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Article 81

Solution-Focused Brief Counseling in Schools: Theoretical Perspectives and Case Application to an Elementary School Student

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Solution–focused brief counseling (SFBC) is a postmodern therapeutic system which focuses on helping clients create solutions in a straight-forward manner within a limited amount of time. It is based on the assumptions that clients have the necessary strengths and resources to change and that counseling is most effective when focusing on constructing solutions unique to each client (de Shazer, 1988). Solution-focused brief counseling differs from other modes of counseling in that it shifts the focus from problem solving to creating present and future solutions. Because of its positive, solution-focus, SFBC can be used in a wide range of settings (Webb, 1999). Since termination is the ultimate goal in counseling SFBC is extensively used in agency and school settings because of its "efficient, effective and positive" use of time (De Jong & Berg, 2008). Once the therapeutic techniques have been introduced in counseling, they can be utilized by the client anywhere without the counselor's assistance. Prior to termination, counselors assist clients in identifying strategies that can be used to maintain progress towards their goals. In agency settings, solution-focused brief counseling is valued because of the demands of managed health care and their limits on the number of sessions. The use of SFBC is valuable in school settings as well since school counselors are responsible for large caseloads of students and rarely see students for long term counseling (Sklare, 2005). This article will provide an overview of the historical development of solution-focused brief counseling and discuss it main principles and techniques. A fictitious case study detailing the use of SFBC with an elementary school student will then be presented to illustrate its main tenants, use of questions, and its focus on the client's strengths and resources.

Development and Main Principles of Solution-Focused Brief Counseling

During the 1980's at the Brief Family Therapy Center (BFTC) of Milwaukee, Steve de Shazer, Marilyn La Court, and Elam Nunnally assisted families with becoming more specific in their descriptions of problems and goals and to focus more on the present and future (Walter & Peller, 1992; de Shazer et al., 1986). To help clients provide

more specific descriptions of their goals, the counseling team provided clients this therapeutic task:

> Between now and next time we meet, we (I) would like you to observe, so that you can describe to us (me) next time, what happens in your (pick one: family, life, marriage, relationship) that you want to continue to have happen. (Walter & Peller, 1992, p. 7)

The above task provided a context for clients, who had previously provided only vague problems and goals, to observe the specific problems and goals, with which they now could work. They also would shift their past-oriented focus to the present and future. As a result of de Shazer, La Court, and Nunnally assigning this task to clients, clients were not only able to search for and articulate specific problems and goals, but they were also able to describe positive changes that had occurred as a result of their search, including change they had not previously considered. These changes frequently resulted in the clients' solutions.

At the Brief Family Therapy Center, de Shazer, Insoo Kim Berg and their therapeutic team developed seven main principles of solution focused brief counseling (De Shazer et al., 1986). The principles focus on how clients deal with problems, how they are maintained, and how to solve them. The counselors were interested in solutions and how they work. The first principle is that most complaints develop in relationships. Solutions are developed by changing interactions and considering the limitations of the situations. The second principle is that the goal of SFBC is to help clients do something different by changing their interactive behavior or their interpretation of others' behavior so that a solution can be achieved. The third principle dictates the importance of establishing a cooperative relationship with the client. The fourth principle states that a "new and beneficial" meaning can be constructed from a client's complaint (de Shazer et al., 1986). This principle reflects the positive orientation that solution focused counseling holds.

The fifth principle states that only a small change is necessary, which is why only a "small and reasonable" goal is essential. The counselors explain this by stating

> One major difference between brief counseling and other models lies in the brief counselor's idea that no matter how awful and how complex the situation, a small change in one person's behavior can lead to profound and far-reaching differences in the behavior of all persons involved. (de Shazer et al., 1986, p. 209)

The counselors believe that any small changes that clients display are signs of their progress towards solutions.

The sixth principle dictates that once a change occurs in one part of a person's life, then other changes will ensue in their whole systematic lives. De Shazer, Kim Berg, and their family systems therapeutic team at the Brief Family Therapy Center explained that "family therapy" means that the counselor must work to witness changes occur throughout the whole family rather than working with the individual client who is part of their family system. They also posit that an individual's change needs to fit within the limits and constraints of the familial system to avoid creating further conflict.

The final principle states that effective counseling can be achieved even when the counselor cannot articulate the client's complaints. More importantly, the counselor and

client need to collaborate on signs of when the problem has been solved. For instance, when a client involved in a usual troublesome interaction behaves differently, then the counselor will know that the client is working towards a solution. De Shazer and the therapeutic team explain that although listening to the client complain about their problems is essential to rapport building, it is more important to collaboratively develop an intervention. It is critical for the counselor to be solution focused rather than problem focused.

In addition to developing the seven main principles of SFBC, deShazer, Kim Berg and their therapeutic team made recommendation about helping clients establish concrete goals. For a goal to be well-defined it should meet a list of criteria, including: "in the positive, in a process form, in the present form, as specific as can be, in the client's control, and in the client's language" (Walter & Peller, 1992, p. 60). A goal that is positively framed should include the key term "instead," which can be used by asking, "What will you be doing instead?" By asking problem-focused clients this question, their focus will be redirected to possible solutions. A goal that is in the process form usually includes the "How" and "-ing" terms, which can be used by asking "How will you be doing this?" Such phrasing implies that clients will be working towards their solutions. For the goal to be as specifically defined as possible counselors could ask, "How specifically will you be doing this?" Most importantly, counselors should communicate their belief in clients' control in designing solutions by using the term "you," which they can do by asking, "What will you be doing when this happens?" (Walter & Peller, 1992). The use of carefully worded questions is critical in solution-focused brief counseling as they guide the clients' actions.

As implied by its name, solution-focused brief counseling has a positive orientation, which assumes that people are healthy and have the competency to construct solutions that enhance their lives. It is a nonpathological and non-deficit focused approach that assumes that people do have the ability to solve daily life challenges but at times they might lose their awareness of their competencies (Corey, 2009). Berg posits that clients are competent and that the role of the counselor is to maintain an optimistic attitude by helping clients regain their awareness of their competencies (De Jong & Berg, 2008). The counselor's role is to build the client's hope by creating positive expectations of change being possible. The client is often asked to reconsider their deterministic view of their problems and consider strengths that they have previously used to cope with other problems. The client is encouraged to look for what is working in their lives in contrast to their previous unsuccessful problem-focused approaches. Its non-deficit focused approach emphasizes the client's strengths through the use of its techniques, which include the pre-counseling change, exception questions, the miracle question, scaling questions, formula first session task, and the therapeutic feedback. The client is active and directive in the participation of these techniques.

Techniques

As previously noted one of the main tenets of solution focused counseling states that only small change is necessary. The counselor emphasizes this principle with clients by having them participate in the first task, which is to look for pre-counseling change (Corey, 2009). Just by scheduling an appointment with the counselor, client change has

already occurred. The counselor would prompt clients by asking, "What have you done since you called for the appointment that has made a difference in your problem?" By being asked this question, clients are more likely to think about their obstacles in an optimistic, positive frame of mind rather than a deterministic, problem-focused context. Clients are also encouraged to depend more on their own strengths and resources to accomplish their goals rather than depending on their counselor.

Clients learn to rely on their own strengths and resources by being asked exception questions, which is a task that helps clients focus on situations in their lives when they would have expected the problem to occur and it did not or did not occur as intensely (Murphy, 2008). These times of exception serve as examples of clients' previous abilities to work towards solutions. They also remind clients that problems are "not all-powerful and have not existed forever" (Corey, 2009, p. 384). Most importantly, exception questions evoke clients to use resources and strengths that they have previously used to solve problems.

When clients are asked to imagine what their lives would look like without the problem, the counselor is using the miracle question. For example, a counselor could ask, "If a miracle happened and the problem you have was solved overnight, how would you know it was solved, and what would be different?" (Sklare, 2005, p. 28). When clients are asked these questions they are encouraged to imagine possible steps to solve their problems which helps them envision their goals. Furthermore, clients would be encouraged to envision the steps toward reaching their goals by being asked what they will be doing differently if the miracle did occur. The future focus of the miracle question helps clients consider a life that will eventually not be dominated by the problem. This is a useful technique because the clients are asked to imagine a wide range of future possibilities (De Jong & Berg, 2008).

To attain a better understanding of changes in experiences not easily observed such as feelings and moods, counselors use scaling questions. Scaling questions make the goal more specific by turning clients' abstract feelings and moods into concrete subjects. Clients are usually asked how they feel on a scale from 0 to 10, with 0 representing when the problem is at its worst, through 10, when the problem is resolved and clients feels their best. Because one of the main tenets of SFBC is that only small change is necessary, counselors should encourage clients on their progress even if they moved only one number up the scale. Scaling questions enable clients to move past their "black/white" and "either/or" mode of thinking about change and help move them closer to their goals (Walter & Peller, 1992).

In order to help clients monitor their actions and environment, counselors would assign a formula first session task. A counselor might say, "Between now and the next time we meet, I would like you to observe, so that you can describe to me the next time, what happens in your (family, life, marriage, relationship) that you want to continue to have happen" (de Shazer, 1988 p. 137). At the next session, clients can be asked about their observations and what they would like to happen in the future. The goal of this assignment is to help clients become more optimistic by offering hope that change will definitely occur. The assignment also offers clients an opportunity to understand the link between their actions and consequences and how they could use this information to result in future desirable results.

During the last few minutes of the session, solution-focused counselors take a 5 to 10 minute "think" break to construct a summary message for each client, which they will share after the break (Walter & Peller, 1992). In this summary message, there are three main components: compliments, a bridge, and a suggested task (De Jong & Berg, 2008). Compliments are authentic encouragements of clients' current productive actions that get them closer to their solutions. The bridge connects the initial compliments to the suggested tasks that will be provided. "The bridge provides the rationale for the suggestions" (Corey, 2009, p. 185). The third component of the message is the suggested task for intervention, which is usually assigned homework for clients to complete for the next session. The suggested task could be observational and/or behavioral. Observational tasks encourage clients to pay attention to aspects of their lives such as their thoughts, feelings, and actions. Behavioral tasks recommend that clients perform actions that are viewed by the counselor as constructive towards their goals. "A therapist's feedback to clients addresses actions that clients need to do more of and do differently in order to increase the chances of obtaining their goals" (De Jong & Berg, 2008, p. 117).

Since solution-focused brief counseling is short-term, present-focused, and usually targeted to specific concerns and behaviors, counselors are aware of termination from the first session (Corey, 2009). Through the use of miracle and scaling questions the counselor and client gain a sense early in counseling when these goals have been met (De Jong & Berg, 2008). Near termination counseling focuses on how the client can maintain and continue change and identify roadblocks to successes. At any time in the future clients can request counseling whenever they feel their lives are no longer headed in the right direction.

Case Study of Solution-Focused Brief Counseling With an Elementary School Student

Client's Biographical Sketch and Relevant History

Jasmine Tawfik is an 8-year-old student in the third grade born in New Jersey to an affluent Iranian family. She is an attractive, tall, slender girl with olive skin complexion, brown hair, and hazel eyes. Jasmine has an 18-year-old brother, Mohammed, with whom she was quite close before he was deployed to Iraq two months ago. Prior to his leaving Mohammed and Jasmine spent much time together; whether it was working on her homework or going to the movies and playgrounds. Jasmine looked up to Mohammed as a parental figure, her role model, and her best friend.

After he left for the war Jasmine's living condition worsened as her parents argued on a daily basis as to who was to blame for Mohammed's decision to join the armed services. Whenever her parents were not fighting, Jasmine's father was working at his medical practice. Her mother, diagnosed with obsessive compulsive disorder, was busy maintaining their house in perfect shape. With her parents constantly busy and her older brother away at war, Jasmine had no one to go to for emotional support and would cry herself to sleep every night.

Right before Mohammed's deployment to Iraq the Tawfik family's household was filled with conflict. Mohammed and his parents argued endlessly every day because of his decision to join the Marines. Specifically, they were angered with his decision to not study medicine to become a plastic surgeon like his father. They hoped that one day he

could join his father's practice and eventually lead it. His parents were even more angered by his decision to "betray his people" by fighting with the Americans against the Middle East.

After Mohammed left for the war, Jasmine's life worsened. The Tawfiks' family friends no longer visited due to their anger with Mohammed's decision to fight in a war against a Middle Eastern country. As a result, Jasmine's social support network collapsed as she was no longer able to see her friends and, most importantly, Mohammed. Since her parents were overprotective of her choice of friends, she had few friends at school to rely on for support. With her lack of a social life and her parents' busy schedules, Jasmine spent much time alone and sad.

Prior to his departure Mohammed would help Jasmine with her homework. As a top student in his high school class Mohammed had developed many study skills that he used to assist Jasmine in maintaining her honor roll status. Specifically, Mohammed helped Jasmine memorize key notes in all her subject areas every night before going to bed and, as a result, Jasmine earned high grades. However, after Mohammed left, just as Jasmine's emotional well-being suffered, so did her grades.

Client's Presenting Problem

The aftermath effects of Mohammed's departure surfaced in Jasmine's affective, behavioral, cognitive, and social functioning. School became especially challenging for Jasmine as she no longer had Mohammed's support. In class, Jasmine appeared withdrawn by keeping her head down and refraining from participation. Whenever she was encouraged by her third grade teacher, Mrs. Vasquez, she would keep her head down and mutter "I don't know" to every single question asked. As a result of her lack of participation, Jasmine was not able to comprehend class material, which then led to the decline in her grades.

As her grades declined, so did Jasmine's self-esteem, which made it more difficult for her to attempt to develop a new supportive social network. During lunch and recess Jasmine was withdrawn from others. Whenever other students invited her to play she would reject their offers and keep to herself. She played by herself on the swings everyday as she watched other children play in groups. Whenever she was too lonely watching others play together, Jasmine hid behind the bushes so she could cry in privacy until her classmates would find her crying and ridicule her even more for "crying like a baby."

Worried that Jasmine's functioning was declining, Mrs. Vasquez asked Jasmine to help her organize the classroom after school. When Mrs. Vasquez asked Jasmine about her lack of participation in class, Jasmine confided to her about Mohammed's departure. She stated that after Mohammed left she no longer had anyone with whom to talk. Concerned, Mrs. Vasquez brought up the idea of seeing the school counselor. At first, Jasmine was reluctant to talk with a stranger. However, after Mrs. Vasquez's explanation of how the school counselor, the "feelings teacher," could try to help her with her school performance in a supportive manner, Jasmine was willing to see her. The next day, Jasmine went to talk with the school counselor because she wanted to feel better and do well in school again.

Why Use Solution-Focused Brief Counseling?

Because Jasmine's feelings of sadness and her declining grades greatly affect her participation in school, she needs an intervention that focuses on her school-based behaviors. Solution-focused brief counseling will target these behaviors by having Jasmine go through a series of small, reasonable steps to achieve her goals.

As Jasmine no longer has any positive influences in her life and thinks in black and white terms, she has difficulty viewing her life optimistically and feels futile with the decline in her grades. Jasmine will greatly benefit from the positive oriented approach of solution-focused brief counseling. Her problems will be redirected towards already existing solutions. By thinking of how she previously accomplished being an honor roll student, Jasmine will regain confidence in her academic abilities and make new attempts to become involved at school.

In addition to thinking of her goals in terms of existing solutions, Jasmine will benefit from the SFBC principle which point out that only a small change is necessary because any change, no matter how small, creates the context for future changes. By learning that all she needs to do to start becoming a better student is simply participate once a day in class, Jasmine will learn that she can achieve her goals by accomplishing small and manageable steps. Eventually, Jasmine will think less in black and white terms and be proud of her steps toward academic success and developing friendships.

Solution-focused brief counseling assumes that people are healthy and competent and have the ability to brainstorm solutions to enhance their lives. This counseling model also assumes that students are competent and that the role of the school counselor is to help students recognize the competencies they possess. As Jasmine is a healthily functioning student who possesses many strengths, such as intelligence and motivation, she can use these strengths to her advantage when she is reminded to do so by the school counselor.

The Therapeutic Relationship

As a result of her teacher's suggestion Jasmine is eager to meet with the school counselor. She comes into counseling as a customer who is open to working with the counselor on her goals. Because she is an eager customer, this will facilitate the development of the counseling relationship, which is crucial to determining the outcomes. To make Jasmine more comfortable and more likely to follow through on suggestions, the counselor creates a climate of trust, which is done by highlighting Jasmine's strengths and resources and how they can be used to construct solutions.

In order to help build Jasmine's self-esteem, the school counselor adopts a "not-knowing" stance which puts Jasmine in the position of being the expert on her own life. By not assuming an expert frame of reference about Jasmine's actions and experiences, the counselor is allowing Jasmine to take ownership of her actions. Although the counselor has expertise in the process of change, Jasmine is the expert on how she wants to change.

The counselor's goal is to create a collaborative relationship, opening up a range of possibilities for positive changes in the present and future. In this collaborative relationship, there is a climate of mutual respect, dialogue, inquiry, and affirmation so that Jasmine is free to create, explore, and "co-author her evolving stories" of improving her grades and diminishing her feelings of sadness.

From a Solution-Focused Brief Counseling Perspective

When positively framed in terms of easily accessible solutions, Jasmine's issues with her declining grades and loneliness in school can be solved because she is already familiar with the solutions. Prior to the start of her family's problems, Jasmine was a successful student, enrolled in high honor roll every quarter. She was always motivated to do well in her classes by frequently participating in class discussions and was always eager to help her teacher with classroom tasks such as cleaning the board and demonstrating a difficult concept. Every week, she always won the spelling bee. Although she never had any close friends in school, Jasmine had a few friendly acquaintances that she would sometimes talk to during recess. Whenever she did talk and play with her classmates, she claimed she felt happy.

In addition to being reminded about her past successes, Jasmine is also reminded each session that only small change is necessary for her to achieve her goals. The counselor tells Jasmine that change does not have to be big because small changes eventually add up to create bigger changes. Reminded that change, no matter how small, is possible and of the successful strategies she has used in the past, Jasmine has positive expectations for their counseling sessions.

Therapeutic Goals

When the counselor asks Jasmine in their first meeting about her goals for counseling, Jasmine states she wants to be more involved in her class and be well liked by her teacher and classmates. By becoming more involved in her class, Jasmine will earn better grades and also establish positive relationships with other students. It has been difficult for Jasmine to develop friendships outside her family because her family never encouraged her to develop friendships at school, reinforcing her close connection with Mohammed. By developing positive associations with other students, Jasmine will feel more included in school, which will also lead to improvement in her grades.

Counseling Strategies and Techniques

The counselor uses strategies and techniques that encourage Jasmine to believe in her ability to achieve her goal of being more involved in class. The strategies help Jasmine discover solutions in the present by picturing previous successful experiences. The techniques all emphasize the impact of a small, positive change and include the miracle question, the exception questions, scaling questions, the formula first session task, and a message at the end of the session.

The miracle question. After engaging in solution and goal talk, the counselor and Jasmine focus on what life would look like for her if she were to be more involved in class. In order to do so, the counselor uses the miracle question, which broadcasts minute glimpses of her goal being achieved. By answering this question, Jasmine will be encouraged to enact what she would like to have happen rather than focusing on her problems. After Jasmine shares her miracle, the counselor asks her to illustrate what would actually occur in the classroom with the "First Sign Question" (Sklare, 2005). By doing so, Jasmine begins to think about the first small steps to make her goal into a reality. The following dialogue demonstrates use of the miracle question with Jasmine:

> Counselor (C): Suppose I had a magic wand and waved it over your head and the problems that brought you here disappeared, what would be different and what would you see yourself doing? (Miracle Question)
>
> Jasmine (J): I would be happy to be in class.
>
> C: What would you be doing in class to make you feel happy to be there? (First Sign Question)
>
> J: I would be paying attention to Mrs. Vasquez.
>
> C: If I were sitting inside your classroom, and I were to see you paying attention, what would I see you doing?
>
> J: I would be raising my hand to answer Mrs. Vasquez's questions. I would be doing class work with my classmates who are being nice to me.
>
> C: Okay, so you would be doing your work with your classmates who are being nice to you. What do you think you would have done in order for your classmates to be nice to you?
>
> J: I would say "Hi" to them and play with them at recess.

By answering the miracle question Jasmine is able to envision what school will be like when she achieves her goal. Most importantly, she is able to envision what she could do to make her goal a reality, such as paying attention to her teacher and being involved in class work with other students. She also realizes that she could start to form positive relationships with her classmates merely by saying "Hi." It prompts Jasmine to identify a "solution picture" of what life would be like if she took the steps to achieve her goal.

The exception question. Exception questions are used to help Jasmine identify times in her life when she successfully participated in class and was an honor roll student. During those times of exception she could have been withdrawn but instead chose to participate, which led to feelings of approval and acceptance. She also mentions that whenever she struggled with schoolwork and Mohammed was unavailable to help, she stayed after school with her teacher. By identifying these times of exception, Jasmine creates solutions for her current problem.

Scaling questions. The counselor uses scaling questions to help Jasmine rate her current situation and establish a baseline in measuring her progress toward her goal. The questions also help Jasmine think about how she arrived at where she is and how she could move up the scale. The solution-focused counselor assumes that because Jasmine is not at a 0, with 0 representing the worst she could be and 10 the best, it means that Jasmine is doing something right since she is not at the lowest number on the scale. The following dialogue illustrates the use of scaling questions with Jasmine.

> C: On a scale from 0 to 10, with zero being the worst your situation has ever been and 10 representing your miracle, where do you think you are now?
>
> J: Four.
>
> C: Is that right, you are at a four? What have you done that has enabled you to get to a four?

J: I talked to you and Mrs. Vasquez.

C: You know, Jasmine, that shows me that you are motivated to work harder in your class.

J: Yes.

C: What will you be doing differently when you get yourself to a 5? What will happen?

J: I will keep my eyes on the blackboard and the teacher and not keep my head down.

C: That is a great idea.

The use of scaling questions help Jasmine learn that a small step, such as asking the counselor and teacher for help, can move her in a positive direction and that she herself has the power to move up the scale.

Formula first session task. Through the use of scaling questions Jasmine realizes she cam move up to a 5 on the scale by paying attention to the teacher. Therefore, for her formula first session task the counselor asks Jasmine to try to keep her head up and pay attention in one class between now and the next time they meet. The objective of this assignment is to show Jasmine that it is not a matter of *if* she will ever participate in her class but *when* she will choose to do so (Corey, 2009). By doing so, Jasmine will become more optimistic and realize that it is up to her to become more involved with her teacher and classmates.

The message. Before concluding the first session the counselor takes a few minutes to write Jasmine a message that reflects compliments and provides a bridging statement to her assigned task for the next session. The counselor lets Jasmine know that she is on the right track by complimenting her for seeking help from the teacher and counselor. The bridge links the compliments to the suggested assigned behavioral task. The following is a copy of the message the counselor writes Jasmine at the end of their first session:

I'm really impressed with the commitment you have to be more involved in your class. Seeking help from me and Mrs. Vasquez shows that you really want to do better in school. Just by asking us for help, you are so much closer to accomplishing your goal!

You brainstormed some wonderful ideas about how to start friendships with others in your class. You realized that all you have to do is to smile at them and say "Hi." By doing so, not only will you have friends to play with at recess but you will also have friends to ask for help with your school work.

You also recognized that you could do better in class by paying attention to Mrs. Vasquez instead of putting your head down. You have already begun to show improvement by participating once in class today. Because of your commitment to be more involved in your class, I would suggest that you continue to participate in class by keeping your eyes on the teacher and the board and by participating at least one time in class. Be

sure to also notice what you are doing to move up the scale one notch to a "5."

Counseling Outcomes

As a result of her motivation to achieve her goals in counseling, Jasmine improves in her class participation. She comes into school smiling because she has worked her grades from "Ds" back up to "Bs" and "Cs." She now participates in class at least three times a day. In their last counseling session, Jasmine moved up the scale up to a "7," which is a vast improvement from her initial rating of "4."

Although Jasmine is still somewhat withdrawn from her classmates, she is beginning to make efforts to reach out to other students. She now says "Hi" to her classmates rather than just going to her seat in class. Instead of immediately going to the swings during recess, she asks at least one classmate to join her in a game. By doing that, she is establishing a positive relationship with another girl in her class who she plays with a few times a week after school. She has been invited to two birthday parties.

Because Jasmine misses her older brother very much, she and the counselor dedicate an entire counseling session to this issue. They turn Jasmine's problem of not being able to talk with Mohammed to a solution, which is for her to write letters to him in Iraq. In her letter she writes about her progress in school and her new friendships. Two sessions later, Jasmine comes into counseling elated while holding up a response from Mohammed. She says she feels much happier now that she knows she can keep in touch with her brother by writing him letters.

Overall, Jasmine has vastly improved from the first counseling session. She states that she feels much more confident about her abilities to do better in school and make friends. Her parents tell the counselor that she seems happy and, based of one of the suggested tasks in counseling, has started to ask them for help with homework. Her new goals include earning As in her classes by studying 30 minutes a night before going to bed and to make new friends. As a result of solution-focused brief counseling, Jasmine is starting to develop the ability to think in positive termed solutions rather than problems.

Conclusion

With its positive orientation, solution-focused brief counseling assumes that clients have the necessary strengths and resources to create solutions in a limited amount of time (De Jong & Berg, 2008). Solution-focused brief counseling is used in a wide variety of settings and is particularly useful in schools where counselors have a limited amount of time to address large caseloads. The techniques used in solution-focused brief counseling include pre-counseling change, formula first session task, exception, miracle and scaling questions, and the counselor's message. The use of SFBC strategies was demonstrated in the case study of Jasmine, an elementary school student, whose goals included increased participation in class and developing friendship skills. Jasmine and her school counselor worked collaboratively to accomplish her goals and, as a result, Jasmine learned to become solution-focused rather than problem-focused. The case study illustrates the success of solution-focused brief counseling in school settings by focusing on client's strengths and resources in working toward solutions.

References

Corey, G. (2009). *Theory and practice of counseling and psychotherapy*. Belmont, CA: Thomson Brooks/Cole.

De Jong, P., & Berg, I. K.. (2008). *Interviewing for solutions* (3rd ed.). Belmont, CA: Thomson Brooks/Cole.

De Shazer, S., Berg, I. K., Lipchik, E., Nunnally, E., Molnar, A., Gingerich, W., & Weiner-Davis, M. (1986). Brief therapy: Focused solution development. *Family Process, Inc., 25,* 207-221.

De Shazer, S. (1988). *Clues: Investigating solutions in brief therapy*. New York, NY: W.W. Norton & Company.

Murphy, J. J. (2008). Solution-focused counseling in schools. Alexandria, VA: American Counseling Association.

Sklare, G. B. (2005). *Brief counseling that works: A solution-focused approach for school counselors and administrators.* Thousand Oaks, California: Corwin Press & The American School Counselor Association.

Walter, J. L. & Peller, J. E. (1992). *Becoming solution-focused in therapy*. New York, NY: Brunner/Mazel, INC.

Webb, W. (1999). *Solutioning: Solution-focused interventions for counselors.* Philadelphia, PA: George H. Buchanan Company.

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