



brighter futures

creative support, housing and employment

SIMPLE SOLUTIONS FOR COMPLEX NEEDS. A Brighter Futures' methodology.

INTRODUCTION

Human pain or insecurity needs to be dealt with or else it festers inside and eventually explodes into a crisis. Old adages such as “a trouble shared is a trouble halved” or “better out than in” or “don’t bottle it up” are all demonstrations of the way in which human beings have learned or intuited this simple truth from time immemorial. Psychiatrists and psychologists spent the twentieth century devising systems of interventions which used, amongst other methodologies, “talking therapies” to help people unload stored up pain. These aimed to help people to regain a healthy balance between their thinking and feelings in order to deal with day to day living more effectively and painlessly. Such therapies have become widely available. Cognitive Behavioural therapy (CBT), for instance, is the current vogue with cash strapped health purchasers who value its cheap efficacy. Methodology has become so cost driven that CBT is even offered via the internet for certain problems.

For some usually well balanced people, a few sessions with a therapist or even a series of exercises on-line may be enough to restore equilibrium after a particular life crisis. However, there are others whose life has been affected much more seriously by a series of events and conditions over a prolonged period. For these people, simple ventilation or a carefully chosen re-evaluation will not be sufficient to affect a cure. This group of people may suffer from what we describe as “complex needs”.

This is a phrase which is often used but rarely defined. This document, in line with Brighter Futures' wish to be transparent and clear in its interventions, defines what we mean by complex needs, identifies their roots and suggests the criteria to be applied to suitable solutions to complex needs.

1. PRE-DISPOSING FACTORS

Complex needs arise as a result of complex causes. No two people will have exactly the same set of needs, but the genesis of these needs will be rooted in an exposure to some of a group of circumstances. People with complex needs will have experienced some of the following “predisposing factors”:

- Physical ill health.
- Mental ill health.
- Bereavement or loss of important relationship.
- Poor support or social networks.
- Psychological trauma.
- Learning disability (particularly if it is undiagnosed).
- Financial poverty, poor housing, diet etc.
- Uncertainty of financial or housing affairs.
- Other major uncertainties (e.g. risk of deportation, unstable relationship, gender uncertainty).
- Trauma associated with being an asylum seeker or refugee.
- Periods of institutionalisation and their aftermath (being in Local Authority care, the armed services or prison for instance).
- Sexual abuse or exploitation.
- Physical or psychological abuse.

2. SELF HELP TREATMENTS

In Brighter Futures experience, human beings generally try to help themselves. Thus, those who suffer from one or more of the above pre-disposing factors, often take action to try to gain a sense of well being or cover up the pain by themselves. Sadly, they will often see their options as very limited and thus their chosen treatment is actually harmful. Their choice can be seen as self medication for someone who knows that their life is unsatisfactory (that is they are dis-eased). These self help treatments are generally pursued with an addictive fervour because this is what displaces the pain. They often involve substances which are actually addictive. It can easily be seen that using a variety of these self help treatments will, over a period of time create a series of complex overlaying problems. The longer a situation is endured, the more complex will the overlay become. For the external observer it becomes increasingly difficult to disentangle cause, effect and self help treatments as a mass of symptoms of dysfunction appear.

Self help treatments include:

- Using alcohol, nicotine or illegal drugs.
- Unhealthy use of religious or spiritual ideologies.
- Joining gangs, institutions or extremist organisations.
- Addictive or unnecessary pursuit of money, power or sex.
- Offending, offensive or anti-social behaviour (including violence and bullying).
- Self doubt self harm or self punishment.
- Seeking social isolation.
- Becoming over dependent on services or institutions.
- Becoming pregnant.
- Entering inappropriate relationships.

3. COMPLEX NEEDS

It is easy to see how a mixture of, perhaps, 3 of the first list of predisposing factors with one or more of the second list of self help treatments is a path to disaster for an individual. For instance:

- The young person, who suffered from a complete lack of parenting, was abused by those who s/he had been taught to respect and then dumped into care, before being exploited as a street sex worker might easily decide that s/he is worthless and resort to self harm or suicide.
- The person who was loved as a child but suffered from undiagnosed and mild Aspergers Syndrome might have sought refuge in the routine of army life. This solution might have worked, but, on discharge from the forces understanding the rules of incomprehensible civvy street might be such a challenge that he would resort to the anaesthesia of drink.
- The person who was brought up in poverty and financial uncertainty might have worked hard to get to university as an exit from this hardship. Once there s/he might have been distracted by new found freedoms and over indulged in recreational drugs. On graduation the difficulty of gaining a career became apparent and the ease of selling drugs instead appeared to be an alternative way to avoid poverty and to enjoy the designer life style that was so universally applauded.
- A widow who has recently lost a very long standing husband. Might be coping with budgeting and practical affairs alone for the first time. She might be managing tasks which her husband used to do. She is coping with poverty and the uncertainty of failing health and the difficulty in managing in the only home she has ever known. She doesn't want to be a burden on her children and attempts suicide by taking an overdose.

4. SIMPLE SOLUTIONS.

BRIGHTER FUTURES recognises that the paths into these situations of complex need are many and confusing. However, we believe that the pathway out of them is essentially simple. That is not to say that they are easy for individuals to follow nor that they are anything but skilfully crafted. We design individual journeys for our customers to help them back to fulfilled engagement which are all:

- **Individually** designed to deal with the symptoms of the predisposing conditions. Able to provide an appropriate **alternative mode of coping** with the underlying pain which does not involve the use of self help treatments.
- Designed to remove the **underlying causes** of the predisposing conditions where possible.
- Designed **collaboratively**, after discussion, negotiation and with the **agreement** of the customer.
- **Holistic**: they address all the needs, physical and psychological of the customer.
- **Multi dimensional**: they use all the many services of BRIGHTER FUTURES itself and also refer customers to our many partners.
- **SMART**, that is, specific (activities or targets), measurable (we include and measure frequency of attendance etc), achievable (they are suited to the customer, not us), realistic (challenging, but possible) and timely (they are offered in the right sequence).
- **Simple**: these are understandable and legible pathways. They are human in conception and deliver care that is customer centred and has no unnecessary boundaries.

It should be noted that this approach is respectful of the individual and their attempts to help themselves. Unlike many other agencies who insist on customers being drink or drug free before they receive services, our engagement is not conditional upon a person having already

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abandoned their self help treatments. We will help people to live without, for instance, drink, or offending, but we recognise that this must be a product of our support and involvement rather than a precondition of it.

This paper is one of many policies which describe our ways of working. Our quality management system (accredited to ISO 9001) ensures that our involvement is defined, standardised and quality is carefully measured. We use the Outcome Star which is personal development measurement tool to make support plans clear and measurable. We understand that these quality measures are our “tools” that enable us to work effectively. However, our focus is not merely on what we do (“ticking boxes”) but on the relationship we create with our customers and the things that change (the outcomes) for them as a result of our involvement.

5. STRATEGIC FIT.

BRIGHTER FUTURES has more than 25 years experience of working with people with complex needs. From our early work as a provider of shelter for those who were sleeping on the street, we have developed a wide variety of types of care that we make available to those with complex needs. Our customers arrive with a wide range of presenting problems including involvement in sex work (male and female), drug and alcohol addiction, street homeless, tenants under threat of losing their tenancy, older people unable to sustain independent living, people with learning disabilities and in need of support to live independently, people with mental illnesses and people convicted of crimes. Our tailor made support plans help individuals to journey at their own pace away from past hurts and towards a brighter future.

Our approach has been shown to work. We end the downward spiral of ever more complex needs that tend to occur with other piecemeal approaches. We put individuals back in touch with where they really want to be. We remove the enormous cost to the public purse of people whose lives are out of control and who therefore cause enormous disruption and cost to others. Our approach contributes to a locality by ensuring that services are carefully defined and coordinated and that individuals are helped to regain full involvement.

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