Exploring facilitation skills in transdisciplinary teamwork

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ABSTRACT

This article describes the facilitation skills relevant to asset-based transdisciplinary team collaboration within an Early Childhood intervention social setting in rural KwaZulu-Natal. The authors describe the conceptual framework of the underlying study, the methodology and the findings, the facilitation skills that have been identified, and the attitudes, values, knowledge and complimentary approaches that were deemed necessary by the participants for the effective and successful utilization of these facilitation skills. The article concludes with the implications for future research and training within community psychology in general, and with regard to facilitation skills within an asset-based transdisciplinary approach in particular.

BACKGROUND

The Universities of Pretoria and Durban-Westville conducted a collaborative project in Early Childhood Intervention in rural KwaZulu-Natal. The project spanned 3 years, from 2000 to 2002. It included a multitude of disciplines and some of the representative professionals were international figures.

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The aim of this project (referred to henceforth as the primary project) was to:

a) introduce pioneering work designed to transform people's perceptions and approaches by adopting the asset-based approach as an alternative to the problem and needs-based approaches using transdisciplinarity as a backdrop.
b) use the outcomes of the primary study to develop and compile an elective module for the newly developed MSc degree in Early Adulthood Intervention.

A secondary study was initiated at a point when the primary study was well underway. One of the researchers posed the question whether a specific set of facilitation skills had been identified that could be utilised within this unique setting.

The relevant literature was surveyed and it was confirmed that no documented research could be found in this regard. The focal areas of the literature search encompassed community psychology in general, and the asset-based approach and transdisciplinary perspectives, in particular.

Because of the unique and conducive factors that prevailed in the primary study, the researchers decided, almost by happenstance, to embark on a secondary study with the aim to investigate whether a definitive set of facilitation skills could be identified within the over-arching or primary study. The conducive factors alluded to were, amongst others, the established interpersonal relationships, group cohesion and shared conceptual framework of collaborators in the primary study. This initiative evolved into a fully-fledged study that became the subject matter of this article.

During the literature search it became evident that many community psychologists were unhappy with the current status of community psychology (Fontana, 1990; Julian, 2006; Maton *et al*, 2006; Schensul *et al*. 2006).

A recurring theme in this regard was the sentiment that lip-service was paid to the many promises that were supposedly inherent in the community psychology discipline. The perception is that there has been a lack in research in this area and that the development and advancement of theory and a body of knowledge underpinning community psychology has been equally slow. Community psychologists and researchers are therefore urged to embark on a new endeavour to build on the theoretical framework that informs community psychology, to engage in research and to integrate the body of knowledge within

community psychology with other theoretical developments and research in other disciplines, both within and outside the field of psychology in general.

The above-mentioned sentiments strike a chord with this article since it is precisely the absence of documented research with regards to facilitation skills within an asset-based approach, when utilizing a trans-disciplinary team perspective that has motivated the initiation of the secondary study. A further aim of the secondary study is thus to heed the call to engage in research that may build on the theoretical framework that informs community psychology.

Theoretical Framework

This article adheres to the definition of community psychology which was adopted at the Austin TX conference in the early 1970's, where the field was defined as one that is:

> concerned with participating in planning for social change; with organizing and implementing planned changes; with designing and conducting programs of service to provide for the human needs generated by social changes; and with the development of community resources and process to deal with the future implications of social changes. It was recognized that these are activities that involve the efforts of persons from several different fields, and that community psychologists should give a priority to cooperation and collaboration with the community and with other disciplines (Mann, 1978, p. 18 as cited in Maton *et al.*, 2006, p. 2).

From the above definition the following salient factors become evident, namely: that it is important to reflect on the social setting where the intervention is going to take place, that how the collaboration will unfold needs to be taken cognisance of, that mobilization is an important element and that the researchers have to have a clear perspective about the approaches that they are going to utilize. These salient factors will now be discussed.

Social Setting

Since community psychology focuses on social change, it therefore has to be practiced within social settings. This view is supported by various authors and specific reference is made to the following settings which are conducive to the discipline

of community psychology, namely: educational settings such as colleges, universities and schools, as well as prisons, and preventative intervention organisations such as early childhood development centres (Davidson *et al*., 2006; Ross and Deverell, 2004; Specter and Zax, 1974).

In this study early childhood intervention was the elected social setting in both the primary and secondary studies being discussed in this article.

Collaboration

Since professionals from various fields are involved in the service provisioning, it has become essential for professionals to collaborate their efforts. This process of collaboration has evolved over the years from uni-disciplinary teams to transdisciplinary teams, where team members share a common conceptual framework (Fereirra, 2004). The transdisciplinary team in the primary study opted for an alternative approach, comprising of the asset-based approach coupled with the transdisciplinary team approach.

This evolutionary and transformative process is elucidated in the topographical Table 1 reproduced below.

Of specific importance in community psychology are the multi-disciplinary, inter disciplinary and transdisciplinary approaches. According to Rosenfield cited in Schensul *et al* (2006, p. 3), the teams can be differentiated as follows. The multidisciplinary approach refers to researchers working parallel or sequentially from a disciplinary-specific base to address common problems. In the interdisciplinary approach, researchers work jointly, but still from a disciplinary-specific base to address a common problem. Lastly, in a trans-disciplinary approach the researchers work jointly, sharing a conceptual framework, whilst drawing together disciplinary-specific theories, concepts and approaches to address a common problem.

According to Briggs cited in Ferreira (2004), the key components of a transdisciplinary model include: many disciplines, flexible boundaries and consensus decision-making, integrating families in the process of assessment, planning implementation and evaluation, recognizing their ultimate authority, co-ordinating a core person to incorporate team decisions and integrate goals of other discipline into a treatment program; shared meaning, synergy and cohesion, understanding different terminology's, relevant concepts and working with families unique to the team.

Transdisciplinary teams are found predominantly within the health sector. The following professionals are usually represented (Oreave and Sobsey, in Ferreira, 2004) namely; primary care-givers, psychologist, occupational therapists, speech therapists, audiologists, psychologists, nurses, paediatricians, social workers, educators, vision specialists, nutritionists, medical specialist and non-medical specialists. The transdisciplinary team is therefore always a kaleidoscope of personalities, functions, roles and expertise, presumably resulting in challenging and enriching exchanges.

Facilitation Skills/Mobilisation

The collaborative process must be mobilised to achieve the desired outcomes. Certain inherent inhibitory factors such as personality clashes, attitudes and professional individualisation could hinder mobilisation (Schensul, 2006). The use of effective facilitation skills is a sine qua non to overcome any hindrances or barriers and to ensure successful mobilisation. To achieve the desired result such as empowerment and capacity building when using (utilizing) the trans-disciplinary approach, the assets, resources and strengths must be mobilized through the employment of various strategies, of which facilitation skills constitute but one.

Skills refer to the behaviour of a worker in pursuit of the helping purpose (Shulman, 1979). According to McMaster (1982, p. 5), skill is "personified by the execution of some activity or method" which is usually measurable. Skillfulness, therefore, is associated with observable behaviour, which in turn reveals how knowledge is used to enable one to set and attain specific goals. With this understanding one can approach the concept of facilitation skills.

Rees (2001, p. 73) typifies facilitation as "the process of making a group's work easier by structuring and guiding the participation of group members so that everyone is involved and contributes". Kinlaw (1993, p. 16) adds that this refers to helpful interventions by any person that will "help the team to meet certain criteria for success". Facilitation skills therefore refer to those capabilities that allow a goal to be reached in an effective manner. A facilitator is one such person who can effect this, because facilitators are seen as agents of change who work on helping individuals, groups and the organisation as a whole to develop or improve performance (Robson and Beary, 1995).

The facilitator usually begins where the team is, with an agenda

TABLE 1

Comparison of service models (Compiled from works of Jantsch [as cited in Shalinsky, quoted in Ferreira, 2004]; Orelove & Sobsey, 1996; Rainforth & York-Barr, 1997; Engelbrecht, 2004

Unidisciplinary	Develop own field competency	In isolation	In isolation	In isolation
Intradisciplinary	I believe you & colleagues can contribute to those with special needs	Assess, plan & implement with own-field colleagues	Colleagues of own discipline involved and responsible	Amongst colleagues of own discipline
Multidisciplinary	Recognise contributions of other disciplines	Separately assess, plan and implement their field part	Caregivers meet with individual team members	Informal lines
Pluridisciplinary	Cooperate with other disciplines, not coordinated	Assess, plan, implement separately but consult	Participate informally, each accountable for own part	Informal
Crossdisciplinary	Cooperate and coordinated, controlled by one discipline	Main discipline determines manner of assessing, planning and implementing	All participate, main discipline accountable	More formal, meeting determined by main discipline

| Interdisciplinary | Cooperate, coordinated, jointly decide, higher level goal as incentive, develop interventions that are supportive & complementing | Separately assess and plan but share& decide together & try to incorporate other sections; Follow up services | Caregivers meet with team and members responsible for sharing and implementing their part | Periodic case-specific meetings |
| Transdisciplinary | Commit to teach, learn and work with other disciplines to better serve, multi-level coordination, promote mutual emotional and technical support | All assess & plan together according to family needs & assets; assigned service provider same implements as with family | All participate on level, incl. Caregivers; shared responsibility - ensure that designated service provider implements plan, usually caregiver or teacher | Regular team meetings with continuous transfer of knowledge & skills |

shared with the team or community reflecting sustainability. The role of the facilitator is mainly concerned with the needs of the team or client and with assessing the assets members have which will allow them to reach their potential.

According to Rees (2001, p. 17) a team is "two or more people who work collaboratively to make something happen". This definition implies a shared focus and togetherness within a team. A team denotes by its very name a sense of cooperation, cohesion and a common focal point, all of which are essential among members in asset-based and trans-disciplinary teams.

In a team adhering to the transdisciplinary approach, the role of the facilitator is not permanently assigned to one individual of the team. Each team member has the potential to take on that role and possess the facilitation skills necessary to manage the variety of disciplines and exchange of roles. The role of facilitator can thus rotate spontaneously amongst the team members depending on the situation, process or expertise called for at the time.

The literature abounds with references to generic facilitation skills such as: leadership skills, community work skills, conflict resolution skills and management skills (Briggs, 1996; Egan, 1998; Fisher and Ury, 1991; Hart, 1992; Reese, 2001; Robson, 1993).

As mentioned in the section related to the background, a lacuna was found with regards to definitive facilitation skills in an asset-based transdisciplinary team approach in the primary study. This lacuna directly motivated the initiation of the secondary study.

It was decided to defer an elaboration on the generic facilitation skills at this point, since the study did not in the final analysis, yield evidence related to specific or definitive skills which are unique to an asset-based approach when working in transdisciplinary teams.

Perspectives/Approaches

It is essential to have a well-defined theoretical framework to inform your intervention strategy. This is even more so when working within a transdisciplinary team where the members come from various and sometimes divergent theoretical and professional perspectives.

In the primary study, the researchers decided to engage with the participating host community from an asset-based approach. Although it is a novel term, it embraces both old and new meanings. The term "asset-based approach" was coined by Kretzman and Mc Knight (1993), when they did groundbreaking

work in community assessment. In essence, the asset-based approach advocated the following, namely a fundamental perspective that emphasizes the assets within individuals, groups, social settings and communities at large, rather than focus on deficits, needs or shortcomings. Carman (2002) concurs that the objective in this approach is to manage the limitations in such a way that the strengths or assets are released and can develop to such an extent that they make the limitations insignificant.

Assets are varied. Ebersohn and Eloff (2003, p. 14) define it as the "skills, gifts, resources, capacities and strengths that are shared with individual, association, the community and organizations". Trivette, Dunst and Deal add to this definition by stating that it encompasses "potentially useful information, experiences, opportunities … that might be mobilised and used to meet the needs of an individual group (1997, p. 76). Some of the assets that have been identified, are: physical, economic, vocational, educational, emotional, cultural, social, medical and logistical (Trivette *et al*. 1997).

Furthermore, the asset-based approach derives from a human ecology framework and emphasises community-specific audits, asset profiles and intervention strategies. During the assessment phase, the shortcomings and needs will be noted with the key purpose of determining how the assets must be harnessed to strengthen the capacity of the community (Tolan, Keys, Chertok and Jansen, 1990). Therefore, within an asset-based approach the identification of the asset is crucial before embarking on any intervention strategy. The asset profile derived from the asset audit should be disseminated amongst all stakeholders (Hendison and Thomas, in Ferreira, 2004).

The asset-based approach is especially suited for disempowered or disadvantaged groups within communities, as the approach seeks to empower those that are affected (Kretzman and McKnight, 1993; Tolan, *et al*., 1990). The asset-based approach is characterised by collaborative networking, where the hosting communities are co-collaborators and self-determinants.

The asset-based approach shares some similarities with the resource-based approach (Kinlaw, 1993), the strength-based perspective (Tolan, Keys, Chertok and Jansen, 1990; Bruns and Slecples, 2001) as well as capacity building theory (Kretzman and McKnight, 1993), except that in the former approach the needs and deficits have a different significance.

Overall, through this approach, perspectives are transformed and challenges are viewed as means to success, not as failures.

METHODOLOGY

This investigation assumed the paradigm of interpretavism (Schurink, 1998), thus to understand and interpret meanings as they are revealed in interviews and literature. The approach adopted for the research design in this study was qualitative in nature, making use specifically of the instrumental case study (Stake, in Ferreira, 2004). The cases at hand were purposively selected groups (Strydom, 1998) of transdisciplinary team members. Selection criteria were aimed at including individuals directly or indirectly involved in the collaborative project on Early Childhood Intervention, based on their knowledge and experiences of the conceptual parameters, namely the transdisciplinary and asset-based approaches.

Data was accessed from focus group interviews with eight purposively selected participants (comprising various disciplines: social work, nursing science, physiotherapy, occupational therapy, educational psychology, communication pathology, as well as a parent of a mainstreamed child with a disability). Data collection methods included self-reporting and field notes. Data gathered from the focus group interviews were documented in the form of transcriptions (from audio- and videotaped recordings). Two focus group interview sessions were held to adhere to data saturation criteria.

Data gathered from the two focus group interviews were clustered, coded and categorised, moving from a holistic to an analytical perspective as Tesch (1990) suggests. Two independent coders, making use of Atlas-Ti software analysis and manual searching of emerging themes, offered other alternatives and controlled this. The categories were then forwarded to the participants of the focus group interviews for verification and comment. Categories were compared and related to information in terms of literature control, complementing Marshall and Rossman's testing of suppositions against alternative explanations and theories (in Tesch, 1990). Finally, in terms of Tesch, relationships and patterns were found and created respectively.

In terms of trustworthiness, we deliberated, challenged, revised and verified our impressions throughout the process by referring interpretations and emerging themes for appraisal to independent coders and to the participants. We also reflected on the influence of our viewpoints, motives and preconceptions on the research process and findings. Raw empirical data were interpreted according to relevant theories, with sensitivity given to the criteria of credibility, transferability and dependability.

Ensuring validity of the research

Validity of any study should ensure that the explanations of phenomena being studied would match the realities of the world. Validity in qualitative research includes internal-causal inferences and external-generalisability, as well as issues of objectivity and reliability. Validity of qualitative designs thus includes the degree to which the interpretations and concepts used have mutual meaning to both the participant and the researcher. Both parties should therefore agree on the description and composition of events and, most especially, on their meanings (McMillan and Schumacher, 2001).

In qualitative research, validity is dependent on data collection and analysis techniques. Qualitative research requires the use of various strategies to enhance validity. These strategies are employed to maintain the least degree of interference while increasing the quality of the data. Strategies used to increase and enhance validity during the study are presented in Table 2.

Ethical aspects

Ethical measures to ensure the research participants' well-being were implemented throughout the study. Informed consent was obtained and confidentiality was maintained. The researchers gave feedback to the research participants on a regular basis, which allowed for no deception on the researchers' part. The research findings were released in an accurate and responsible manner.

Discussion of the data: Facilitation skills in transdisciplinary teamwork

Communication skills

Communication has been emphasised as an important facilitation skill by participants, for effective facilitating in an asset-based approach, when working in transdisciplinary teams. This is borne out by statements such as "one thing that is core is communication skills … what kind of questions should you ask"; "avoid professional jargon" and "we teach our learners … a lot about the narrative approach".

TABLE 2

Strategies to increase and enhance validity during data collection and analysis in the current study

DATA COLLECTION

Strategy	Description
Participant language: verbatim accounts	Obtained literal statements of participant such as verbatim accounts of conversations, transcripts as well as quotations from documents.
Mechanically recorded data	Used tape recordings
Low-inference descriptors	Recorded concrete, precise, and detailed descriptions of the participant and the situations in field notes.
Participant researcher	Used the participant's written documents.
Member checking	Rephrased and probed to obtain more complete and subtle meanings during interviews and therapy sessions
Participant review	Participants reviewed the researcher's synthesis of all interviews

(Adapted from McMillan and Schumacher, 2001, pp. 407–409)

DATA ANALYSIS

Participant validation	The participants were asked to validate the data analysis process. The participants were also required to state whether they agreed with the results of the data analysis throughout the process.
Avoiding subjective interpretation	The researchers acted as objectively as possible while analysing the research data.
Avoiding poor coding of qualitative data	The research data were carefully coded by the researchers and verified by an external coder.
Avoiding making unsupported inferences	Generalisations were not made beyond the capability of the data to support such statements (particularly in the table of categories). The external coder assisted in this process.
Avoiding selective use of data	Data were not used selectively to falsely verify findings. The external coder assisted in this process.
Avoiding the unfair aggregation of data	Data were only aggregated a value if it could be supported by the research data. The external coder assisted in this process.
Avoiding researcher bias	The researchers guarded against their own expectations, misperceptions and need to find answers that would support their preconceived notions about the research. The external coder assisted in this process.

It is through communication that a common vision is nurtured and the team guided through decisions and challenges, enabling each member to acquire and apply qualities needed (Gomez, 1999). Communication is a skill needed to convey correct messages and to ensure that misunderstandings are avoided in a team (Ferreira, 2004).

Leadership Skills

Leadership skills were also regarded highly by participants. Specific emphasis was placed on shared leadership, as leadership roles are rotated within a transdisciplinary team. This is supported by comments of participants, such as " you need someone who's going to take you and guide you in the right direction"; "you also don't want them to go into avenues where you know it's a pitfall… as a facilitator you'll be able to guide them through that", "working towards a common goal" and "keeping the enthusiasm alive". Gomez (1999) regards communication and leadership skills as part of interpersonal skills.

Community work skills

Another skill deemed important by participants, relate to community work skills. Community work skills include being able to **access** communities appropriately by following the correct channels and, conversely, by increasing and encouraging access of community members to the team, as well as facilitating development and **empowerment** of communities, even in the form of **activism** through the legislature.

Access to and by a community implies interaction and an exchange of ideas and, possibly, roles and functions. Community members who are part of an asset-based, transdisciplinary team will inevitably take on roles of influence that may differ from their previous roles. For example, a church minister may be asked to take on some of the functions of a social worker or psychologist in order to assist the community. It is evident, therefore, that the skill of accessing is integrated with the transdisciplinary approach, as communication and interaction are needed.

In this context the emphasis tends to be on sustainability and guiding a client or community to eventual self-sufficiency by recognising and utilising assets. Only with an asset-based approach are members of a community and team able to **empower** them and others to the point that they can act *as activists* for change and development.

Numerous statements made by group members include "… provide people with the opportunity to gain access into the group"; "advocate on behalf of the family sometimes if they're disempowered" and "… first awaken the community … then you go through the process of 'conscientiation' … make them conscious of what they already have".

Literature abounds with examples that emphasise being adept at transactions with communities. In the spirit of community capacity building (Kretzmann and McKnight, 1993) and the asset-based approach, Ebersöhn and Mbetse (2003) maintain that professionals should encourage communities to acknowledge and use their resources. Smith, Littlejohns and Thompson (2001) similarly believe that, if the emphasis is on building the community's capacities, such a community has a better chance of desired change. Briggs (1993, 1997) and Jones (2002) mention that all members need to be empowered equally and, within an asset-based approach, this could lead to the empowerment and capacity-building of communities. On the legal front, Rainforth and York-Barr (1997) mention that legislation is a motivator for including families in necessary programmes.

Creative chaos skills

The participants also identified creative chaos skills as necessary facilitative skills within an asset-based approach / transdisciplinary team. This is reflected by their statement such as: "how do other people feel about this". "not to attack the person, but the problem specifically" and "brainstorming for different solutions, "a synonym for "creative chaos" from a deficit-model perspective is conflict resolution. From this, two skills categories are derived, namely resolving discord constructively and resolving it through negotiation.

Discord or conflict as a phenomenon is perceived mainly as *constructive* and necessary for the growth of a team. Statements supporting this view are, "you want a bit of conflict…because then you always come to better solutions" and "creative chaos".

Ways to manage and *negotiate* the discord are reflected in statements such as "search for common ground", "negotiation type of skills … to defuse a situation" and "you have to work on some sort of compromise".

Acknowledgement of the value of discord is also illustrated in literature: Rees (2001) states that an environment conducive to constructive conflict resolution is important and enriching for a

team. White and Nair (1999) also assert that every team member could become a catalyst communicator who believes that conflict is constructive. In finding ways to elucidate discord, Fisher and Ury (1991) coined the term "principled negotiation" as a method to assist facilitators in resolving disputes by focusing on mutual gains or a higher purpose.

Teamwork skills

Through analysis of the transcripts, it became apparent that participants also rated teamwork skills as important facilitation skills. Being skilled in teamwork is described in terms of planning and reflecting, the application of norms and role allocation and transition. Four skills categories of teamwork emerged, namely knowledge pertaining to all-embracing or all-inclusive grouping, team process (planning and reflection included), team roles (including role release) and team structure through rules.

An *inclusive* team is one in which all members could be included from the beginning. Related to the all-embracing concept are the ***planning, process and reflection*** of teamwork. All of these concepts mentioned are reflected in the statements, "… everybody should be involved in the team from the beginning", "… starting before the group" and "in your group process … you have this closing where you will have … reflection".

It seems evident that being skilled in the workings of a team means that one starts to facilitate even before the actual formation of the team. Preparation seems essential and, as far as possible, all members should participate in its every step. Just as it is important for everyone to be on board even before the team's official inception, so it is necessary for everyone to periodically evaluated and reflect periodically on their experiences as individuals and as team contributors.

Bruns and Steeples (2001) assert that parents could be involved in the planning as well as the implementation and evaluation phases and are therefore members of equal status in the team and should not be consulted halfway into the process. Rees (2001) also mentions that team facilitation begins before the team gets together, thereby implying that planning and early preparation are crucial. Concerning reflection, Briggs (1993, 1997) again states that one of the qualities of effective teams is the continuous evaluation of roles, values, norms and performance. Jones (2002) also believes that regular reflection is part of the initial grounding phase of teamwork.

When examining skills for dealing with **team roles, roles of disciplines and role changes,** statements include, "realistic expectations…of the different professions", "get to the point when you can do role release and when you can share" and "multiple roles". The concepts of a supportive environment and flexibility in role change are clearly reflected here too.

In literature, facilitation is called for not only in knowing about different roles, but also in being able to identify typical behaviours and styles associated with these roles (Briggs, 1993; Lamprecht, 1990; Robson and Beary, 1995). Hart (1992) describes the various helping and hindering roles in groups that a facilitator should be skilled enough to use to the team's advantage. Jones (2002) further explains that enabling team members to understand the purpose of their efforts creates motivation and a positive attitude.

One of the components of a transdisciplinary model is the overlapping of roles. This *role release* is one of the changes needed to affect an enhanced and sustainable health service (Eloff and Ebersöhn, 2001).

As important as the dynamic process of a team is its structure and stability. Rules are imperative to the meaningful functioning of a team and could be reached consensually and democratically. This was specifically mentioned in a statement from the second focus group: "…need to have a set of rules for the team members". One of the first issues team members could address, according to Robson and Beary (1995), is the establishment of norms or rules by which to abide. Many of these norms are implicit amongst the members of a team, while others need to be specifically verbalised and even notarised. It is perhaps advisable to include the evaluation of rules in the reflection process that a team should undergo periodically. It is likely that this activity will contribute much to the efficient resolution of conflicts.

Empowerment skills

These skills were also esteemed highly by participants, in order to ensure the effectiveness of facilitation.

Skills to validate and empower relevant stakeholders arise from a supportive environment, in which the facilitator tries to ensure empathy, trust and collaboration amongst the team members. The importance of this is clear in phrases and words used by participants in the groups such as, "… be able to validate everybody equally so that everybody is equally empowered in being part of the process".

According to Briggs (1993, 1997), one of the qualities of effective teams, is empowerment of all. Jones (2002) maintains that, in the transforming phase of teamwork, all members could be informed and empowered equally. The asset-based approach is synonymous with the empowerment and validation of people, organisations and situations and the building of capacities of communities (Kretzmann and McKnight, 1993). The approach aims to empower the disempowered and to promote a spirit of participation on equal footing. The importance of empowerment was emphasized by comments of participants such as: "if they are not empowered they don't feel they can contribute, "make people feel comfortable, validated", "everybody in the team should feel they are getting something out if you actually feel that I am worth something when I am there", "sustainability" and "what is the expertise that each person brings into the team", provide people with the opportunity to gain access into the group" "different ways of entering into a community", "facilitate that the whole community buys into the whole concept of group" raise awareness", trained in the working of communities and doing community development, "facilitate groups in a community", "advocate on behalf of the sometimes if they're disempowered", programme of community empowerment … first awaken the community … then you go through the process of concentration … make them conscious of what they already have" and "you are in this community … even go further and facilitating change in legislature for that matter … especially in a transforming society such as ours".

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Management Skills

Through surveying the transcripts, it was also shown that participants esteemed management skills as important facilitation skills. These management skills encompass the skill of facilitating decision making in the team and that of managing the interaction and networking of members within and without the team.

At the heart of teamwork is the action of continuously *making decisions*, from minor preferences to life-changing choices. In the focus group interviews, decision making as a skill is not considered an option but is automatically presumed and discussions revolved rather around the method and process of deciding.

Rees (2001) states that for effective functioning of a team to occur, there must be power or, as Turnbull, Turbiville and Turnbull (2000) put it, collective empowerment within the team, to make decisions or influence circumstances. This implies taking on an asset-based approach which not only acknowledges resources and strengths, but which also shares them as a collective whole. Within a transdisciplinary model or team, making decisions and choices should be consensual (Briggs, 1997), implying that the power is shared, just as the expertise and strengths are shared in an asset-based approach.

Controversy arises when determining who the decision maker should be. As reflected in one of the focus group discussions, the question arose as to whether the facilitator, the team or the client relevant to the situation should have the final say. In a transdisciplinary team using an asset-based approach, all viewpoints in the decision-making process need to be validated and considered through equal empowerment. Decisions made should always be consensual. This does not mean that the team must be unanimous, but that everybody's views have been reflected in the decision-making process (Robson and Beary, 1995, p. 61). In a supportive environment, the client, an equal member of the transdisciplinary team, is eventually respected for how or whether the decision is implemented.

The need to *manage and network* effectively is reflected in the numerous associations of the facilitator with the role of a case manager. Briggs (1993) actually makes use of the concept of a case manager or coordinator who integrates the team decisions into a programme and helps the client to integrate them as well. Robson and Beary (1995) warn that the majority of difficulties experienced in teams originate from an ignorance of team dynamics as well as a lack of skill in managing team processes.

Management may be erroneously interpreted as control or exclusive supervision. In a transdisciplinary team that strives to be supportive, adaptable and asset-based in its approach, such an interpretation becomes redundant. Instead, the art of managing, if executed appropriately, should be synonymous with the art of facilitating. It implies a facilitation that guides rather than directs and denotes a spirit of stewardship as well as of

ownership. Comments of participants that indicated their strong feelings about empowerment as an important facilitation skill, are: "You need strong management styles or management skills", "you have to have good management skills and know how to network" and "facilitate the group to prioritise, "decisions based on consensus that the group must reach", executive power of actually implementing power is not with the group … parents need to decide", put all the options on the table and let the client make the choice must be an informed choice".

It is however important to note that the skills identified and described above, are not unique to the asset-based/ transdisciplinary approach. This is borne out by the numerous references to authors discussing the same skills in a generic context. Of significance, though, is the fact that the participants consistently indicated how these skills can be adapted to inform an asset-based/transdisciplinary approach. This extension of the facilitation skills is mirrored by reference to *shared leadership* and *role release.*

Equally important is to note that an emerging theme was illustrated by the participants indicating that certain prerequisites for the successful application of the above-mentioned facilitation skills within an asset based/transdisciplinary approach, are: attitudes, knowledge and approaches. A brief explanation of these emerging themes is given below.

Attitudes

Participants indicated that the facilitator should display an underlying attitude of involvement, flexibility, a supportive nature, transparency, trust and respect.

Knowledge

In addition, the facilitator must be knowledgeable with regards to diversity, ethics, discipline specific information, general expertise, team principles, process and needs.

Complimentary Approaches

The participants indicated that for the facilitation skills to come to fruition within an asset-based / trans -disciplinary team, the following complimentary approaches should be employed.

Family-centred approach

In the context of health professions services, the participants of the focus groups emphasised the importance of recognising, including and learning from the family. The focus seems to be not only on the client who needs guidance, but on the family system affected by and affecting the situation.

Transcripts referring to this include, "we don't see the family as a whole", "advocate on behalf of the family", "make the client and then the family part of the planning process ... because our perceptions of what the problem is may be totally different to what the client and the family sees as the problem" and "change according to the needs of the family.

Literature supports this view through authors such as Bennett, Zhang and Hojnar (1998) who emphasise collaborative partnerships with families by focusing on family structure and characteristics and encouraging family centred principles. Mittler and McConachie (1983) also recognise and respect the need to value the uniqueness of each family while Turnbull at al. (2000) described the evolution of the family-professional partnership to the current or ideal stage in which families are empowered to become active members In the team:

The transdisclplinary model advocates for all relevant stakeholders to be equally involved in the team process and often makes use of a family member as the core person to implement team decisions (Briggs, 1997). This complements the shared leadership and empowerment skills mentioned above through mutual accountability and building of existing capacities and strengths in contrast to other service delivery models, the transdisciplinary model plans according to the needs and assets of the family first. rather than according to the dictates of the professionals.

Narrative approach

This approach is introduced with the statements from members of the groups, "we teach our learners.., a lot about the narrative approach" and "... that technique in the African context is great because they're story tellers of note and that's the way they communicate. So the family story is a nice technique to use". Although mentioned in only one of the focus group interviews, this approach is considered important by the independent coders and me as it relates strongly to the asset-based approach,

the recognition of diversity and the empowerment of team members.

In the narrative approach, problems and needs are externalised and clients are empowered to construct their own life stories and meanings (Eloff, 2002). Language and therefore diverse cultural elements of members are used as tools to enable these processes to take place. This approach can be optimally used by utilising the assets and experiences of team members familiar to this approach and guiding the team through the process of meaning construction. Facilitators knowledgeable of the diversity of their team members and encouraging of open communication can guide members to take ownership of their roles in the team through this approach.

Approach of holism

Another category and approach, which emerged, is that of taking cognisance of the gestalt of the situation and understanding the interrelations therein. This is mentioned, and implied in the statements, "the whole sense of everybody knowing about everything and linking people to each other", "we're only interested in this child and we don't see the family as a whole". "... the whole thing", holistic approach and everybody has got to do that". Mention was also made of techniques such as "encompass and genograms" which structure family and situational Information into a totality. The words "your whole life Is shaken" spoken by a parent of a child with a disability also allude to the 'fact that events and experiences do not happen in isolation and that the aspects of a situation addressed by a team are therefore always multifaceted.

Jones (2002) states that a holistic approach needs to be integrated in the initial or grounding phase of teamwork. Briggs (1993, 1997) agrees that systemic thinking is an essential part of an effective team. In the context of health services, which acts as the backdrop for many transdisciplinary teams, research has shown that parents generally perceive holistically (Winton, 1988) and could therefore more easily interact in teams using the same approach.

The asset-based approach mentioned earlier is, according to Ebersohn and Eloff (2003), holistic in perspective itself. Therefore, incorporating said approach could automatically be incorporating the other. By perceiving situations systemically rather than partially it is easier to identify and utilise the strengths and capacities of the constituents of a team and empower individuals and communities.

Again one needs a balance between appreciating the gestalt of a situation and recognising the elements comprising the whole. A transdisdlplinary approach strives not only for a spirit of partnership, but acknowledges and realises the individual differences of team members. Collaboration is achieved through individual commitments to a shared purpose.

Limitations and recommendations

The challenges and possible pitfalls of facilitating asset-based, transdisciplinary teams must be acknowledged. This inquiry was limited in the variety of participants represented in the focus group interviews. This influenced the quality and richness of the findings and prevented the researchers from comparing viewpoints. Students and younger participants were also not included in the focus groups.

Recommendations

It is further recommended that research be carried out on the inter-relationship among professionals to and how the asset-based approach can be applied effectively in these situations. The role of care-giving as a professional function can also be investigated. This is important as the global tendency is towards involving all stakeholders in any given situation. This would imply that, especially within the health profession, caregivers and educators should be given voice and that communal assets be realised.

Finally, where further research into facilitation in asset-based and transdisciplinary teams is concerned, we recommend that this could be expanded to include not only necessary skills, but also the knowledge, attitudes and values accompanying them. It became clear in this study that skills alone do not suffice in the making of an effective facilitator, but that adequate and relevant prior knowledge as well as a sense of concern and an open-minded attitude are imperative. In future, facilitators should be knowledgeable and skilled in team dynamics in order to address obstacles that could hamper the team process. This is particularly important when attempting to inculcate certain attitudes in a team where members may not hold or practice those attitudes and approaches.

Training

The theory of transdisciplinary and asset-based approaches is fairly new to lecturers and textbooks at tertiary institutions. In practice, therefore, current and prospective facilitators could undergo pre- and in-service training so as to acquire and practice the knowledge, skills and attitudes necessary to manage a transdisciplinary team within an asset-based approach. Students, especially those in the health professional field, could be made aware of these novel approaches, as well as their pitfalls when facilitating multifarious teams.

Resistance to novel approaches, possibly caused by ignorance or a sense of threat, is unavoidable and should be addressed sensitively.

Training aside, health professionals should also be encouraged through their affiliate bodies to incorporate the above mentioned approaches in their practices and to be open to including and exchanging various roles and perspectives, to enhance the assessment and manage.

SUMMARY

As part of a broader and over-arching study on the changing perceptions and approaches through the adoption of an asset-based approach within a transdiciplinary collaboration, the researchers undertook a secondary study, almost by happenstance, to determine if a definitive set of facilitation skills could be identified within the same circumstances. The broader study involved an Early Childhood Intervention collaboration in the rural KwaZulu-Natal, between the Universities of Durban-Westville and Pretoria, during 2000 through to 2002.

The participants in the focus groups for the secondary study consisted of professionals from the transdisciplinary team. The following facilitation skills were deemed necessary within an asset-based transdisciplinary team context, namely: interpersonal skills, community work skills, creative chaos skills,, empowerment and validation skills, teamwork skills and management skills. These facilitation skills are not unique to the asset-based transdisciplinary approach. Of significance is the fact that the participants extended and aligned these skills to meet the dictates of the specified approach by reference to terms such as shared leadership and role release.

Of further importance are the emerging themes that, (a) the correct underlying attitudes and knowledge of ethics and diversity are essential for the utilization of facilitation skills and (b) the asset-based transdiciplinary approach should be used in conjunction with three complimentary approaches, namely: the narrative approach, the family centred approach and the holistic approach, for maximum benefit.

Finally, the authors addressed the research and training implications of the study. Limitations that prevailed within the focus group due to the small size of the groups, lack of variety of professional disciplines, and lack of representation related to age and gender were outlined. These limitations could be ascribed to the fact that the secondary study was undertaken by happenstance, as is often the case within community psychology.

It is concluded that the researcher within a community psychology context should maintain a certain degree of flexibility to accommodate the unexpected which is common cause within a social setting.

The initial framing of the research questions is normally the result of a priori observation deliberation and decision. However, these questions should not be considered set or limiting, because the research may call at any time for new skills and knowledge to address emerging themes. It has also proven to be highly beneficial and economical, to capitalize on the conducive factors prevailing in the primary study, when the lacunae with regard to definitive facilitation skills within an asset-based transdiciplinary team became evident.

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