

Solution News

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United Kingdom Association for Solution Focused Practice

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SPECIAL ISSUE **UKASFP 2005 Conference:**

ARTICLE

Teaching the Difficult Craft of Not Knowing

Chris Iveson shares his quest to know and do as little as possible

BRIEF ARTICLES ON EIGHT WORKSHOPS

Presenters and participants write about:

- Working with children
- Supervision
- Working with mandated clients
- Abuse and trauma work
- Working with asylum seekers
- Research
- Domestic violence
- Solutions in hospitals

Also in this issue:

Editorial

Association News

Details of what the UKASFP sub-systems have been up to

Solution Gnus

All your questions about solution focused working answered

Member News

Information on what our members are doing and plan to do



Greetings again from Solutions News-land!

This issue is a bit of an experiment, as we decided to try and give our readers who went to the UKASFP

conference in Preston a

bit of a reminder of this useful day out, and those who never made it a taste of what they missed. I must say I'm nervous about it, as in the past I've personally always dreaded reading 'conference specials', but hopefully we've managed to do it in a way that everyone will find interesting and useful.

We got hold of the conference's keynote speaker (Alasdair MacDonald) early and published an article by him last issue, but the conference also featured a fascinating 'all conference workshop' run by Chris Iveson, which he has kindly turned into an article for us on the following pages. The rest of this issue is made up of a multitude of 'mini-articles', which give a flavour of workshops from the day, and hopefully some food for thought! Wherever possible we have got both the presenter and someone who attended to write about each workshop, to give a truly 'binocular' view on them.

This issue is the first to be launched straight onto our web site (www.solution-news.co.uk), and from now on you should be able to get all future issues there. One of the advantages of this is that for the first time we are getting feedback that tells us how our readership is growing, and I've discovered some quite unexpected things such as the fact that we have now have a solid readership base in Singapore. Hi, you guys! Remember that we welcome contributions from any country! Thanks to all of you everywhere for reading, and please keep sending us letters, comments, articles, and questions!

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Teaching the Difficult Craft of Not Knowing

Chris Iveson takes on the impossible quest for the 'philosopher's stone' of brief therapy

Socrates' strategy as a philosopher was never to ask a question to which he knew the answer. Add to this the conversational rule of turn taking, and every conversation he had would have been a creative (or as we might say today a co-creative or co-constructive) event. It would probably be safe to say, at least in Socrates' absence, that he took 'not knowing' to an art form. The rest of us will probably have to settle for 'not knowing' as a craft – farmhouse rather than Chippendale.

At BRIEF under the ghostly eyes of Socrates and William (don't need it, dump it) Occam we are trying to know and do as little as we can while still turning out the product: opening possibilities in people's lives. Doing it how we do it is not the only way to do solution focused brief therapy, and no better, purer or more ethical than other ways. It is simply different. However, it is a "different" that makes a difference. Whatever we are able to do without and still be effective therapists can no longer be regarded as essential. Almost everyone who has engaged with solution focused practice

will have had the experience of realising how much of what we believed to be fixed and necessary turned out to be dispensable: not necessarily without utility, but still not strictly necessary to the process of effective therapy. Look at all the early de Shazer, Berg and team (de Shazer, Berg et al, 1986; de Shazer, 1986) texts and this principle (the principle of Occam's razor) is one of the great driving forces. Dispensing with diagnostic structures, with hypotheses about the cause or meaning of behaviour, indeed,

with any psychological theory as a means of understanding or explaining behaviour, the team at the Brief Family Therapy Centre in Milwaukee began a journey towards not-knowing that decade by decade is transforming the doing and viewing (to borrow some words from Bill O'Hanlon & Sandy Beadle, 1996) of therapy.

What else?

So what are the ways we teach the craft of not knowing at BRIEF? An exercise that many thousands of potential brief



Chris Iveson is co-founder (with Evan George and Harvey Ratner) of BRIEF (www.brieftherapy.org.uk). A former social worker and family therapist he is interested in how solution focused principles such as 'not knowing' can help improve the effectiveness of statutory work in child protection, mental health and criminal justice.

"Compliments require a form of 'knowing' that doesn't sit easily with the principle of 'not knowing'."

therapists have done with differing mixtures of frustration and wonder is this:

EXERCISE 1. JOBSKILLS

In pairs one ask the other:

What are you good at in your job?

What else?

x 50

What can the interviewer possibly know in this scenario other than that 50 is merely scratching the surface? For the person responding to these questions each "What else?", when it works, is like opening a door into another room, a room that has always been there but is rarely entered and its contents half forgotten. The therapist in these interviews cannot know the meaning of the answers, cannot know if the answers are useful and cannot know what difference voicing these answers will make to the client's life. All that the therapist can know is that there is an association between constructing these conversations and clients reporting improvements in their lives and it is this (still being researched) association that justifies the activity.

Power handover

The ultimate 'not knowing' question is a variation of a question asked by professionals since the first shopkeeper asked "How can I help you?" This is a question only the client can answer and once it is asked the whole future of the relationship is in the client's hands. No answer means no business. This is one of the basic tenets of the client-professional relationship: that the client determines the purpose of whatever contract is established. Solution focused therapists are among those at the forefront of re-establishing this foundational principle. At BRIEF our version of the question is most usually: "What are your best hopes from our work together?"

EXERCISE 2. BEST HOPES

In groups of three or four each take turns being the client and the therapist.

Begin the interview with "What are your best hopes from this therapy?" and continue developing the conversation until a contract can be made.

As soon as the basis of a contract has been found (e.g. I want to be happier, I want to free from depression, I want my child to behave) change roles and do another interview.

Have at least two goes each.

With this question there comes a certain sort of knowledge in the shape of an assumption: all clients have a valid reason for being there (in shopkeeper talk: the customer is always right). This assumption holds in every situation where the client is present while at the same time having the physical means to be absent. Knocking on the door does not mean you have a client: not having the door slammed in your face means you have while the door is open. In solution focused work this assumption is seen to place the onus on the therapist to discover the client's good reason for being there and it is therefore a required interviewing skill to be able to develop a conversation with every client that leads to a possible contract or, what Harry Korman would call a "common project". (Korman, 2004).

Starting in the middle

The ultimate test of the 'not knowing' position is to be able to take over an interview in the middle knowing only the client's last answer. The logic here is that the information gleaned from the interview is the client's only, and cannot be 'known' by the therapist. Neither can it be understood, processed or used in any way. Each question should be constructed only from the client's last answer and the 'listening rules' of solution focused interviewing (strengths, resources, indications of a preferred future, historical detail that might support this future etc).

EXERCISE 3. "DON'T KNOW"

Participants are a multi-mouthed solution focused therapist with no mouth being able to ask two questions in a row. Each question must follow the last answer.

The client begins (in this case) in the middle with the last answer (e.g. "Don't know") and the therapist picks it up from there (e.g. "What do you think?"). The client answers the questions that work and (as the facilitator) engages participants in a discussion about how to make it work when it doesn't.

This exercise (inspired by Palazzoli and colleagues' work in Milan during the 1980s) demands total listening to the client and virtually no listening to our own voices. As no therapist voice can develop a line or operate from an idea inside their head, all each therapist voice can do is select what aspect of the client's last answer will form the basis of the next question (this selection being based on the principles of solution focused listening).

And how far can we take it?

This most extreme version of the many ways solution focused brief therapists try not to know puts into question the necessity of both tasks and compliments. Solution focused tasks require, in their indirectness, a significant amount of thought in which information about the client is processed. The old idea of customer, complainant, and visitor is still a common framework for assessing the client (or the client-professional relationship). Such processing is an example of the very sort of 'knowing' that we are trying to get away from. The fact that it is not a 'problem focused knowing' makes it no less 'knowing'. Compliments, too, require a form of knowing that does not sit easily with the principle of 'not knowing'. They are, after all, the product of an assessment. We only have to give a bad compliment (e.g. one which celebrates a positive quality within our own culture which is regarded differently within the client's culture) to know how flimsy and provisional these assessments can be.

'Not knowing' raises innumerable practical questions: about using a solution focus in jobs that require the gathering of information, assessments and judgements on such things as risk, resource provision and need; about the sharing of knowledge that we 'know' to be useful such as parenting skills, reading systems or presentational skills, and about the impossibility of existing without knowing. Such questions can be used to explore and value traditional ways of 'knowing' but they should not be used to deny or devalue our current, culture-wide interest in trying to do without such securities. The quest to not know is one of the most fruitful in the history of therapy. The solution focused approach has been a major contributor to this shift of direction and just as de Shazer and Berg transcended their roots in MRI, so will some of today's solution focused brief therapists transcend their roots in de Shazer and Berg.

And some knowing is okay.

EXERCISE 4. KNOWING WHAT?

In pairs (or any other configuration) towards the end of a course take ten minutes (or any other number of minutes) each to interview the other beginning with the question:

What do you now realise you already knew about solution focused brief therapy before the course started even though you didn't necessarily know that you already knew it?

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ASSOCIATION NEWS

A round-up of the work of the *UKASFP* sub-systems

General committee news

The new slightly bigger general committee met up in Birmingham in August, to consider what can be done next to develop the association. The full minutes are available on the UKASFP smartgroup (at <http://www.smartgroups.com>).

We are currently one member short, as Joe Windsor had to resign earlier in the month. His contribution for the short time he was able to be on the committee was much appreciated. Steve Freeman, our National Development Officer has recently sent out a press release regarding the association and the conference, and we have begun to get responses to this, but Steve is short of contacts in charitable, private and public sector organisations. If anyone is able to provide contacts in such organisations, Steve would appreciate them getting in touch with him at steve.freeman1@ntlworld.com.

Quotes have been obtained for the redesign and setting up of the UKASFP web-site, but more work needs to be done on this, and committee members will be doing further research before their next meeting. Solution News and its website were also discussed, and the possibility of placing spoken word audio files on SF topics on the website was also suggested. Ian Smith will do some work on this, but if any other

members are interested in helping to develop this idea, we would love them to get in touch.

Carole Waskett has already taken some steps toward setting up a meeting for Solution Focused trainers interested in networking, and the committee support this (although it will not be an official part of the UKASFP). Details on the planned meeting appear in "Member News" this issue.

The very first steps toward facilitating local networks around the country were taken at the conference, where attendees were invited to leave contact details which were pooled and given to an identified person in each region who agreed to co-ordinate. While some areas already have well established local interest groups, others are just beginning to share ideas by email and arrange their first meeting. The committee has written to the co-ordinators to see what further help and support they would like from the association.

The accreditation committee completed its work and has been disbanded. The most popular option in the vote on accreditation was that whilst accreditation as a solution focused therapist should be done primarily through the existing national bodies (e.g. BACP), the UKASFP should explore the possibility of setting up an entry level

qualification in collaboration with such a body. A new sub-group is needed to do this work, and the committee will be approaching members of last year's accreditation committee to see if they will be willing to be involved in this. Anyone else who is interested in helping out can email Dominic.Bray@ukasfp.co.uk.

The committee also discussed keeping the association finances in order, membership renewal, setting up a 'buddy' system for new members, and how the association communicates with members (including setting up mechanisms for dealing with feedback).

Anyone who wants to get in touch with the committee can do so by emailing committee@solution-news.co.uk.



Conference committee

After a second successful conference, the conference organising committee is now planning for UKASFP3 which will be on 16th June 2006. Anyone interested in presenting should get in touch with Janine Ross (janine@sfbt41.freeserve.co.uk) as soon as possible, as the organising work has already begun!

UKASFP Conference workshops

Index of Brief Articles:

Engaging the Imagination - Creative Ways of Working with Children and Families

Presenter's Summary by Rob Black Page 8

Participant's Summary by Yasmin Ajmal Page 8

Supervision

Presenter's Summary by John Wheeler..... Page 9

Participant's Summary by Maureen Smojkis Page 10

The Mandated Client - Working in the Solution Environment

Presenter's Summary by Peter Lewer Page 11

Participant's Summary by Mike Porter..... Page 11

A Solution Focused Approach to Working with Survivors of Abuse and Trauma

Presenter's Summary by John Henden..... Page 13

Participant's Summary by Charlotte Moss..... Page 14

Asylum, Torture, Interpreters and a Solution Focused Approach

Presenter's Summary by Steve Freeman..... Page 15

Participant's Summary by Rachael Dunn Page 15

Research and Influence on Practice

Presenters' Summary by Ian Smith, Helen Lloyd and Paul Hanton Page 16

Participant's Summary by Ann Proctor Page 17

Children Living Beyond Domestic Violence

Presenter's Summary by Janine Ross Page 18

Participant's Summary by Jan Turner..... Page 19

Solutions in the Hospital Setting

Presenter's Summary by Kidge Burns Page 20

WORKSHOP: Engaging the Imagination - Creative Ways of Working with Children and Families by Rob Black

The presenter's summary by Rob Black

*Contact Rob at Rob.Black@solution-focused-practice.co.uk
www.solution-focused-practice.co.uk*

I have presented this workshop on three previous occasions and have tried to expand on the content each time. Workshops for me need to be a variety of entertainment, fun, practical ideas, content and interaction. I find there is nothing more boring than to sit and listen to someone just talk for an hour.

My own work is predominantly with Children and Families and my interest over the last three years has been expanding the solution focused model by utilising young people's more imaginative side and adapting some of the key

elements of the approach to present them in a way that links in with the young person's / family's mindset.

The workshop looks at each element from problem free talk and preferred future questions to scaling, and outlines the various ways in which it is possible to creatively expand each type of question by tapping into the client's own imagination. There is a large section of video content which helps bring some of the ideas to life, as well as some cases examples of work covering a wide range of issues from school exclusion to depression.

It never ceases to amaze me that young people have so many different facets to their personalities; focusing on these successful aspects of the client's life can provide the worker with a wealth of exceptions to the presenting problem and also highlight and amplify the strengths they possess.

To date I have presented this workshop on four occasions and have been hugely encouraged by the feedback I have received. Many thanks to the people who attended I hope you were able to take away something of use for your work.

The participant's summary by Yasmin Ajmal:

After 60 minutes with Rob Black, I wanted to go straight out onto the streets of Preston and initiate a creative conversation with a young person (either that or I wanted Rob to be my keyworker!). Rob's work with young people is inspirational. Not only did he illustrate the power of the imagination in young people, but also helped me to dust off my own imagination. I could actually picture myself taking huge strides across rocks in

shark infested waters with Charlie wearing a superman outfit. You may well be asking yourself who is wearing the outfit and at this juncture I can't actually be sure.

Fun aside – Rob's session was completely grounded in the key message of keeping it simple and uncluttered. Rob's style is very direct and the language he uses is as accessible as his ideas. In our work with young people we are often faced with the

dilemma of what to do if someone is not talking. Rob's message is clear – move the boundaries until they come into the vision of the young person. Use their interests and passions to engage them. I would like to give a couple of short examples.

- Whilst talking to a young person ('Tony') Rob found out that he was passionate about Liverpool football team and about Michael Owen. Together

they draw a picture of the Michael Owen and 'Tony' in Liverpool football kits each with a speech bubble coming from their mouths. 'Tony' was then asked to imagine that it was 6 months in the future and he meets Michael in the park wherein Michael asks 'how it is going?' 'Tony' wrote in his speech bubble all the things that he would be pleased to be telling Michael about.

- Star turn of the afternoon was Alex the Jedi warrior. In between Alex pointing

to Rob behind the camera and asking him to 'cut!!' we witnessed Alex completely engaged in talking to Rob about a chart mapping the triumph of the 'the force' over 'the dark side'.

Watching Rob in the session and on tape, I was also struck about the optimism with which he engages in discussions with young people. His boundless energy (more on that in a moment) is maybe only matched by his obvious belief in the young people he is working

with. The thing about Rob's energy is that he talks very very quickly. I heard someone complaining about this – simply because they felt that so many gems were lost in the rapidity of flow. So it might be useful to take a course in short hand before you see Rob. And to see him would come highly recommended from me for anyone who works not only with young people but in any situation where there is room for creativity and imagination. Board meetings need never be the same.

WORKSHOP: *Supervision by John Wheeler*

The presenter's summary by John Wheeler:

"Will you offer a workshop on supervision drawing on your latest thinking?" asked Carole Waskett. So I did. Drawing on ideas from the draft of a chapter which Carole had seen, I outlined the thinking of Frank Thomas (2000) who suggests that supervisors typically adopt the role of Gatekeeper, Guru or Guide, and Stephen Brookfield (1994) who reflects that supervisors need to both ask interesting questions and know when to stop. I also shared my own reflections on the potential impact of the assumptions supervisors have over supervisees, supervision, therapeutic practice and clients. Not knowing that not knowing was to be a theme of the

day I asked participants to work in threes with one as supervisee and two as supervisors. The supervisors were directed to take turns asking questions based entirely on the supervisee's last response. And they were to do so without the supervisee explaining what they were bringing to supervision. It soon became obvious to me that the imposed condition of not-knowing resulted in the creation of surprisingly useful questions. By then it was very obvious to me what my latest thinking was about.

My intended workshop title, "On the threshold of the mind" taken from Gibran's (1972) the Prophet, had already hinted at what is



fascinating me most at the moment in supervision conversations: the possibility of creating a space in which supervisees can generate new thinking which is untainted by my influence. For me, the exercise amply demonstrated that this is possible, as long as the supervisor keeps his / her knowledge out of the way. With more time we might have addressed the next question, "How, as supervisors do we draw

on not knowing whilst also carrying authority and responsibility?" A short response would be to say read Turnell and Edward's (1999) *Signs of Safety* to see how Child Protection Social Workers can both exercise their authority and meaningfully invite families to come up with their own ideas. A longer response would be another workshop.

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The participant's summary by Maureen Smojkis:

My best hopes for the session on supervision were to leave the room feeling that it had been worthwhile attending and that the process of the session had got me thinking. I was not disappointed. John's workshop was well thought out, the participants were invited to take part in an exercise which encouraged thinking and offered the opportunity to take something back to practice; there was also time to engage in discussion. Supervision is important in the process of self care for the practitioner and in ensuring safe and

effective practise for the client. Social work has a strong history of offering supervision; the writing of Hawkins and Shohet (1989) along with Proctor (2000) offer the reader some sound underpinning to the supervisory process. I think that one of the strong feelings I had when I left the room was that it is important to remember where you started and that when you are introduced to something new to build on the things you bring from your previous life. I believe that John's experience underpinned his workshop and this enhanced the participants' experience. As I expected, he used his previous knowledge to good effect without giving the impression of taking an expert stance. This is a difficult balance to achieve, but John managed it!

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Proctor B (2000) *Group Supervision: A Guide to Creative Practice*. London: Sage

WORKSHOP: The Mandated Client - Working in the Solution Environment by Pat Licnahan and Peter Lewer

The presenter's summary by Peter Lewer:

The presentation introduced the Kent Multi-Agency Parenting Order Support Service. This specialist service provides consultation and training for multi-agency workers, and offers group and individual interventions for parents of children aged 5 to 17 years of age, across the county of Kent, either on or at risk of receiving Parenting Orders.

The service is funded by Social Services, Education, and the Youth Offending Service, with three Area Parenting Co-ordinators servicing the county.

This service offers a specialised approach to parents based on Solution Focused Principles. This starts from the premiss that each parent has strengths, abilities, talents and resources with which they are able to arrive at workable solutions. Parents are encouraged to recognise

their strengths and to change the environment in which their young people live. This is achieved through the setting of realistic goals, challenging perceptions and promoting positive change in the family behaviour.

Through the use of case studies, workshop participants were introduced to the benefits of working in family homes where the environment is full of solutions, and clues to solutions, and where successes and achievements are more readily identifiable when they are visibly present. Evidence was also provided to support the view that, engaging with families in their environment encourages them to accept control of the process and ownership of their solutions.

Tips on engaging parents and maintaining a solution focused approach were shared. It was recognised that when working in family homes engagement

is crucial. The Parenting Co-ordinators acknowledge that they are guests in the home, and offer observations, not solutions. Emphasis was placed on the importance of celebrating the family's successes and achievements and on embracing difference.

An external independent evaluation of the service was distributed and discussed. This evaluation evidenced that 90% of parents found the service helpful, and 70% found it very helpful. All parents and 70% of referrers felt the community needed the service and all parents stated that they would recommend the service to other parents.

This presentation celebrated the success of the Kent Multi Agency Parenting Order Support Service in embracing a solution focused approach and explored the preferred futures of the service.

The participant's summary by Mike Porter:

michael.porter@awp.nhs.uk

I initially signed up for this workshop in the expectation it would concern work with individual clients subject to probation (now Community Rehabilitation Orders). That sounded like familiar and comfortable territory. Then I discovered it was about

working with families in their own homes! That would require me to confront my number one phobic object; the issue that all self-respecting would-be therapists dread: how do you get the family to turn off the TV so that they don't

miss any of my undoubted expert wisdom? I was suddenly unsure whether I had made the correct choice of workshop.

Nevertheless I arrived at the workshop ready to absorb a new angle on SF approaches. The exercises devised before

lunch by Chris Iveson and Guy Shennan had cleared my brain of problem-focused noise and clutter. We had been invited to ask questions of Chris in the role of a school excluded youth who usually met our questions with "I don't know". We were obliged to base the next question on a part of the preceding answer. Guy asked us to get into pairs with one player identifying a goal and then the other asking "and what would that mean to you if you achieved (that openly stated goal)?" The exercises made the perfect warm-up! Perhaps we should do this regularly in our team: a "start the week" or even "a start the day" routine. And so to the workshop!

Pat Licnahan and Peter Lewer gave us a full briefing on their work in Kent, using the solution focused approach with families directed by courts to receive "support and guidance", whilst subject to three month orders. Their team is a multi-agency project now firmly backed by a SF-aware senior officer, and an independent SF consultant.

As one fellow participant put it, "they are dealing with the tough end of the market"; parents of offending children and young people, some of whom were subject to an ASBO. Often these parents are angry and dispirited. It is so easy to join in with blaming descriptions. Instead, Pat, Peter and colleagues worked according to SF principles, always assuming their clients would

know best what changes, if any, they would wish to make. They have clearly trained themselves to resist the temptation to be the expert and know better what was best for their client. They had done this because of the assumption that it does not help to direct and advise, and that if you hold onto your values, the greatest of which is respect, then, and only then can the client find the room to change. Pat, Peter and their team have no place for feeling put out by blaring TVs on a home visit. They stick to their task and their principles by reminding themselves that they were the guests. Then, as respectful conversations progressed, the client would usually decide to switch off the TV in any case.

This workshop reminded me of Eve Lipchik's advice that when you feel stuck, you need to remind yourself of the assumptions of Solution Focused work (Lipchik, 2002). Likewise it reminded me of the centrality of respect in solution focused techniques as described by Dvora Simon (1996). Pat and Peter recounted an anecdote from one of their families where the previously strife-torn family had been able to spend an exceptional two hour period with their offending son. This was described by the parents as "the best two hours of their lives". This made the point to me that this was not just good work, but heroic, in that it patiently succeeds in overcoming the negative cultural attitudes to this client group.

I must return to Chris Iveson's notion of "ignorance is bliss". My initial search for a workshop with familiar, comfortable material led me to acknowledge that I had made a false assumption. As a result I attended a workshop which both surprised and enthused me. Perhaps in the future I should stick to only going to workshops which address areas of work that are not familiar to me. Perhaps only then can I truly exercise the solution focused part of me. Otherwise I might go over old ground and merely reinforce unhelpful models of cause and effect in "familiar" knowledge. After all, as Steve de Shazer reminds us, we don't need to know the content of "the problem" in order to consider the hopes for the future.

Our thanks to Pat and Peter for an excellent presentation about their brave work. Our thanks also to Chris and Guy for preparing us for such a possibility.

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WORKSHOP: A Solution Focused Approach to Working with Survivors of Abuse and Trauma by John Henden

The presenter's summary by John Henden:

Hitherto, many survivors of abuse and trauma have had a less than satisfactory service from the helping professions. In this workshop, I was able to describe how Yvonne Dolan's specific application of the solution focused approach to this client group produces lasting benefits within a relatively small number of sessions. In many mental health services, one hears the oft repeated phrase (or similar): "This client says he/she was abused as a child. I think we need to refer him/her on to a specialist who deals with this sort of thing". Sadly, this is often where it stops, as either no-one knows of any specialists, or else there is a long waiting list. It is this problem I have sought to address by training up mental health practitioners on 2-day workshops, so they feel adequately skilled to perform this vital work.

In addition to the general solution focused tools and techniques used, I outlined in the workshop some specialised tools which can be helpful to abuse and trauma survivors. Before doing so, I highlighted the importance of looking at 'what works' in abuse and trauma survival work. The results of a small group work exercise I set for participants

showed an amazing match with a handout prepared earlier, of the same title.

Another handout followed entitled, 'What Service Users Have Found to be Helpful in Abuse Survival Work'. It is always helpful to be aware of what our clients say is useful to them in this often delicate area of solution focused practice.

Later, I highlighted some of the pitfalls in working in this area, both for clients and practitioners. The likelihood of both re-victimisation and re-traumatisation can be reduced by using two powerful specialist SF techniques. The first of these is to encourage the client to describe a 'symbol of safety in the present' as they are recounting past abuse experiences. A second technique is 'an associational cue for (relative) comfort and security from the past'. The one hour allotted for the workshop meant that the helpfulness of these could be referred to only.

Interrupting the abuse/trauma description as it unfolds with powerful solution focused questions, which are at one and the same time affirming, empowering and presuppositional in nature, can prove really helpful to clients, thus avoiding re-victimisation and re-

traumatisation still further. These are:

- "How did you cope at the time?"
- "What got you through all this?"
- "How did you know how to do that?"
- "What most helped?"
- "In what ways was it helpful?"
- "Looking back on what happened, in what ways has it made you a more determined person?"
- "Awful though it was, which aspects of surviving it have made you a better and/or stronger person?"

Throughout the workshop, I emphasised one of Yvonne Dolan's most important discoveries when working with this client group. This was that there can be three stages in the survivor's journey, which begins in victimhood; moves on to survivorhood; and then, with the solution focused practitioner's help through to 'living the authentic life' (or 'living life to the full'/'living the life you so richly deserve'). What often happens with countless survivors of abuse, is that they get stuck in survivorhood, with its recurrent symptoms of anxiety, depression, low

self-esteem and lack of confidence. The good news is that clients can begin to enjoy the benefits and freedom of this liberating third stage.

At one point in the workshop, I demonstrated to participants by way of a powerful paired exercise, how difficult it can be for many adult survivors of abuse to disclose or divulge

what happened to them, when they are wanting to tell someone for the first time. This was followed by a handout outlining the many and various blocks to disclosing.

Of the 15 or so specialised SF tools & techniques taught on the 2-day workshops, I described briefly: 'Say goodbye to the parents you never had';

and the 'Write, read & burn' letter.

At the end of the workshop I provided an opportunity for some public questions to be asked and, once the workshop had ended, allowed adequate time for individuals to ask their own private questions about the subject matter and treatment process.

The participant's summary by Charlotte Moss:

On reflection it is clear that, when opting to attend this seminar, my motivation was to be equipped with a basic armor of knowledge that would allow me to work with survivors of abuse from the safe position of practitioner. I wanted to have a repertoire of solution focused questions that would safely see me through what can often be a most challenging and emotional client interaction. Most of all the concept of safety was paramount. As a nurse working within a regional mental health crisis team, what I wanted from the seminar most was definitive answers. Needless to say that my agenda did not fit that of the speaker.

In sitting down to write this piece I began with a list of words that for me best represented my experience of the seminar. They are: challenging, informative, useful and strangely enough, despite my opening comments, practical. This

practicality was not on a level of providing the "idiots guide" that I originally sought, it was in the atmosphere of non-expert communication that challenged my thinking and drew a slightly altered perspective, from expert to individual. The benefit of John Henden's session was not merely that of receiving teaching from an experienced practitioner in the field, but was also the speaker's experience of having both survived past abuse and attaining a level of self actualization that goes beyond the concept of "survivor". On a practical note what was useful was the list of questions as rated by clients given to delegates based on the "what works" spectrum. What was challenging was the emotional investment of both the speaker and delegates to strive towards a homogeneity of experience between client and practitioner rather than the alternative (and it could be argued somewhat

ineffectual) expert led approach.

The challenge came in not concluding that the position of "survivor" is fixed and absolute, but rather in using the scaling tool to enable clients to move beyond "survivor" to fully grasp the concept of "best hopes". As Henden puts it, "getting the fullness of life you so richly deserve".

What were my best hopes for the session? To have a greater confidence in working with survivors of abuse. In evaluation, it worked!

WORKSHOP: Asylum, Torture, Interpreters and a Solution Focused Approach by Steve Freeman and Sara Wilshaw

The presenter's summary by Steve Freeman:

sarahk.wilshaw@northstaffs.nhs.uk
steve.freeman@northstaffs.nhs.uk

The workshop was titled "Asylum, Torture, Interpreters and an SF Approach". I presented alone due to Sarah's family commitments on the day. We used PowerPoint as a backdrop for conversation which included the experiences of people in the group.

During these workshops Sarah and I always talk about our experience, "sparkly moments" and our best hopes for the session.

Sarah works with people whose experience has included civil war, famine, human rights violations and war torn areas of the world. She works with an astounding range of abuse but this is not detailed in the workshop. We are not here as voyeurs!

I am a Solution Focused Approaches Manager, and am involved in training and development. I run a three day course in Solution

Focused Approaches. When Sarah first met me, she said "The Miracle Question will never work with my client group"!

A few notes on what our experiences have taught us:

- Realising that the interpreter is a resource in face-to-face contact.
- We have to always bear in mind the family's role. They cannot act as interpreters, and yet are a useful resource.
- We use a 'Language Line', which is anonymous (therefore has no stigma attached), and offers no opinion (so is non-expert).
- There is a "paradox of competence" between our skills in working with these problems and the fact that each person's experience is unique to them.
- We need to identify/focus on problems to satisfy Home Office criteria for asylum claims. We

therefore use a problem focus as a tool and then balancing this with a solution focus.

- We take the "judo approach", using the strength and momentum of the opponent to overcome them, "And yet..." "What would have to happen?"
- The Miracle question CAN be used and is helpful!

So how and why does it work?

- It leads to reduced stress for staff (there is a high suicide rate in interpreters).
- The optimism is contagious.
- People are resourceful.
- Language is not everything; whilst solution focused therapy is language based, we can communicate in many other ways.

Thank you and please get in touch.

The participant's summary by Rachael Dunn:

The second UKASFP conference was opened by Dominic Bray with a statement that read that the conference had something for

both the 'expert and novice.' The novice statement had real appeal due to the fact that I fitted into this category. The limited experience I have

with solution focused therapy has been in adult acute psychiatry as a mental health nurse.

One of the first workshops that caught my eye was that of Asylum, Torture and Interpreters. I had some limited experience of working with this client group within adult acute psychiatry, so you could say that my 'best hope' for the workshop was that I had a keen interest in seeing how the solution focused approach could work with both individuals of asylum and their interpreters.

The workshop was based upon the work of Sarah Wilshaw who is a community psychiatric nurse who works with individuals who are seeking asylum. These individuals had experienced a range of abuse, human rights violations, war and famine.

Sarah Wilshaw and Steve Freeman had met during a three day 'Solution Focused Approach' training course. It was interesting that Sarah first felt that the solution focused approach would not work with her client group, (I'm sure many of us have been sceptical as to whether a solution focus can work with a number of individuals). Steve outlined how Sarah had used a solution focused assessment with her client group and how they had come to recognise and use the interpreter as a resource within the contact rather than an obstacle. It had also been recognised through the work with the client group and the interpreters that the solution

focused approach helped to support the interpreters by taking a non-expert stance.

The workshop also gave a number of professionals (social workers, government workers, doctors, community nurses, ward based nurses etc) the opportunity to discuss their use of a solution focused approach within their practice and to share this with the group.

The workshop was interesting and enjoyable and my 'best hopes' for the workshop had been met, it gave me much 'food for thought' with regards to my own practice.

WORKSHOP: Research and Influence on Practice by Helen Lloyd, Ian Smith and Paul Hanton

The presenters' summaries of their research:

Ian Smith:
Talked about his proposed research into the his practice of SFT.



Doing research into the effectiveness of psychotherapy is hard.

On the one hand, we have NHS managers pushing for randomised control trials to provide an 'evidence base' for our practice, and on the other hand, such research seems utterly meaningless given the complexity and uniqueness in each case of this thing we call 'psychotherapy'. I have therefore decided to look at what works in therapy in a way that will be useful in developing my practice. In order to provide some sort of 'scientific' context, I will explore this through case studies comprising mainly of semi-structured interviews

with my clients which are based upon Lambert's model of 'what works' in psychotherapy, which is in turn based upon his macro-analysis of psychotherapy outcome studies over the previous 30 years.

Helen Lloyd:
Solution-focused brief therapy with families who have a child with intellectual disabilities.

Study 1: The content of initial sessions and the processes from the practitioners' perspective.

Processes emerged of empowerment, integration of the goals into the mothers' life narrative, understanding the child's abilities and clarification of the preferred future. The 'miracle question' appeared to stimulate a change in rapport, discussion about the impossibility of the child becoming 'normal' and a shift away from wishful thinking towards problem-solving.

Study 2: An IPA study of the mother's views and experiences of SFBT

Three themes emerged in the mothers accounts:

- 1) that SFBT brought to mind the idea of 'making the best of it'
- 2) 'insight into the process of change'
- 3) that SFBT created a collaborative therapeutic relationship'.

Self-efficacy recurred in each theme.

Paul Hanton: SFT and depression for MA in SFBT

This research paper reported on a small group study (n=10), (8 completed treatment, 7 filled out post intervention BDI-2) utilising pre-test, post-test self assessment scales (BDI-2) and follow up interviews to explore the effectiveness of using solution focused therapy with people presenting as depressed; (BDI-2 range: 25-32). All clients had been referred to a PCT Department of Psychology by either their GP or a sector mental health team. Post intervention BDI-2 self assessment questionnaires (n=7) resulted in a mean average improvement of 55.12%, in the range of 19.23% (lowest

improvement) to 93% (highest improvement). The mean average improvement defined by BDI-2 points (all point differences divided by seven) = 16.28. The paper utilised a 'bricolage' approach to methodology including qualitative as well as quantitative methods, but the qualitative aspects of the study were not discussed at the presentation.



The participant's summary by Ann Proctor:

The workshop was made up of three presentations. The first of these, by Ian Smith, was an opportunity to explore the process of setting up a research study in the area of solution focused therapy. He was looking at "what works" when people with learning disabilities are referred to a solution focused therapist. His focus was on the challenges he faced in reconciling his intense interest in what he wished to find out (e.g his clients' experiences of their

problems and solutions, of the therapist and of what works for them) with the constraints of "academic" research.

The second presentation, by Helen Lloyd, was again related to learning disability but this time the focus was on the families of children with learning disabilities and especially the views and experiences the mothers about solution focused brief therapy. In the presentation an account was given of the

helpfulness/unhelpfulness of different aspects of the solution process for these families.

Finally, the third presentation, by Paul Hanton, gave an account of a research study into the effectiveness of solution focused brief therapy when working with moderate and severe depression. The measures of improvement in self-report inventories completed by the clients, were supported by narrative

accounts of the effectiveness of the therapeutic process.

For me this was probably the most interesting session of the whole conference. Working in comparative isolation in this approach I have to depend very heavily on conferences and personal reading to keep my enthusiasm and professional development alive. In this very brief account I can only indicate some of the features of the session which stood out for me. The dedication of the presenters to the effectiveness of their work and the well-being of their clients was heart-warming. Trying to balance the challenges of

responding to a need to acknowledge the richness of the solution focused brief therapy approach and, at the same time, to answer the underlying scepticism of an "academic" community was apparent to me. I felt enthusiastic about the way they had been able to do this without losing the integrity of the approach. Inevitably, this qualitative work was conducted with small numbers of clients but the focus on developing practice offered me an incentive to seek out opportunities of my own. The attempts by the presenters to locate their work in a wider solution focused context

was important from the development of the approach but sometimes limiting.

If I have a criticism of this presentation, it is that it was much too short. My excitement about what I was listening to was seriously combined with my frustration at not having time to follow up the questions I so desperately wanted to ask. May I make a plea for much more time for exploration of research issues either during the conference or in alternative forum.

Finally, many many thanks to these presenters.

WORKSHOP: Children Living Beyond Domestic Violence by Janine Ross

The presenter's summary by Janine Ross: janine@sfbt41.freemove.co.uk

I ended up doing this workshop kind of at last minute and despite being adamant I wouldn't do one (I was one of the conference organisers as I had been last year - I had facilitated a joint workshop last year which was at the end of the day and I felt really cream cracked by the time it came to do the workshop) - so I was going to be much more sensible this year! Anyway, having already done the same workshop for the Brief Therapy North East Study day (even more last minute) I felt okay

and being told by someone earlier in the day that I would probably only have a few as it was a 'funny' subject (I didn't have time to check out what they meant by this) I sat back and smugly thought how organised I was with 30 handouts (far too many) as it happens there were well over 30 in the workshop and there was some cracking contributions from people! I quickly went over what domestic violence was (having made the mistake many moons ago of assuming people know what you are

talking about / facilitating on)!

In pairs the group was asked to share some of the fears and feelings described by children living in a violent situation as well as some of the emotional effects. These were then shared in the bigger group. People then went back in to pairs and reframed the statements/descriptions they had come up with into more solution orientated statements / responses.

The group then again shared these in the bigger

group – both of these exercises elicited a lot of discussion ranging from people sharing cases to a debate on the ethical implications, to gender issues!

The session finished with the group recognising and noting how resilient children and young people can be,

and what makes them able to cope/function/survive against the odds. Finally we looked at some ways of building on that resiliency and how the solution focused approach marries well / helps facilitate this process.

If anyone wants a copy of the presentation feel free to email me – and anyone who

is going to Salamanca and wants to hear it / avoid it – surprise surprise - I have been roped in again!

Thanks to all who contributed and joined in - it made facilitating the session a real pleasure.

The participant's summary by Jan Turner:

I would like to say a big thank you to Janine Ross for hosting the workshop that considered the difficult subject of children and domestic violence.

Janine managed to 'sparkle', and engage the audience from the start.

The first exercise was thrown open to the floor, thus allowing participants to share their expertise in answering the question 'What is domestic violence?'

This was summarised in the PowerPoint presentation under the headings:

- Physical
- Psychological
- Sexual
- Abuse to property

We considered the 'Abuse Cycle'. This revolves through the various phases from the build up and escalation of tension ultimately provoking the incident, through the remorse and making up phases. The group, again,

'thought showered' the range of emotions and behaviours that young people caught up in this horror inevitably experience, and we also discussed the mixed messages they hear. Promises are made that 'this will never happen again', or they are rewarded for their collusion and secrecy.

The good news, however, as solution focused practitioners we can influence the cycle as we act to promote the child's self esteem, and elicit their strengths to help them cope.

An interesting point was raised that typically the language associated with domestic violence generally assumes male perpetrators, but it was noted that women also abuse. How easily widely held assumptions can influence our language when we don't stop to think!

We ended on a useful, but rather difficult exercise. Working in pairs we thought about the words young

people say to 'therapists' regarding their situations. E.g.

- 'it must be my fault'
- 'They don't know I can hear'
- 'I have to go home'..... etc

We were then encouraged to think of solution focused responses.

This initially prompted a debate regarding safety and ethics. An important point was raised that children need firstly to be reassured that 'none of this is your fault'. It was noted that we must validate the child's experience, and that the tone of the responses would be along the lines

'How would it be different if they did know?'

'Tell me about a time you did want to go home'

The handouts Janine provided to accompany the session were very useful to refer back to as I have been reviewing this thought-provoking subject over the last week.

To my mind no other approach could work so well with 'difficult cases'.

As practitioners we can provide a secure base, where

we listen respectfully and compliment resilience, to encourage self efficacy. We can't wave a magic wand, but we can just be there.

Thanks again to Janine who both provided useful information and interesting prompts for further reflection.

WORKSHOP: Solutions in the Hospital Setting *by Kidge Burns*



The presenter's summary by Kidge Burns:

The workshop started with a picture described by Danny Janssen some time back on the Solution Focused Therapy listserv (SFT-L) which I call 'Think White Spaces'. Both practitioners and clients need to remember that it is possible to talk positively about what is working in the hospital setting, while at the same time acknowledging the real problems (the black spots in the picture) that exist.

We discussed how SFBT can be helpful to practitioners in this environment; how it gets us to focus on small changes and to treat each session as the last, and how we can focus on the time of discharge as number 10 on a scale, where 0 might be the point of admission to hospital, so as to facilitate the clients' perception of control over their environment.

I asked groups of three to spend ten minutes looking at what they've 'been pleased to notice' about themselves over a recent period of time.

Some of the participants in the workshop work with clients with dementia or people in palliative care, where the medical model tends to focus on what is wrong rather than how well their patients are managing to handle their situation. In such environments it is useful to remember the value of direct, indirect and self-compliments.

I showed videos of three of my clients using a future focus (best hopes for the session / the miracle question) and scales. Extracts from the sessions aimed to remind us of how we can make that leap of faith that clients can benefit from focusing on their strengths and establish their own measurement of change, even if there is no 'cure' for the problem that brings them to the session. Cecil could talk about his 6.5 on a scale that is looking at how well he is managing his chronic condition (Parkinson's disease), while Kate can comment on how she is "actually coping with it [her

stammer] quite well". Bill and his sister, who have seen so many professionals for investigations regarding motor neuron disease, are surprised and delighted to be asked 'how can I be helpful to you today?'

I touch on some of these points in Chapter 2 of my book ('Focus on Solutions: A Health Professional's Guide') and it was good to have the opportunity to discuss them further with other colleagues working in the hospital setting. It would have been nice to have had more time to discuss goals for the future in terms of how we can promote SFBT further within the medical model.

I enjoyed doing a workshop at UKASFP. It was the end of a long day and I was with a group of people who shared enthusiasm and ideas.

Unfortunately we have no participant write-up for this workshop - Ed.

BOOK REVIEW

Let us know what you think of a book...

Solution News has a number of books available for members to review. If you would like to review one of the books below, or another book, please contact books@solution-news.co.uk.

Books still currently available:

- Solution Focused Stress Counselling by Bill O'Connell
- Handbook of Solution-Focused Therapy. Edited by Bill O'Connell and Stephen Palmer

We are also looking for more books to review. If you would like to make a book available for review, please get in touch!

LINKS

Useful web-links

Download past (and present, and future) issues of *Solution News* (and coming soon, podcast versions) at www.solution-news.co.uk

UKASFP web-site is at www.ukasfp.co.uk

Join the UKASFP national discussion group at www.smartgroups.com

European Brief Therapy Association web site is at www.ebta.nu

The St John's (SFT-L) international discussion list is at
<http://maelstrom.stjohns.edu/CGI/wa.exe?SUBED1=sft-l&A=1>

CORRESPONDENCE

We welcome your views and comments on any article in *Solution News*, the UKASFP, or on any other solution focused topic. Send your correspondence to letters@solution-news.co.uk, indicating clearly whether you intend your correspondence for print or solely for consumption by the *Solution News* team.



There's no escaping...

...the SOLUTION GNUS!



There really seems to be no getting rid of them. The gnus are becoming something of an institution, with reports of the EBTA conference taking on a 'gnu fancy dress' theme next year, and dark rumours emerging out of Texas SF circles of a secret society known only as the "sacred order of the gnu groupies". So it looks like we'll have to learn to put up with the smell here in the *Solution News* offices, and just keep asking visitors to "be careful not to tread in the dung". They're still earning their keep, though. Here's what the wise wildebeests have been pondering this month...

"Dear Gnus, I'd like to network more with other solutioneers in my local area. Could you give me any top tips on how I could build up a local network?"

John Wheeler gnu. He said:

1. Find a friend who is as passionate as you about spreading solution focused practice. Two generate much more than twice as much energy, creativity, enthusiasm and reality checking.
2. Meet and talk big dreams. Use the miracle question to generate detail and excitement.
3. Create a catchy name and simple logo with the help of someone who can draw if neither of you can. Branding helps an identity to grow, so use your materials to establish the network as a "must join" initiative.
4. Create an event to get people together. Give it a name which will attract practitioners. Give it an identity which managers will find credible.
5. Keep costs low so people can self-fund if necessary. Use venues you and colleagues have access to without having to pay. Use internal mail systems and mail lists to promote the event to thousands. Remember, you want to grow a pool of people, not a pot of money.
6. Be generous and give people useful materials, and a membership slip with a member number and the logo. Becoming member number 30 tells someone they are in something that's big and growing.
7. Hold onto people. Keep contact information, especially email addresses and always reply when people ask you for information.
8. When you hit snags return to point number 2 to remind yourself why this matters.
9. If you have a partner let them know you've taken up a new hobby. You could end up being pretty busy!



“Dear Gnus, my colleague has said to me that the solution focused approach is a whole way of life, but I thought it was just a bunch of questions to ask in therapy sessions. Which one of us is right?”

Barry White gnu. He said:

As with so much in life this is not an either / or question! When you use a solution focused approach in your professional work you find that it is a very respectful approach that brings about great results!

One of the exciting things is that we see changes not only in the way that the presenting issue is dealt with but changes in the way people lead their lives generally - simply by doing more of what works. The more you do this kind of work then the more you realise that by doing the same i.e. doing more of what works - that we too can begin to make changes in our own lives. In this way many do indeed choose to make this a way of being - a way of life!

The answer then of course is that both of you are right, and that it is a question of degree. You can of course simply use the techniques with others, or you can go that step further and live your life the same way. If you are undecided about the issue simply ask yourself the miracle question and see what you would be like if you were using the approach as a way of life - the answer will give you your direction!

“Dear Gnus, can you do solution focused work with someone who is drunk?”

Carole Waskett gnu. She said:

Well, it depends. A falling-down being-sick drunk really needs water and a quiet bed. An angry breadknife-waving drunk needs good restraining skills or someone to hide behind. A delightfully silly, funny drunk isn't up for much serious thinking (though you might meet up later with warm feelings on both sides). There are such broad variations in 'drunk'. You seem to have tapering self-control for quite a way into inebriation, and if you want to work with me one-to-one that's fine, though I'll probably mention that you seem to be a bit under the influence, and ask if you think this might affect our conversation. If you come to a meeting I'm facilitating, I'm happy for you to join in, provided others aren't bothered by your behaviour. I don't specialise in this area, so I'm sure there are things they know that I don't about drunkenness. Is it different if the person's there to 'work' on alcohol-related behaviour? Am I saying all the wrong things? Quite likely.

So if you're a bit sloshed we can probably have a reasonable solution focused conversation. We may get even more interesting answers to a miracle question, and more eloquent details when we start asking about scales. Dangerous it may be when mistreated, but alcohol has that wonderful mind-expanding effect that may help us think outside the box - which is why it's been such a crowd-pleaser for so many millennia.

MEMBER NEWS

This section is for members to let people know about what they've been up to or is happening for them, and for requests for help. If you have an announcement, please post it to: news@solution-news.co.uk.

Announcements this issue:

The people at Sage have asked us to mention that the second edition of member Bill O'Connell's text "Solution-Focused Therapy" has now been published, price £17.99. There will be a review of this book in the December issue of Solution News.



Member Carole Waskett wanted to let people know that she is at last settled in Manchester and ready to restart her private practice, which she has been running for around twenty years. She offers solution focused coaching and supervision, in person or by phone. She also does teambuilding and training. Trained at BRIEF, Carole has plenty of experience in primary care counselling and supervision, and is currently teaching in the health service, with some interesting sidelines in university teaching and writing. To discuss possibilities with her, ring Carole on 0161-959-6515 or email her on Carole@waskett.org.



Carole has also organised a meeting to discuss how SF trainers might wish to network for later in the year, and all interested parties are welcome to attend. Steve Freeman has sorted the room and hot drinks, and says "we will be meeting at the Dept of Academic Psychiatry, Harplands Hospital, STOKE ON TRENT, ST4 6TH - switchboard no. 01782-441600 on Saturday December 10th from 12 pm to 5pm".



Mark McKergow says "Great news - we have a new publisher of SF-related work. The SolutionsBooks website is now up at www.solutionsbooks.com. You can find details about our first two publications, Positive Approaches to Change (Mark McKergow and Jenny Clarke, eds) and Team Coaching with the SolutionCircle (Daniel Meier). These can be ordered from the site, with a special introductory offer of shipping to anywhere in the world at just £1 per book.



Member Ian C. Smith wanted to let everyone know that a case study he wrote on using solution focused therapy with adults with intellectual disabilities has been published in the September 2005 issue of the British Journal of Learning Disabilities. If anyone would like a copy of the article, they can email him at ian@sftp.co.uk.



NEXT ISSUE:

Back to full-length articles! Training suggestions, solution focused family doctoring, solution focused social work, all the usual features, and not a word about the 2005 conference! Promise!

Expect the next issue to appear just after Christmas. The final deadline for copy for the December issue is Friday 18th November. So get writing - you know you've always wanted to!