### SOLUTION-FOCUSED BRIEF THERAPY:

### WHAT IS IT & WHAT'S THE EVIDENCE?

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### SFBT:

#### SOLUTION-FOCUSED BRIEF THERAPY

- \*\*Treatment approach developed by Steve de Shazer, Insoo Kim Berg and associates from 1982 on.
- \*\* Pragmatic emphasis, to determine active ingredients of psychotherapy and change in the real world.
- Make the active ingredients knowable and easily accessible.
- Clinical research has informed the practice of SFBT since it's early history.

## TENETS OF SOLUTION-FOCUSED BRIEF THERAPY: THREE RULES

- # If it isn't broken, don't fix it.
- # If it works, do more of it.
- # If it is not working, do something different.
  - If it doesn't work, don't "try harder", rather stop doing it, and do (or view) something else (or differently).

### TENETS OF SOLUTION-FOCUSED BRIEF THERAPY:

- Small steps can lead to big changes.
- The future is both created and negotiable.
- \*\*A solution is not necessarily related to the problem.
- Solution language is different from problem language.
- Change is inevitable, problems do not happen all the time.
- Find ways to cooperate with the client.

### SOLUTION-FOCUSED INTERVENTIONS:

- \*\* Positive, collaborative, hopeful therapist stance.
- \* Look for exceptions.
- \*\* Look for previous solutions, strengths, resources and abilities.
- Questions as primary vs. directives or interpretations.
- \* Present and future orientation.
- **Compliments.**
- \* Encouragement to do more of what is working.

## SPECIFIC INTERVENTIONS:

- \*\* Ask about pre-session change.
- \* Clear, concrete and specific goals.
- Miracle question.
- \*\* Scaling questions.
- Constructing and paying attention to solutions and exceptions.

### SPECIFIC INTERVENTIONS:

- **Coping questions.**
- "Is there anything I forgot to ask?"
- \*\* Taking a break before the end of the session.
- \* Experiments and homework assignments.

## SPECIFIC INTERVENTIONS:

SECOND AND SUBSEQUENT SESSIONS

- "So, what is even a little better since the last time we met?" (expand and amplify)
- \* Progress scaling.
- # Gently checking homework assignments.
- \*\*Ask about differences, learning since last time.

#### APPLICATIONS:

- \* family therapy
- \*\* traditional psychotherapy
- couples therapy
- domestic violence offenders
- sexual abuse

- \* substance abuse
- \*\* schizophrenia
- \* social service agencies
- schools/parenting
- **# prisons**
- business applications

#### SUMMARY:

#### Solution-focused Brief Therapy:

- \* builds on client resources, skills and abilities.
- \*has a present and future orientation, building goal picture.
- focus on previous or formulated solutions and exceptions to problems.
- mencourages clients to do more of what works.
- \*\*simple but not easy, takes skill to become proficient.

# SFBT: WHAT'S THE EVIDENCE?

- \*\* 77 relevant studies, 8 randomized controlled trials, 24 comparison studies.
- \*2 meta-analyses, 2 systematic reviews.
- Effectiveness data from over 2800 cases.
- Research done in "real world" settings, so more transferable.

#### POPULATIONS

Problem drinkers, problem gamblers, families, adolescents, prison inmates, parents (parenting skills groups), domestic violence offenders, couples, college students, primary school students, secondary school children, children in residential treatment, outpatient mental health clinic patients, Hispanics, sick employees, suicide hotline callers, diabetics, developmentally delayed adults.

#### PROBLEMS

Parent-child conflict, child behavior problems, diabetes, domestic violence, suicide, self harm, alcoholism, substance abuse, problem gambling, depression, anxiety, schizophrenia, orthopedic injury (return to work), delinquency, antisocial behavior, life coaching, school counseling issues.

#### SETTINGS

High school, junior high school, elementary school, university clinic, private practice, military clinic, residential treatment facility, domestic violence program, foster care, problem gambling program, inpatient substance abuse program, outpatient substance abuse program, orthopedic rehabilitation, prison, juvenile secure custody, mental health clinic, inpatient psychiatric facility, employee assistance program, work hardening program, public social services, family counseling center, suicide hotline.

- \*\* SFBT is equally effective for all social classes.
- Results usually achieved in 3-5 sessions.
- \*\* 18 of 24 comparison studies show convincing benefit, one is equivocal.
- \*\*8 randomized controlled trials show benefit from SFBT, 5 show benefit over existing treatments.
- Overall 60% success rate with average of 3-5 sessions.

Kim, J.S. (2006) meta-analysis conclusions:

Small, positive treatment effects on outcome measures for: externalizing behavior problems, internalizing behavior problems, and family and relationship problems.

\*\* "SFBT appears to be effective with internalizing behavior problems such as depression, anxiety, self-concept and self-esteem but doesn't appear to be as effective with externalizing behavior problems such as hyperactivity, conduct problems, aggression or with family and relationship problems." (page 16)

- "So while the results from this study found small treatment effects for SFBT, other meta-analyses on psychotherapy found only slightly better or equal results depending on the research study." (page 16)
- "... the results were comparable to other metaanalyses that examined the effectiveness of social work practice models and psychotherapies, especially under real world settings." (page 19)

### SFBT RESOURCES:

- \*\*NWBTTC.com—links, handouts, books, references.
- \*\*Interviewing for Solutions (3rd ed.). de Jong & Berg (2008).
- More than Miracles: The State of the Art of SFBT. de Shazer & Dolan et al (2007).
- \*\* Working with the Problem Drinker. Berg & Miller (1992).