TECHNIQUES with CHILDREN AND THEIR FAMILIES that FIT WELL WITH SOLUTION-FOCUSED THERAPY

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PROGRAM DESCRIPTION:
Most assumptions and techniques of the solution-focused (SF) approach were created for individual adult or adolescent clients. This interactive workshop will expose participants to SF assumptions necessary in working with families, including collaborative goal-setting and systemic interaction that includes children, plus multiple SF techniques for use with children and their families. Practical, hands-on learning will be our focus.

A Solution-Building Stance
• Nonjudgmental listening is essential.
• The focus of attention is on what the child and family are asking for in the therapeutic situation and what the role of the therapist is to be.
• This involves the development of a positive interaction which fosters an awareness of change, directed by the child & family and reinforced by the therapist.
• The essential position of the therapist is curiosity.

A Solution-Building Stance
• Assumption: if one part of a system changes, other changes will occur.
• Eliciting information about the child’s and parents’ competencies and resources is tied closely to positively impacting their lives.
• This approach is not impressed with symptoms or troublesome behavior. Therapy is a time to practice new behaviors, to create a theme of competence, and be supported by a compassionate professional in this affirming change-adventure.

A Solution-Building Stance
• A great deal of this approach is not so much about changing anything but rather everyone – everyone -- learning how to pay attention differently.
• The greatest asset in being a solution-building therapist is ‘relentless optimism.’

WHAT MAKES IT SOLUTION-FOCUSED?
• CURIOSITY
• RESPECT
• TENTATIVENESS
• NONPATHOLOGIZING
WHAT MAKES IT SOLUTION-FOCUSED?

- Future focus -- goals are co-created by therapist & client(s)
- Focus on exceptions
- Clients are competent
- Focus on the change-able
- Clients know their experiences
- Therapists have expertise, too
- Strengths & resources matter
- Do more of what works
- Stop doing what does not work
- Doesn’t work? Do something different(ly)

Stages of Solution-Building
(De Jong & Berg, 2013)

- Describing the Problem
- Developing Well-Formed Goals (Future Focus)
- Exploring for Exceptions
- End-of-Session Feedback
- Evaluating Client Progress

Erickson’s Six Core Strategies Tied to Solution-Focused Techniques
(Short et al., 2005)

- Distraction: Presuppositional Q?s
- Partitioning: Goal-Setting, Miracle Q?s
- Progression: Scaling Q?s
- Suggestion: Presuppositional Q?s, Miracle Q?s
- Reorientation: Miracle Q?s, Exception Q?s, Externalization (Narrative)
- Utilization: Exceptions, Strengths, Resources, Cooperating with “Resistance”

Other Intervention Strategies

- Reframing (Reorientation)
- Pattern Interruption (Molnar & de Shazer, 1987)
- Psychoeducation
- Social Networking

Interactional MIRACLE QUESTION
(Reorientation, Suggestion)

- Go for specifics the morning after
- Stay with what they would do and what they would notice was different
- Ask, “…and then, how would you respond if she (he) did that?”
- Frequently ask others, “Would that be a good thing for you, if she (he) did that?”
- “…and if you did that just a little bit more…”

Techniques: MIRACLE QUESTIONS (2)

a. SFT Miracle question:
“If a miracle were to happen tonight while you were asleep and tomorrow morning you awoke to find that this problem were no longer a part of your life, what would be different? What would be the first SMALL thing that will indicate to you that this miracle had taken place? How would other people be able to tell without you telling them?”
Techniques:

MIRACLE QUESTIONS (3)

b. Video description question:

“Let’s say that we have two video tapes of you, one is in the past when the problem was really getting in the way for you and the other is sometime in the near future when things are better. What’s most noticeable in the tape of you in the future that will tell us that things are better for you?”

TECHNIQUES for MIRACLE QUESTION:

STORYBOARD MIRACLE  
(Black, 2010)

- Progressive drawing of a family/child miracle
- Ask the Miracle Question
- Ask the child to draw a picture of the first thing that would happen in the miracle day, then chronologically draw frame after frame as s/he moves through the morning (or day)
- Curiosity centers on “Tell me about this part of the miracle” and “Then what happens?”
- Keeps the Miracle Question concrete and specific
- Helps with child expression, “voice”

GOALS: “The First Small Step”  
(Partitioning)

- Creating goals should focus on the beginning of the therapy process rather than the end or result
- With families: (say to one member), “What would be the first small step you would (not could) take tomorrow, if this miracle were to happen?”
- Then ask another member, “…and what would you do then?” (as a response to the first person’s change)
- Continue asking around
- Repeat with another family member

GOALING EXERCISE  
(Partitioning)

- Ask: “What do you WANT?” (stay away from what they do NOT want)
- Ask: “What are YOU willing to change to make this situation better?”
  – Ask another family member: “Would that change make a positive difference for you?”
- Ask: “What would that change look like if I saw you doing that?”
- Ask: “Is this possible? Is this realistic, given your situation?”

Techniques:

COPING QUESTIONS  
(Reorientation)

- (to Parent): “What do you do to barely cope each day?”
- “How do you keep going every day?”
- “How did you manage to get up this morning?”
- “So you thought seriously about giving up (Parent’s words). How did you manage to get to this appointment?”
- “So the problem isn’t any better. Many times, problems get worse with time… What have you been doing to keep the problem from getting any worse?”

Techniques:

“Do Something Different”  
(Pattern Interruption)  
(de Shazer & Molinar, 1984)

- “Do something different the next time Jamie throws a tantrum, no matter how strange, or weird, or off-the-wall what you do might seem. The only important thing is that whatever you decide to do, you need to do something different.”  
  (p. 301)
Techniques:
“Do Something Different” (2)
(de Shazer & Molnar, 1984)

- People often need permission to try something besides what they've always tried (which always seems to result in the same outcome). As simple as this seems, it can be a powerful intervention.

Techniques:
“Do Something Different” (3)
(de Shazer, 1985)

- “Between now and next time we meet, we would like each of you once to, do something different, when you catch Mary watching TV instead of doing what she needs to be doing, no matter how strange or weird or off-the-wall what you do might seem. The only important thing is that whatever you decide to do, you need to, do something different.” (de Shazer, 1985, p. 123)

Techniques:
“Everything is an Experiment”
(Reorientation) (Thomas, 1999)

- “I'd like for you to do _______ (whatever you all agree on) this week. But remember: this is not permanent -- it's just an experiment. If you like how it goes, we can talk about continuing it. If you don't, you only have to do it for a week.”
- When change isn’t assigned or required, people are more likely to try out a different way of thinking, behaving, or interacting. To commit to a week's trial is very different than any “from now on, to succeed, you must...” Also, failures (by your standards or theirs!) are time-limited!

Techniques:
EXCEPTION-FINDING QUESTIONS
(Reorientation)

- Enhancing existing and past successes
- Identifying exceptions to problem-dominated perceptions and behaviors
- SFBT assumes exceptions happen all the time!

Techniques:
EXCEPTION-FINDING QUESTIONS (2)

- “There are times, I am sure, when you would expect the problem to happen, but it doesn't. How do you get that to happen?” (ALWAYS assuming that the Parent(s) and Child have some element of CONTROL over the change that has taken place.)
- “What is different when the problem could have gotten the best of you, but you did something to prevent it? What did you do?”

Techniques:
EXCEPTION-FINDING QUESTIONS (3)

- “Who else noticed that change? In what way could you tell that s/he noticed?”
- “When is it less frequent (intense, severe)?”
- “When is it different in any way? How did you figure out that doing ________ helps?”
Techniques: EXCEPTION-FINDING QUESTIONS (4)
(see Thomas, 2010)

- Exceptions can relate to part of one's experience
- "What percentage do you have some control over?"
- Only work on experiences within the controllable portion
- Connecting contexts – school ↔ home

Techniques: MAKING SENSE OF THE EXCEPTIONS

- Making exceptions meaningful
- Unique account questions = “You are special!”
- “How do you account for your ability to do this?”
- “Is this something that surprised you about yourself...the fact that you were able to stand up to the problem in this way?”

Techniques: MAKING SENSE OF THE EXCEPTIONS (2)

- “What about you helped you to be able to do this?”
- “Did you know before you did ________ that you would be able to do it? How did you know that about yourself?”
- “What was different about this situation compared with one when the problem was more in charge? What was different about you?”

Techniques: MAKING SENSE OF THE EXCEPTIONS (3)

- “Did this escape from the problem come easily to you, or was it something you found difficult?”
  a. (if response is that it was easy):
"How do you account for your ability to make something other people find very difficult seem easy?”
  b. (if response is that it was difficult):
"How do you account for your ability to do something like this even though it was hard to do?”

Techniques (Pattern Interruption):
“Fool Your Parent(s)”

- (to “Sarah,” the IP): “I need your help this week. I think your parent can’t tell the difference between when you are REALLY out-of-control and when you are doing it on purpose. I’d like for you to pick one time this week and act a LITTLE out-of-control on purpose. Don’t tell Mom/Dad when that is, but be sure to be ready to tell me when you did it, OK?”
- “Mom, I’d like for you to keep track of the times you think Sarah is getting out-of-control on purpose. Note the situation on a sheet of paper – you know, day, time, what happened – and bring it with you next time.”

Techniques: “Fool Your Parent(s)” (2)

- This, like the “pretend task,” can upset several patterns. First, if the Parent feels she has superior knowledge of Sarah’s motives, then (more than likely) Sarah will provide an event that breaks the Parent’s stranglehold by fooling her. Also, this puts Sarah in a position of controlling her behavior, albeit negatively (for the moment!), which makes her “impulsive” behavior controllable. Finally, this may interrupt the Parent’s normal procedures around trying to control Sarah / get Sarah under control, which haven’t been successful and have led to counseling.
Techniques: HIGHLIGHTING PRE-SESSION CHANGE

- "Many people experience changes around their problem between the time they call for the first appointment and the first session, often for the better. Have you experienced any positive changes since you first called?"
- "What positive thing do you think ____ (partner’s name) would say about you, now that you’ve gained more control of your depression?"
- "So you’ve noticed less anxiety in your life since your first called. How did you do that?"
- "So things have changed a bit for you. What have you been doing the past week that brought this about?"

Techniques: Observing Differently (de Shazer & Molnar, 1984)

- "Between now and the next time we meet, I want you to observe, so that you can tell me next time, what happens in your ____ (life, family, school, or relationship) that you want to continue to have happen."
- People tend to be problem-saturated in their descriptions, explanations, and (therefore) experience. Bringing focus to other, less dominant experiences and themes allows them to notice WHEN other events and experiences are happening, creating hope and future vision.

Techniques: “Pay Attention To When Things Are A Little Better” (de Shazer & Molnar, 1984)

- "Pay attention to what you do when you overcome the temptation or urge to . . . (perform the symptom or some behavior associated with the complaint), and come back and tell me about it next time."
- "Nothing happens all the time" (M. Durrant)
- The results of this “noticing task” can be very powerful, and everyone can participate

Techniques: PRESUPPOSITIONAL QUESTIONS (1)

- "Many people experience changes around their problem between the time they call for the first appointment and the first session, often for the better. What positive changes have you experienced since you first called?"
- "What would ____ (Child, Mother) say about you now that you’ve gained more control of your situation?"

Techniques: PRESUPPOSITIONAL QUESTIONS (2)

- "So you’ve noticed less fighting among your children since your first called, Father. How did you do that?"
- "So things have changed a bit for you. What have you been doing the past week that brought this about?"

Techniques: Pride Round (Tolksdorf, 2007)

- In groups of children or with families
- "I often tell them that I am really proud of them. Instead of me telling them all the time, I often ask them to choose something they have done well in (the problem context) and are proud of and to tell the group/family."
- "I’m proud I got a sticker" (for well-done homework)
- "I’m proud of how I held my temper this past Tuesday"
- "I think I’ve really done well showing my appreciation for my son this week"
Techniques:
RATE THE OTHER’S EXPERIENCE

- “I would like for you to rate your ‘tantrums’ (Child’s word) each day. Mom, I would like for you to rate his ‘tantrums’ each day, also. Don’t tell each other what your rating is, but keep track of it on these note cards and we’ll talk about it next time.”
- This often highlights the Child as expert of her or his own problem, since Parent will be “wrong” on her/his rating of the “actual rating number” of the Child nearly every time.

Techniques:
“Rate The Other’s Experience” (2)

- “I would like for you to keep a journal / diary of your Son’s ‘acting-out’ this week. On a scale from ‘1’ to ‘10,’ with ‘1’ being totally out-of-control and ‘10’ being totally in-control, I’d like for you (one or both Parents) to rate his behavior -- morning, afternoon, and evening. Pay particular attention to what’s going on when you do not rate his behavior as a ‘1,’ and bring in your notes next time for assessment.”
- Parent version!

Techniques:
“Rate The Other’s Experience” (3)

- Since most people dichotomize (“He’s awful / He’s perfect”), this scaling or rating exercise introduces difference into the equation.
- Assuming Son will not be a ‘1’ all the time (note the word ‘when’), the parent will have evidence around Son’s better moments to discuss the next time you meet.

Techniques:
SCALING (Progression)

- Given: There will be differences in #’s!
- Do not try to resolve the differences!
- “Why would that be a ‘____’ (number) for you and not higher?”
- “What would have to happen for that number to increase by one?”
- “What would you notice when that number increased from x to x+1?”

Techniques:
SCALING QUESTIONS

- Change is easier when it is removed from the dichotomy of ‘all / nothing’
- Moving away from setting an unattainable goal of ‘10’ (perfection) allows both the therapist and the client(s) to experience success before the problem is completely eliminated (assuming it can be eliminated)

Techniques:
SCALING QUESTIONS (2)

- “On a scale from one to ten, with one being ‘pretty bad’ and ten being ‘pretty good’, how would you rate how you’re doing now?” Follow with, “And when you’re able to say (the client’s response plus one or two), what will be happening differently?”
- (Ask each family member – part of “goal-ing” process)
Techniques:
SCALING QUESTIONS (3)

- "On a scale from one to ten, how bad is your anger (Child's word) right now? What would it take for it to get better, say, one or two points?"
- "So your child's laziness (Parent's word) has improved from a '2' to a '4'. What did you do to move up from 2 to 4 in such a short time?"
- "What would it take to get the problem from a '5' to a '6'?"

from Tolksdorf, in Nelson & Thomas, 2007

Techniques:
ROCK/PAPER/SCISSORS
(Hackett, 2010)

- "On '3,' everyone uses both hands to show where you think the family is on a scale from 0 to 10, 0 = 2 closed hands and 10 = all 10 fingers showing."
- Practice before creating an interventive scale x 2 or 3!
- Example: "On '3,' everyone show where you are, 0 to 10, on how well you got along on your best day, which you all agreed was last Saturday, OK? Ready? 1..2..3!" (Mom=7, Dad=8, Son=9) OK, Son, 9 is really high! What made it a '9' for you?"

Techniques:
Sharing Credit
(Furman & Ahola, 1992)

- Also in Bertolino & O'Hanlon (2002)
- "Who taught you how to overcome this?"
- "Who helped you to make the progress so quickly?"
- "If you were to thank someone for your help on this problem, who would it be? (follow with), "How might we do that?"
- "How did your parents help you change?"

Techniques:
Tapping into Social Support Systems
(Bertolino & O'Hanlon, 2002)

- Also called "Unconditional Conversations"
- "Who helps you in your day-to-day life?"
- "What do these people do to be a help to you?"
- "Who has been helpful to you in the past in facing daily challenges? How has s/he been helpful to you?"

Techniques:
Tapping into Social Support Systems (2)
(Bertolino & O'Hanlon, 2002)

- "Who do you feel you can count on?"
- "When you're struggling, who knows just what to say or do to help you to get back on track?"
- "Who has helped you through tough times? How did (do) they help?"
- "Who would be willing to help out and would be helpful?"
Techniques:
Transfer Competence
(O’Hanlon & Beadle, 1999)

- Child: “I just hang out at school -- nobody thinks I do much of anything right.”
  Therapist: “Didn’t you tell me you are in the band?  How did you get good enough to become a member of the band?”
- Adolescent: “My mother and my brother squabble constantly.”
  Therapist: “You work at a daycare -- when you see two kids fighting, how do you help them get along better?”

Techniques:
Transfer Competence (2)
(O’Hanlon & Beadle, 1999)

“We can help clients draw upon the confidence and ease they feel in situations where they are competent and effective and apply it in new areas. They can also draw useful metaphors and practical help from these areas and apply them to current areas of difficulty.”

REFERENCES/RESOURCES
Hudgins, Maryann (2001)
RESPECT BINGO
“Now you can help students understand respectful behavior while having fun. Each bingo card gives students the opportunity to look for actions that show caring for self, working with others, responsibility at home, fairness in play, and trustworthy actions. Included are 30 bingo cards, calling cards, and reproducible activity sheets.”

GRADES 2-5 • UP TO 30 PLAYERS • $23.95 from http://www.monarchbooks.ca/catalogues/cata/spneeds.pdf

REFERENCES/RESOURCES
Trenhaile, Jay (2006). CREATING SOLUTIONS and CHARACTER EDUCATION VERSION of C.S.
“The format of the game draws children’s natural interest and encourages them to share information. Both versions are focused on children’s strengths. They are cooperative – the counselor plays with the child or children to attempt to win the game jointly. Everyone is on the same team.” http://www.creatingsolutions.org

HOW TO INTERVIEW FAMILIES

1. If you want A to speak with B, the therapist should avoid drawing eye gaze, being sensitive to cultural.
2. When A speaks for B, check it out with B (“Is that your experience, B?  Is your experience similar to what A is saying?”)
3. Alternative to #2: When A speaks for B, politely ask A to speak for self (“Is that your experience, A?  I’ll get to B in a moment to get his/her view of this.”)
4. When A states his/her opinion of an event, ask B: “Is your experience similar or different?”
5. About the amount of time each person speaks: Division of time spent talking must fit that counseling situation. Ask, “Is it necessary that we divide the speaking time equally?”
6. When people interrupt and speak for the other, answering a question meant for the other: Ask, “If I ask one of you a question, and the other responds, how do I stop the interruption without offending you?”
• 7. Ask, “How can I make this helpful to you (individually and collectively)?”
• 8. Not asking about goals for therapy may lead a person to assume you agree with his/her unspoken goals. Ask, “What do you expect from counseling?” early on and expect to hear different and (seemingly) contradictory things.
• 9. Disagree respectfully (especially with people’s conclusions). Example: “If I disagree with you on that, what would you say?”

• 10. If all agree that doing _______ would make a significant positive difference in their relationship or problem, find a way to make _______ happen!
• 11. STAY TENTATIVE!
• 12. Normalize but don’t diminish or disqualify someone’s experience.

• 13. Start Old Good Behaviors Again -- Only change (initially) what the others say is meaningful change
• 14. Keep nonverbal cues you pick up to yourself (if client made aware → control it).
• 15. Learn to say, “I can’t do that” and “I won’t do that,” when appropriate.

• 16. Interactive Miracle Questions (Berg)
  – Ask one (example, W), “What would be 1st thing you would do…?”
  – Ask H, “If she did that, how would you respond?”
  – Switch – ask H about his Miracle, what he would do first; then ask W how she would respond to H’s 1st miracle action
REFERENCES/RESOURCES


