

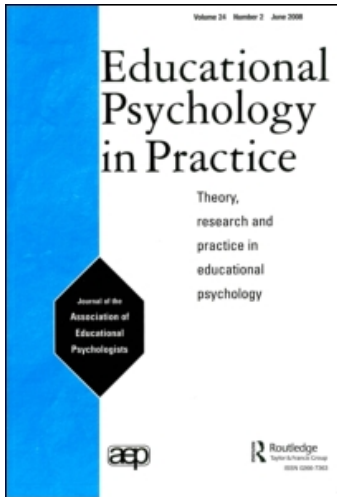
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Using Solution Focused Brief Therapy in Individual Referrals for Bullying

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SUMMARY *The authors work in a city local education authority Special Educational Needs Support Service with an Anti-Bullying Project that continues to develop effective approaches to dealing with bullying in schools. This paper describes the project's use of Solution Focused Brief Therapy (SFBT) and reports on the outcomes of a large number of interventions, particularly with pupils of secondary school age. The support group approach, developed within this project and published in Educational Psychology in Practice, is referred to in the government's anti-bullying pack as a key strategy. The authors show that SFBT provides another effective strategy to support pupils vulnerable to bullying in both primary and secondary schools.*

Introduction

The Anti-Bullying Project has a wide remit. As well as helping with individual referrals in bullying situations, it works with preventive programmes and training for staff, governors and peer mentors. In 1998 *Educational Psychology in Practice* published a paper outlining the effectiveness of the Support Group Approach to bullying (Young, 1998) developed and evaluated within this project. This paper has since been referred to in the revised anti-bullying pack for schools, *Bullying—don't suffer in silence* (Department for Education and Employment, 2000). A number of strategies, including the Support Group Approach, are recognised as *key strategies* in preventing or reducing bullying.

The Anti-Bullying Project has continued to monitor interventions and evaluate outcomes to referrals in relation to the strategies employed. Solution Focused Brief Therapy (SFBT) has now been used in a large number of cases, particularly involving secondary school pupils.

The Support Group Approach in Schools

In a nutshell, the Support Group Approach uses a 'victim's' own perceptions of the situation to identify 'bullies', 'bystanders' and 'friends' to make up a support group.

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The group members are invited to suggest ways of helping. The intervention is reviewed about a week later and as necessary from then on. This strategy has been proven to be extremely effective in primary schools (Young, 1998, 2001, 2002).

Nevertheless it is a strategy that 'feels risky'. This is because the solution unfolds outside the direct supervision of adults in school. It is to some extent controversial, in that it takes a non-judgemental, gentle and altogether positive approach, when the predominant view is that adults ought to be condemnatory and punitive toward 'bullies'. Although one can argue that these things contribute to its undoubted success, they also make the Support Group Approach less likely to be put into practice.

The ramifications of an intervention 'going wrong' are greater in secondary than primary schools—in secondary schools the perceived risks may be thought to be too great. For example, in the secondary age group, pupils who might be asked to help in the support group are more likely to be seriously violent or in trouble with the police for petty offending.

What is more, if anything illegal or harmful occurs while there is an intervention going on, teachers may be called upon to justify whatever they have done, and it is easier to justify punishment than conflict resolution. In other words, teachers may feel that these risks outweigh the advantages.

Another constraint on using the Support Group Approach in secondary schools is that some pupils do not wish for any intervention that involves their wider peer group, let alone the 'bullies', to take place. Although teachers use their own best judgement in deciding an intervention with primary age pupils and take the responsibility of doing so, it is a different matter with secondary age pupils. As pupils become older, account must increasingly be taken of their views, even if that view is believed to be incorrect.

From a purely practical point of view, organising a support group and co-ordinating reviews in secondary settings can be quite difficult when the members of the group are in a range of different lessons spread across a secondary school site.

As a result of these constraints, the project began to use individual SFBT, particularly in secondary cases. In addition, for reasons that are not at all clear, in recent years referrals to the Anti-Bullying Project have shifted from involving predominantly primary, to mainly secondary age pupils.

This paper examines the outcomes of using SFBT with referrals to the project during the academic year 2000–2001. There were 134 referrals that required more than advice and support over the phone. These pupils (and sometimes parents/carers) were seen for one or more sessions. Of these, 96 (72%) were secondary age; 38 (28%) were in primary schools. 77 (57%) were boys and 57 (43%) girls.

In 12 cases the Support Group Approach was used, 10 in primary schools, two in secondary schools—all but one, a primary referral, had a successful outcome. SFBT was used in 118 of the referrals, for 66 boys and 52 girls, 26 in primary and 92 in secondary schools.

Solution Focused Brief Therapy

SFBT is a relatively new approach in education. Rhodes and Ajmal (1995) provided the first English exposition of using the approach in schools. It is much better known in the therapeutic field where it originated. Steve de Shazer and Insoo Kim Berg are generally credited with being the first to develop this way of working at the Brief Family Therapy Centre in Milwaukee, USA, in the early 1980s (De Jong & Berg, 2002). They found that it was more effective to deliberately and skilfully focus attention on solutions rather than focus on the problem. They did this by encouraging the conversation to concentrate around three main areas:

- Past successes and exceptions to the problem
- Existing skills and positive personal qualities
- The preferred future.

A variety of strategies encourage this to happen, although it must be said that solution focused practice is much more than a set of learned conversational techniques. The anti-bullying co-ordinator in all cases used what might be termed standard techniques (De Jong & Berg, 2002) well known in solution focused brief therapy.

Non-Problem Talk

The initial conversation begins with a phase of non-problem talk. This is designed to convey to the pupil that they are not just seen as a 'walking problem'. It may start with a mundane, matter of fact conversation about the room assigned, the furniture, the weather even. And then, instead of what might be expected, an invitation to talk about the problem, the interview proper begins quite differently:

So, ... what are you good at?

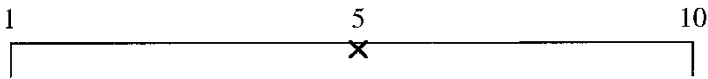
Notice the assumption being implied by the question—that there are things that the pupil is good at. Solution focused questions often imply competences and personal qualities, a powerful means of validating the pupil's positive self-esteem. When one area of competence has been explored, there follows more implied complimentary questions:

Right ... so you're a good footballer, that's great ... and what else are you good at?

Scaling

Scaling is used in a particular way in SFBT—to highlight the three areas of past success, present skills and preferred future. It also helps by giving a means of gauging progress that is meaningful to the pupil. First, the pupil will be asked to scale where they are at present. Usually this is illustrated by simply drawing a line on paper, sometimes with a 'smiley face' and a 'sad face' at each end, and marking their present position.

On a scale of one to ten—where one is ‘the pits, the worst it’s been’ and ten is ‘happy in school’—where are you now, say today, or this week?



Ah, about a five, that’s good ...

The lowest point on the scale is described in such a way that it is below their present position, and the highest point above it. The best parameters are those that enable the pupil to place themselves in or about the middle of the scale. The assumption is that the pupil is managing something better than might be expected. As long as they do not scale themselves right at the bottom of the scale (which in fact suggests the question was not quite worded in the most helpful way for the pupil) the follow-up can be:

Good, how come you have managed to reach as far as that already?

Notice again the implication behind the question is that the pupil is at least partly in control of their predicament, and they are doing well to be where they are, given the circumstances. This acknowledges the difficulty without focusing on it. This question is crucial in exploring the skills and personal qualities that the pupil has already shown in dealing with their difficulties.

So whatever the answer may be—usually something like ‘Well I’ve been keeping away from that group of kids’, the follow-up is often ‘So ... good ... how do you manage to do that?’—again implying competence and skills that may be explicitly complimented later.

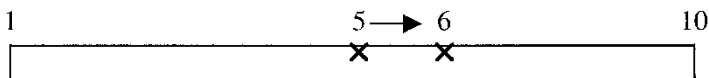
The interviewer continues to find further strategies they have tried:

That’s a good idea—what else have you been doing that helps?

The implication in this question is that there are other things that the pupil has tried and will more often than not evoke a positive response. It is not the same as asking, ‘Have you tried anything else?’, which almost invites a ‘no’ response.

When the present strategies have been explored and appreciated, the interview will move on to what the preferred future may look like, usually by adding just one more to their previous scaling. Continuing the example from earlier:

Let’s say I come back in a week or so ... and you say ‘I’m a six now’ ... like this ...



So, when you are six, what will be different?

This question implies that things are going to improve and focuses attention on what will be happening rather than what will not be happening. In bullying situations, as with many problems, the answer is often seen in terms of the absence of something, in this case the end of the bullying. Solution focused interviewing explores what will

be happening instead. Again the skilled interviewer will expand and ask for further and further details—the more precise and concrete the details, the more likely that change will happen in that direction.

Exceptions

The pupil is enabled to describe, again in as much detail as possible, what is happening when the problem is not there, or is less intrusive. So for example:

When you are happier in school what is happening?

When things are ok, how are you different?

The interviewer takes a curious posture, what De Jong and Berg (2002, p. 20) call a posture of ‘not knowing’, to allow the pupil to explain how these times happen in great detail, and what part the pupil played in bringing them about.

Miracle Question

The ‘miracle question’ is a powerful means of enabling someone to identify and articulate their preferred future. It asks the pupil to imagine this future, without the problem, happening tomorrow. It is a strange and intriguing question, and is often preceded with questions to encourage an appropriate mindset:

Do you know what a miracle is? Or

Do you have a good imagination? I am going to ask a strange question!

Right ... so you go to bed tonight, after just a normal evening, and you go to sleep ... and during the night a miracle happens ... but you don’t know because you are asleep ... and you wake up tomorrow morning ... and everything is fine. How will you know this miracle has happened?

What is the first thing that you notice is different about you?

What will you do different?

Who will be the first person to see you in the morning? What will they notice is different about you?

In this way the pupil can be encouraged to describe in detail what life will be like when the problem is no longer there, particularly what they will be doing differently. The more detail that can be elicited, the more likely the pupil will learn from their own answers about their own solutions.

Compliments

Because the conversation concentrates on times when the pupil is probably more confident, and more successful, the interviewer can listen carefully for implied skills and personal qualities that the pupil has used already so that these can be highlighted, particularly near the close of the interview. These compliments are

grounded in actions recognisable to the pupil. It is sometimes easier to formulate these by beginning with ‘I am impressed by ...’; for example, it might be:

I am impressed by the way you managed to keep away from those kids you find difficult, even though that was not easy at times. You have good ideas for managing to do this and are capable of putting your plans into action, well done!

The pupil feels their past efforts, that they may not even have noticed until now, have been validated and appreciated. This reinforces their sense of control and ‘agency’ in any subsequent suggestions that are linked.

Suggestions

A suggestion can be formulated by taking an element of something the pupil has already mentioned that they can experiment with during the coming week or so. It should be tied to the compliments, so that they can be confident in being able to do it.

Arrange to Review

The pupil can decide when they think it would be helpful to meet again. It is best, if at all possible, to allow the pupil to make this decision, although there may be other constraints that serve to make an earlier review necessary; for example, if parents want feedback sooner. If this is the case, it is better to be open and ask the pupil if your choice of timing is acceptable to them.

Throughout, the tone is respectful, optimistic, curious and empowering. Very rarely will any advice be given. The pupil’s own strategies and ideas are being utilised and therefore are more likely to be done well, and to continue to be used successfully after the intervention, as well as any other ideas the pupil may have over the longer term.

Review of Interventions

Evaluation

In the ‘clinical’ context, evaluations of success are often based on longer term follow-up, say by contacting clients six months after intervention and asking if they found it helpful (De Jong & Berg, 2002, chapter 14). Evaluation of interventions in schools is not so straightforward in so far as the referral may have come from the school itself or (more often) from parents, but the intervention is usually with the pupil.

One of the strategies in particular, scaling, is useful when evaluating immediate outcomes. If in subsequent sessions the pupil reports progress up the scale of being happier in school, it is a fair assumption that the interview has been helpful. The authors decided to use the pupil’s own scaling to evaluate interventions. However,

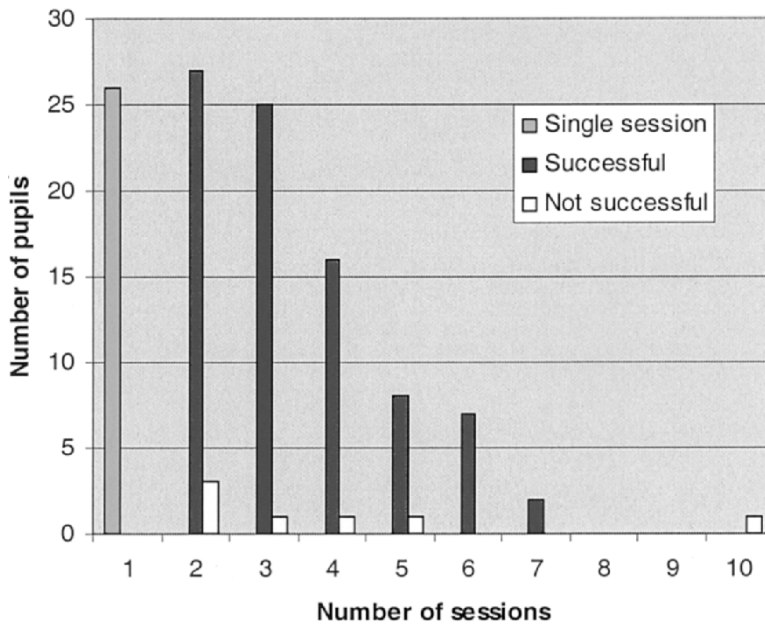


FIG. 1. Solution focused brief therapy outcomes.

it is not possible, obviously, to evaluate single session interventions in this way. The number of sessions ranged from single sessions, in one referral, to 10 altogether.

Out of the 118 pupils, 26 pupils had only one session. In these cases the anti-bullying co-ordinator used her own experience in collaboration with the pupil's own view, to decide whether any further sessions would be helpful. Any pupil who wanted a further session would be seen again. In any case, the pupil was given a card with the co-ordinator's name and telephone number with an invitation to get back in touch if they wanted to. Clearly the evaluation in these cases is largely subjective.

When there was more than one session, the project can use the pupil's own scaling as the measure of a positive outcome. A referral is judged successful when the pupil is satisfied that their situation has improved to the point where they feel no longer in need of support. From the 92 pupils who had more than one session, 85 pupils (92%) progressed up the scale until they reached this point. Seven pupils (8%) stayed the same on their scaling, made some (but unsatisfactory in their view) progress or decided to stop the sessions for some other reason.

Figure 1 shows how the interventions were analysed according to outcomes, alongside the number of sessions of each intervention. Leaving aside the pupils who only had one session, the average number of sessions to a successful conclusion, based on the pupil's own scaling, was 3.4. Including pupils who only had one session, the average number of sessions for pupils was 2.8. Appointments for second and subsequent sessions are made at the end of the preceding session. The time-scale is largely determined by whatever the pupil thinks would be most helpful—as a general rule the time between sessions lengthens as the number of sessions

increases. The second session will often be one week after the first, and the third session may be two weeks after the second, and so on. The majority of referrals were therefore completed within half a term.

It is an important advantage of this approach that it actively avoids creating dependence. This is important when trying to maximise the longer term effectiveness of an intervention. Re-referral for bullying is very low, even within the context of the co-ordinator regularly revisiting schools to help other pupils. SFBT is known not only for its effectiveness, often in cases where other approaches have already been tried, and its 'briefness' (i.e., it takes no more sessions than necessary), but also for its longer term outcomes—at least as good as other therapeutic approaches (George *et al.*, 1999; De Jong & Berg, 2002).

Case Study

Of course every individual referral is both different but in some ways the same. The following case study is a compilation of different referrals with fictional names, to illustrate typical features.

Mrs Smith rang the anti-bullying helpline when she felt that her daughter Rachel's secondary school was not responding effectively to her difficulties in school. Mrs Smith had been in to see various members of staff: the head of year, form tutor and deputy head, but the problem was still not sorted. Her daughter was getting upset at home and was reluctant to go to school. Although Mrs Smith did not want her daughter to have time away from school, she was at the same time worried what might happen to her and was beginning to feel that Rachel should change schools.

The co-ordinator asked what could she do to help and they explored various options but decided the co-ordinator would arrange to go into school to see her daughter and to try to help within the school. An appointment was made through the head of year to see Rachel. Since it was not a clear emergency, the appointment was made for about 10 days' time. This allowed the school, Rachel herself and her parents to collect their thoughts and take any action they felt would be helpful before the initial meeting.

First of all Rachel was thanked for coming to the meeting and asked where she would prefer to sit. Once settled Rachel was asked for her consent to the interview and asked if she was aware that her mother has been worried about her in school. Rachel said yes, her mother had told her that she had phoned the anti-bullying co-ordinator who would be coming in to see her.

Rachel was asked what was going well in school. Rachel replied that she was quite good at English and a short conversation followed on how Rachel managed to do such good work in English. Then she was asked for further areas of success. Rachel said she also enjoyed Art. After each suggestion the conversation was extended to reinforce Rachel's positive skills and personal qualities.

The co-ordinator asked Rachel to scale where she was:

Co-ordinator: So, on scale of 1 to 10 where 10 is school is fine, everything ok

and one is the worst you can imagine at school—where would you put yourself along this line?

Rachel pointed to where she thought she was on a line across a paper—about a five:

Co-ordinator: Oh good—you're half way to ten already—how have you managed that?

Rachel could tell the co-ordinator about how she ignored the pupils who taunted her, she stayed close to her friends at break, dinner times and after school, she listened to the teacher and got on with her work, and so on.

The co-ordinator congratulated Rachel on her ideas for coping with the situation and her skill and determination in following her ideas through, even though it must have been difficult at times.

So then to get an idea of how Rachel envisages life without the problem, her preferred future, she was asked the 'miracle question':

Co-ordinator: This is a strange question ... it takes some imagination ... you go home after school and have a normal evening and then go to bed. And during the night when you are asleep, a miracle happens ... you don't know that the miracle has happened because you are asleep. Tomorrow when you wake up ... what is the first thing you notice that's different? What is the first thing that tells you the miracle has happened?"

Rachel: I would feel happier ... [Rachel smiled].

Co-ordinator: Who would you see first in the morning, when you wake up?

Rachel: My Mum.

[Rachel began to look interested in this intriguing question.]

Co-ordinator: Oh ... What will your mum notice that is different about you?

Rachel: She would notice I was talking nicer to my sister.

Co-ordinator: And what else is different?

Rachel: I'd get ready for school on time?

Co-ordinator: Ah ... And what next? ... Who else will notice you're happier?

Rachel: My form tutor would notice.

Co-ordinator: Wow! What would the form tutor notice?

Rachel: Oh ... he would notice I was on time and chatting to mates ...

Rachel was encouraged to go through her day, using her perceptions of what she and other people around her would notice that is different. The miracle question allows Rachel to describe her preferred future.

Co-ordinator: You are a five now. So if we were to meet again in a week

- or so, and you said 'I'm a six now' ... what will be different ? ... What will you be doing different?
- Rachel: I'll be smiling more ... getting more work done and answering questions. Talking to my mates ...
- Co-ordinator: What will they notice first?
- Rachel: They might notice I'm happier, having a joke ...
- Co-ordinator: How soon will you be a six?
- Rachel: Oh not long, maybe three or four days.

Rachel was complimented on her good ideas and it was suggested that she keep on doing those things that have helped already, including talking to her friends and speaking nicely to her sister at home.

Then Rachel was asked if it would be helpful to arrange another appointment so that she could describe how she was managing. Arrangements were made to meet in about a week.

- Co-ordinator: Good Luck. See you in a week's time. Thanks for coming, look forward to seeing you next time.

At the next session Rachel was looking happier. She scaled herself at a seven.

- Co-ordinator: Wow! How have you managed that?
- Rachel: Well I have been working hard. I got a certificate in Art.
- Co-ordinator: Well done! What else is different?
- Rachel: I am speaking to more mates and made some new friends.
- Co-ordinator: Wow! How did you manage to make new friends?
- Rachel: I was just talking to them.
- Co-ordinator: That's great, what else?

It is helpful to ask them to imagine how other people might notice these changes that are happening.

- Co-ordinator: Who else has noticed that you have gone up to a six?
- Rachel: My Mum.
- Co-ordinator: Oh What's she noticed?
- Rachel: I've been getting on with my sister.
- Co-ordinator: Brilliant ... Who else has noticed?
- Rachel: My form tutor noticed.
- Co-ordinator: Oh ... how come?
- Rachel: She said I was getting in on time now!
- Co-ordinator: Is that correct?
- Rachel: Yes.
- Co-ordinator: That's excellent! How do you manage to do that?
- Rachel: I've been setting my alarm clock ... and I've been walking to school with Jane, so I've got to get up ...

Rachel only wanted to see the co-ordinator once more before she felt she had made enough progress. She felt that she could stay at that level now, or if she had a

setback, she could get herself back on track. She was given the co-ordinator's card and an invitation to get back in touch if she should want to talk again.

Effectiveness of Anti-Bullying Strategies

Unfortunately investigation into the effectiveness of anti-bullying strategies to help individual pupils has been lacking. As a result, particular interventions in bullying situations are often promoted on the basis of faith, hope and anecdotal accounts rather than rigorous evaluation, even though the supporting literature may sound convincing (Department for Education and Employment, 2000).

The authors would welcome more outcome evaluations on, for example, traditional counselling, phone help-lines, circles of friends, assertiveness training. Only then can we be confident or even justified in recommending these approaches on anything other than an experimental basis.

However, this paper has shown that both the solution focused support group and SFBT for individuals can be trusted as effective strategies that work quickly when a pupil needs help in a bullying situation. What is more, these strategies are useful because they do not 'take sides', or presuppose any judgement about the cause of the difficulties, which so often takes place beyond the view of adults and is not open to 'proof'. Practitioners do not have to label pupils 'victims' or 'bullies'—if a pupil feels in need of help, that is enough.

Solution Focused Brief Therapy

SFBT can be used in a wide variety of ways in schools to help pupils (or staff for that matter) make changes for the better. Pupils enjoy the experience and gain a lot from it, beyond the immediate problem.

However, it is a more skilled intervention than using a support group, and as a result staff will probably need training in order to use this approach. Staff need no previous experience or qualifications other than an open mind and an ability to take a new approach on board. Moreover, the skill is generic and is transferable to other types of intervention to support vulnerable pupils.

Solution focused strategies are truly inclusive and awareness of solution focused thinking is rightly growing fast, providing new ways to empower staff and pupils to bring about positive change in their schools.

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