities.

## DISCUSSION

The application of environmental support, exception, and possibility questions to the case example highlights the effective use of the strengths based perspective in the social work information gathering interview. Multidimensional environmental assessments, such as the social network mapping tool have the potential for highlighting strengths and resources in Meredith’s environment, including sources of support (i.e., family, boyfriend, university) and power (i.e., taking legal action against her perpetrator and coming forward with her own story of CSA). In addition to these assessments, the social worker may want to highlight the potential benefits of a mutual aid or support group for those who have experienced CSA. Through such a group, Meredith may not only experience support around her own CSA, she may also provide support for others thereby playing a potentially important role in someone else’s recovery. Kemp and colleagues’ (1997) discussion on environmental interventions support and promote the use of mutual aid and support groups.

The use of exception questions allowed the social worker and Meredith to explore times when her anxiety was not interfering in her life and to identify relationships that challenge her sense of isolation. Possibility questions facilitated the exploration of Meredith’s self-defined dreams and goals.

By reframing the client–worker relationship into one focused on possibilities as opposed to problems, Meredith and the social worker can explore Meredith’s desires rather than relying on a pre-determined treatment modality for young adults who have experienced CSA. Additional strengths-based work with Meredith might incorporate additional lines of questioning that include support, esteem, change, and meaning questions (Saleebey, 2009b). These additional questions could help Meredith expand her ideas about “strength” and “resilience,” as well as strengthen the relationship between Meredith and social worker.

The collaborative, non-pathologizing/problematising nature of strengths-based work complicates pathologizing treatment modalities (e.g., EMDR) for DSM-IV-TR diagnosed conditions (e.g., posttraumatic stress disorder) that promote the identification and treatment of singular, non-contextualized problems. While researchers note the efficacy of EMDR for victims of posttraumatic stress disorder, including CSA (Korn & Leeds, 2002; Shapiro, 2002a; Shapiro, 2002b; Shapiro and Maxfield, 2002), they do not note if and how EMDR incorporates clients’ strengths. Shapiro and Maxfield (2002) briefly allude to an exploration of strengths in the second phase of EMDR. In this phase the clinician focuses on the “enhancement of and development of personal resources such as safety, affect management, and self-control, before work on traumatic memories” (p. 936). Unfortunately, in this context personal resources (strengths) are used as a means to support clients in the exploration of their trauma thus reinforcing a pathologizing framework. By including environmental support, exception, and possibility questions in the information gathering interview, social workers incorporate strengths-based work into the initial session with the client and co-construct contextualized understandings of clients’ strengths, assets, and resources. The client and the social worker work collectively to address the presenting reason for the social work information gathering interview as perceived by the client and not based on diagnostic problems.

Saleebey (2009c) notes that there are several uncertainties and cautions to strengths-based work. Some of the strongest criticism flows from the idea that strengths-focused work is superficial and that it avoids dealing with real problems. As Anderson and Hiersteiner (2007) caution:

As a helping professional, one is left to reflect on the extent to which the participants challenge us to set aside our assumptions and metaphors about a progressive trajectory toward health. . . . We found it challenging to find “space” during the group interviews for exploring alternative meanings as participants were reluctant to shift from problem-saturated life stories. It is a natural impulse to want to sort, categorize, label, and weave disjointed or disconnected themes into an organized whole that moves in a linear direction. Yet, the goal of the helping process should not be for clinicians to impose alternative interpretations onto adult survivors’ stories, including ones of strength and resiliency. (p. 643)

Their reflections highlight the problems with strict adherence to a strengths-based approach in working with those who have experienced CSA. While the strengths-based perspective deemphasizes pathological framing with young adults who have experienced CSA in the social work gathering interview, social workers must not do so at the cost of ignoring the real and negative outcomes of CSA.

In addition, multidimensional gender and power issues often existent in social work suggest the need for a feminist critique by which the social worker can frame the strengths-focused interview. Feminist Kersti Yllo (1998) aptly notes that “compressed into one assault are our deepest human emotions, our sense of self, our power, and our hopes and fears about love and intimacy” (p. 610). Feminist social work encourages the social worker to call into question structures of power in society (including in practice). The strengths-focused social work interview is an opportunity for people who have experienced CSA, such as Meredith, to move to a place of empowerment. Social work can move from perhaps its historically Western position of compelling, controlling, or dominating, to “personal empowerment” (Collins, 1986). There is potential for further work on how strengths-based work with people who have experienced CSA could be a feminist intervention, calling into question the power dynamics in our society that enable victimization and helping those who have experienced CSA to be empowered.

### Implications for Social Work

Strengths-focused social work practice with young adults who have experienced CSA is a much needed change in perspective. While the profession has historically concerned itself with helping the vulnerable and the oppressed (NASW, 2008), the strengths-focused social work information gathering interview requires that the practitioner view those that we help in a different way. Young adults who have experienced CSA are resilient, capable of strength and many manage to have healthy, happy lives, despite experiences that threaten to break their spirits. Many have incredible interpersonal and social supports that assist them in negotiating new challenges in their lives. The strengths-focused social work information gathering interview recognizes that these young adults have extraordinary resources that will help them overcome episodic setbacks, as evidenced by the case example describing Meredith.

The social work interview that continues to focus on pathology and on what is “wrong” with clients versus what is “right” only serves to further exploit clients in new ways. While the profession has benefited from framing client issues as “problems” that require resolution, we must abandon problem-focused practice. Strengths-focused work with young adults who have experienced CSA provides a good example of how our clients benefit from abandoning problem-focused work. Strengths-focused interviewing better serves “strong” and “capable” clients.

## SUMMARY

The strengths-focused social work information-gathering interview is an opportunity to draw on the resources and capabilities of young adults who have experienced CSA. Although it requires a shift in thinking for many social work practitioners, we believe that this work best serves clients of mental health services. As demonstrated by the case example, "Meredith," strengths-focused interviewing recognizes that many clients already possess the resources they need to overcome obstacles that threaten their success. It is our duty as social workers to help clients draw on those resources they already possess by focusing the social work interview on strengths, not pathology.

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