

Providing Efficacy for Solution-Focused Theory in School Counseling Programs

Mark C. Gillen

University of Tennessee at Chattanooga

Abstract

Solution-focused theory has been accepted as a useful treatment modality in schools with little empirical evidence regarding its efficacy. This article describes the historical underpinnings and assumptions of solution-focused theory, three studies that examine the effectiveness of solution-focused theory with children in school settings, as well as how solution-focused theory has been integrated into school counseling programs.

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School counseling requires approaches that are appropriate for the time constraints encountered (Littrell, Malia, & Vanderwood, 1995). The use of solution-focused theory has increased in all areas of counseling, but particularly in schools where it seems to offer practical interventions for students, teachers and parents (Franklin, Biever, Moore, Clemons, & Scamardo, 2001). Solution-focused theory has been popularized both by its' flexibility and focus on client's strengths, which reportedly energized staff (Williams, 2000). Proponents of solution-focused theory claimed that it yields rapid change, enduring change, and a high degree of client satisfaction (Stalker, Levene, & Coady, 1999).

Unfortunately, the literature contained anecdotal reports of the success of solution-focused theory (Corcoran & Stephenson, 2000), including the majority of research on solution-focused theory with adolescents (Littrell et al., 1995). In a meta-analysis of published studies examining solution-focused theory Stalker et al. (1999) reported that there was no empirical evidence to support the claims of success made by solution-focused advocates, since no methodologically sound studies had been conducted. Littrell et al. found that previous studies were constrained by the solution-focused assumption that the client was considered the person most knowledgeable about whether he or she has reached the goal of therapy, thus client feedback was the primary focus of research. Stalker et al. excluded some studies in the meta-analysis because the counselors being observed were not practicing solution-focused counseling or the counselors being observed utilized some components of solution-focused theory, but did not employ all of the characteristic features including (a) the miracle question,

(b) scaling questions, (c) the interview break, and (d) client compliments and homework.

Franklin et al. (2001) stated that the solution-focused model has not been established using experimental methods, and that outcomes of the studies that have been done are simplistic. Coady, Stalker, and Levene (2000) warned that most experimental research on solution-focused theory have not utilized control groups. Studies that have employed control groups must be also viewed with caution because of the small number of participants, stringent criteria for participation, and little information about intervention protocols (Coady et al., 2000).

Even with the lack of experimental efficacy, solution-focused theory has been accepted as a useful individual and group counseling modality in schools. Therefore, it is vital to understand the basics of solution-focused theory, and how it has been integrated into school counseling programs.

Essentials of Solution-Focused Theory

Steve De Shazer, Insoo Kim Berg, Eve Lipchik, Alex Molnar, Jane Peller, and others developed solution-focused theory at the Brief Family Therapy Center in the 1980's. De Shazer (1982) described how Milton Erickson, and others, influenced solution-focused theory. According to De Shazer (1982), Erickson took the learning that people already had and assisted them in applying this information to new situations. This method of interaction with clients was based upon Erickson's three principles: (a) meet the client where they are at, (b) modify the outlook of the client to gain control, and (c) allow for change that meets the needs of the client (De Shazer, 1982). Aspects of Erickson's principles have been intertwined in solution-focused theory. For instance, solution-focused counselors utilized the miracle question in order to determine how life

would be different for the client if the problem were miraculously solved (Stalker et al., 1999). Erickson also contributed his description of the counselor's role in client resistance; referred to as Erickson's First Law, it states, "as long as clients are going to resist, you ought to encourage them to resist" (De Shazer, 1982, p.11). De Shazer (1982) reported that he and others at the Brief Family Therapy Center were also influenced by the concepts of (a) isomorphic change, (b) prior learning, which stated that an idea that had been used successfully would be used again, and (c) social-group support, where a social group strengthened ideas that were demonstrably false. Finally, De Shazer (1982) stated that the concepts of isomorphism, cooperation and paradoxical intent were described as basic to solution-focused work.

Basic Assumptions

Solution-focused theory assumes that solutions lie in changing interactions and the creation of new meanings for client's problems, as well as the client solving the problems and overcoming the habit pattern that they have fallen into (Stalker et al., 1999). Littrell et al. (1995) described the assumptions of solution-focused theory as, (a) setting a concrete goal to elicit ideas for change, (b) exceptions to any problem, (c) clients have the resources to change, and (d) a clinical team develops compliments and clues. These assumptions supported the underlying contentions that (a) small changes lead to changes in the system as a whole, (b) change is constant, and (c) clients should be encouraged to see themselves as normal, with the counselors at their side (Littrell et al., 1995; Stalker et al., 1999).

The components of solution-focused theory have actually been built over time. Historically, solution-focused theory has not been dogmatically short term, but rather

occurred on a continuum from a single session to 15 or more (Littrell et al., 1995). The miracle question, a major therapeutic component, originated with Milton Erickson's work with hypnosis, and it emphasized co-construction of solutions gathered through the use of Socratic questioning between the therapist and the client, as well as visualization of prior and future successes (Franklin et al., 2001). The consulting break began when a Brief Family Therapy Center trainee disagreed with a phone-in suggestion and left the room to consult with the team, and the compliment originated when a client asked the observers for feedback (De Shazer, 1982). The model has also evolved from attempting to directly change behavior to a process of mutuality whereby the counselor and the client accept each other's world-view and employed a conversation counseling model to determine an appropriate intervention (Stalker et al., 1999).

Solution-focused theory is described as ecosystemic, thus intended to impact problem behaviors in various social settings, including schools (Molnar & Lindquist, 1989). Molnar and Lindquist (1989) offered insights on the creation of an ecosystemic view that included (a) asking questions that reoriented the client to the problems, (b) searching for clues that revealed how others perceived the problem situation, and (c) noticing changes. However, an important point must be remembered when describing the interaction between problems and solutions. While some theorists described a close relationship between problems and solutions, known as problutions (Selekman, 1997), this contradicted the solution-focused concept that solutions are not directly related to problems (De Shazer, 1988).

Prior to meeting with clients, solution-focused theory counselors gathered limited information about the client so as to minimize pre-conceived ideas (Stalker et al., 1999).

Counselors devoted little time to exploring problems (Franklin et al., 2001) or searching for underlying problems (Littrell et al., 1995). Counselors developed realistic solutions with the clients, discovered how the solutions were already manifested, and determined small steps toward a solution (Franklin et al.).

Exceptions, or circumstances when the problem did not occur, or occurred with less frequency were used to assist clients in discovering solutions. Murphy (1994) described five methods for helping a client to recognize and utilize exceptions. The methods included (a) elicitation of times when the problem is absent, (b) elaboration on features and circumstances of these times, (c) expanded exceptions to other contexts, (d) evaluation of the exceptions based on pre-established goals, and (e) empowerment of the client so that change was maintained over time (Murphy, 1994).

By recognizing exceptions, solution-focused theory amplified positive behaviors and reinforced effective coping strategies, while emphasizing the process and focusing on changing future behavior (Franklin et al., 2001). The focus on future behavior related to frames, or rules that people followed in certain situations. Reframing, or shaping, was another component of solution-focused theory that assisted clients in changing frames that gave them trouble (De Shazer, 1988; Molnar & Lindquist, 1989). For example, Molnar and Lindquist (1989) reframed disruptive school behaviors as helping other students to accommodate distractions. Molnar and Lindquist (1989) contended that when reframed in this manner a positive connotation of the function is determined. Shaping was seen as an important concept, and when used with parents and teachers increased the focus on the teens' strengths (Todd, 2000).

Solution-Focused Theory and School Counseling

While there have been few experimental research studies of solution-focused theory and its' applicability to school settings that offer more than anecdotal information concerning efficacy there are studies which have begun to examine solution-focused theory in schools. Franklin et al. (2001) examined the effectiveness of solution-focused theory with children in school settings. The researchers provided five to ten sessions of solution-focused theory to seven children identified by their teachers as having learning difficulties and classroom behavior problems. To insure that solution-focused guidelines were maintained Insoo Kim Berg, one of the developers of solution-focused theory, examined the protocols and approved the methods for therapy. Franklin et al. focused on (a) the miracle question, (b) scaling questions, and (c) giving compliments and homework to the students.

Feedback from the teachers, obtained by Franklin et al. (2001) using the Conners' Teacher Rating Scale, indicated that the model was useful when working with learning disabled/ behavior problem students. There were observable changes in five of the seven students studied; however, while some teachers observed changes in the student, others did not. The researchers determined (a) that teachers did not observe the same behavior problems for students, (b) the counseling was short term, and (c) not all deficits originally observed in students were confronted.

Corcoran and Stephenson (2000) conducted a similar study on the effectiveness of solution-focused theory with children described as having school behavior problems. In this study the researchers excluded any student whose problems where occurring in conjunction with life events such as a death or divorce. Training in solution-focused

theory consisted of demonstration, lecture, discussion and role-play of techniques including a) joining, b) normalizing, c) exception finding, d) the miracle question, e) goal-setting and scaling questions, and f) termination.

Using the Conners' Parent Rating Scale Corcoran and Stephenson (2000) stated that parents reported improvement in conduct problems, learning problems, psychosomatic problems, impulsivity, and hyperactivity. Unfortunately, students in the study did not report the same level of change. While the study supported the use of solution-focused theory for children with behavior problems there were concerns about validity, as half of the sample did not complete the course of therapy. Ultimately, Corcoran and Stephenson (2000) recognized that the study lacked any control group, and integrity of model implementation.

Littrell et al. (1995) examined three single session counseling approaches, problem-focused without a task, problem-focused with a task, and solution focused with a task. The goal of the study was to determine the effectiveness of these three counseling approaches for alleviating student concerns, helping students to reach their goals, and modifying the intensity of student feelings.

Littrell et al. (1995) did not find any significant difference in effectiveness between the three approaches. However, the task oriented counseling approaches helped the students become involved in the process and encouraged generalization to other decision-making tasks. In addition, Littrell et al. determined that solution-focused theory was desirable when dealing with developmental concerns and met the needs of many students who wanted a limited number of sessions with concrete interventions. Also, the time that the counselors spent with students was shorter when utilizing the solution-

focused techniques, thus producing equivalent results in a shorter period of time. Littrell et al. were careful to note that counselors needed to ensure that they spent an appropriate amount of time to determine the students true concern, and that this method of counseling was not suitable for a number of types of problems such as potential suicide and abuse.

Implications for School Counseling

Solution-focused counselors have claimed that this method provided rapid, enduring change, and a high degree of client satisfaction (Stalker et al., 1999). Research on solution-focused theory found that this method was strengths oriented, collaborative, and represented a promising addition to the school counselor's repertoire (Murphy, 1994). However, there has been little evidence that solution-focused theory was superior to any other form of theoretical orientation (Coady et al., 2001). Some have argued that methods, such as solution-focused theory, were merely vehicles that contributed to change (Williams, 2000).

While a few research studies provided a glimpse into the effectiveness of solution-focused theory with school children, there is evidence that solution-focused theory is as effective as other types of counseling (Littrell et al., 1995). However, in order to effectively assess effectiveness research needs to be integrated into any program conducted by school counselors that includes the essential elements of solution-focused theory. For example, Cook and Kaffenberger (2003) evaluated a solution-focused group counseling study skills program for middle schools and found improvement in more than fifty percent of the student's grade point averages. In addition, teachers and administrators reported positive benefits for the students. The

solution-focused group examined by Cook and Kaffenberger (2003) integrated summative and formative evaluation techniques into the program. Unfortunately, evaluation of the program was based on grade point improvement and staff survey alone. A more sophisticated methodology would only improve the reliability of the information gathered.

Conclusion

In order to be effective school counselors who utilize solution-focused theory should have a command of the essential components and principles that underlie the theory. In addition, they should find other counselors engaged in solution-focused individual or group work, or form a peer supervision group, in order to support each other in the use of the theory. Finally, as increasing numbers of school counselors are trained in the use of solution-focused theory they must seize opportunities to study the outcome and efficacy of the use of solution-focused theory in all school counseling settings. By integrating methodologically sound evaluation, and reporting the findings, school counselors will be able to assess, and thereby support the use of, solution-focused programs with school children.

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Biographical Statement

Mark Gillen is an assistant professor at the University of Tennessee at Chattanooga and coordinator of the school counseling program. He has more than 20 years of experience as a school teacher, school counselor, community counselor, adventure counselor, and educator. In addition, Mark spent 10 years at the Brief Family Therapy Institute training with Eve Lipchik and has worked as a clinical supervisor supporting solution-focused work with adjudicated adolescents.