EBTA SOLUTIONS FOCUSED PRACTICE DEFINITIONS
Adopted by the EBTA ebta-board 21.4.2012

This document contains EBTA’s description of what Solutions Focus (SF) looks like now and how it is generally applied in treatment contexts like counselling, psychotherapy and rehabilitation. The approach is also used in other contexts, such as education, coaching, social work, sports and management. Our definition is based on numerous other existing definitions and is subject to change as the approach develops further.

Solutions Focus Practice
Solution Focused Brief Therapy treatment is based on over thirty years of theoretical development, clinical practice, and empirical research by Insoo Kim Berg, Steve de Shazer and their colleagues and clients at the Milwaukee Brief Family Therapy Centre in the early 1980s and later developed by many professionals in many countries all over the world. Developed inductively rather than deductively, SF is a highly disciplined, pragmatic approach rather than a theoretical one. The developers observed hundreds of hours of therapy over the course years, carefully noting the questions and client’s answers, behaviours, and emotions that led to clients conceptualizing and achieving viable, real-life solutions. The questions that proved to be the most consistently related to clients’ reports of progress and solutions were carefully noted and incorporated into the approach, while those that did not were eliminated. (De Shazer S., Dolan Y., 2007).
SF builds on the work of Milton Erickson (client beliefs, capacity to change, choice, relationships, language, instructions, interaction) and of the Mental Research Institute in Palo Alto (interaction, behaviour, doing different, frames of reference, and reframing) and systemic family therapy (cybernetics, communication, feedback, relations, networks, complexity). It draws from the philosophical ideas of Ludwig Wittgenstein (language games, descriptions as reality).
Solution Focused treatment is a form of empowerment, because clients are developing the skills for self-sufficiency and supported to obtain basic political, economical, social and psychological opportunities.

Figure 1. Today Solution-Focused treatment can be defined as a, client-directed, interactional, competency-based, future-oriented and goal-directed
Client-directed
Client-directed is a stance of working mainly within clients’ perceptions and having as few assumptions about the client as possible, giving every client enough recognition, validation and normalizing concerns. Treatment involves forming and working within a respectful, non-blaming collaborative relationship. Professionals listen to clients, promote client involvement and privilege their ideas and what they want, understanding that clients are choice makers in their own lives. Professionals try to intervene as economically as possible and find ways to facilitate solutions as fast as possible. This means that the other main stances – interactional, competency-based, future-oriented, and goal-directed are used with caution in order to maintain sensitivity to the client’s perspective.

Main tools:
- Treat clients as experts in their situation.
- Show empathy with client efforts and situation.
- Use compliments and appreciation.
- Treat all involved as equals.
- Focus on what and how the clients are expressing.
- Work from within the client’s frame of reference as the most important, but not the only possible frame.
- Use dialogue to talk through what you are thinking.
- Summarize with client words and reformulate if necessary to fit client frames.
- Express own confusion and doubts while assuming the clients have good reasons for what they are and do.
- Use rituals to show respect, sharing and celebration.

Interactional
The different types of questions used in SF (pre-session change, goal-oriented, exceptions, scaling, and coping) have two directions: 1.) an individual direction “If the miracle has happened, what would be the first sign that shows YOU that something is different?” and 2.) a relational direction “WHO ELSE would discover, that your problem has gone?”

Language constructs and re-constructs both problems and solutions as an interactional process. Every question by the professional opens up different and new perspectives. Every remark influences, every summary focuses, and every reflection leads to understanding and misunderstanding. The process emerges based on what the clients say, do, and want as observable phenomena. This leads to a pragmatic approach, treating each case as different rather than imposing a fit into a predetermined theoretical or conceptual framework.

The interactional view means “staying on the surface”, concentrating on behaviour rather than “reading between the lines”. In addition, it means asking questions in the “relational direction” to open up the differences between the involved persons and forces the thinking in interactional terms (“Putting difference to work”) rather than thinking in the way of an individualistic disease, ignoring the context in which behaviour happens.

Main tools:
- Listen what clients say and how they say it.
- Talk about specific relevant situations with appropriate (client) words and expressions.
- Organize the descriptions and elaborate on different perspectives and possibilities.
- Use open questions that start with words such as who, what, and when.
- Listen for signs of success, positive differences.
- Use presuppositions of clients’ possibilities.
- Ask for details.
- Find out what is going on between involved people rather than within them.
- Use the different perspectives of the people involved to build solutions.
- Reframe labelling and narrowing descriptions.
- Use breaks (time for personal reflection) when possible.
- Share thoughts and embed what the clients have thought and learned.
- Externalize, use the ‘bird’s eye view’.
- Give multiple choices/suggestions.
- Use metaphors and examples.
- Summarize with care, knowing your influence.

**Competency-Based/ Resource-Oriented**

Competency-based means focusing on and using resources, strengths, abilities and successes of all involved in demanding situations. Working with competencies is resource activating, transforming resources to skills and competency. A competency based approach assumes that everyone who seeks help already possesses at least some experience and some skills necessary to create solutions, even though they may need some, at times considerable, help describing the details of their better life and may need extra resources. Differing from skill-building and behaviour therapy interventions, the SF treatment approach assumes that solution behaviours already exist for clients at least to some extent. These ‘exceptions’ are identified and amplified for progress. Using a competency-base leads to a minimal emphasis on failings, inabilities, motives, conflicts, and problems. In some situations, clients need alternatives to counterproductive or harmful behaviour, interaction, cognition and feelings. In these situations, clients are helped to do something different within their repertoire, values and frame of reference.

Main tools:
- Find and amplify any success, progress, failings, coping, etc.
- Find hope in hopelessness – the unfulfilled dream.
- Use presuppositions of change.
- Encourage clients to use their own abilities as well as external resources.
- Use humour, highlighting several realities at once.
- Encourage clients to identify how previous solutions can be used.
- Ask the clients to identify times when they managed things better. How did they do it? - How could they do more of it?
- Analyse success in related situations.
- Use coping questions.
- Ask and find ways to use client’s learned skills and any resources they have.
- Activate and co-work with client’s family, friends, professionals and local services.

Main tools in finding different ways of doing:
- Normalize the difficulties.
- Make sure you’re able to talk about serious problems: ‘lift the cat onto the table’.
- Find out what repetitive behaviour or habits are maintaining the problem sequences.
- Find out what the client’s frame of reference is: ‘I have to/can’t do, because…’
- Find and try out opposite or creative new behaviour within the frame of reference.

**Future-oriented**

Future-oriented means finding the best hopes and desires in client’s problems and helping clients progress towards them: “Every problem is a frustrated dream” (Peter Lang). A positive view of the future invites hope. Hope helps to cope with current hardships, recognizes signs of
change, inspires the generation of solutions, and creates positive emotions that further evoke skills for progress.

Future-oriented builds on the notion that change in actions, relations, thoughts, feelings, outlook, sensations, external environment and other people, is inevitable. The desired change is the challenge. Small increments of change lead to large increments of change.

There is a parallel with Aristotle’s concept of a good life (Eudaimonia).

Future-oriented is related to goal-directiveness, as both stances lie in the future.

Main tools:
- Address possibilities throughout the work.
- Ask about changes and find useful change.
- Tap into the visions, hopes and ideals of the client.
- Add perspectives of important persons.
- Concentrate on the topic at hand and “best hopes”.
- Ask what life would be like for the client if the client can cope with the problem or with significant change.
- Give and evaluate experiments and homework assignments.
- Ask if there is anything else.

Goal-directed

Goal directed approaches help clients get what they want by finding ways to reach some important specific and concrete goals in that direction, making life better as the client defines it (more of this). Goals direct the treatment, focus it, and inform the end. By acting in order to achieve goals and by evaluating the process, goals change. This is called “goaling”. The process by which the goal is reached is often called “solutions building” and alleviates the step-by-step nature of progressing towards the goal. The solution might have little or no direct relation with the problems. Goals are often connected with positive reframing of the problems.

Using concrete and practical goals concentrates the client on behavioural issues in everyday life. It includes looking at events from a non-normative stance and being creative in building solutions. Being practical in this sense means that any ideas for solutions are first tested and evaluated in the situations where they should have effect. After this evaluation, meaning is constructed.

The work ends when clients have made sufficient progress and have enough confidence to continue by themselves.

In situations where serious danger or harm is imminent, the dangers and risks have to be dealt with appropriately. This can be done together by working on goals and safety.

Main tools:
- Ask what the clients want instead of questions about the problems.
- Construct a concrete vision of a preferred future for the clients.
- Use the miracle question or its alternatives.
- Identify the good in the bad and its implications.
- Transfer the goals into the real life of the client, with perspectives of important others, homework assignments, etc.
- Use scaling questions to identify small but significant change.
- Help to make progress by defining small actionable steps.
- Evaluate and end the working process appropriately when clients report that things are good enough and/or they know how to approach the next steps.
- Ask if there are other things to address.

Main tools when serious danger or harm is imminent:
- Explore when, where, with whom and how pieces of that preferred future are already happening.
- Give appropriate time for clients to express worries and troubles.
- Explore and evaluate each danger/harm/risk and safety measure together.
- Find and build on the client strengths within the situation.
- Use all available resources.
- Use thorough evaluation and follow-up of both danger and safety.

**Code of ethics**

Acknowledgements:
Practitioners of SF acknowledge the open source ethos of SF and give credit to the developers and others they refer to. They make no claims about ownership or exclusive use of SF. They conduct and report research competently.

Law and ethics:
They will always act within the law and with honesty and integrity. They set, communicate, and observe clear, appropriate, and culturally sensitive boundaries governing their own practice. They keep adequate records. They have an ethical advisor.

Client relationship:
They will ensure that their conduct with clients is always appropriate. They show respect for their clients' expertise, confidentiality, health, safety and autonomy. They never make false claims or otherwise mislead their clients or others involved. They do not exploit the relationship with their clients for their own personal, professional or financial benefit. They make clear agreements with their clients and honor these agreements. They empower clients in their networks.

Practitioner skills and well-being
Practitioners should keep professional knowledge and skills up-to-date through continuous training, peer contacts and supervision. They act within the limits of their skill and knowledge and refer clients to other professionals and services if appropriate. They limit or stop their work, if their performance or judgment is affected by poor health or any other reason.

**SF is a continuously evolving practice**

Citation by Steve de Shazer:
‘Insoo’s first law has always been “Thou must be flexible”. As we observed our practice over the years, these “questions” were the questions that seem most likely to get useful responses. Now, if you can get as useful responses with other questions, great. The next step is to figure out what came before that question, i.e., the context and the sequence of question, response. Then find simple situations in which you can use the new question and see if you tend to regularly get useful responses – if so, then you have something. If not, perhaps you do not want to use it very often. This process takes a lot of patience, a lot of time, watching/listening to tapes, etc. But if you end up with a “new” useful question, it’s worth it’. (de Shazer 2000)

Points to think about:
- Start from something that has been working for you and other skillful people.
- Always respect, validate and try to understand the perspectives of all involved.
- Carefully do the sometimes exhaustive groundwork for building the solutions.
- Be systematic and concentrate on one thing at a time.
Look at your/others' practice (what you/they are actually doing – not the fixed) model (explanations) or the elaborate techniques.

Be curious of the professional's questions, reactions, and behaviour: What came before and what happened next?

Experiment continuously: observe, reflect and learn. Try to find new ways of doing things.

Be open for contradictions, exceptions and chance.

Be creative and accept mistakes and randomness. New developments may also come from intuitive actions and reactions.

A word of caution! This description was made in English. Be cautious with translations. Some of the ideas and terms might not translate directly.

References:


Huibers A, (2012), How does SF work, SFT-L Solution Focused Therapy SFT-L@LISTSERV.ICORS.ORG, 12.3.2012


Solution Focused Therapy (n.d.), Wikipedia.org/Solution_focused_brief_therapy, read 19.3.2012


