

“Creating Talk: Integrating Creative Methods into Solution-Focused Brief Therapy when Counselling Primary School Children in New Zealand”

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by Nadia Dick

University of Canterbury, Christchurch, New Zealand
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ABSTRACT

Solution-Focused Brief Therapy is a present to future approach to counselling, highlighting strengths and capabilities on the journey towards a clients preferred future. It is both collaborative and inherently hopeful with a focus on particular uses of language to enhance the change process. This research explores what an integration of Solution-Focused Brief Therapy and Creative Methods might offer primary aged children.

The context for this research is a primary school in Canterbury, New Zealand. They are part of the Mana Ake – Stronger for Tomorrow, three year government funded pilot programme which provides a range of wellbeing support workers to primary schools in the Canterbury region. The child-participant for this research came from a Request for Support from this initiative.

This practice-based research focuses on a single case study which follows six counselling sessions with a 9 years old boy. Qualitative research methods are used and data includes the videoed sessions, co-constructed artwork, notes, and counsellor and researcher reflections. Pieces of transcript and photographs of the Creative Methods and what was co-constructed in the sessions are included in the Findings to give the reader a sense of each session.

Analysis was completed using Narrative Inquiry and the discussion centres on what emerged from the data: 1) Creative Methods 2) What was offered? 3) Silly and Serious and, finally, 4) Space. These findings and the discussion I hope are a useful addition to the research on SFBT with children and particularly the integration of this approach with Creative Methods.

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CHAPTER ONE: INTRODUCTION

I am currently a student at the University of Canterbury, studying towards a Master of Counselling within a counselling department that teaches Solution-Focused Brief Therapy (SFBT). This is a language based therapy that “perhaps more than many therapeutic models emphasizes the precise use of language as an important tool” (Berg & Steiner, 2003, p. 13). I have enjoyed using this present-future and strengths focused modality with adolescents in a school guidance context, during my first counselling placement. This age group often showed a high level of verbal ability, so a talk-based therapy was a good fit. However, prior to undertaking this research I became employed as a counsellor specifically to work under a new government initiative in primary schools, ‘Mana Ake – Stronger for Tomorrow’. I thus became interested in the application of SFBT with a different aged population.

Mana Ake – Stronger for Tomorrow is a three year pilot program which has funded eighty people into primary schools to aid the wellbeing of students’ in primary schools (Years 0-8, ages 5-13) in Canterbury, New Zealand. These workers are employed by different social service agencies and include counsellors, psychologists, social workers, youth workers and similar. I work twenty hours a week as a counsellor, seeing a variety of children across a number of different schools in my cluster. The children I work with are all mandated, or initially involuntary clients, and they attend counselling at the request, and with the support of caregivers and teachers.

This programme is the first time that government funding has been given specifically for the well-being of children in primary schools. In the past, a small number of schools have used

other funding to employ counsellors on individual contracts to provide a solution for the need they see for their children (Crowe, 2014). Counselling in New Zealand *secondary schools* has been supported by government funding since the 1960s (Hermansson & Webb, 1993; Miller, Manthei, & Gilmore, 1998). These school guidance counsellors often have teaching certificates and post-graduate education in counselling. As previously mentioned, at the University of Canterbury, this education is based on the Solution-Focused approach to counselling; an approach that is considered to be very appropriate for secondary school settings where counsellors have large numbers of clients, and limited resources. This aligns with US literature where a major benefit of SFBT was noted to be its effectiveness in bringing about desired change quickly (Kim & Franklin, 2009). Mana Ake - Stronger for Tomorrow signals a change in New Zealand by extending wellbeing support to younger children and is a pilot programme being followed with great interest by those in the Health and Education sectors in New Zealand.

Near the beginning of my work with primary aged children, I attended a counselling symposium held in Christchurch, New Zealand where Professor Frank Thomas asked, "What have you done to adapt your practice to the people you serve?" (Thomas, 2018). Musing on this question encouraged me to explore what an answer might look like in my current context where potentially some students are still developing their cognitive and verbal skills.

At the time, my cursory knowledge of play therapy, and literature promoting the use of expressive arts, had left me with a sense that there was something essential about the use of creativity in therapeutic work with children. Alongside this, I had noticed that even when working with adolescents I often integrated various creative aspects into the sessions. To benefit my young clients, and respond to Professor Thomas's challenge, it seemed I needed to look at what was already known about child therapy with the use of creativity. I also still

wanted to retain the integrity of the ‘strengths-based’¹ approach of SFBT. This research developed around this curiosity of what an integration of SFBT and creativity might look like in a primary school setting.

It has been posited that to excel as a counsellor one must develop, and continue to develop “at a very high level, as a person...for the therapist, personal development is essential.” (Skovholt & Starkey, 2010, p. 126). The interaction between personal life, practitioner experience and academic research can all be seen as contributors to this development. I had initially envisaged the findings and outcomes of the research as being the only way to benefit my young clients. However, I also began to realise in light of Skovholt & Starkey’s comment, that the process of research, and my interaction with this process, would also benefit my clients by influencing my counselling and my very way of being. Acknowledging this has led me to carry out this project as a piece of practice-based research as it contains the concept of research being a continual transformation rather than just a discrete event (du Plock, 2010).

Rationale for research

The broader value of this research will be largely in relation to the context in which it has been undertaken. The government of Aotearoa-New Zealand is pursuing early intervention with young people and their whanau (family) delivered by primary school counsellors and workers (Ardern & Peters, 2017). Research produced from the work being carried out within this context can make a particularly important contribution to this endeavour. While this

¹ Can be attributed to Martin Seligman and is a focus on nurturing what is best within ourselves rather than just focusing on weakness and damage.

research is a small case study, with limited generalisability, this can be enormously valuable when integrated with other sources of knowledge to inform decision making (Midgley, Hayes, & Cooper, 2017).

Secondly, although there is a lot of literature and research around counselling practice with children, very little is from a Solution-Focused approach. In this study, I therefore aim to explore the integration of SFBT and Creative Methods through the following two questions;

1. How do I integrate Creative Methods and SFBT in my counselling practice when counselling young children in a primary school setting?
2. What does the integration of SFBT with Creative Methods offer therapeutically for children in a primary school setting?

Organisation of this research

I have described above what led me to pursue a study of the integration between SFBT and Creative Methods in the context of New Zealand primary school counselling.

In Chapter Two I look at the literature relevant to these research questions. This begins with an examination of Social Constructionism, the underlying theory of SFBT. I then discuss some of the main assumptions of SFBT itself, and the interviewing skills this approach uses. The literature around counselling children is considered alongside Creative Methods. Finally, there is an examination of the outcome research on the use of SFBT with children.

In Chapter Three I present my choice of Methodology and Methods and how this design relates to my research question. The research journey of moving from a multiple case study

to a single case study is explained here as are details of how participant selection and the data collection was achieved in a practice-based setting. Ethical considerations surrounding this project and issues to do with rigour and trustworthiness are also examined. Finally, an explanation around the data analysis process is included for the reader, before some detail about how the Findings will be presented.

The Findings regarding the integration of SFBT with Creative Methods and what this offered to the therapeutic process is presented in Chapters Four, Five and Six. The format of these is in keeping with the Narrative Inquiry of the analysis.

In Chapter Seven, The Findings are discussed in relation to the emergence of four main themes:

- 1) Creative Methods
- 2) What was Offered?
- 3) Silly and Serious
- 4) Space

These findings are considered in light of relevant literature. Possible implications for my own practice and that of other counsellors working with primary aged children is considered before I discuss the limitations and possible future directions for the research.

The Appendices include Education Research Human Ethics Committee approval, the explanation and consent forms for the parent/caregivers and the child, the school principal and my NGO provider.

CHAPTER TWO: LITERATURE REVIEW

Introduction

In this chapter, I firstly explore the literature around Social Constructionism, the philosophy that undergirds Solution-Focused Brief Therapy before looking at some of the main assumptions of SFBT. I then examine some of the key interviewing skills in the SFBT approach before focusing on the development of the SFBT approach with children. Finally, I consider the use of Creative Methods in therapy and the current SFBT outcome research regarding children and the use of Creative Methods. The review of these particular aspects of literature are related to my research questions.

Social Constructionism

SFBT is widely acknowledged to sit within the post-modern and social constructionist family of therapies (Jones-Smith, 2016). "Social constructionist theorists see ideas, concepts and memories arising from social interchange and mediated through language" (Hoffman, 1992, p. 8). In this critique of modernism, humans are viewed as meaning-generating beings, with knowledge and meaning theorised as evolving in conversation; the space between people (Anderson & Goolishian, 1992). In SFBT this means that knowledge of the solution does not sit within the therapist. A client is not positioned as someone passively waiting to be filled. Rather it is through a conversation between the therapist and client, a new story, reality or solution emerges.

Although there is no one definition of social constructionism, there are a number of characteristics or assumptions which it has at its foundation. A critical stance towards taken-for-granted knowledge is one such assumption. This challenges objective, unbiased

accounts of the world and the categories they might create. Historical and cultural specificity is a characteristic of social constructionism which means that our understandings are dependent on the context and period in history and are products of that so therefore are not necessarily any better than another. Knowledge is also viewed as sustained by social processes. It is in the interaction between people that knowledge is both generated and sustained rather than in objective observation of the world. Finally knowledge and social action go together, as different constructions of the world sustain some forms of social action and exclude others (Burr, 1995). Each of these assumptions aligns with assumptions underlying the philosophy of solution-focused therapy.

Language is very important within social constructionism, and, is believed to be a pre-condition for thought. More than a way to express oneself, language is viewed as the way in which the world gets constructed and is therefore regarded as “a carrier of power” (Allen, 2005, p. 50). The use of language is equated to a type of action “rather than a passive vehicle for our thoughts and emotions” (Burr, 1995, p. 7). In therapies based on social constructionist thinking, the languaging by clients and therapists is central to therapeutic change. With language being so vital within this construct, it naturally raises questions about the appropriateness of therapies that are based on these assumptions when working with very young children. This is discussed in more detail later in this chapter alongside how SFBT therapists are currently working with children.

Within social constructionism, identity is not seen as fixed, but rather as a “stretch of moving history” (Hoffman, 1992, p. 10), with ‘self’ always changing. Emotions are viewed as just one part of the complexity of communication between people and are not granted special status as interior states. This anti-essentialist stance is not without critique. Derek Layder (2007) argues for a more substantial notion of self, and, I think more a more moderate view, that acknowledges its connection with human agency rather than humans solely being an effect

of language and discourse. “Retaining a notion of individual agency, intentionality and of subjective characteristics like reasons, motives and desires is not necessarily identical with, or mired by an ahistorical essentialism or psychological atomism” (Layder, 2007, p. 7). This invites a view of self that plays some part in the construction of meaning and social reality as well as acknowledging the crucial role that social factors, discourses, power, material resources, institutional constraints and so on also have in this process (Layder, 2007, p. 12).

My inclusion of Layder’s critique is expressing my present ontological stance which encompasses a relationally formed and forming constructionist self with individual agency which may be limited by environmental and contextual constraints. Therapeutically this means I find the SFBT understanding “we are always in the process of constructing ourselves” (Jones-Smith, 2016, p. 489) a hopeful orientation to have when working with children. It invokes in me a curiosity around the possibilities of how a child might wish to describe themselves and what that might look like. Therapy is then future focused and actions are part of the forming of self rather than therapy being based around a more Rogerian, humanist and essentialist view of finding oneself. Retaining the notion of some individual agency is not an oxymoron to this social constructionist view. Rather in therapy it enhances my belief in the capabilities and capacity of the child while not being naïve about the potential limits the environment or context the child is situated in might have on this.

In social constructionism, problems are actions that impinge on, or diminish our sense of agency, rather than something that exist in a person. Problems exist in language and are therefore unique to the narrative context in which they are formed. Therapy then becomes a conversational space for a new narrative or reality to form, offering the opportunity for the client to develop new agency in relation to the problem they brought them to therapy (Anderson & Goolishian, 1992). This means that the way that people describe (and re-

describe) their experiences through language has the power to transform what their experiences are (Hare-Mustin & Marecek, 1994). This gives the interactive nature of conversation and language a large degree of power in shaping clients' realities.

SFBT can be viewed as a therapeutic approach which embodies social constructionism. It is a conversational therapy where together the client and therapist, through language, construct new client realities. I now look at the approach itself in more detail, firstly noting particular SFBT assumptions and then some key skills used in the therapeutic process.

Solution-Focused Brief Therapy Assumptions

The Solution-Focused Brief Therapy approach was developed by Steve de Shazer, Insoo Kim Berg and their colleagues in Milwaukee, Wisconsin during the 1970's and 80's (Berg & De Jong, 2013). Developed inductively, SFBT was a practise-based model, founded on divergent rather than convergent thinking (Berg & De Jong, 2013). These pioneers looked in detail at their practice and asked clients to help them discover what was working and bringing about change with clients. This process led to them recognising that the problems practitioners are exposed to in the helping profession do not always have one single solution, and different solutions can be helpful for the same issue for different clients.

SFBT belongs to an alternative paradigm to that of the traditional problem solving, pathology-based variety (Bavelas, McGee, Phillips, & Routledge, 2000). The latter has been the predominant way of working in the helping field, regardless of modality. The predominant paradigm is structured similarly to the medical model, where people are assessed, diagnosed and treated according to certain criteria and categories. The Diagnostic and Statistical Manual of Mental Disorders (DSM), is the 'Bible' for this way of

working and this therapeutic approach can simply be described as the process of moving away from the problem. Solution-Focused pioneers however, reconstructed this, suggesting therapy was best approached as a process of moving towards a solution (Iverson, George, & Ratner, 2012). This is viewed as more empowering to clients as they are not regarded as “victims of some disease or dysfunction such as alcoholism or the dysfunctional family syndrome” (Berg & De Jong, 2013, p. 9). In writing about the problem/solution paradigms, de Shazer talks of how traditionally solutions to problems are frequently missed. “...we end up searching for explanations believing that without explanation a solution is irrational, not recognizing that the solution itself is its own best explanation” (de Shazer, 1988, p. 10). From an SFBT perspective solutions can be approached without knowing necessarily the detail of how a problem came about, or the exact mechanisms that sustain it.

SFBT assumes that positive change is best enabled by looking for what is right and how to use it, rather than focusing on what is wrong and how to fix it (Davis & Osborn, 2000). This assumption is summarised in a pithy statement often quoted by SFBT practitioners; “If it ain’t broke, don’t fix it. Once you know what works, do more of it. If it doesn’t work, don’t do it again. Do something different” (Berg & Miller, 1992, p. 17). Therefore, in a SFBT conversation, pathology or illness is de-emphasised as the assumption is that understanding more about the problem and where it came from does not necessarily lead to overcoming it. Even in working with trauma, a SFBT therapist will be interested in the client’s capacity to change, believing that the trauma narrative is not where hope lies (Connie, 2018). Furthermore, there is not necessarily a ‘straight-line’ or logical connection between the problem and the solution. Correlations are recognised, however they are not seen as causal (Nelson, 2019, p. 59). In contrast, progress and recovery are brought to light and amplified. . For this reason, a SFBT therapist focuses on, and amplifies, progress and recovery and helps the client bring these to light.

Another SFBT assumption is that change is possible, constant and inevitable (Nelson, 2019). Clients are also assumed to be competent to change if they decide to do so (Berg & De Jong, 2013). Throughout therapy, therapists hold the assumption that clients want to change. Rather than citing certain behaviours as client resistance, the emphasis is placed on the therapist to find a way to work within the client's frame of reference (Iverson, George, & Ratner, 2012).

Another assumption SFBT holds, is that the client is the expert on their lives, not the therapist. This changes the traditional nature of the interaction between a therapist and client, as the therapist takes a position of 'not knowing'. This means by the therapist's very attitude, actions and stance, there is a curiosity displayed towards the client. Paul Hanton (2011) writes that "however young or old the client is, they will always have more experience of themselves and their context than we will." (p.13). A SFBT practitioner is often described as someone who "leads from one step behind" (Cantwell & Holmes, 1994, p. 20) as they listen to the client, preserve some of their words, ignore others and add to or transform what is said (Bavelas, McGee, Phillips, & Routledge, 2000). The emphasis is on the way a client makes meaning of their actions and words, rather than the therapist declaring opinions and expectations about the client, the problem, and what needs to be changed. When counselling with children this premise does not change, and an attitude of 'not knowing' is seen as vital for both mandated and voluntary clients (Berg & De Jong, 2013). With the client positioned as the expert on their lives, the therapist is positioned as the expert on asking questions that facilitate the client reaching the life they want (Nelson, 2019). It might be reasonable to ask how this assumption is held when working with children, and so this will be explored further when considering SFBT with children below.

Solution-Focused Brief Therapy Interviewing Skills

The philosophical basis and assumptions of the SFBT approach have been outlined above, however for this to be fleshed out in a therapeutic context requires the utilisation of appropriate skills in the interview process. Some of the key SFBT skills are discussed below.

SFBT acknowledges the **co-constructed** nature of therapy, and moreover builds on this premise by using selective language and questions as a means of “eliciting client participation in the collaborative process of constructing solutions” (Davis & Osborn, 2000, p. 70). SFBT is a question-based approach, with questions and language formulated around what it will take for the client to move into more of the solution (Shennan, 2014). This is a radical change from questions that are purely information gathering or designed to help the counsellor to formulate their diagnosis. SFBT questions and therapist responses are also very different to a therapy pivoted solely around summarising and clarifying a client’s perspective and situation. The latter might have once been seen as non-directive, yet a practitioner is still selecting and reformulating words and therefore choosing either a problem or solution-focused approach (Bavelas, McGee, Phillips, & Routledge, 2000).

SFBT questions also seek to motivate and engage a client beyond their situation by asking about what the client might like in their life **instead**. The clarifying and expansion of the ‘instead’ is one of the intrinsic motivators and sources of **hope** within the SFBT model. “What are your best hopes for this session” is another key question for the beginning of a SFBT session. Questions are designed “to reveal strength and beauty rather than to carve away these same qualities” (McGee, DelVento, & Bavelas, 2005, p. 382). The use of a particular SF skill, the **‘Miracle Question’**, is often used to engage a client in the direction of

an “unlimited range of possibilities” (Berg & De Jong, 2013, p. 91). This question could also be described as aiming to move beyond a re-narration of what is currently known, and seeking to access the “not-yet-said” (Anderson & Goolishian, 1996, p. 37). In its original form, the Miracle Question was similar to the following:

“Now, I want to ask you a strange question. Suppose that while you are sleeping tonight and the entire house is quiet, a miracle happens. The miracle is that the problem which brought you here is solved. However, because you are sleeping, you don’t know that the miracle has happened. So, when you wake up tomorrow morning, what will be different that will tell you that a miracle has happened and the problem which brought you here is solved?” (De Shazer, 1988, p. 5)

The building of this miracle picture within SFBT is commonly termed a **‘preferred future’**. This is something that will be happening instead of the problem, when life is not defined by the problem but rather will be altogether different (Hanton, 2011). BRIEF, who are a United Kingdom centre who train practitioners in the Solution-Focused approach, talk about “entire (preferred) ways of being, located within a hypothetical future” (Shennan, 2014, p. 51). This encompasses the full human experience of thoughts, feelings and actions. This is perhaps a wider definition than the predominant focus on actions which initially was established within SFBT, and potentially a ‘better fit’ for therapeutic work with children.

One of the skills SFBT practitioners employ after the detail around a preferred future has been explored, is **scaling**. Often set up between 0 or 1-10, ‘10’ represents being or living the preferred future and ‘0’ or ‘1’ being the antithesis of this. The client is invited to indicate where they perceive themselves to be in that moment in relation to what they have

articulated about their preferred future. Although scaling is used across many in the helping profession, it is used uniquely in the SFBT approach. SFBT practitioners use scales to facilitate conversations around change and as a predominant means of eliciting and developing conversations around **exceptions or instances of success** (Shennan, 2014). Instances of success are times when some aspect of a client's preferred future has already happened or been present in the past. Scales in this context are not a tool of assessment for the practitioner. Rather any assessment is subjectively being done by the client, with the number only having meaning for the client, rather than being calibrated against a rating scale the therapist has in mind (Berg & Steiner, 2003).

From the scale, a SFBT therapist aims to amplify times where there have been **exceptions** to the problem, and, seeks detail around this. "Where else have you been on this scale?" might be a question asked at this time. If the client notes a number higher than their current number, then the therapist becomes curious about what was happening in the client's life at this higher number. If the number is lower, then the therapist becomes curious as to what has happened between the lower figure, and where the client has currently scaled themselves. These questions are for the purpose of inviting the client to look for patterns of behaviour, thoughts or events that speak into their preferred future or a solution. They also develop in the client a **sense of agency** as they hear themselves talk of past success. Exception based questions are looking to find "evidence of competence", (Hanton, 2011, p. 15) and then further questions explore what was different in those times, with the aim to change the clients present reality.

BRIEF practitioners have moderated their language and practice, moving from 'exception finding' into '**instances of success**'. These practitioners feel the latter is not as orientated

around problems, and better reflects a solution-focused mindset (Shennan, 2014). Looking for instances of success, where what the client is wanting more of in their life has already been seen, becomes the building block on which therapy continues. Although focusing on 'instances' seems congruent to the SFBT approach, it is perhaps also important to maintain a perspective where the concerns of the client are not minimised in the effort to support a client's movement towards their preferred future (Bateman & Milner, 2011).

Compliments and affirmations are another aspect of Solution-Focused practice, although the use of them is evolving within the SFBT world. Initially they were used at the end of sessions "to draw clients' attention to strengths and past successes that might be helpful in them achieving their goals" (Berg & De Jong, 2013, p. 38). Indirect compliments tend to now be used by practitioners throughout sessions through statements such as; "Wow, you were able to control your anger that time and stay calm. I wonder how you knew to do that?" (Nims, 2007, p. 57). BRIEF practitioners tend not to use direct compliments at all. They suggest that these types of compliments are relying on the practitioner's assessment rather than the client's self-knowledge, which does not sit as well within an SFBT framework (Shennan & Iveson, 2012). However, in recent SFBT research, Vivian-Neal (2018) offers a way to bridge the gap BRIEF have created between the client's self-knowledge and the practitioner. She writes that "plausible compliments come from the fine details of the clients' stories. This requires the counsellor to pay close attention throughout the sessions, develop a good memory to be able to recall those details and thread them back as compliments" (p. 87).

Co-construction is also involved in the formulation of any **between session tasks**. Although not all SFBT practitioners use these, those that do perhaps see them as more of a

'suggestion' than a prescribed task (Hanton, 2011; Lipchik, 2002). Clients might collaborate in how the task is formulated, and ideally a client sets their own task which emphasises their autonomy and agency. Sometimes these tasks are as simple as noticing and being more aware of what is going on when things are going well. What is different about those times?

Perhaps all SFBT techniques can be summarised as the art of bringing **hope** to the centre of a therapeutic conversation. The focus towards solutions is not denying the existence of problems, nor equating an SFBT therapist to being problem phobic. However, with language having the ability to solidify certain views of reality (O'Hanlon, 2003), the Solution-Focused therapist invites clients into new descriptions of experiences, thoughts, understandings and emotions and highlights the strengths and resources they have to get there. (Froerer, Walker, Kim, Connie, & von Cziffra-Bergs, 2018)

Many of the SFBT assumptions and practices described above have been developed with adults. Now I will discuss this approach in relation to working with children, firstly considering therapeutic work in the context of human development.

Developmental Theories of Children and Implications for Therapy

There are different theories on human development and depending on which one a therapist subscribes to will impact the way they interact therapeutically with children. These can be loosely divided into three categories. Those that favour biological influence, those that promote environmental factors and finally theories that emphasis the interaction between the person with the environment.

Cognitive development, psychosexual and evolutionary theory all have a strong biological thread. Psychoanalytic development theory proposed initially by Freud (1856-1939) focuses on psychosexual phases of development. “People do not have free will; rather behaviour is determined by inner drives that have to do with sex and aggression or love and death” (Jones-Smith, 2016, p. 32). Therapy is orientated around the past in order to change the present, and the role of the therapist is to be detached and passive.

Modern cognitive development theory, which looks at how children come to know, was stimulated by Jean Piaget (1896-1980), a trained biologist. He theorised that the roots of cognition lie in the person’s biological capacities, and thought unfolds in “biologically guided stages that emerge in a fixed sequence as the person engages and explores the environment” (Newman & Newman, 2016, p. 89). How the mind of a child develops is theorised as age related, largely predetermined and universal.

Evolutionary development theory focuses on the adaption of humans over many generations. Theorists study behaviours that appear to be unlearned and spontaneous or innate, that provide some adaptive advantage to the specific environment. John Bowlby’s (1907 – 1990) attachment theory is connected to this view of childhood development as he theorised that attachment behaviour was an innate behavioural system between the infant and caregiver for the benefit of protection from predators and enhancing interpersonal skills (Holmes J. , 2014). A therapist working from this theory will place a lot of emphasis on developing a secure bond with the client to help them explore how their current feelings and behaviours are linked to earlier experiences. The theory proposes that after developing the

bond with the therapist, the client will be able to develop trusting relationships with others outside of therapy.

Other developmental theories focus on the part that context and environment play in the shaping, enhancing or delay of human development. Pavlov's (1849-1936) work on classical conditioning and Skinner's (1904-1990) operant conditioning gave rise to an academic psychology where human behaviour could be modified through stimulus control and contingency management (Jones-Smith, 2016). In this therapeutic construct a therapist might take a more directive approach. Therapy can be systematic and often involves a functional analysis assessment. The client is assumed to come to therapy motivated to change and may have homework assignments to complete. Through Ellis, Beck and Bandura this became more cognition based.

Cognitive Behaviour Therapy (CBT) integrates these environmental developmental theories and assumes that most emotional and behavioural reactions are learned. Therapy is focused around unlearning problematic reactions and learning a new way of reacting (Newman & Newman, 2016). The role of thinking is emphasised in how we feel and what we do, and the therapist is positioned as an expert instructor or teacher, coaching the client into a new way of thinking.

Finally, there are human development theories that blur the distinctions between the environment and the person, focussing on the interaction between them. Erik Erikson (1902-1994) contributed a psychosocial eight stage theory of development over the lifespan, which although was still sequential and universal, included the influence of social milieu.

Environmental supports were theorised as being able to help bring balance in areas later in life where an appropriate strength had not been adequately developed (Newman & Newman, 2016). This theory also questioned the idea that a child is an 'unfinished' version of the adult as "attention has shifted to development across the life course" (Pattison, Robson, & Beynon, 2015).

It was Vygotsky however, who moved away from stage theories and the orientations of psychoanalysis and behaviourism by proposing that it was in the interactions with people that children learn internal mental processes.

"Every function in the child's cultural development appears twice: first on the social level, and later, on the individual level; first, between people (interpsychological), and then inside the child (intrapsychological). This applies equally to voluntary attention, to logical memory, and to the formation of concepts. All the higher functions originate as actual relations between human individuals" (Vygotsky, 1978b).

In this way all learning is social, and children's "perceptions of the world are shaped by the categories made available to them as they appropriate their language and as a consequence develop their psychology" (Lantolf & Peohner, 2014, p. 10). Vygotsky suggested that play was also a large contributor to children's process of cognitive development and was how children learnt what was behaviourally appropriate to their contexts and cultures. Alongside this he proposed the concept known as Zones of Proximal Development (ZPD) which is really about potential and the movement "from the actual to the possible" (Smidt, 2009, p. 86). Reflecting on Vygotsky's work, the term 'scaffolding' was used by Jeremy Bruner to explain the interactional support (often, but not always provided by an adult) mediated through the cultural tool of language in order to maximise the growth of the child's internal learning (Smidt, 2009).

SFBT originated out of a family systems approach, yet I have found very little literature linking the SFBT approach directly to a child development framework. However, Vygotsky's theory of development connects well to the social construction of knowledge and the mediating tools of language that underpin SFBT. Vygotsky emphasises the unique socio-cultural situation of each child rather than the universal approach of some previously described theories.

Social constructionism is characterised by an adherence to historical and cultural specificity, and so the notion of childhood and childhood development is perhaps best viewed through this lens. This acknowledges that the "construction of childhood is not uniform; it varies across societies and across time. It varies in the length of time a child is considered dependent; it varies in the constitution of that dependence; and it varies in the social arrangements devised to protect the child while he or she is seen as dependent" (Lauster & Allan, 2011, p. 3). Conversely, as some of the previously described theorists were from the West, the yardstick for normal was almost exclusively based on western societies, and adult perceptions of what child development should be (Aldgate, 2005).

In social constructionist terms it is perhaps better to speak of 'childhoods', rather than childhood to encompass the diversity that is present (Leonard, 2016). To capture this in my project I have chosen to use qualitative rather than quantitative methods which will be described in more detail in the following chapter. This lens also relates to my Findings which need to be read in light of the specific cultural context in which they are situated rather than read to be appropriated as a truth for all children over all time.

Vygotsky's concept of ZPD and scaffolding also has some resonance with SFBT. A SFBT therapist must first listen to the child, making careful use of the child's own language (which helps connect with the child's socio-cultural situation) before co-constructing a scaffold from the present to the potential. This immediately changes the place of the therapist to a collaborator, and the child to an active participant in the process rather than a blank slate or empty vessel (Smidt, 2009). It also removes the normative standard as an ideal and offers instead the opportunity for each child to engage in moving towards their 'possible' (whatever that might look like), without a pathological label. In another area that is important for this piece of research, Vygotsky also suggests to the therapist working with children that play might be part of the scaffolding process.

In this section I have considered the connectedness of human development theory to therapy approaches with children, and established the link between Vygotsky's work to both social constructionism and SFBT. We now move to looking more specifically at SFBT and the counselling of children.

Solution-Focused Brief Therapy and Counselling children

As discussed above, the viewpoints regarding the development of children are connected to how therapists approach the counselling of children and are therefore explicitly connected to my research. In Western psychology, a child is no longer viewed as 'a little adult', like was thought in medieval times, (Henderson & Thompson, 2011) and the consensus is that we cannot counsel children in the same way we counsel adults (Geldard, Geldard, & Foo, 2018, p. 5).

Most practitioners working with children agree that the child-counsellor relationship is central to the process of therapeutic change. Some argue that “it is the single most important factor in achieving successful therapeutic outcomes” (Geldard, Geldard, & Foo, 2018, p. 10). In Lambert’s (1992) meta-analysis of percentage of improvement in psychotherapy patients as a function of therapeutic factors, the therapeutic relationship was shown as contributing 30 percent. SFBT pioneer, de Shazer held that “we don’t need to ‘establish’ relationships with clients – we already have them by virtue of the fact that they have come to see us. Rather, we must simply be careful to not mess them up!” (Nelson, 2019, p. 63). In regards to children however, we must consider they are attending therapy nearly always as mandated, or initially involuntary clients. It is generally other adults around them that have asked them to attend counselling, and de Shazer’s view may seem too blasé to some in this context. However, the SFBT approach itself can be viewed as part of what establishes the alliance. “In solution-focused therapy, the therapeutic alliance is enhanced by the therapist’s interest in the person and his or her life, strengths, and previous solutions” (Quick, 2012, p. 36). Perhaps a more moderate view is to acknowledge the significance of the therapeutic relationship, and, hold loosely the notion that change only happens in the bounds of the therapeutic relationship. The latter view can potentially marginalise the resources and relationships that the child has with family and friends outside of the therapy room (Bateman & Milner, 2011) and contribute to unnecessarily long therapy.

Although all clients come to therapy in the context of a wider set of relationships, it seems that this is essential to acknowledge when working with children. Some practitioners will not see a child without their family. Although this might be desirable, this is not always achievable. SFBT was formed in and around systemic thinking, and therefore even when working with an individual, a therapist will seek to use relationship-based questions to

enhance their work. People in the child's life can be viewed as "resources, as observers, as walking with clients whether they attend therapy or not, as part of the clients' systems" (Nelson, 2019, p. 106). Questions that include these people are also particularly helpful when working with clients from a collectivist-orientated rather than individualistic background as it links "a person's contributions to the betterment of their community or their family" (Langer, 2018, p. 107). Acknowledging what clients, including children bring with them into the therapeutic environment also seems in alignment with Lambert's (1992) analysis which shows this 40 percent of the improvement in psychotherapy can be attributed to client variables and extra-therapeutic influences.

The SFBT approach "attends to the clients' views of what they want and the resources they bring to therapy" (Nelson, 2019, p. 55). This remains the same when counselling children, with the child's preferred future, goals and agenda taken seriously. A SFBT practitioner will not just rely on parent, school or their own goal formulations, they will also endeavour to enter a co-constructed conversation whereby the child's wishes are expounded. Similarly, the education arena has found that; "When students are taken seriously, and attended to as knowledgeable participants in important conversations, (Hudson-Ross, Cleary, & Casey, 1993) they feel empowered and motivated to participate constructively in their education" (Cook-Sather, May 2002, p. 3). In terms of the multiplicity of goals that might develop through the engagement with caregivers, schools, and other interested parties, the following is perhaps useful to keep in mind. "In our view, wherever possible, these...goals, involving the child's own agenda, should take precedence" (Geldard, Geldard, & Foo, 2018, p. 7).

In a recent Facebook post, Chris Iverson an SFBT practitioner and trainer in London, writes that working with children is much the same as adults; "We are managing a conversation

about a better future or a successful past” (Iverson, 2019). This might be a sufficient understanding when working with an older child, however, depending on the age of the child, they can still be learning language skills. This means “adults who work with children must have knowledge in communicating with children in ways that are not dependant on linguistic skills only” (Berg & Steiner, 2003, p. 15). Matthew Selekman (1997), in his book dedicated to SFBT and children, expresses some limitations that SFBT has when working with children. He notes that being a talk therapy it does not “mesh well with young children’s natural tendencies to express themselves best through non-verbal means (e.g., play and art activities)” (p. 12).

To counter this limitation, Selekman (1997) outlines a number of different ways that he engages and appropriates SFBT work with children using drawing and imagination. The ‘Victory Box’, ‘Squiggle Game’ and ‘Time Machine Question’ are some of his creative adaptations. Insoo Kim Berg and Therese Steiner (2003) have also sought to address concerns regarding the use of SFBT with children and provide creative techniques and strategies for therapists. They provide many creative games and ideas for work with children many of which are suitable not only for an office setting but also for places where there is not a huge availability of resources.

Elizabeth Taylor (2009) writes of integrating sand tray therapy in her SFBT work where the sand tray and miniatures are a nonverbal communication tool for the child and therapist. She also writes of how a child being able to “manipulate one’s world in the sand in ways that goals are already achieved provides the client with sense of control, a chance to rehearse the behaviours needed to make change occur, and the opportunity to notice the interpersonal impact that the change might have. The therapist is provided the opportunity to

ask the client in a more concrete approach who or what may assist and support him or her in reaching goals” (p. 63). Taylor concludes that more research is needed in the area of blending SFBT with sandtray therapy.

Donald Nims (2007) has also written an article supporting an integrated approach in his practice with children, using SFBT principles alongside puppets, art, sand tray and miniatures. He illustrates how he uses all of these techniques in the SFBT process of goal setting, miracle question, finding exceptions, scaling and a final message at the end of a session. Nims concludes that these expressive play therapy techniques are effective in facilitating the process of SFBT with children with the cognitive ability sufficient to comprehend the concepts.

In a more recent addition, Milner and Bateman (2011) have also written on solution focused approaches with teenagers and children with small case examples and some transcript included. They write from the perspective of social workers who are often doing home visits and so I found this helpful to get a sense of their practice. There are some creative and practical ideas included in this book that link SFBT to work with young people.

Milner and Myers (2017) have also contributed to the conversation around SFBT and Creative Methods by providing a book with a number of ideas based around different techniques. This is not directed specifically at children, and often the ideas are language based, however there are some ideas included that could be used or adapted to work with children, and a few that are specifically child friendly.

The latest literature regarding the use of SFBT with children has been written by Pamela King (King, 2017). She integrates a play therapy approach with SFBT as a means to promote solutions for children and their families. This book connects the languaging principles of SFBT, with play and creative aspects more suited to work with children. King includes pieces of transcript and explanations of her work over a range of different presenting issues.

It seems that SFBT can work well with children, however counsellors working with children suggest that in order to help a child therapeutically, the use of suitable media is required (Geldard, Geldard, & Foo, 2018). It also seems that many SFBT practitioners working with children already integrate some type of creativity into their practice. In this way the literature seems to support an integrated approach when working with children and the inclusion of non-verbal elements such as toys, art and games. It is to a brief discussion around these Creative Methods that we turn to next.

Creative Methods and Counselling

There is well documented literature around the limitations of talking therapy with children, and also the effectiveness of engaging using other mediums such as play and expressive arts (Kaduson & Schaefer, 2006; Baggerly, Ray, & Bratton, 2010; Malchiodi, 2007). Likewise SFBT practitioners Berg and Steiner (2003) write how “children communicate through actions, visual images, playing, games and many other creative activities” (p. 68).

Creative Methods and play, like talk can be viewed as trans-theoretical (King, 2017).

Although many therapists use play, art, sand tray and other creative methods with children,

the therapeutic assumptions of the model a therapist uses, means that they approach, interpret and interact with children and creative methods differently. In psychoanalytic play therapy for example, the counsellor's role "is to interpret the child's symbolic play in words that are meaningful to the child" (Henderson & Thompson, 2011, p. 174). Drawing on Roger's notions of unconditional positive regard, empathy, self-actualization and congruence (1956), play in a person-centred approach is for the purpose of letting a child fully "express and explore self" (Henderson & Thompson, 2011, p. 209). This leads counsellors to extend energy creating a warm therapeutic environment and attending in great detail to the child, noticing what they are doing, with very little therapist intervention or direction. The therapist's hope is that the child will be able to express and resolve their feelings and troubles through play. This may take a significant number of sessions and is usually conducted in a room set up for this purpose.

In SFBT, a child's play is not interpreted, or viewed as an expression of self. Rather, in line with SFBT assumptions and practices, play is used as a medium for the illumination of times when there are exceptions to what the child might be finding currently difficult, or for the purpose of building an alternate future. Drawing, for example, might be used to invite the child to explain their perception of what will improve things (Berg & De Jong, 2013) and, as per the approach, the strengths and resources of the child are the focus, rather than the problem. Alongside being an aid to help children make the best use of talk-therapy, Creative Methods are also used for the purpose of engaging the child in co-creation of their preferred future.

From the literature it seems play, expressive arts and other creative methods such as sand-tray work are able to be adapted across a range of different modalities. In the previous

section I also discussed ways in which SFBT practitioners write of adapting their practice and integrating Creative Methods with children. In my research project I aim to explore the integration of Creative Methods with SFBT and see what this might offer primary school aged children in New Zealand. Firstly though, I look below at what research there is already around SFBT and the counselling of children and also the counselling of children in New Zealand primary schools.

Solution-Focused Brief Therapy Outcome Research with Children

Although there are a growing number of SFBT practitioners who have written about their work with children and the creative integrations they have used, in this section I consider what research there is supporting this. Since much of this research also originates from other Western countries, I also look at more general research to do with SFBT and children and what research there is around counselling children in schools in New Zealand.

There is a growing body of literature around Solution Focused theory and practice with adolescents and adults (Hanton, 2011). Findings from eight systematic reviews and meta-analyses have demonstrated that SFBT is an effective counselling approach, with similar effect sizes to other approaches such as Cognitive Behaviour Therapy, but with these effects found in fewer average sessions (Gingerich, Kim, & MacDonald, 2012). “In addition to these...there are approximately 100 randomized-control trial studies (the gold standard of research evidence) that consistently show SFBT to be as effective as treatment as usual (or more effective) compared to other evidence-based approaches” (Kim & Froerer, 2018).

However, the research literature using SFBT in working with children is much smaller and still emerging. The following discussion includes research found through a literature search using “SFBT and children”, “solution-focused and children”, “school counselling and SFBT”, “solution-focused counsellor”, “creative methods and sfbt” in the University of Canterbury’s main library database, and a wider search on Google Scholar. I also searched using ‘SFBT’, ‘solution-focused’, and ‘brief therapy’ to make sure I read widely on SFBT literature in case there was information in them about the integration of the theory when working with children. I also read through the bibliographies of the books I found that contained information regarding SFBT practice with children, especially noting any seminal authors and recent journal articles. What emerged from this search was that most research supported the use of SFBT with adults and teenagers. However, as discussed in a previous section, although there is a growing literature base for SFBT with children, the research with those aged 13 and under is significantly less.

In their review of SFBT in schools Kim and Franklin (2009) found some evidence for the effectiveness of SFBT in relation to at-risk students in a school setting, “specifically helping students reduce the intensity of their negative feelings, manage their conduct problems, and externalizing behavioral problems” (p. 464). This overview however only included one study for elementary school pupils and the results of that study were not statistically significant.

In an evaluation of ten years of existing research on SFBT work with children and families, it was concluded that “existing research does provide tentative support for the use of SFBT, particularly in relation to internalizing and externalizing child behaviour problems. SFBT appears particularly effective as an early intervention when presenting problems are not severe” (Bond, Woods, Humphrey, Symes, & Green, 2013, p. 707). There were a range of

ages, contexts and issues included in this review with a mixture of group based, family and individual SFBT interventions. Twenty-three of the thirty eight studies examined included children thirteen years or under, although some of these were in a mixed age study with adolescents or family members and none of these studies were in a New Zealand context.

Included in the above review was research of seven children aged between ten and thirteen years presenting with learning and behavioural issues in a school based setting. The research team provided between five and ten sessions of SFBT and the ratings scales and analysis indicated “positive change on a range of behavioral problems” (Franklin, Biever, Moore, Clemons, & Scamardo, 2001, p. 411). There was no indication of any Creative Methods integration with SFBT in this study, however it was carried out with children in the age bracket that I am working with.

Although not in New Zealand, another interesting piece of SFBT research that bears some relation to my own project, is a case study with a seven year old child suffering from chronic illness. This study was based in a hospital and featured the use of SFBT and creativity. In this study the therapist used stuffed animals, creative play and art techniques which were all integrated with the SFBT model. The researchers concluded that creativity and SFBT are compatible, and underscored how children, “working as co-constructors of counseling goals, can tap into spontaneity, imagination, and the freeing aspects of play for confidence and hope in the future” (Frels, Leggett, & Larocca, 2009).

The closest piece of research I could find that incorporated Creative Methods and SFBT with children in New Zealand was a recent thesis completed by Karise Dell (2017). She has

completed some qualitative research into the use of miniature toys as a useful adaption with SFBT. Her work showed that the use of the toys helped build rapport and also helped children co-construct the concepts of exception finding through the use of scaling. Interestingly three of the four child-participants lowered their scale number when using the toys in comparison to their initial verbal reply, possibly suggesting the use of toys aided their ability to express themselves more completely. This study was around a focused aspect of SFBT, and one main type of Creative Method (miniatures) and was carried out in an agency office rather than a primary school setting.

The research also contained information about a schoolwide SFBT intervention where Garza Independence High School in Texas implemented SFBT strategies through its teachers, management and wider school culture. Follow-up data from the school district and state education agency showed a number of pleasing results (Kelly, Kim, & Franklin, 2008). Although this was encouraging to read, this study and its school wide implementation is both situated with an older group of students than I will be working with, and, is beyond the scope of this research project in terms of implementation.

From this review of the literature, I have noted that there are several research studies describing the effectiveness of SFBT with adolescents. Some have been carried out here in New Zealand, however, there is little detailing SFBT work with younger children. What little research there is, shows that SFBT is being used alongside other Creative Methods which is encouraging. I could not find any research relating to counselling in a New Zealand primary school context, and there is no research describing the use of SFBT in a primary school setting in New Zealand. This illustrates the need for more counselling research with younger children and SFBT. My intention is to add rigour to the literature around SFBT work

with children, and I hope the resulting reflection and analysis will be helpful to both my future clients, and also to younger people receiving counselling in general, especially in New Zealand.

Conclusion

SFBT is an approach that fits within the post-modern, social constructionism family of therapies. The assumptions and associated skills or techniques contribute to SFBT having a “present-to-future focus” (Murphy, 1996) and significant research has been conducted around the effectiveness of SFBT to help adults and adolescents focus on, and move towards what they identify as their preferred future.

When working with children, the literature seems to indicate that talk-based therapy alone is not sufficient, and therapists need to also be familiar with play, art, games and other creative ways of working. These Creative Methods are trans-theoretical, and literature notes that some therapists use these within a pathological or interpretive framework. Although there is a growing number of books describing SFBT work with children, there is very little research focusing on the integration of Creative Methods in the service of solution-building when working with children or the effect of SFBT with young children. There also appears to be no research around this integration in a primary school context in New Zealand. This literature review has exposed gaps in both the context where my research will be carried out while also showing there is still room to add to the SFBT research with children by focusing on the integration of Creative Methods in my practice with primary-aged children. For these reasons, I have focused my research on two primary questions:

1. How do I integrate Creative Methods and SFBT in my counselling practice when counselling young children in a primary school setting?
2. What does the integration of SFBT with Creative Methods offer therapeutically for children in a primary school setting?

CHAPTER 3: METHODOLOGY AND METHODS

Introduction

This chapter seeks to explain the paradigm and constructs in which this research is carried out, and expands on the manner in which I have approached this research issue and sought answers (Taylor, Bogdan, & DeVault, 2016). In particular, I outline qualitative, practice-based research as the methodology for this research, drawing also on a narrative case study approach. The process in which participants were selected, along with how data were gathered and analysed to bring about understanding in relation to my research questions, is also outlined.

Ethical considerations relating to this study are also expanded on, as are considerations around the Treaty of Waitangi (1840) along with the actions I have taken to ensure Rigour and Trustworthiness in this project. Finally, I outline how I have addressed the presentation of the findings which are in Chapter Four, Five and Six

Methodology

Qualitative Research

Given that Solution Focused Brief Therapy is a model which sits in the post-modern paradigm, and is foundationally orientated towards social constructionism, it seemed a good fit that this research is carried out using qualitative research. Qualitative researchers are more concerned with producing rich descriptions of both the things and meaning people attach to their lives, and how they describe their versions of reality, rather than producing statistics and percentages (Taylor, Bogdan, & DeVault, 2016).

A qualitative researcher also doesn't see what they produce as a truth for all time, but rather "as an interpretation of reality that is useful for understanding the human condition" (Bogdan & Biklen, 2007, p. 27). My personal epistemological stance includes a belief in Ultimate Reality, however I recognise research can at best "only discover contingent relationships and contextualized knowledge and insights from which more generalised and precise accounts can be developed" (Holmes & Lindsay, 2018, p. 4). St Paul writes that "For now we see through a glass half darkly" (1 Corinthians 13:12). Eugene Peterson (1932-2018) in *The Message*, colloquially paraphrases this as, "squinting in a fog, peering through a mist". I do not equate research with revelation, and accept that research will not bring complete clarity, as what it describes will always be socially and culturally situated and produced. This does not dissuade me from research however, as apart from the formative process itself, research findings also offer the potential to scaffold new learning about something, or offer a new perspective. In this study this is regarding the integration of SFBT with Creative Methods with primary school children in New Zealand.

Data in this paradigm become the captured interactive experience/s and includes different voices, including the researchers. The methodology seems particularly suited to this project, focusing as it does on counselling sessions which are in themselves an unfolding interactive process. Qualitative research also seems to mirror the curiosity and 'naïve enquirer' stance that the SFBT counsellor brings to the client's life, and therefore seems to provide a natural segue from therapy to research. The research questions themselves are also suited to qualitative research as they are exploratory and process driven, and do not lend themselves to being answered from a positivist or empirical framework.

Practice-Based Research

Due to my dual role as both counsellor and researcher, and research into my own counselling practice this research is also informed by a practice-based research methodology. It is important to note that this is different to evidence-based research which often comes from a positivist epistemological paradigm (Hatch, 2007). Practice-based research is qualitative and highly reflexive in nature, while still aiming for the practitioner to effect change with their client (Bager-Charleson, 2014). The SFBT approach itself was formed inductively out of practice-based research. Close inspection of therapeutic sessions at a macro and micro level, firstly at the Mental Research Institute (MRI) Brief Therapy Center in Palo Alto California, and later at the Brief Family Therapy Center (BFTC) have contributed to new therapeutic assumptions and practices being available to the helping community. Alongside this historical foundation, SFBT's clear regard for the co-constructed nature of therapy means practice-based research seems a useful way to explore the questions under consideration for this project. In discussing the similarities of human science research and counselling practice, Rennie (1994) writes; "both are similar in engaging the other person, whether client or research participant, collaboratively and in a way that is empowering" (Rennie, 1994).

The idea that any research is carried out objectively, or value free has been critiqued extensively (Guba & Lincoln 1994). Practice-based research means that I become a subject in the research, rather than being an 'Other' in relation to my client-participant. In this process the 'eye' and the 'I' of the researcher are also expressed as being explicitly connected through the data, analysis and findings. Practice-based research aligns itself with the researcher transparency that is one of the characteristics of qualitative research.

The reflective and reflexive nature of practice-based research also acknowledges that one of the ways new insights for self and/or practice is gained, is the critical process of learning through and from experience (Finlay, 2008). Du Plock's description of practice-based research resonates; "A personal journey of discovery or perhaps re-search, a continual transformative process rather than a discrete event" (Du Plock, 2004, p. 32). Although it might be a personal journey, the self-awareness, learning and transformation has a purpose beyond myself. It is for the flourishing of the community, particularly the primary school children with whom I work.

Finally, the nature of practice-based research means that it takes "place on a grass root level and involves practitioners and clients in a real-life setting" (Bager-Charleson, 2014, p. 3). Jane Speedy writes of the importance of this as she discusses blurring the edges of therapy and research.

"My own strong sense, also, is that as long as 'research' continues to identify itself as something esoteric and unavailable to practitioners and those consulting them, the published works emerging from the counselling and psychotherapy fields will continue to be dominated by academics and practitioners located in university settings (such as myself) rather than the voices of practitioners out in the field, and the clients they are working with" (Speedy, 2008, p. 125).

Practice-based research can be seen as closing the gap between research and counselling practice (Rennie, 1994), while inviting rich, and relevant insights that are unable to be gained from counsellors' perceptions and quantitative questionnaires. . It is also "by looking into the toolbox and experimenting with the tools that the inseparability and interdependence of

theory and practice becomes obvious to us” (Taguchi, 2009, p. 23). This approach is not without its critics however, and some of the ethical considerations implicit in this approach are addressed later in this chapter.

Narrative Case Study

Initially my research design was going to be formed around a multiple case study, however during the initial analysis phase it became clear for the size of this project that a single case study was going to offer a more suitable framework to explore the richness of the data that had been collected. Case studies allow a closeness to real-life situations, and the details they include help develop a nuanced view of what is being studied (Flyvbjerg, 2011).

Narrative case studies in the counselling field are not common (McLeod, 2010; Riessman & Speedy, 2007), and there is a diversity in both definitions and methodology. They can however be distinguished by their focus on sequence and consequence (Riessman & Speedy, 2007) and their choosing to let the many-sided or complex story unfold without necessarily summarising it into neat formulas and theories, or even conceptual closure (Flyvbjerg, 2011). The rich contextual depth of a narrative case study invites exploration of its many facets to both the researcher and reader, ultimately offering different things to different people.

I have chosen this form as it seems a ‘best fit’, for a number of reasons. There is a strong synergy between what happens in therapy, a place where people are invited to retell and reconstruct their lived experiences, and narrative analysis which seeks to look at how and why these stories are told. In both counselling and narrative analysis, “subjective meanings

and sense of self and identity that are negotiated as stories unfold” (Etherington, 2013). A narrative case study also aligns philosophically to the co-constructed nature of SFBT and the reflective nature of practice-based research. Not only do these align, a narrative case study actually assumes co-construction of participant and researcher and a reflexive approach by the researcher.

Aside from the theoretical synergies, I also have a great personal love of stories, and storytelling. Some of my earliest memories are of jumping into bed with my Grandma whenever she came to stay, where she would ‘story’ to me about her life and her memories of my dad and his siblings when they were small. Later, as a teenager biking home from high school, I would while away the time, composing ‘how my day went’ into stories to share with my family that night at the dinner table.

Although these are examples of ‘story’ in the most colloquial sense of the word, narrative analysis is founded on the concept that “a story functions as a basic human means of organising and communicating information about life experience” (McLeod, 2010, p. 207). Similarly, it can be explained as an umbrella term that captures personal and human dimensions of experience over time, and, takes account of the relationship between individual experience and cultural context (Clandinin and Connelly 2000). This ‘narrative knowing’ is a way to make sense of the ambiguity and complexity of human lives in a way that other research methods do not (Etherington, 2013). In terms of a narrative case study, McLeod writes that the aim is to “allow the reader to gain a sense of what the therapy was like for either the client or the therapist (or both)” (McLeod, 2010, p. 27). My research has been informed by this and the presentation of Findings have been structured in such a way

to include transcriptions with both the client and counsellor voice, alongside explanation for the reader and researcher reflections.

Method and Research Design

Research Setting

The place where this research was carried out was a Year 0-8 primary school in the Canterbury region where children were aged between 5 and 13. As previously noted, I am not based in this school as their school counsellor, rather I travel between a number of schools, working with different primary aged clients in a predominately one-to-one basis.

Participant Recruitment

For this research study, I was initially interested in recruiting three to five participants who would voluntarily agree to be part of this research over 3-5 sessions each. The number of clients was to allow for potential participant drop-outs while still providing the ability to fulfil the requirements for a multiple case study which was part of my proposed research design. The session length was chosen to reflect that solution-focused therapy is a brief therapy, and, also for the purposes of manageable data for the project size.

Since an important component of the research design was to reflect the situated knowledge and context of my counselling practice, I decided that potential participants would be recruited from those who were 'next in line' from the perspective of my Mana Ake team. This would elevate normal process over picking cases to fit research selection criteria. However, given the language focus of SFBT, there was some discussion with my supervisor in the

proposal stage of the project over whether I should set a minimum age for research participants. Although this research involved the use of Creative Methods, it was concluded that those aged 5 or 6 years would not be considered. In the end this selection criteria did not interfere with the 'next-in-line' process, as there were no children at the time in that age group awaiting wellbeing support.

I began this project knowing that it was being undertaken in a wider social context where waitlists for many counselling services were high. I did not want this to contribute to a parent or caregiver feeling pressured into being part of this research just so they could access the wellbeing support they wanted. To mitigate this as much as possible, I did not make the first contact with the potential participants' caregivers myself. I arranged for a colleague to ring and explain the research outline, ascertaining the initial interest, or otherwise, of participating. Anyone who did not want to be part of the research was at this stage informed that they would still receive counselling as per normal without the research component. The first two caregivers and children agreed to be involved, however the third child-participant did not agree to be filmed. After discussing this with my supervisor we agreed that this was a key component of data for my research and so this client was counselled without inclusion in the research, and another client was approached and engaged in the research. The combination of data collection with this third child-participant starting later, the end of primary school year and the already significant amount of data collected from the first two participants meant after discussion with my supervisor, this last client was excluded from the research process, leaving a remaining two participants.

The caregivers and children who agreed to take part were then sent an e-mail explanation of the research. The attachments to the email contained a consent form and a detailed

explanation of the research for the adult, and an explanation for the child that better reflected their age and language ability (Appendix A and B). Two explanations were available for the child, one suiting a younger child, and one suiting a slightly older child.

Signed consent forms were gathered before meeting with the child. In my first meeting with the child I went through the child's consent form again and did a verbal double check on the child's agreement. At the start of each session, I checked again the client's willingness to give consent to being videoed. In this way, I sought to follow the basic moral and ethical guidelines of autonomy, non-maleficence, justice and fidelity (McLeod, 2010; Mills & Morton, 2013). This also complies with the University's Ethical guidelines around any unnecessary deception (UC Human Ethics Policy, 2018).

Creative Method Resources

After my initial reading of the literature around creative work with SFBT and children (Bateman & Milner, 2011; King, 2017; Berg & Steiner, 2003; Selekman, 1997; Nims, 2007), I had envisaged having a large number of creative options available for research participants to use in my counselling room. However, while working under the Mana Ake program, I realised that any creative supplies for my research would need to be carried around with me and be suitable for a variety of spaces. This meant that my bag included a minimal number of resources, compiled from things that in the past I had found useful when working in a SFBT way with children. In the next chapter I will look at how these Creative Methods were integrated and what they offered therapeutically.

Drawing Supplies

This includes white and coloured paper, felt-tip pens, colouring-in pencils, glue and scissors.

Strength Cards for Kids

This is a resource from St Luke Innovative Resources based in Australia. There are 40 full colour, plastic coated cards, each identifying a possible strength in simple English. All of the cards are illustrated with pictures and describe only positive characteristics and actions. There is quite a lot of synergy between a strengths-based approach and SFBT, with both highlighting the resources that a client has. These cards have also been used by other SFBT practitioners due to the alignment between approaches (Hanton, 2011). They describe using them in both individual and family therapy “to get a rich description of how a particular strength has been displayed” (Milner & Bateman, 2011, p. 33).

The Bears

This is another resource from St Luke’s Innovative Resources. There are 48 full colour cards each with a picture of bear. The Bears show a range of emotions and there is no descriptive wording underneath. This invites a client to interpret the bears’ facial expressions and body language and match to how they feel, or how they would like to feel. The child makes meaning from the images rather than the therapist/cards telling the client what they represent. This is also helpful in regards to scaling, as SFBT therapists recommend that “it is better to keep away from smiley and grumpy faces as they are either too general or too specific” (Bateman & Milner, 2011, p. 127). Another reason that I have included this resource is because, “The Bears can say a lot about feelings without using words, but they also create ways to add words and build languages...” (Deal, 2018). There is the potential ability for the bears to be a bridge between the therapist and child in terms of languaging. This connects to this project as it is an integration of Creative Methods and a talk-based therapy.

'Magic Wand'

This is a plastic glitter filled rainbow and unicorn type wand like many found in stores selling thrift items for children. The inclusion of the wand in my bag acts as a visual, and possible kinaesthetic link to the famous 'Miracle Question' in SFBT.

My Life Rulz Truth Cards

These are 10 'rulz' and accompanying insights put together by Joan Koskela and David Riddell from Living Wisdom, especially for the development of emotional resiliency and reassurance in children. This is a faith-based resource and I am careful to use this in a culturally responsive way with clients. This includes not using 'Rule 6' (God does care, even when it doesn't seem like it.) in a standard secular school setting unless clients specifically ask for where it is, and then want it included in the offerings they choose from. I included these in my bag as I have found in the past children have usually always been able to choose one or more that would help them towards their preferred future and often mention them in their feedback as being important to them.

Squeezy balls

These are soft, light, balls that can held and squished by clients and return to their original shape. They can also be thrown between client and counsellor without harming furniture or other things in the room.

Data Collection

A robust case study collects data from a variety of sources to create the in-depth understanding that is required (Creswell, 2013). For this study, I used data collected from 6

counselling sessions with one client-participant (participant description is included at the beginning of the Findings chapter). Data include client notes from the counselling sessions, the visual recording of the session, my counsellor and researcher journaling, and any artwork that was co-constructed.

Visual Recording

The predominant form of data collection was through the visual recording of sessions on a phone or iPad in the counselling room. The capturing of movement, body language and facial expressions was immensely helpful, as was being able to watch the entire case consecutively and then go back and review sections of a single session in detail. Things I had not remembered or noted became part of the data through the visual recording.

Artwork

Any artwork that the client had made, or we had co-constructed, became part of the data, as in qualitative research “pictures take the place of words or at least convey something that words cannot” (Taylor, Bogdan, & DeVault, 2016, p. 149).

Counsellor and Researcher Journal

Although the complete compartmentalisation of counsellor and researcher is a fiction, I engaged in reflexive journaling throughout the process of this project. What I term, ‘scraps of thoughts’ were made immediately following nearly all of the sessions. These logged immediate impressions, hunches and questions that I didn’t want to forget. However, the time constraints of the counselling day meant much of my reflexive writing took place after

viewing the visual recordings. As Bager-Charleson (2014) writes; “a significant aspect of reflexive practice-based research is the ongoing attempt to look at problems from different perspectives and ‘lenses’” (p. 85). The voice of the counsellor can be seen to dominate in some, however as time went on, the questions and musings of the researcher came to the fore.

Notes

Although most things were captured on the video, I also took client notes after each session (Bogdan & Biklen, 2007). This was a requirement of Mana Ake, yet this condensed form of each session became part of the data for this project also. Notes I took after the clinical supervision of these cases were also included as data.

Ethical Considerations

Visual Recording

One of the ethical considerations around this research is the visual recording of the sessions. Visual recording captures “body posture, direction of gaze and interactional synchrony” (McLeod, 2010, p. 85) in a way that is not possible with audio. Kathie Crocket also notes that electronic recording can make a significant contribution to the ongoing competence of a practitioner (Crocket, 2011). The visual recording of clients is already something that is required in the Master of Counselling program specifically for this reason. It is important to keep in mind, that similarly to this research, proficiency is not sought as an end-in-itself, rather, it is for the benefit of the clients I continue to work with.

Crocket warns that apart from informed consent for visual recordings, client ability to change their mind at any point must be prioritised. Storage of recordings must be password protected and erased once the purpose of use has been served (Crocket, 2011). As part of the information first given to the client and care-giver regarding my research, it was clearly stated that any recordings will be viewed by myself the counsellor and my university and clinical supervisor only. I also explained that the child was able to change their mind about being recorded at any stage. I also checked with the child-participant at the beginning of each session that they were happy to proceed with the recording. This is what Ethical Research Involving Children term “re-negotiable consent” (Ethical Guidance, 2018). I also sought and gained ERHEC approval for only pieces of transcription from the visual recording to be kept for the five years required (Appendix E) Thus, I was able to assure participants that the recording itself would be deleted as soon as the project was completed.

Looking at the ethics of visual recordings from a research perspective, some researchers feel that using visual recording equipment can make research more visible (Bogdan & Biklen, 2007). The recording will always be an entangled part of the counselling and therefore the data, however having a phone or iPad sitting on a desk recording a session seems quite unobtrusive compared to the video tripods and cameras of previous years. I also set my phone/iPad to a blank screen rather than the participants seeing what was being recorded. In this way the visual recording was set up as much as possible to maintain the integrity, rather than compromise, the counselling session.

Practice-based Research

Included in the NZAC Professional Ethical Practices for Research is the requirement of the researcher to consider the issues around ‘conflict of interest’ (NZAC 2016). Being involved

in practice-based research could be argued to be a conflict of interest with the goals of the therapist and researcher creating conflict. (Gabriel, 2005). However, when the therapeutic process is not compromised in any way, and the client's needs are seen as paramount this is seen as a valuable form of data gathering (Etherington, 2000; Wosket, 1999).

To manage these dual roles, I decided I needed to be fully focused and attentive to the 'in the moment' needs of the child in front of me as a counsellor. Reflexively observing the participants (the client and me) from a researcher position was secondary. It is perhaps important to note that there is a difference between the reflexivity required as a counsellor to that of a researcher. As a researcher, reflexivity is to enhance the rigour of the research and to consider the researcher's own impact on the research. I chose to use the visual recordings to engage in this process. Hence from this perspective, the visual recordings can be viewed as maintaining therapeutic safety for the client during the data collection.

Confidentiality and Anonymity

Another ethical consideration with this research is the requirement of the ERHEC and NZAC in making sure the identities of the participants are protected. To this end I have used a pseudonym chosen by the client for this project, (Taylor, Bogdan, & DeVault, 2016) and have not made clear the school or where in Canterbury this research is being carried out.

Risk and Harm

Protecting clients from risk or harm is something that is embedded in the way a counsellor seeks to practise, whether-or-not they are also conducting research. This is one of the main

criteria addressed when researching children (Ethical Guidance, 2018). In my research, this means as already noted, the therapy will take precedence over the research. In Dell's (2017) research where she was also working as a practice based researcher with children and the SFBT model, her initial plan for research was changed for one participant after she found part of the process was not contributing positively to his growth. Prior to engaging in this research, I concluded if the research participant for some reason did not want to engage with Creative Methods, then I would choose an action that would best suit the client over the research.

With children being part of what might be termed a vulnerable population, the risk of any research must be minimal. Similar to that encountered in everyday life "or during the performance of routine physical or psychological examinations or tests" (Savin-Baden & Major, 2013, p. 323). As the counsellor, and instrument of the research, I am still led by the client and have the responsibility to use my power **for** the client rather than **over** the client. Hence another thing I did to avoid risk and harm to the client was to receive separate clinical and research supervision on this case (Wosket, 1999). This allowed another more experienced counsellor to check that I was doing the best by my client, and the academic supervisor to oversee the research aspect of the work.

Clandinin & Connelly (2000, p. 177), speak of the "relational responsibility" that narrative inquirers have in terms of research. This includes consideration being given to how the research might impact child participants as they continue "to story and re-story who they were becoming as their lives unfolded in the future" (Craig & Huber, 2007, p. 258). Speedy (2008) notes that people may find themselves positioned differently in relation to the stories they have told once they are in print. I have thought a great deal about this in relation to my

project and I am not sure this can be adequately foreseen. However, a mitigating factor is the project's focus on the integration of Creative Methods and SFBT which is by design a strengths-based, solution-building approach. SFBT also acknowledges that 'self' is constantly changing and what might be printed is not seeking to capture the essence of the child. I also visited the child-participant and his parents with a draft print out of the Findings so he was able to see how I had written up our project. We read a piece of transcript out together and reminisced on some of the happenings in our sessions together. In this way I sought to make sure that the final printed research wasn't a surprise and the child had a visual idea of both how it was written up and what areas would be discussed in the Discussion chapter.

Treaty of Waitangi

I have spent a number of my adult years living outside of New Zealand. Some of this time was in a country with no treaty with its indigenous people group, and some in a country where independence from Britain has been more recent history. These experiences, along with some of the reading I did while in those countries gave me a greater appreciation for the far reaching effects of colonisation and an abiding appreciation for Te Tiriti o Waitangi. This founding document is an agreement in both Māori and English made between the British Crown and about 540 Māori rangatira (chiefs). The underlying tenants of this document are often summed up as Protection, Participation and Partnership.

Being a New Zealand citizen committed to a thriving nation for all, and especially for Māori, I continue to pursue ways to make this more evident in my practice. Part of this is the

process of continuing to develop respectful, participatory relationships with all clients and whanau. The NZAC of Code of Ethics also has this as one of its priorities;

Counsellors shall avoid discriminating against clients on the basis of their race, colour, disability, ethnic group, culture, gender, sexual orientation, social class, age, religious or political beliefs or on any other basis. Counsellors shall work with clients in ways that are meaningful in the context of, and respectful towards, the clients' cultural communities. Counsellors shall be committed to the equitable provision of counselling services to all individuals and social groups. (NZAC Code of Ethics, 2016)

From my life experience of living alongside cultures different to my own, and my theological training, I find it helpful to embrace the unity of humanity while also revelling in its uniqueness. Without the former there can be a 'them vs us' or 'me vs you' mentality, and, without the latter, a flattening of diversity and potential. One of the ways I choose to combine and develop this as a counsellor is continuing to be involved in cultural supervision.

Alongside this, when I began the proposal for this project, I began to think about what might be required to make sure not just my practice, but also my research and analysis was culturally responsive if my participant identified as Māori. In the end further work on this area was not required as the initial three participants were New Zealand European.

Rigour and Trustworthiness

Trustworthiness can mean “the ways we work to meet the criteria of validity, credibility, and believability of our research—as assessed by the academy, our communities, and our

participants” (Harrison, MacGibbon, & Morton, 2001, p. 324). This requires that research be open to critique by not only peers but also participants themselves.

I have written this project regarding the child as a potential audience. In this way I endeavoured to read through his eyes to avoid unintentional hurt (Taylor, Bogdan, & DeVault, 2016). I have also sat down with the child-participant and his parents to show them a draft form of the research particularly so the child could see what had happened in our sessions in the research process. The child was given the opportunity to give feedback and contribute comments rather than just assent to what has appeared in the final document.

During this research process, raw data has been viewed by my research supervisor so she can make any relevant comments and check I have not flattened or “laundered” the research (Taylor, Bogdan, & DeVault, 2016, p. 201). One session has not been included in the final narrative. I discussed my reasons around this with my supervisor to make sure I was not discounting data without justification.

Keeping a reflexive journal on my own processing, thoughts and assumptions through-out the research is another area where I have added trustworthiness to this study. If, when talking about qualitative research in general; “critical self-reflection is essential” (Taylor, Bogdan, & DeVault, 2016, p. 194), then for practice-based research it seems even more so.

Another way that rigour and trustworthiness is threaded through my project is in the inclusion of sections of transcript. Rather than just summarising the content or providing one or two

sentences of client speech, I have included the context of the therapist question and/or response. This exemplifies good narrative analysis, and it also offers a way that readers can independently evaluate what I have written and directly engage with the text. The transcription process itself was time consuming, requiring multiple viewings to capture the nuances of speech, and then more viewings to add detail about movements or affect that might have accompanied the speech. Although they are always filtered through the researcher's eyes, the accuracy of these transcripts however provides a valid base for research (Taylor, Bogdan, & DeVault, 2016).

Data Analysis

Given the narrative case study design, narrative inquiry was a natural fit as the means to analyse my data. Below I describe this "field in the making" (Chase, 2011, p. 421) in a little more detail, and then describe what this process looked like for my project.

Narrative Inquiry

Bruner (1985) made a distinction between two types of narrative inquiry. One that uses an *analysis of narratives* to find elements as members of a category, and the other *narrative analysis*. The latter can be described as "studies whose data consist of actions, events and happenings, but whose analysis produces stories (e.g. biographies, histories, case studies)" (Polkinghorne, 2005, p. 6) Narrative analysis is a 'pulling together' of the data and values the messiness, texture and differences present. Data are organised into a cohesive account, rather than a separation out of the story, or a paradigmatic reasoned analysis from a narrative. Likewise, the analysis and data gathering have no set boundaries but become part of "a single harmonious, organic process" (Etherington, 2013). It is this type of analysis that I have used in this study.

In my research, a succession of counselling sessions (Scenes) are compiled into a two Act drama complete with Intermission. The research questions act as the plot; “the glue that connects the parts together” (Polkinghorne, 2005, p. 18). Being a co-constructed story between myself and the client, each Scene also includes my own reflections, as both researcher and counsellor. Similarly, each piece of transcript offered shows both the voice of the client, and that of myself, the counsellor. This supports both the nature of practice-based research and the methodological framework of a narrative analysis. The client’s voice is not offered, “as exemplification of researcher-generated categories”, (McLeod, 2010, p. 197) rather as part of the co-constructed, contextual nature of the narrative.

The pieces of transcript were chosen because they relate to the research questions (the plot). As Polkinghorne (2005) suggests, it is the focus on the plot that allows the researcher to begin to decide which items from the data should be included in the finished text.

Furthermore, the finished story must fit the data while bringing an “order and meaningfulness that is not apparent in the data themselves” (Polkinghorne, 2005, p. 16). This is not a theme orientated way of analysing qualitative material. Rather than finding themes *across* material, narrative researchers “listen to the voices *within* each narrative” (Riessman, 2008, p. 12).

Here we find narrative analysis is more than just the presentation of a story; “it is the excavation and interpretation of the story and circles around questions of how this came to be, why, for whom, and for what purpose” (Riessman & Speedy, 2007, p. 429).

In qualitative studies, (and in what is generally termed ‘good’ narrative analysis), “researchers gradually make sense of what they are studying by combining insight and intuition with an intimate familiarity with the data” (Taylor, Bogdan, & DeVault, 2016). I immersed myself in my data over a period of two and a half months, watching and re-

watching the counselling sessions with both clients. I initially watched one client's six sessions consecutively and then the next client's sessions consecutively. This enabled me to get a sense of both cases before I began to focus on one case, paying more detailed attention to each of the different sessions within this.

It was during this process that I realised that I had more data than was necessary and possible to adequately analyse, for the size and length of this project. From initially aiming to fully analyse and write up the findings from two cases, I reduced this to one case study. I wish I could write that the decision of which case to pursue was made with great thought about what might serve the research question best. In the end it was purely a pragmatic decision based on how much further along the analysis process I was with Bob's² case. Narrative research often focuses on one individual or a small group (Savin-Baden & Major, 2013), so this has not affected the overall research design or trustworthiness of findings.

I viewed each session in this case six times through, before being guided by the research questions and watching smaller sections within each session. Each time I viewed the videoed sessions I wrote my observations of the data, guided by the questions 'how' did this happen, and 'why' did this happen. Studying how I integrated Creative Methods with SFBT meant looking at small pieces of each session. To see what was offered therapeutically by this integration, required a more complete knowledge of not only each session but the entire case. I also continued to reflect on my experience of the viewing and reviewing process. Along with these reflections, I wrote notes of the discussions and conversations I had with my supervisors about both the data, and my 'alongside process' with it.

² Pseudonym

I then began to transcribe various sections of the counselling sessions related to the plot, collating all the data to do with each session chronologically. Sometimes I transcribed two or three pieces of transcript for a session, unsure which I would use. I read through the transcripts and then often left them for a couple of days before picking them up again, to read them afresh. I was always seeking which would best serve the research questions. At the same time, I was very aware of how these actions of keeping and discarding were my decisions and they could easily have been made differently by someone else.

Once I had decided on the final transcriptions, I spent time going over these looking at the detail of the language. I noticed how I had the sound of both my, and the child-participant's, voice in my head when I read them through. I realised that another reader wouldn't have that. This made go back and add details of facial expressions and movement into the transcript to capture more accurately the nuances of the session.

Presentation of Findings

There has been a sense of continuity between the data collection, analysis and finished writing for me. The process of writing has blurred the usually distinguishable boundaries around these processes, with reflections at times indistinguishable from analysis. Writing has become a form of thinking (Stake, 2010) and I resonate with St. Pierre (2011) when she states that for her, writing is analysis. "Data collection and data analysis cannot be separated when writing is a method of inquiry" (Richardson & St. Pierre, 2005, p. 971).

There are many people experimenting with different and exciting ways of presenting their findings in the field of narrative analysis. Due to only being a beginner with this form, I have

decided to use a sequential narrative in the form of a play. This is one of many new forms qualitative researchers are using to present their findings (Richardson & St. Pierre, 2005). My choosing of this form is not for some novelty value, but because it seems a structural form in which to conceptualise the research. Dramas involve changing sets and character development, comedy and pathos, and at the end of the play each member of the audience takes something different away even though it has been a shared experience. In this way it seems an entirely appropriate form to write of this research.

I have chosen to write with a flexible, narrative voice interspersed with voices of other SFBT practitioners. Although she is writing from a post-qualitative and post-humanist perspective, St. Pierre (2011) notes that this way of writing acknowledges the non-visible or un-textualised data that has already informed thinking/writing. Through the liberal use of transcript, and other data, I have sought to show that the data interpretation is firmly based in the experience and perspectives of the participants (Savin-Baden & Major, 2013). I also hope that the writing might be engaging, explanatory and easy to read by those who are seeking to work with SFBT and children in primary schools.

CHAPTER FOUR: FINDINGS - ACT ONE

Introduction

The previous chapters have been written as a form of advertisement for the writing in this one. It is here that the drama takes place. You have arrived at the theatre. In lieu of a programme, this chapter starts with a brief synopsis of the main two characters, Bob and Nadia. This has been purposefully written in a way that seems aligned with SFBT and narrative inquiry. The description of Bob has been collated directly from the words Bob's parents used when describing him at his best, along with other information about himself that Bob has contributed and approved of being included. The description of me has been written from words Bob said he would use if he was describing me to a friend that was about to start counselling with me.

The play (case) begins with Act 1. This Act contains three Scenes (counselling sessions). There is an Intermission (one counselling session), and, then Act 2 commences with the remaining two Scenes. Each Scene begins with a description of the *Context* and *Setting*, with the word *Action* indicating the beginning of the transcript. In bold throughout each Scene SFBT concepts have been highlighted for clarity. The transcript is included to highlight the plot (research questions) which are; How do I integrate Creative Methods and SFBT in my counselling practice when counselling young children in a primary school setting? What does the integration of SFBT with Creative Methods offer therapeutically for children in a primary school setting?

As is often the case when attending the theatre, there can be a bit of whispering as the set changes after each Scene. The audience takes this time to check in with one another about

what has just transpired. Hence, I have included a paragraph or two at the end of each Scene summarising the main happenings.

Character Synopsis

BOB

A *nearly* 10 year old boy who is into fitness, is athletic, and is also very creative. Loves pizza, YouTube, Fortnite and playing with friends. Funny, empathetic, cute, caring, sensitive. Talented and able to perform on stage. Great with babies and small children.

NADIA

She's funny, and she helped me with a lot of hard times. I liked that I could make jokes with her hearing because she wears hearing aids. She is an average height and about the same age as my mum. At first I was a bit nervous, but when I met her it was fine.

Scene One – Growing Seeds

This beginning scene demonstrates a Creative Methods integration of the *Strength Cards for Kids* with SFBT and the co-constructed conversation around **preferred future** that evolved.

Setting

This counselling session takes place in the office of the Resource Teacher: Learning Behaviour (RTLB) at Bob's school. I describe the room and my interaction with it in my reflection.

"I'm a visitor in this space, I notice how I'm so careful to return everything to its place, the chairs I've changed around, the table I've pushed aside. It's a nice room though, a good size with a good-sized window. However, it is not mine, and I leave trying to make it look like I've never been."

Context

This scene is the first time Bob and I have met. I have previously met with Bob's parents in their home, and, spoken to the school's Special Education Needs Co-ordinator (SENCO). The transcribed section occurs near the beginning of the scene just after Bob and I have conversed about a number of *Strength Cards* he has chosen to describe himself. This pivots the language away from being problem saturated, and towards a conversation around the child's already existing skills and competencies, all of which are key parts of the SFBT philosophy. The transcript records how I then begin a conversation around what Bob might like 'to grow' in his life.

Action

N I'm wondering, if you were to imagine down here, one of these or two, maybe two or three, whichever, imagine them like a seed in a garden you know how you plant

B Yeah

N It starts off as a seed, imagine these are like a seed in you

B Yeah, and I'm like growing them

N Yeah! What would you like out of all of these ones to grow into a flower? If you could choose two or three that you would have grow in your life.

B *(Immediately gets up and grabs two cards)*

One, two

N um hmm, and if there is more, you can choose those. Do I need to pull those round or can you see those round there?

B Yeah, I got it *(picks up card)*

N Any more or is that the main ones?

B Just these ones.

N Just those ones, righto, talk me through these.

B **Honest**, because like, some people, wait it sorta doesn't make sense to have this one first so I'll do this one

(changes card order)

Ummm. **Trusted**, because I'm really good at like some games and I'm better than other people, but other people don't think I play, or like they think they are really good at the game or something, yeah like video games for instance, like Fortnite, yeah like they might say "Oh you suck at Fortnite" and I'm like "But I've got more wins than you", and they might be like "oh you don't play". Something like that.

N So it's a matter of you wanting people to trust you when you speak,

B Yeah

N so that they believe what you have say. And you want to be someone who only speaks the truth

B Yeah

N so you can be trusted.

B Yeah

Fair – cause like, some games, yeah like I sorta can't like..... say it, I can't speak like about this because I don't know how, what the right words for it

N But there is something about this card that you want to have more of in your life?

- B Yeah because like, I want to make sure I am fair to other people
- N So at the moment, would you say that if people would look at you, or you would say about yourself “I am fair”? Are you wanting to have more of this fairness, or is this you picking this up because you wish others would be more fair to you?
- B Pretty much both.
- N Okay, both, so you want to be fairer as well?
- B Yeah, I want, like it goes along with being trusted, it’s like yeah
- N They kinda like work together don’t they...
- B Yeah
- N Yeah and even this one
- B I want people to be honest to me and I want to be honest to them.
- N Yeah, so you want to grow your honesty so that mum or dad, the teachers or your friends know that if they were to talk about you they would say “This describes Bob”.
- B Yeah
- N Does that make sense?
- B Yeah
- N Do they kinda all connect in like Lego?
- B Yeah. Pretty much
- N Pretty much. How would you know these were growing in you?
- B I wouldn’t know, but like
- N What would be different?
- B It would probably just like happen.

I use a metaphor, a simple image of a flower’s growth to help integrate the Creative Method (*Strength Cards for Kids*) into an SFBT preferred future question. I have used this metaphor in work with other children and found that ‘a seed growing into a flower’, is something they know about already in their environment. The metaphor is about progression, a seed to a flower, and is a simple way of introducing the SFBT concept of a **preferred future**. Finding what it is that the client wants to happen that is different to now, sets the trajectory of future sessions (Hanton, 2011). I introduce this saying, *“It starts off as a seed, imagine these are*

like a seed in you". Bob shows he quickly understand the gardening metaphor and applies it directly to himself. *"Yeah and I'm like growing them"*.

This question also enables a preferred future to be framed "in terms of the presence or start of something, rather than the absence or end of something" (Bateman & Milner, 2011, p. 49). It assumes change is desired, without an orientation around the problem. The client's future is not necessarily a negative goal or the absence of the problem, but, is rooted in what they would like to be doing **instead**.

Framing the question of what the child might like to grow as, *"these are like a seed in you"*, also reflects an SFBT way of thinking. It acknowledges there are aspects of whatever Bob chooses that are already present in his life (Milner & O'Byrne, 2002). Part of Solution-Focused therapy is finding information around what is happening in Bob's life when those 'seeds' are present.

The languaging also seeks to give a sense of **hope**, *"What would you, out of all of these ones, like to grow into a flower?"* Underpinning this, is the SFBT idea that Bob is capable of this growth. Hanton (2011) writes that "SF brief therapists do not believe that people come to us as dysfunctional, unskilful, helpless souls" (p. 15), instead we believe that those who sit in front of us do have skills, strengths and resources that they have used before and can use again. When I began learning and working with SFBT, I brought with me a strong belief in a client's inherent value and worth which was founded in my Christian faith. This model however has broadened my understanding to include that clients are also both capable and resourced.

The question, *“What would you, out of all of these ones, like to grow into a flower?”*, also functions as an invitation for Bob to begin to voice *for himself* the things he might like more of in his life, thus initiating his **sense of agency**. In this case, and like most other children in counselling, Bob has come to counselling as a mandated client (Berg & Steiner, 2003; Berg & De Jong, 2013). Before I have met or spoken with Bob, I have already been exposed to the narratives and perspectives on Bob’s problems through his parents and the school on what needs to be changed. *“If you could choose two or three that you would have grow in your life”*, shifts the sense of agency and enables Bob to set the agenda for what is important to him. This simple question reorientates me as a counsellor as to who my client is, while also acknowledging that Bob is the expert on his life. In true SFBT style, it is the child choosing which areas of life he would like more agency in.

The video shows Bob quickly getting up from his chair, picking up two cards before taking some time to look over the rest and picking a final card. The three cards are “I am honest”, “I am fair”, and “I can be trusted”.



As Bob begins to talk through the first card he reshuffles the order *“wait, it sorta doesn’t make sense to have this one first so I’ll do this one.”* He uses the cards to structure the story he wants to tell in a way that makes sense to him.

When Bob expands on the “I am trusted” card, he refers to the specific context that this has meaning for him, *“like video games for instance, like Fortnite..”*, alongside his interaction

between himself and others around this. The conversation that follows between us, clarifies the interplay between Bob's actions and the actions of others in relation to the 'seeds' he has chosen. I ask; "*Are you wanting to have more of this fairness, or is this you picking this up because you wish others would be more fair to you?*" This is a redundant question as Bob has already indicated that he wants more fairness by picking up the card, and he has also just said "*I want to make sure I am fair to other people.*" The reply from Bob is "*Pretty much both*". When I was studying this transcript, Bob's response seemed to be the epitome of fairness, and reminded me of the oft quoted; "Do unto others as you would have them do unto you" (Luke 6:31). Regarding honesty, Bob asks for much the same; "*I want people to be honest to me and I want to be honest to them.*" I remember being relieved hearing that it wasn't just other people's reactions that Bob wanted changed, and that he did see a participatory part for himself.

Even if Bob had indicated that he only wanted others to change, SFBT questions are designed to elicit what the client wants for themselves, and not just for others. Berg and De Jong (2013) write that when clients don't see themselves as a part of the solution "we respect the client's current perceptions, but at the same time shift the focus from the problematic others to the client and any role he or she might feel able to play in any positive change" (p. 69). This focus then helps move a client who might have initially arrived as mandated into continuing as a voluntary co-constructor.

Near the end of the transcript I ask; "*How would you know these were growing in you?*" This is an attempt to invite Bob to explore what would be different if the characteristics from the *Strength Cards* he had chosen were present in his life now. This is an SFBT style question that seeks to help develop an articulate, concrete, behavioural and measurable goal, rather

than leaving honesty, fairness and trustworthy as wide undefined statements (Berg & De Jong, 2013). I ask a similarly worded question when Bob replies; *“I wouldn’t know”*. It is clear in both the video and transcript that I don’t leave enough space for Bob to develop his initial answer before asking the next question. Perhaps Bob’s meaning is conveyed more accurately if read without my interruption; *“I wouldn’t know, but like, it would probably just like happen”*.

After viewing the visual recording, I reflected on this last sentence in the transcript, linking it to the possible purpose of the counselling process itself.

The movement from everything just happens to me, I have no control over whether a day is good or bad, to a perspective that is enlarged to include a child’s ability to perhaps in some small sense act on their world. To think a new thought, do a new thing and feel differently than before. (Researcher Journal)

The integration of SFBT and the *Strength Cards for Kids* in this session, as demonstrated in the excerpt above, seemed to be effective in a number of ways. Remembering this is the first time I have met Bob, the use of the *Strength Cards* alongside SFBT questions helped establish rapport by engaging Bob in discussions around what he was good at and interested in. This SFBT and Creative Methods integration also invited him to experience time with an adult oriented around **problem free talk**. A SFBT therapist however is unlikely to spend the whole of a first session *solely* building rapport. SFBT therapist Paul Hanton offers a useful reflection on a good balance in regard to the time spent on making clients ‘at ease’; “...always bear in mind that you are there for a purpose *and* you can still help people

to feel at ease while retaining focus”³ (Hanton, 2011, p. 39). SFBT is more pragmatic than other therapies in regards to the helping relationship “and doesn’t focus on the relationship as an ends or means” (Egan, 2002, p. 43) rather, emphasising outcomes and what needs to change in relation to these.

This SFBT - Creative Methods integration also invited Bob to consider a preferred way of being that was not related to a problem, or an issue introduced from an adult. It invited the opportunity to take “the conversation beyond the problem/solution distinction altogether to a hypothetical narrative in which the client’s life is free of the problem and that area of the client’s life is the way she wants it” (Walter & Peller, 1996, p. 17).

Not long after this section of transcript ends, Bob looks at the three cards he has chosen and says; “*Like, all this probably effects on my bullying, like I get bullied.*” I asked him “*Tell me how this works*”, and this began a conversation around how Bob would play basketball differently if he was full up with fairness. The solution is not always found by looking first at the problem, nor is it “just the flip side of the problem” (Walter & Peller, 1996, p. 12). From the integration of the *Strengths Cards* Bob was able to come up with something he wanted to work towards, and only later verbalised that he somehow saw this as connected to his problem.

The *Strength Cards for Kids* with their large pictures and clear simple writing, used within an SFBT model also seem to have aided Bob with the languaging of what he wanted more of in his life. Asking a child to come up with a goal or what they want more of in their life on a first

³ Italics mine

meeting is not the way that many child counsellors operate. Child goals are often seen as emerging during the therapy, “although the child will usually be unable to verbalize them as such” (Geldard, Geldard, & Foo, 2018, p. 7). In this our first session together, Bob, a 9 year old boy was able to articulate what he wanted to grow in his life and relate this to his current life context.

Summary

How do I integrate Creative Methods and SFBT in my counselling practice when counselling young children in a primary school setting?

- I initiate the use the *Strength Cards for Kids* at the beginning of our first meeting together, asking Bob to choose cards that might describe him.
- The transcript then demonstrated how I used a metaphor of a seed growing into a flower as a bridge connecting the *Strength Cards for Kids* to the SFBT concept of a preferred future or preferred way of being.

What does the integration of SFBT with Creative Methods offer therapeutically for children in a primary school setting?

- This integration helped build rapport while also enabling talk that focused on eliciting how Bob’s strengths and resources are evidenced in his life. This integration also focused our future work together on the presence of something, rather than the absence of something.
- It seemed to encourage a sense of agency enabling Bob to be the expert on what he wanted from our work together.

- It enabled Bob to engage in a description of a preferred identity, a 'preferred way of being' that included honesty, fairness and trust.
- Between Scene 2 & 3 the school specifically recorded Bob's honesty when describing an incident he was involved in.

Scene Two – Magical Bob

After describing the setting and context, this scene includes a section of transcript that illustrates an SFBT conversation around a creative metaphor/language choice by Bob. In service of eliciting more detail around this metaphor, a section of transcript describes how *The Bears* were used in a Creative Methods integration with SFBT. A second piece of transcript demonstrates a Creative Methods integration of the *My Life Rules* cards and SFBT. This was also designed to get more detail around Bob's original metaphor.

Setting

This second session with Bob takes place upstairs in a small storage/resource type area at Bob's school. Large grey filing cupboards on runners dominate the room. There is an office that belongs to another resource teacher close by and it is accessed by walking through where Bob and I are seated. It is currently unoccupied. Bob and I sit side by side at a desk that the Special Education Needs Co-Ordinator (SENCO) has just wiped free of dust. The SENCO has apologised for the area looking like a dumping ground. Noise from the children downstairs filters through the door from time to time. In reflecting on the space arrangement after watching the videoed session I have written;

"I am reminded of the issues to do with space, the 'calm room' being busy, the struggle to find a space. I remember my desire to let the SENCO know I was flexible with location, alongside my spoken thinking that this little spot where someone could come in and out of an office wasn't ideal long-term" (Researcher Journal).

The school has been openly appreciative of the work being done by Mana Ake practitioners with their children, although consistent space for one-on-one therapeutic sessions seems a problem.

Context

This scene begins with some general problem free talk and laughter as Bob describes that in the previous lesson his class had just had a 'puberty talk'. Bob discusses different aspects of this talk throughout the scene.

Near the end of Scene One, we had constructed a scale with '1' being described by Bob as, '*Bullied every day, crying*', and '10' as, '*Be more happy, be around more friends*'. Bob had scaled himself as a '1' that session. SFBT uses scales to "regularly evaluate with our clients how they are doing in reaching solutions satisfactory to them" (Berg & De Jong, 2013, p. 18). The first piece of transcript in Scene Two occurs near the beginning of the scene after Bob has just scaled himself as '5' on this same scale.

I have enquired about what has made the difference in reaching a 5, as getting detail around '**what is working**' is a key SFBT approach. Berg and Steiner (2003) write that "it is crucial to build on the small solutions you discover and expand these small pieces into slightly bigger ones" (p. 25). Bob speaks about how some of the kids who are mean to him were in a different learning space and how he has been hanging out with his friends and playing tag at break time. I ask how on earth he had managed to have a great break time, focusing on what *Bob* has done. This type of question is an indirect compliment within SFBT as it leads to the client being able to state their own strengths and resources (Berg & De Jong, 2013). Bob attributes his great break time to "*Magical Bob*" coming down.

Action

B I'm the Magical Bob. The Magical Bob is here!

N The Magical Bob is here!

B Not normal Bob!

N *(picks up wand out of bag and waves it around).*
So tell me, there has obviously been some magic happen.

B ummmhmmm.

N So tell me what's different about Magical Bob playing tag and everything? What's Magical Bob like?

B No one knows Magical Bob.

N But these guys have been playing with Magical Bob.

B hmmm, but no one knows what he is really like.

N Tell me, what is Magical Bob really like *(whispered in a 'you can tell me' kind of way)*

B Nope, it's a secret.

N But Magical Bob seems to have a good life.

B Yes he does. Normal Bob. *(points to the 1 on the scale)* Magical Bob *(points to the 10 on the scale)*

The use of 'Magical Bob' immediately reminded me of something Bob's parents had said in our initial meeting when we were discussing some **exceptions** regarding Bob's behaviour. They jokingly referred to these exception times with Bob within their family as, "*an alien coming to visit*". Part of their preferred future was "*for the alien to take up permanent residency*".

I continue the conversation with Bob, and, join in the 'magic' by bringing out my wand and waving it around. SFBT practitioners regularly incorporate clients' words into responses and questions, as this is a way of respecting the clients' frame of reference and languaging (Berg & De Jong, 2013). I ask, "*So tell me, there has obviously been some magic happen, so what's different about Magical Bob playing tag and everything? What's Magical Bob like?*"

Although I have asked two questions when it might have been more skilful to ask one, both questions are directed at trying to elicit details.

It is 'Magical Bob' talking with me in this piece of transcript and I refer to him as such. He tells me that no-one knows him or what he is like, even the people who have been playing tag with him. My supervisor points out to me later, that in this scene I am now privy to Magical Bob. Although I am yet to find out what he is like, I am in his presence and he has made his presence explicit. This means I could have begun noticing or checking in with him about what he was currently doing that might be Magical Bob behaviour.

The transcript shows that Bob then integrates the scale on the desk in front of us into his narration by pointing out that Magical Bob is a '10' and Normal Bob is a '1'. This is Bob giving me a clear indication that life as Magical Bob is linked to his preferred future, and part of what he wants more of. Magical Bob characterises the desired change.

In the section after this transcript finishes, I continue to ask questions looking for more detail about Magical Bob since he has the days that rate as '10's'. I am particularly looking at eliciting things Magical Bob *did*, actions that aid him in his '10' days. As Berg and Steiner (2003) suggest, "...it is always helpful for a child to have a name for a solution, and this is followed up with some concrete idea of how the change from problem to solution will occur" (p. 74). I was however unable to get any set behaviours from Bob. I decide to introduce *The Bears* cards to invite possible affect differences between Magical and Normal Bob.

Bob very quickly identified the bear that represented Magical Bob. When I asked what a speech bubble coming out of the bear's mouth would say, the reply was; "*All Good*". Bob then voluntarily offered to show me what bear might represent Normal Bob, and went on to say "*bored, tired, sad*" was a "*perfect description*" of Normal Bob. We agreed I would cut these pictures of the bears out and add them to our evolving scale. This Creative Methods integration was used to try and get more detail and information about the differences between Normal Bob and Magical Bob, and in some way concretise the 'magic' by using images. The bears seem to represent a concretised version of Bob's feelings.



By adding in the additional question of the "speech bubble", the integration became more than an identification of feelings. Perhaps it can be seen as closer to something of what Bob himself might say when asked 'How are things?', when experiencing something of his preferred future at school.

Within the construct of SFBT, emotions are what lead to behaviour. The behaviours that are connected to the emotion are what a therapist is aiming to get the client to hear themselves provide detail around (Milner & Myers, 2017, p. 34). Although some in the SFBT world are only concerned with how people 'do' emotions (Milner & Myers, 2017), a more nuanced view includes emotions as "manifested behaviours that can be identified and become part of the

co-created conversation” (Nelson, 2019, p. 83). In this way, if positive emotions are part of a client’s preferred way of being, then these can be explored further with contextual questions. “What other times do you feel “all good” like this bear?”, and, “What other kind of things does Magical Bob do that would make him say I’m ‘all good’?” are questions that might have been useful to ask here.

This second section of transcript occurs near the end of the scene when I decide to introduce the *My Life Rulz* resource cards into our conversation. I introduce this Creative Method integration in another effort to get detail about the differences between the two Bob’s. The focus of this integration is on exploring what possible *thinking* strengths and resources Magical Bob is using to have ‘10’ days.

N I’m really curious, because Magical Bob has way better days than Normal Bob. I wanna know the secret.

B Nothing. It’s just lucky days.

N Do you know what, I’m going to put some of these things down here on the floor and I want you to see, if you are Normal Bob, I know you are Magical Bob today, I know it’s a lucky day and you are Magical Bob, but I’m curious to know.....actually, Magical Bob which one of these do you think Normal Bob needs to know?

Can you flick round, or do I need to put them on the table?

B I can look.

(I lay the My Life Rulz cards out on the floor and Bob looks over them from his seat)

N There could be two or three, which do you think?

B That makes no sense. Rule 1 *(Card says “I belong, I do belong”)*

N I belong. That is someone that knows they belong wherever they are.

B I don’t belong at school, I hate it.

N Ahh, so Magical Bob, do you reckon Normal Bob needs to know that?

B ummmhmmmm yeah but then normal Bob has bad days.

N Yes, yep, Normal Bob does have bad days.

- B ummhmmm, I need to keep it balanced.
- N As Magical Bob you have a responsibility to give Normal Bob some good advice. What would you choose as things you should ahh maybe tell? You aren't older and wiser, but you have better days, so what would you tell Normal Bob?
- B I don't know, I can't choose.
- N You can pick whichever ones stand out.
- B Number 4. (*Sometimes life is fair and good and sometimes it isn't*)
- N What was that? Rule 4?
- B Yep.
- N Normal Bob needs that one. Do you think that umm Normal Bob needs that Rule 1? You just said Normal Bob doesn't feel like he belongs at school?
- B He doesn't *like* going to school.
- N He doesn't like going to school. Does Normal Bob feel like he belongs at school?
- B ummm, like noooo and yes, like he goes for half the year and then I go for the other half.
- N But Magical Bob, does he always feel like he belongs and has fun?
- B Yeah.
- N So it sounds like half the year Magical Bob is here he knows that. I might pick this one up too.

After a slightly bumbling start to the question, I ask; "*Magical Bob, which one of these do you think Normal Bob needs to know?*" This question is effectively asking Bob to be the advice giver, and, later in the transcript I specifically encourage Magical Bob to give Normal Bob some good advice. Milner and Bateman write "children are not consulted very often, and asked for advice even more rarely" (Bateman & Milner, 2011, p. 35). This Creative Methods integration with the *My Life Rulz* cards and SFBT is focused on the client's own wisdom, solution and choice.

When Bob struggles to make sense of the card that says, "I belong, I do belong", I provide him with a possible perspective on this. He immediately responds with, "*I don't belong at*

school, I hate it". While still 'hearing' his current perspective, I engage my Solution-Focused perspective and avoid a problem focused exploration of how come this might be, and continue the conversation onwards wondering aloud if "I belong. I do belong" is something Normal Bob might need to know.

Bob reminds me that Normal Bob has bad days and he wants to keep a balance. I didn't understand what he meant at the time, and I could have used an SFBT technique of echoing the word 'balance' to get more detail (Berg & De Jong, 2013). I chose to go back to what Magical Bob might need to teach Normal Bob. Bob then chooses "Sometimes life is fair and good, and sometimes it isn't". The transcript shows me wondering about the initial card Bob and I talked about, and some clarifying around this happens between myself and Bob.



In the end I pick up this card, so we have two in front of us at the desk. My decision to include this card was most likely influenced by a number of factors, not least Bob's initial statement that he didn't belong at school. When I had met Bob's parents his dad had said at one point; "*We kinda almost feel that he doesn't know where he belongs.*" Berg and Steiner (2003) suggest that all parents have a fairly good idea of how they want things to be different, and what solutions might look like. Similarly, King (2018) writes, "Trust the family to know what they need". Hence Bob's parents' expertise on their child also led to me including this card.

After the transcript finishes, I flip the cards over where there are six more statements listed, and I ask, “*Are any of these helpful for Normal Bob?*” Bob picks out a further insight from each; “Being left out happens to everyone, not just me” and, “When things are unfair, I can fight or be angry, or I can accept the disappointment and let it go.”

This Creative Methods integration with SFBT is looking at what type of thoughts or beliefs might be working for Magical Bob. This seemed to be effective in that Bob engaged with the idea of Magical Bob giving advice to Normal Bob, which in the end led to some concrete differences between Normal Bob and Magical Bob. The use of the cards as ‘advice to Normal Bob’ also continued to build on aspects of Bob’s preferred future. SFBT contains the premise that the more detail that is gathered about the client’s **preferred future** “the more likely it will be achieved” (King, 2017, p. 33). The cards also invited the idea that Bob has agency over his own thinking.

SFBT normally focuses on behavioural things a client wants to be different, and, elicits and co-constructs detailed goals around changes in actions. When Bob first distinguished Magical Bob and Normal Bob on the scale, I had thought that it would be quite simple to gather detail around what Magical Bob did differently. However, this did not prove to be the case. *The Bears* and the *My Life Rulz* cards were used to help start to ‘flesh out’ the magical metaphor and add in emotions and thoughts that Magical Bob might have that are working for him.

In re-watching the session, I am also aware of the SFBT assumption I hold, that ‘luck’ has nothing to do with change. In most cases when things go better, it isn’t just luck, the client

has changed something. I am bringing this assumption into the room with me, and, am not willing to accept that when Bob has '10' days and is Magical Bob, it is just down to luck. In reflection I have written;

“My continued questioning by entering his story and creative thinking was all trying to elicit difference between normal and magical Bob, to expose personal agency, the power within. In his narrative of bullying, where are the limits of his own agency? If a child is unaware of their own agency, limited though it might be, isn't part of the counselling process to invite the child into that knowledge?” (Researcher journal)

Similarly, Hanton (2011) writes that when things appear random, clients have often been active participants in the change without realising it (p. 61).

My reflection also speaks to my questions around where the limits of agency might be for children, especially if they have used the word 'bullying'. As a child therapist working in primary schools Alison Davies writes regarding this dilemma saying, “a possible source of tension when considering intervention with the children is whether the focus for change should be on changing the child's internal processes or on changing social environments” (Davies, 2011, p. 83). I continue to explore this tension throughout my work with Bob.

At the end of the session, when asked what was the most useful part of the session Bob said it was, “magicalness”. There were parts of the session where we delved into alien talk, Bob played tricks on my hearing (I wear hearing aids), changing Magical Bob to 'Magical Blob' and vice versa. My initial reflection straight after the session was;

“Felt chaotic, the magical and normal, the going with the client and the desire to think this is all silly....” (Researcher Journal)

This short reflection speaks to the tension I noticed within myself during the scene when the metaphor of Magical Bob evolved into some organic playful happenings. Bateman and Milner (2011) write how problems “have a knack of convincing adults that it’s time to get down to the serious business of problem solving” (p. 37), an attitude that can potentially work to the advantage of the problem rather than the solution as well as alienate or exclude children. King (2017) writes of play creating “positive feelings between those who play and facilitates social, cognitive, physical and relational skill development” (p. 10). For Bob to mention ‘magicalness’ as the most useful part of the session lets me know that ‘going with’ and ‘joining in’ with the silly and playful aspects of this session was important.

It was interesting for me to watch parts of this session with my supervisor as she helped me to see how I privileged Bob’s imagination and his creative mind while also integrating approaches that have been effective. I started to see how I can be drawn to the negative in my work, focusing only on things I need to do better. I am not always reflecting using a SFBT lens, looking for both what is working, and for exceptions. I watched this session in its entirety after this supervision, and wrote another reflection which included;

“This session seemed to have a very SFBT framework and all the creative interventions aided that, and seemed to flow as part of the session rather than as stand-alone things used without clear thought as to what purpose they are serving within a SFBT framework.” (Researcher Journal)

The process I have described here is similar to the developmental stages within the reflective process for professionals; firstly becoming aware of an uncomfortable feeling or thought, a critical analysis of that, and then the development of a new perspective (Atkins & Murphy, 1993).

This session has enabled some new perspectives regarding my counselling work with children. I realise that I am able to work in a playful way with a child, utilising their language. I am also continuing an SFBT approach while I use Creative Methods. I also can see that sometimes my initial reflections on my work needed to be relooked at, or “re-searched”, in order for continual transformation to occur (Bager-Charleson, 2014).

Summary

How do I integrate Creative Methods and SFBT in my counselling practice when counselling young children in a primary school setting?

- I firstly accept and playfully enter into Bob’s construct of ‘Magical Bob’ and ‘Normal Bob’ by using my wand and addressing Bob directly as ‘Magical Bob.
- I then introduce *The Bears* cards to gain feeling or affect descriptions associated with Magical Bob, and by association Bob’s preferred future and they are added to the Scale.
- Similarly, I introduce the *My Life Rules* cards to invite Magical Bob to give advice to Normal Bob. Bob is again placed as the expert in his life. This integration is to make explicit possible thinking resources that Magical Bob is using. These are added to the Scale later.

What does the integration of SFBT with Creative Methods offer therapeutically for children in a primary school setting?

- A focus on the child’s internal world, inviting the amplification of Bob’s preferred future to include feelings and thoughts.

- An expansion of what is recorded on Bob's scale. This enables 'Magical Bob', the particular bears that Bob chose, and 'I Belong' to be referred to through ongoing sessions.
- A sense of play, magic and silliness was in this session from the laughter over the puberty talk to the 'Magical Bob' metaphor which led to alien talk and purposefully mixing up names – Magical Blob, Magical Bob. I did not always find this easy.
- The *My Life Rulz* cards invited Bob to take up agency in his thinking while at the same time I considered that there are limits to a child's agency. When might the social environment need changing?
- The type of space where this session takes place seems to indicate the strain schools might be under to find appropriate spaces for therapy.

Scene Three – Labels and Colby Cheese

Between Scene 2 and Scene 3 Bob had been involved in an incident at school with some other boys. I had been informed about this from a staff member who said to me that she wrote in her notes that Bob was open and honest in his account regarding his own part in this. She said that she specifically recorded this as it stood out to her as different from other interactions with Bob in similar situations. (Honesty was one of the things that Bob in his first session said he wanted to grow into a flower; part of his preferred future).

In this Scene, I firstly endeavour to describe and discuss a piece of SFBT and Creative Methods work in the *Context* section. In the second half of the Scene, I present a section of transcript which seeks to demonstrate more of what follows on from this SFBT informed piece of creativity.

Setting

This is the third session with Bob, and is held in the school's 'calm room'. This room has plenty of light from two big windows, a couple of desks, some sequined cushions, paper, pens, and a largish wooden board with some mechanical type movement objects. This room is typically used by the school to help children who need to have a calm space to de-escalate.

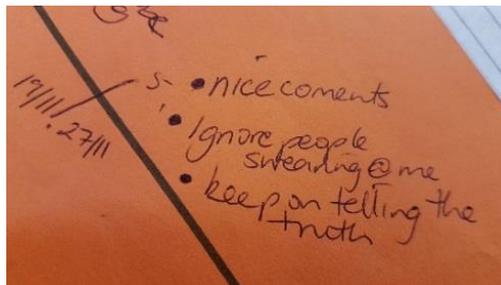
Context

The section of transcript that follows occurs near the end of the session. Earlier, Bob has scaled himself as a '5', similar to the week previous. Bob and I have just come to the end of a conversation around what I had termed labels (descriptions of identity). We had engaged in a piece of creative work where we pretended squares of lined refill were post-it notes. Bob wrote various names that he gets called on them. He then decided to put these in a

“nuclear testing station” and we ripped them up into little pieces together. We then made new labels (descriptions of identity) of things Bob said he wanted to be stuck to him.

“Nice comments” and “Trustworthy” were things he wanted to stick. Nice comments that Bob said he would say to himself were: “Good job” and “Good honesty”⁴ and then below this were comments Bob said he would say to others. The red circled ones were ones he was going to try giving to others in the coming week. This work is alongside the other things (ignore people swearing at me, keep on telling the truth) Bob had come up with during the session that would help him move onward from a ‘5’ and towards being a ‘10’.

The creative work around labelling seemed to be effective in that Bob participated willingly in



it. He came up with his own description, “*nuclear testing station*”, of how he wanted to get rid of the names he was called, and used his own wording in the ‘labels’/identity descriptors he wanted stuck to him.

Regarding the “*nice comments*” descriptor, I ask Bob, “*What would be a nice comment you could say to yourself.*” One of the things he said in reply to this was, “*Good honesty*”. This seems significant as it refers back to the story of how Bob had told the truth to the teacher about the incident he had been involved in at school that week. It also relates to part of his preferred future outlined in session 1; “I am honest”. My question invited Bob to give himself

⁴ “It’s going to be alright” was added from a later session

a “self-compliment”, (Berg & De Jong, 2013, p. 39) reinforcing something he approved of in himself. Hanton (2011) writes how part of the therapeutic process is “essentially to train clients....to look for what is working and what will work, for them to **acknowledge it for themselves** and to give self-praise” (p. 30).

This activity also enabled some goals to be set for a **between session task**, as Bob circled what he was going to say to others around him that week; “*Thank you, good job, wow*”. A Solution-Focused counsellor acknowledges that most of therapy occurs outside the room, although not all practitioners use between session tasks. In this case the task was related to what had been discussed therapeutically. Hanton (2011) writes when a task is formed this way “it becomes more ‘real’, it is more ‘shared’, in understanding at least, and can be ‘visited’ if appropriate, at the next session should there be one” (p. 91).

Action

This following section of transcript occurs near the end of the scene, just after we have shared a laugh together. Bob is sticking the ‘labels’ onto his scale.

N How will mum and dad know by the way that this is growing in you? (*pointing to the ‘labels’*)

B Because I’m honest, like.

N Honest yep. If I went and saw them in two weeks time....

B They wouldn’t say anything because I don’t tell them about school. (*picks up wand*)

N Don’t you?

B Abracadabra, colby cheese.

(Bob waves my wand then puts it down and picks up a green squidgy ball he had previously been playing with during part of the session. He continues to play with this ball through to the end of this transcript)

N Ahh, what’s stopping you telling them about school?

B I dunno. The colby cheese.

N The colby cheese. Stinky. Who do you talk to about school?

B No-one.

N and this kinda stuff?

B no-one.

N So are you just telling me, and you haven't been telling other people?

B I don't tell you about school.

N You've told me some stuff that's going on at school.

B Some.

N Is there more stuff?

B I get emailed at school, school gets emailed, well my mum gets emailed by school.

N Does she?

B Oh pop (squeezes ball and a bubble appears)

N And what do they email her?

B I don't know.

N If things go down?

B I dunno, I dunno, I dunno.

N If things are down here? (*pointing to a 1 on the scale*)

B Down, down. It's down, I can't get it (*pretending the ball is under the desk*)

N Umm, wouldn't it be amazing if the school started emailing about stuff that was happening up here. (*pointing to the 10 on the scale*)

B No, cause they don't email about that stuff. They don't go (*puts on a special voice*) "Bob's had a good week at school", they go "Bob's Bob has done something naughty", or something like that.

N Oh. They don't tell your parents all the great things you do?

B Yeah

N Oh, sounds like I'd love if it was my child, I'd love to hear some good things too. What kinda good things do you think that your parents would like to hear?

B Nothing

N They don't want to hear any good things?

B Ohhh they wanna hear things, but like

N What kind of things would they like to hear about?

- B Nothing. I don't want them to hear
- N You don't want them to hear?
- B Noooo weeeellll. I can't be bothered
- N Hmmm. But if the school was emailing good things, what kind of things would that, do you think your parents be like, ohhh that's so cool I'm so pleased the school emailed me about that. It was a good thing, what kinda emails would they be?
- B I dunno know.
- N What would you be doing? What would you be doing to get those emails?
- B I've never had ummm, Schools never emailed ummm my mum and dad saying I've done something good.
- N But I know you've already done good things, but if they were to email about good things, what kind of things would be worth emailing about do you think?
- B Colby cheese and if I have, when I have good play times and nothing happens
- N Okay. Should I add that up here? (*referring to the scale*) So, what would be a good playtime, how would the teacher like...
- B Ummm, if I'm not narking or something
- N Okay, so no narking, yip, good playtimes, yip. What else? (*says this while writing on scale*)
- B Stay out of trouble
- N Staying out of trouble. What are you having to do if you're staying out of trouble, what are you doing instead?
- B Playing responsibly, and I totally do.

I point to the first label (trustworthy) Bob has stuck down on the scale, and ask; "*How will mum and dad know by the way that this is growing in you?*" This is a relationship question that links family therapy to SFBT, and invites the client to externalise the signs of improvement that might be witnessed by others (Hanton, 2011). There has been movement in this session in capturing more of what Bob can do behaviourally to move towards his preferred future, and this question attempts to build on what others might notice when this happens.

Bob replies with *“Because I’m honest, like”*. My next comment cuts in on him when potentially Bob might have had more to add after ‘like’. I continue to press for more detail by wording the same question a slightly different way. The answer Bob gives this time is; *“They wouldn’t say anything because I don’t tell them about school”*. This is Bob inferring that the main difference would be seen at school and not home, which is congruent with the following exchange from the previous ‘Magical Bob’ scene:

B Yes, when it’s like lucky day for Bob, Magical Bob comes down.

N Ah haaa, does this happen at home as well as at school, or does Normal Bob cope okay at home?

B Well Normal Bob likes watching TV. I don’t get to watch TV because he doesn’t call me out on weekends. That’s his shift.

I didn’t catch the inference quick enough to potentially redirect the question to what teachers might notice if being trustworthy is growing in Bob. Instead I get curious about what is stopping Bob talking to his parents about school. A more SFBT approach to this would have been to become curious about what does happen when Bob does talk to his parents about school. Guided by this curiosity I might have asked; *“When has there been a time that you have talked to mum and dad about school?”* or *“What would have to happen for you to talk to mum and dad about school?”*

It is here that for some reason *“colby cheese”* makes an appearance in the conversation and I am back in the interplay of silly and serious. Without pausing, or giving an indication that this is anything out of the ordinary, I instinctively play along using Bob’s language. I add my own addition of *“stinky”* to the *“colby cheese”*. In my research reflection written after watching the session on video a second time I write;

"I notice the amount of 'silly' or seemingly 'unimportant talk', laughter, jokes and tricks that are interspersed throughout the session. I join in for a while, and then return to the question that might have been before the little interlude. How important are these sections I wonder? What part do they play? For play they are, no pun intended."

(Researcher Journal)

One of my analysis sheets from this session has arrows from 'serious' statements from me such as; *"You have a lot of power"* to Bob then singing *"You've got the power"*. The singing does not seem an 'interruption' to the therapeutic process, rather just a part of it. It seems that I am in agreement with Selekman (1997) when he writes; "The therapeutic experience with children and their families should be a fun, surprising, and, at times wacky adventure" (p. 25). Like the previous Act, there is an interplay between 'silly' and 'serious', and an evolving co-construction of these between Bob and I in the therapeutic process.

When Bob tells me, *"I don't tell you about school"*, I check my perception against his, that he has told me *"some"* stuff that goes on. My inquiry, *"Is there more stuff?"* is an attempt to give an opportunity for Bob to speak about something that he may not have told his parents, teachers or myself regarding school. It leads to Bob talking about how his mum gets emailed from the school. I refer back to the scale, wondering if the school emails when things are happening down at a '1'. This is unfortunately a more problem focused question. However, the conversation returns to a more SFBT oriented direction when I suggest how *"amazing"* it would be if the school started emailing about stuff that was happening at a '10'.

Bob shows his ability at different voices as he pretends to imitate the school talking about him. *"They don't go "Bob's had a good week at school", they go, "Bob's, Bob has done*

something naughty or something like that". My focus is on what Bob would need to be doing for the school to email. I am entering a discussion "of what will be signs to him that either the problem is solved or his life is going more the way he wants it to" (Walter & Peller, 1996, p. 18).

It doesn't however appear to be something that Bob has experienced happening. "*School's never emailed ummm my mum and dad saying I've done something good.*" I change my phrasing. I start by acknowledging that Bob already does good things, and, put the emails from the school in the realm of possibility. "*If they were to email about good things, what kind of things would be worth emailing about do you think?*" We have now moved from the beginning of the transcript where I asked "*How will mum and dad know by the way that this is growing in you?*", to a place where Bob is needing to consider what he would need to be doing *for the school to notice* that his preferred future was growing, and feed this back to his parents.

Bob's reply is; "*Colby cheese, and if I have, when I have good play times, and nothing happens.*" The language he uses here is interesting to note in that he moves from "*if I have*", to "*when I have*". This shows Bob's own belief that he is at times experiencing these types of playtimes and there are things happening now that the school could email home about. "While this shift in verb tense may appear extremely subtle, it is a shift of significance to the process of reconstructing a vision, **a belief of a hopeful future**" (Parsons, 2009, p. 74).

School is the place where most of Bob's challenges are reported, and it is these adults who form the relational context around him, and, are the potential witnesses to his changes. "The

child's significant adults are the context in which he or she must develop solutions" (Berg & De Jong, 2013, p. 192). Through relationship questions, SFBT also acknowledges that change is a "joint or collective endeavour, not a solo act" (Davis & Osborn, 2000, p. 71). Even when working with an individual child, SFBT questions work to include the wider systems in which the child belongs.

In one of my reflections regarding this session I have written about the potential the school has to be part of the change.

"This connection between a social force (school) promoting and reporting on good behaviour, and the individual making good playtime choices perhaps sum up the 'both-and'. The school has a part to play; a child in its environs isn't an island, but part of something greater and they are shaping the child and his narrative, and therefore can be part of the changed story and outcome." (Researcher Journal)

This session took place two weeks before the end of the school year and I did not follow-up with the school on the possibility of changing what they noticed and emailed home.

However, in the new school year before I had even met with Bob again, I did speak with the SENCO about this, and she was very keen to begin implementing this change immediately.

In this situation I have chosen to be an advocate for the child, looking at how the environment around him can help contribute to his preferred future by encouraging the school to follow a more SFBT philosophy by noticing and reporting on different things than they have previously been.

The conversation with Bob continues where he says the teachers would notice “If I’m not narking or something.” ‘Narking’ could have been echoed, or I could have asked what circumstances Bob felt warranted not narking. This would have garnered detail, while also providing a safety check in case the things he was referring to did need reporting. However, I have trusted that Bob knows what he is doing here without getting further explanation. I prompt for more of what makes a good playtime, and Bob adds; “*Stay out of trouble.*” I then use my next question to stay with the SFBT focus on what Bob would need to be doing to stay out of trouble, and his reply is “*Playing responsibly, and I totally do.*” After this transcript finished, we continue to converse around what playing responsibly looked like, and I offered “*Would playing responsibly mean everyone is having fun and no-one is getting hurt?*” Bob agrees with this, and so this also gets added to the scale.

The Creative Methods integration with SFBT involving the labels enabled an opportunity for Bob to construct something new he wanted about himself. As the transcript demonstrates, it led on to a relational connection between Bob and the school being made. This connection grounded the future in Bob’s life by focusing on what he might need to be doing in the present for those new emails to be sent home. It also suggested to me as a counsellor working with Bob, that it might be a good idea to introduce the school to the idea of noticing and reporting on something different.

Summary

How do I integrate Creative Methods and SFBT in my counselling practice when counselling young children in a primary school setting?

- I suggest the idea of writing and then destroying labels (identity descriptors) given to Bob by others that he no longer wants to 'stick to him'. Bob then composes two labels (identity descriptors) of his own that he does want to be known by and these are added to the Scale in the session
- These 'preferred labels' are added to Bob's scale as part of the description around his preferred future. SFBT relationship questions are also asked about these labels which helps to elicit what Bob would be doing for others to notice these labels being present.

What does the integration of SFBT with Creative Methods offer therapeutically for children in a primary school setting?

- This co-construction offered the idea that identity can be changed, and that Bob has some agency over what descriptors he wants for himself. Bob was able to give himself some self-praise and make a task for the week from this co-construction also.
- The SFBT relationship questions following on from the integration connected Bob's preferred future to his community at school and family at home.
- As the counsellor I became aware of what part the school could be encouraged to play in Bob's story.
- The interaction of the silly and serious was organically present throughout this co-constructed conversation shown through: shared laughter, 'colby cheese', Bob playing with a squeazy ball and pretending to go under the table in a word play association, and the imaginary nuclear testing station.

CHAPTER FIVE: FINDINGS - INTERMISSION

Intermission – It's Going To Be Alright

Setting

My fourth session with Bob takes place in the Principal's office. I am struck when watching the video of this session that this is the fourth new space I have been in with this client in four sessions. I am an itinerant counsellor, moving between numbers of schools, and, rooms within schools it seems. There is also a curiosity that I hold regarding working in the principal's office in a school, and the power dynamic that this brings to the session. In one of my reflections I have written;

“The school are going out of their way to tell me how much they appreciate the help they are getting with their pupils, and the principal leaving his space does confirm this, yet it also brings up other issues. To try and keep the power dynamic balanced, using the office of the most senior person in the school is not helpful, even if the relationship the children have with him is positive.” (Researcher Journal)

It is becoming apparent that not all primary schools are necessarily well set up to facilitate one-to-one therapy. I wonder what briefing was given to schools from Mana Ake about 'space', and what might be required. Are designers of new schools with their open plan office spaces and glass walls thinking of children having privacy for therapeutic conversations?

As we go past a little office filled with chrome books, I suggest to the SENCO that this could be a therapy space, and it is clear she agrees. Although it is small and not ideal as a

therapy room, it could provide a consistent space. I can't help wondering about the value placed on machines vs therapeutic work with children.

In an effort to mitigate the fact we are in the principal's office, I arrange the seating so that Bob and I are sitting in two chairs beside a coffee table in the room, with our backs to the principal's desk. I have taken pens and paper and various other things out of my bag and put them on the coffee table in an effort to create a sense that this space is ours for the moment.

Context

When Bob first arrives into the room, he yawns, and when I ask, "*Are you tired?*" he replies in the affirmative. I do not notice this until reviewing the session on video, however it strikes me that tiredness also is an influence on this session. Near the beginning of the session Bob tells me about a recent happening where another boy had been "*winding me up saying I can't be around them because I just moved to where my friends were*". The boy pushed Bob, and he then punched the boy. When I said, "*Ahh, so it didn't go so well for you?*", Bob replies in the affirmative again.

I then ask Bob an exception question, looking for other ways he had dealt with similar situations in the past without resorting to punching. This sequence of questions is both acknowledging that the situation isn't great, while staying open to the tenets of possibility held within the SFBT model. Bob has also already had interaction with school staff and discussions around this punching issue so my exception question seeks to focus on something different. "*What other things do you do when you feel like you are being wound up?*" Bob's reply is "*Go away*". Unfortunately, I did not stay with the exception of "*go away*"

long enough to get the detail around it, and my next questions were around a more problem focused angle. My reflection after watching the video, speaks to this;

“I can see I have looked at exceptions and tried to highlight these, although I haven’t spent enough time dwelling on those.”

The drawing came about when I asked Bob *“Who do you like hanging around?”* This question was trying to move the conversation towards a new direction. When Bob started to name boys, I began to write their names down before realising I was about to get quite confused. I stopped, and, suggested he might like to draw the groups. This not only had the benefit of me understanding more clearly Bob’s world, but also gave Bob the chance to draw the friendship groups in a way that was meaningful for him. This enabled another method in which to show he was the ‘expert’ and I the learner. The drawing became the pivot on which this session revolved.

I am unable to show the picture due to the names written underneath the stick figures, however the video shows that Bob continued adding to his picture for around thirteen minutes. The drawings were all stick figures, with six drawn for his friends, and, by the end, around fifteen for the others. He took time to name them, and the drawing was the focus of much of the session.

Action

The transcript starts while Bob is still drawing.

- N What are you going to do potentially at break time with this group?
B Busted or something
N Yep, and does normally busted go quite well with this group?

- B Yeah.
- N So this tells me.
- B But then these people show up.
- N So it's all good when it's like this (*pointing to one group*)... but these guys not so much? (*pointing to the other group*)
- B Yeah.
- N What this tells me about you Bob is that you do have the ability to make friends with people. There are actually quite a few people that you've connected with and can play busted with, and do things with.
- (*continuing to watching Bob draw another figure in the 'other' group*)
- There's someone else in there too.
- So these ones here are safer people for you? (*pointing to friend group*)
- B Yeah.
- N That's good news, so you've got some safer people in there. And are these people in your class as well?
- B Some of them are.
- N Some of them, yep.
- B Yeah, Alfred's not, but everyone else is.
- N Okay. And are these ummm the kind of friends that are quite trusted,
- B Yeah.
- N Like you want to be trusted and trustworthy, are they those kind of friends if you look at them are they kinda getting into trouble a lot, or are these kinda a good group of friends?
- B They are a good group.
- N So this is the more troublesome group?
- B Yeah.
- N Yep, so you are choosing some good friends over here. Well done you Bob.

I enquire as to what Bob is going to do potentially at break time with the group he had drawn around him. This question was a specific behavioural question around the goal, while functioning as one where I was able to check on how break-times were going. I've started

to give the compliment “*So this tells me...*”, when Bob adds that there is a change when another group shows up. I acknowledge this and still give the compliment as I had intended.

In this comment, I am using the drawing not only as a way of understanding more of Bob’s world and the dynamics of the boys in his year group, but also to compliment him in his friend making ability by noticing the number of people he is connected with and can play with. This compliment is reality-based in that it refers directly to what Bob has drawn and said. However it is a direct compliment, a positive reaction from me to the client (Berg & De Jong, 2013) that privileges my interpretation. This type of compliment is of limited use within SFBT as they can make a child dependent on a counsellor’s praise, rather than a child noticing and recognising their own strengths and potential (Milner & Bateman, 2011). It would have been easy for me at this stage to concentrate on the number of ‘others’ that Bob was drawing in his picture, however I was determined to try and stay with the possibility of another narrative, and what was working.

While Bob keeps drawing, I ask clarifying questions around his drawing around safer people and whether they are in his class. These are not particularly solution-focused questions, but they allow some clarity around his drawing rather than my making an interpretation or meaning about the drawing that does not fit with the client’s framework. My detail gathering around these questions was also influenced by Bob’s parents whose perception was that he perhaps wasn’t a good judge of character regarding friends he was hanging around with.

I also try and relate his choice of friendships back to one of his preferred future goals of being trustworthy. “*Are these ummm the type of friends that are quite trusted?*” With the

reply in the affirmative I give another compliment about the types of choices that Bob is making in his friends. *“Well done you Bob.”*

Drawing within a solution-focused session is not used as an activity for a child to pass time, (Berg & Steiner, 2003) rather it is used for children to describe what is going on now, and their current perceptions. “Drawing slows down the discussion, gives the child time to think, is calming and gives the child something more concrete to talk about once the picture is drawn” (Berg & De Jong, 2013, p. 190). In this situation with Bob, there were periods of silence as he drew. The transcript shows how I used the drawing to get detail around the groups of people he was drawing. In this session drawing has been used as a current descriptor, whereas within SFBT it is also available as a way for children to express what they would be doing that would indicate that things were better (Nims, 2007). Inviting Bob to draw other times when things have been better and what he was doing then, or how he envisaged things being better might have been a nice addition here. It would have added more SFBT into this integration.

In this session Bob also lets me know that his dog is very sick, and he is feeling upset about this. At the finish of this Scene, I refer back to the labels that were stuck on the scale the week before. I am particularly interested in the “Nice Comments” label, as Bob had divided it into nice comments to himself and others.

N This is nice comments to yourself as well, even though you’ve got this hard time with your dog. Do you think you can think of some nice comments you can say to yourself?

B It's going to be alright.

N It's going to be alright. Should I add that over here? (*I add this to the 'nice comments' label*)

It's going to be alright. It's sad, but you are still going to be alright.

This was seeking to draw on Bob's own wisdom about what would be reassuring to him rather than something from me as a counsellor which might not resonate with him. I also write down what he says, and, add it to the 'nice comments' label. What gets written down by the therapist in an SFBT session is also important as the very act of writing is seen as a reinforcer. This means that a therapist tends to especially note down anything which is to do with exceptions, goals, a preferred future and things that have been done differently that led to positive changes in the client's life. "When a grown up records something that a child says....it communicates that it was an important utterance" (King, 2017, p. 69).

Hearing about the incident at school, and seeing Bob put a '1' on the scale seemed like such a backward step, and my initial reflection immediately after this session was brief;

"Sense of going round in circles, no progress, not a lot of hope."

I expanded on this later in the day, writing;

"The desire for progress and shifts is strong in me. So much so, that sometimes I overlook what has taken place."

I then listed how I had been able to hear and understand more about Bob's friendship groupings, and, listen to Bob's sadness about his dog's illness. I also wrote reminding myself;

“I need reassurances for myself - the same as them” (clients).

Watching this session through on video for analysis purposes was also difficult for me, so I spent some time reflecting on this uncomfortableness.

“Closer viewing has required me to unequivocally hold on to the truth that I am okay and enough, even though I might now engage with that moment differently given the opportunity. This doesn’t divorce or hide myself from myself, rather, acceptance and a secure hold on my ‘okayness’ invites the chance for change in my practice and person.” (Researcher Journal)

“The opposite of the gaze is the intrusive stare. When you are stared at the eye of the ‘Other’ become tyrannical. You have become the object of the other’s stare in a humiliating, invasive and threatening way.” (O’Donohue, 1997, p. 87). There is a gentleness and a soft gaze required when engaging in the reflection process. I am a novice practitioner, developing the ability to access “the theory of another – and spontaneously use it”, a process which takes extensive experience (Skovholt & Ronnestad, 2003).

Hanton gives a salient reminder to me also, that solution-focused is not solution-forced, and the pace and agenda belongs to the client lest the therapeutic alliance or momentum established is risked (Hanton, 2011). Fiske (2008) writes of there being no formula for the balance of accepting and validating a client’s struggle, and helping the client build solutions. Later, after viewing the session through again on video, I write;

“Not just about me – he has had a hard week, punched someone, there are repercussions of that. Dog sick, it’s a hard week to find good things, “It’s going to be alright”, might be as good as its going to get. His hard week needed to be heard, and

that today is the therapy – I am at a ‘1’ today.....and “it’s going to be alright”.

(Researcher Journal)

My reflection here is perhaps illustrative of the both/and concept, having “one foot in acknowledgement and the other in possibility at all times” (Shennan, 2014, p. 121).

Summary

How do I integrate Creative Methods and SFBT in my counselling practice when counselling young children in a primary school setting?

- The process of drawing is utilised as a way for Bob to describe the friendship situation he finds himself in. I use it to form some compliments about the strengths I see in Bob.
- The work with labels (Scene 3), particularly ‘Nice Comments’, is threaded into this session as a way for Bob to give himself some reassurance.
- The Principal’s office where this integration takes place is again considered as to what part it might have in the counselling process and I try to mitigate the possible power dynamic by re-positioning the room slightly.

What does the integration of SFBT with Creative Methods offer therapeutically for children in a primary school setting?

- The drawing invites Bob to again be established as the expert in his life by encouraging him to portray how things are for him. If taken further, it could have offered a medium for Bob to describe times when things have been better and what he was doing then.

- The recording of the Scene 3 work with labels (identity descriptors) on the scale enabled an opportunity for me to enquire as to what reassurance Bob could offer himself this Scene.
- This co-construction offered the opportunity for me as a counsellor to keep one foot in acknowledgement, and the other in possibility.

CHAPTER SIX: FINDINGS - ACT TWO

Scene 4 – Playful Mutations

This Scene seeks to firstly describe a Creative Methods piece of work in the *Context* section, using a co-constructed list to do with friendship. Then in the *Action* section, a piece of transcript demonstrates how this Creative Methods work was integrated with SFBT and evolved further. The organic playful interaction that is part of the characters' conversation is also featured.

Setting

This fifth session takes place in the principal's office. This is the first time since therapy began that we have been in a room we have previously used. It is straight after a play break, so Bob has bought his lunch box with him. At some point during the session, Bob has started to eat a packet of crisps.

Context

Bob has scaled himself as an '8' on his scale today. When I ask, "*What's made the difference between last week and this week?*" Bob's reply is; "*We get to go to the movies, there is a show on and I'm just feeling a lot happier because my dog is better.*" In the ensuing conversation we connect in again with Magical Bob, and, also with one of the *My Life Rulz* cards Bob had chosen in Scene 2. From this card we explore a bit more around what 'letting it go' would look like. (This also involves each of us singing a line from the song "*Let it Go*" made famous from the *Frozen* movie).

We then look at what Bob would need to do to stay at an '8'. Bob replies that "*Having a good day*" would keep him at an '8'. In this moment, I am aware; that it still seems quite

nebulous what Bob actually needs to do to have a good day, the previous session revolved around friendships, and also the scale we have been co-constructing has “*Be around more friends*” as part of Bob’s preferred future. Given all of this, I make a suggestion that we start to complete a list of things that make up a ‘good friend’. The video shows Bob engaging willingly with this activity choosing the colour of paper and pens he wanted to use to facilitate this happening.

These ‘good friend’ characteristics were seen to relate to both Bob and others. When Bob said a good friend was “*positive*”, I used SFBT questions to elicit detail around this. “*How do you know a friend is being positive?*” “*How would a friend know you are being positive?*” “*What kind of things do positive people say to their friends?*” In this way, the activity was not being used as a piece of psycho-education where I was teaching Bob about friendship. In contrast, it was making explicit what Bob already knew about good friends and what types of things he did when he was being a good friend. Bob also had suggestions for a ‘Bad Friend’.

When the list is complete, I suggest transferring the ‘Good Friend’ points to a handprint, wanting to focus on the positive side of this work. During part of this time, Bob has been eating a packet of chips and teasing me about them, shaking the packet in front of me, saying how crunchy they were. We have also talked about our favourite chip flavour. This extended piece of transcript is situated near the end of our Scene together and begins with Bob handing me a chip from his packet.

Action

- N Are you being a nice friend and sharing? Oh my gosh! Sharing is a nice thing. Am I really allowed to eat it?
- B (*Nods*) Are they good?

N Thanks for being really generous!
So 'positive', number 2? Should I put 'Positive no complaining'?

B Just 'positive'.

N Just positive, okay. What's the third finger.... is this the 'saying nice things'?

B 'Honest' and then....

N What's the last one going to be.... Truth, do I just I write truth is that enough?

B *(Nods)* Wait, can I've that? *(Grabs pen from me and draws on page)*
Oh, there's a mutated finger coming out of me!

N What does it need to do?

B I don't know.... 'share'.

N 'Share', brilliant. *(I write this down)*
Okay. So do we need to tick one of these off? Should we tick 'listens' you said that's....

B Um hmmm.

N What colour are we going to use to say yep we've got this one down?
(Bob chooses a colour)
A tick, or are we going to colour in a fingernail, or what would you like to do to say yes I've got this one down?

B *(Spends time drawing on the listening finger)*

N That's cool, Love it! Okay. So which one did you say you are going to work on this week?

B Wait, pass. *(Grabs pen and draws something else on the listening finger)*

N Which one are you going to work on this week so we can colour it in next?

B I don't know, ummmm.
(Runs fingers across the hand, eyes up so he can't see the fingers and then stops and lands on 'Saying Nice Things'.)

N Saying nice things.

B That is the exact same!
(Smiling and pointing to work done two weeks ago on the scale regarding saying 'nice things')

N It is! So, saying nice things, this is the goal this week. So, this afternoon, do you think you could get 10 nice things out before the end of day?

B No. *(Shakes head, eating chips)*

N How many, how many nice things? I'm going to close my eyes and count to 5.

B You guess it, you guess, I'll put my hands behind my back.

N Make it realistic. How many nice things you can say between now and the end of school? I'll let you go in 2 mins.

B Done, done.

N Okay I'm going to close my eyes and I'm going to guess is that right?

B *(Puts on a special voice and shows 8 fingers to camera)*
Wait! I'm just going to show the viewers.

N I'm guessing that you will be able to say 4 nice things.

B No.

N How do I know you're not changing behind your back?

B I'm not, I showed everyone.

N Okay, ummmm I'm guessing you're gonna say 2.

B No.

N 1.

B No.

N 6.

B No.

N 10.

B No.

(Joint laughter)

N 4.

B You've said that! *(More laughter)*

N 10.

B No, you've said that!

N 9.

B No.

N 8!

B Yep!

N 8, okay! I think you'd better go! You've only got 15 minutes and you've gotta get 8 nice things!

(Bob gets out of his seat and heads towards the door)

What's been the most helpful today, the most helpful thing for you today?

B *(Shrugs shoulders)* Food.

N Food.

B That's helpful.

N Okay. Go right...

B Okay. Have a good day, have a good day.....that's one! *(Smiling with thumb up)*

Eating in a counselling session is not my normal practice. However, when Bob offered me the chip, I decide to eat it, clarifying first if he really means me to eat it, or if it is still part of the 'game'. I use this action of Bob's as part of a compliment highlighting his friendship skills and generosity. *"Are you being a nice friend and sharing? Oh my gosh! Sharing is a nice thing. Am I really allowed to eat it?"* Then when I take it I say, *"Thanks for being really generous."* Once again this is a reality-based compliment that tangibly relates to the work we are doing, and a strength Bob had shown me. Fiske (2008, p. 61) writes how "positive perceptions of the client 'slip out'" throughout the sessions and I find this is the case, especially in my work with children. Rather than this being an exception where Bob has shared how he has used skills of friendship, his sharing a chip with me is evidence of competence in situ, and I have responded to point that out.

We carry on forming the handprint, and I am doing the writing as Bob has told me in our first session together that he doesn't like writing. In my questions however, I am collaborating with Bob regarding the order and how he wants the wording to be transferred. Hence, I check if *"Positive, no complaining"* should go over to the hand, and he returns with his desire for just *"positive"* to go across.⁵ We finish the final fingers, and Bob says *"Wait, can I've*

⁵ The picture shows 'Positive & Respectful'. The word 'Respectful' was added in the following session and I had not taken a picture without it.

that”, and grabs the pen from me and begins drawing on the page before saying, “Oh, there’s a mutated finger coming out of me!”



This action by Bob shows his engagement with the task while also suggesting his implicit understanding that this is a **co-constructed** activity. What has been drawn and written so far is not fixed, and he is able to change or add to it.

My curiosity about the added finger is worded in a question not designed to find *why* Bob added it. Rather I am curious about what the finger is going to ‘do’, in the context of good friendship. I ask; “*What does it need to do?*” and Bob’s response is “*I don’t know.....share.*” It is perhaps a relatively easy connection to make that the in situ sharing and eating of the chip, and possibly the compliment about this, has been part of what has led to the addition of the “*mutated finger*”. I again affirm his action by repeating the word ‘share’, and, adding the compliment; “*Brilliant.*”

The transcript shows how I immediately move on. “*So, do we need to tick one of these off? Should we tick ‘listens, you said that’s something...’.*” This is referring back to something earlier in the session where Bob had said that he was already good at listening. We had also explored who might notice this about him. After my suggestions of a tick or colouring in a fingernail, I finish by asking Bob what he would “*like to do to say yes I’ve got this one*

down.” Bob chooses his colour and spends time drawing on the “listening” flange on the handprint. I again affirm his work by saying, *“That’s cool, Love it!”* I then attempt to utilise the handprint as a goaling conversation. *“Okay, so which one did you say you are going to work on this week?”*

This handprint is essentially another way of expressing a list that has already been done. In looking back over the recording and transcript, I realise this last question is almost redundant. SFBT practitioners ask questions from a position of curiosity about what might be created rather than about things they already know the answer to (Walter & Peller, 1996). This question falls into this latter category. In comparison, the question asked around the “mutated finger” had curiosity attached to it, as it was something added to the original listed work and I had no idea what Bob might answer.

Bob adds something to his drawing on his ‘listening thumb’, and I return to the question of what he is going to work on this week. Bob’s reply is *“I don’t know, ummmm”*, and I wait. This is the second *“I don’t know”* that Bob has expressed in this transcript, and the second time I have waited, and he has come up with an answer. Earlier in the session the following had taken place;

N What else makes a good friend?

B Uhhhh like, I don’t really know!

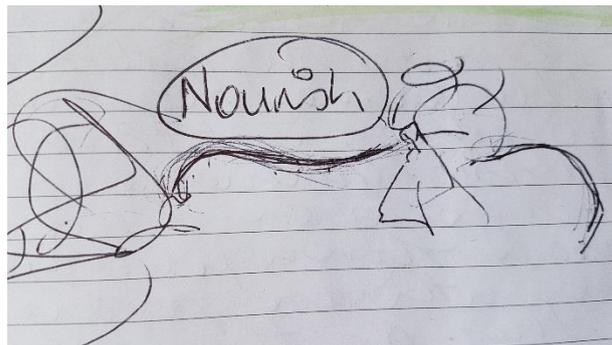
N Ohhh, this is curious!

B You are asking me hard questions. (*Head in hands*)

As this conversation evolved it became clear that Bob wanted me to leave longer spaces between questions. Now, by waiting after Bob says, "I don't know", I am trying to honour this.

I spend a lot of time reflecting on this issue of 'space' after watching this session on video. Space as more than a physical room where a conversation takes place, although this is also part of the narrative of this case. Space between questions, and the connection this 'lack of space' has to my own life as a practitioner.

"As I write my mind connects to the word 'nourish'. Something that came up in supervision a year earlier and how I drew it, and then described it as 'space between'. It seems likely that my own frenetic paced life where I am still re-learning to carve out space is having an influence on my counselling style."



It is the last week of Term 4, I am still collecting data for my thesis, and have perhaps taken on too many clients. Mana Ake is new, and the focus at present is on numbers of clients being seen. These are things in my professional world, but my personal world of family, mothering, getting ready for Christmas and going away on holiday sit in this space also. These silent forces are perhaps converging in the room, and, being 'heard' in the pace and style of my questions.

Bob comes up with a type of game to answer the question of what he is going to work on this week and runs his own fingers over the fingers in the handprint stopping on "*Saying nice things*". The video shows he smiles broadly and responds, "*That is the exact same*", pointing to the labelling activity we had done two weeks previous, where he had also circled some nice things he was going to say to others. I ask Bob if he thinks he can get 10 nice things out before the end of the day. When he responds negatively, I turn this into a game. "*How many, how many nice things? I'm going to close my eyes and count to 5*". Bob responds immediately to this with his own suggestion; "*You guess it, you guess, it I'll put my hands behind my back*". He puts his chip packet down, and the video shows his focus on this 'game'. The sense of energy around this 'game' is noticeable in the video.

As in all games, the boundaries are established between the players. I encourage him to make it realistic and remind him of the timeframe. These nice things are needing to be said before the end of school. I note that the syntax of this sentence; "*I'll let you go in 2 minutes*", sounds far more like a teacher than a counsellor. Bob decides to "*show the viewers*" his chosen number by holding up his fingers to the recording phone. I am a bit slow to realise the point of this, (and the example of honesty that this is showing) and so question; "*How do I know you're not changing behind your back?*" The guessing begins.

When I first started reading this transcript, I did not pay much attention to the numbers. Yet as I have focused more attention on the micro aspects of the language, I note that I start with three low numbers, 4, 2, 1 before returning to those higher and I wonder if showing belief in Bob's ability would have been better shown by higher guesses. However, the game continues with much laughter, until I finally land on '8'. I write in a reflection;

“The destination might be clear, but it doesn’t have to be a serious journey to get there”.

I end the session with a question, *“What’s been the most helpful today, the most helpful thing for you today?”* As a practitioner I am interested in doing more of what is working for the client, and this question invites a conversation around this. It also acknowledges that Bob is the expert on his experience of himself, rather me as the counsellor relying only on my own assessment of what went well. Bob replies *“Food.”* Given that Bob is out of his seat and the session is over, I don’t question this response, and just repeat it. Bob then finishes with *“Okay. Have a good day....that’s one!”* The video shows his smile as he says this.

I reflect on these last two sentences from Bob;

“Perhaps it is the feeling that nothing is being learnt, or taught that is difficult. Yet in the feedback, just when with my adult serious eyes, it could be assumed the session was wasted – when asked “what was the best part”, the answer was “food”. The next silly/serious instalment was just around the corner; “Have a good day – that’s one!”

(Researcher Journal)

I notice the languaging I have used. Words such as ‘learnt’ and ‘taught’ which seem to fit in the school environment, and, also with the ‘serious’ idea of the myself as an expert imparting knowledge that Bob needs to learn. SFBT is an approach where knowledge is viewed as being co-constructed in language and relationship. With change not being enabled through psycho-education, there is a trust a practitioner must have in assumptions of the co-construction process.

Finally, this transcript, especially the last piece regarding feedback on the session, reminds me that working with children is not quite the same as adults. The ability to be silly, playful and engage in a creative idea seems, (at least with this child), essential. Although I later explored my internal reactions, at the time I did not react negatively or pass judgement when Bob said that *'Food'* was the best part of the session. Rather I accepted the answer at 'face value'. Finishing with *"Okay. Have a good day....that's one!"* Bob demonstrates the connectedness between taking his task of 'saying nice things' seriously, and, expressing himself in a playful manner. This is summed up in a musing I've written regarding this Scene;

"Perhaps 'creating talk' requires space as much as creative methods, silence as well as questions, silly as well as serious."

Summary

How do I integrate Creative Methods and SFBT in my counselling practice when counselling young children in a primary school setting?

- I suggest the making of a list describing what makes a 'good friend' in the service of Bob's preferred future. SFBT questions are asked to elicit detail around what actions relate to these suggested characteristics.
- The strength-based aspects of this list are transferred to a **co-constructed** hand-print, and this is used to create a **between session task** for Bob.
- An organic and spontaneous game evolves over the detail of this task.
- **The Scale**, and previous work around Magical Bob (Scene 2), the *My Life Rulz* cards (Scene 2) the friendship drawing (Intermission) are threaded through different parts of this Scene.

What does the integration of SFBT with Creative Methods offer therapeutically for children in a primary school setting?

- This offered Bob a way of being the expert and articulate the characteristics and actions he connected with being a good friend without any psycho-education from me. Bob also chose which characteristic he wanted to work on.
- 'Silly' was retained and entertained in the 'serious' task of therapy by: Bob teasing and tempting me regarding his crisps, a co-constructed game to establish the between session task detail and the comedic interchange regarding the feedback on the session.
- The ecology of schools and the 'space' that a counsellor has in their life is considered as a possible enabler and restrictor of what is co-constructed in a session.

Scene 5 – “I’m This. I’m Here!”

Between this session and the previous one, I have met with Bob and his parents in his home on a matter regarding Bob’s learning. This session has not been included as it was seen as not adding anything to the plot. This final Scene is the finishing of my time working with Bob. It explores how the Creative Methods used in the previous chapters have become an integrated part of a SFBT scale and what this has enabled.

Setting

The session takes place in another new room, the fifth new space we have been in while meeting together at the school. This space is the largest room we have been in so far, with a small kitchen at one end and a portable table set up in the middle. I decide to use another table that is already set up against a wall, and, take out various things from my counselling bag to put on the table. In doing this, I am endeavouring to create a sense of containment or cosiness, acknowledging that for a time, this is a counselling space. After the session I have written my initial impression after being shown the room;

“I am almost bemused at the fact we are in a new space, and mention it to Bob on our way from his classroom. He thinks it’s some kind of breakout room initially, but changes his mind and isn’t sure what its normal use is.”

Context

This session takes place after the Christmas school holidays, and a few weeks into the new school term. It has been a total of 9 weeks since I last saw Bob for a session, although, while at the school for something else, I witnessed Bob apparently chatting happily with another child as they made their way to school camp.

Chatting to Bob on the way to the counselling room from his classroom, he seems positive about his year, and gave me an indication that he might not need to see me anymore. One

of the first things I do when we arrive in the counselling room is ask “*What has been going better?*” Pam King (2017) writes how a version of this question is a good opener for children at the beginning of a second and subsequent sessions, “What is better? Even a little bit?” (p. 58). After exploring this a little, I bring out the scale and ask; “*So if you were looking at this, where would you put yourself on your scale today?*” Bob points to the ‘10’ with a big smile on his face. For an SFBT practitioner if a client reaches their goal, this is rationale for closure (Hanton, 2011). When Bob pointed to the ‘10’, it confirmed this would definitely be our final session. I then ask what mum and dad are noticing at home, because he is now at a ‘10’.

I ask this because I am aware that although Bob has appeared to come willingly to our sessions, in some ways he is a mandated client. It is his parents and the school who initiated the Mana Ake request for support, and they are wanting to see change. It would have been interesting at this point if I had asked a relationship question enquiring about what Bob’s teachers were noticing also. The following emerges after this question.

Action

B Ahhh, they are saying I’m an alien or something.

N Are they? (*laughing*) A bit like Magic Bob?

B Yes (*smiling*)

N Is it like Magical Bob’s like is here all the time now?

B Yeah, ummhmmm

In this exchange there is reference to Bob's parents seeing him as an 'alien', which directly relates to their preferred future which was around the alien taking up permanent residency. My reply connects Bob's parents 'alien' metaphor to his own metaphor of 'Magical Bob'. Magical Bob was introduced in Scene 2 and was connected to Bob's preferred future, shown as a '10' on the scale. Bob affirms that his current experience is like Magical Bob being here all the time. In what might be called an identity shift, Normal Bob has become Magical Bob. This is also an indication that following what the child wants more of in their life, can also achieve the goals the adults around them have.

The session continues with problem free talk about a recent school camp and later Bob talks about the new friends he has made. Even though this is the last session, I still ask questions to highlight Bob's skills and competencies in making changes in his life.

N I'm really curious, how have you managed to make these friends?

B New class

N Yeah, but you could have been in that class and not made them, so how have you made them?

B Connecting with them

N How have you connected?

B Adding them into games and stuff

N Ahhh you've invited them in

B Yeah

N So you've actually been the one, it's not like you've been waiting to be invited, you've invited them.

B Yeah

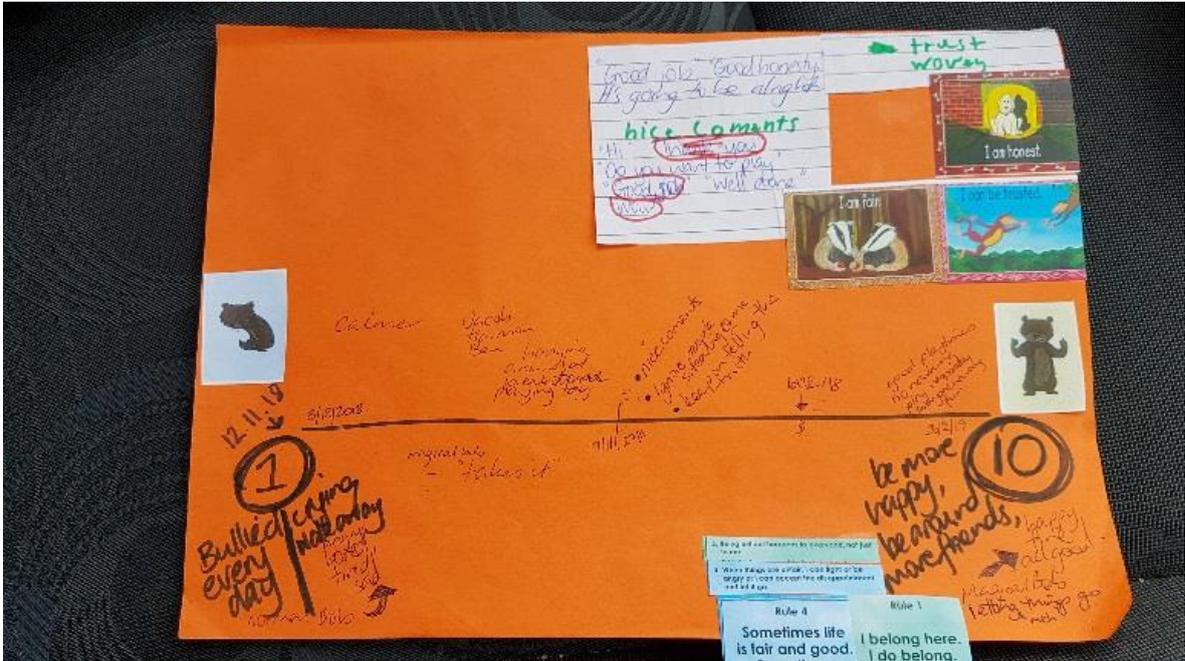
N Wow! That's amazing. Good job. So, you've probably helped them feel like they belong.

B Yep

This dialogue also demonstrates the subtle threading in of past work. In Scene 2 "I belong here. I do belong" had been added to Bob's scale as something that Magical Bob knew. Here I have suggested that now that Bob is at a '10' and he is inviting others into games, he could be contributing to their sense of belonging.

In this session no new creative things have been made, however what has previously been worked on has been referred to and referenced. When Bob talked about some of the new friends he had made, I referred to the handprint from Scene 4 to ask which things he noticed them showing. I also asked, "*Which things are you finding that you are doing more of now that you are with this new group?*" Bob's reply was, "*I'm sharing and I'm being positive and respectful.*"

The scale begun in our very first session has also functioned as a summary of the work that has been done across the sessions. It has helped me stay focused on Bob's preferred future, and I have returned to it in subsequent sessions as a way "to mark further progress, and to create a thread that connects the sessions together" (Shennan, 2014). It also been a visual way of recording Bob's work within this drama. During this final session, Bob glued on a couple of things I had printed from a previous session's work that hadn't been stuck on the scale.



After this, I also offer to photocopy the scale for Bob to take home. Even though I make clear he is in no way obligated to take this home, he is keen for his parents to have a copy. I suggest he will need to explain it to them, as it might not make sense to them.

N What would you explain to them?

B Umm. This is the good side (*pointing to the '10'*), this is the bad side (*pointing to the '1'*), and now I'm this (*points back to the '10'*). I'm here.

N Yeah, yeah. Okay

B And these are all the good things I've done (*pointing along the scale*)

My suggestion that Bob might need to explain the scale to his parents was firstly a practical one for their benefit. Secondly, I surmised that this might also be to Bob's benefit, as it afforded another opportunity for Bob to narrate himself as a '10'.

This exchange also indicates some lovely languaging around identity change; "*now I'm this*", Bob says. "*I'm here.*" Previously in the session Bob has talked about the "*new year*", his

“new class” and “nobody saying rude things and stuff” as being the reason for his ‘10’.

These are things he has perhaps had little agency over. However, the scale brings him back to “*all the good things I’ve done.*” In reflecting after watching the recording of this session I have written about this connection;

If Bob’s parents said things hadn’t been great from Year 2 through to Year 5 and now Bob is reporting things are better in Year 6, then something has shifted, and potentially not just in the environment, but also in Bob internally. He feels happier.”

(Researcher Journal)

I circle back to this again in another reflection, summarising it this way;

“It seems like this is both/and. Bob has done some things differently and his environment has changed.” (Researcher Journal)

Keeping a record on the scale of much of his work, and, asking Bob how he would explain this to his parents has enabled Bob to **acknowledge to himself** what he has done and summarise our sessions as about himself and his work. In effect, this section of transcript can be viewed as Bob giving himself a compliment. He is acknowledging his change, and the resources he has used to make those changes. “Self-complimenting involves phrasing questions in such a way that clients are placed in the position of describing their successes and hidden abilities” (Berg & De Jong, 2005, p. 52). This becomes important when viewed next to research which shows that “clients who do better in psychotherapy, and maintain treatment gains believe that the changes made in therapy were primarily a result of their own efforts” (Asay & Lambert, 1999, p. 32).

In the school environment, paintings, stories and other work are often taken home for children to show, or 'show-off' to parents. There perhaps can be a sense of pride attached to what ends up going home to parents. This scale is a piece of work by Bob, not by me. I may have done much of the physical writing of it, yet I was writing Bob's words, his actions, and his choices of the various things used across the sessions. The integration of Creative Methods with the SFBT scaling technique has resulted in something that Bob desires to take home and show to his parents.

Although Bob knows what he will be telling his parents about the scale, in this Scene I also let Bob know I will be phoning his parents myself. I ask what he would like me to tell them about our work together. When working with children "it is important to consider what, and how, information is shared with parents and associated parties" (Geldard, Geldard, & Foo, 2018, p. 21). Bob lets me know what he would like his parents to know, and I write this down. "Recording the answers as they emerge, so that they are visible to the client as well as the worker, is both encouraging and reinforcing" (Shennan, 2014, p. 90). At the very end of the session I read back to Bob what he has said to me.

N Yeah, righto. Okay. Well, let's leave it at that. Go well, and I'll ring mum and dad. I'll read this out again, let me know. "I'm happy with my new class, I've got lots of new friends, I'm like this bear, and this bear is saying "Yay" and "Positive", and I want mum and dad to know I'm positive and happy."

B (nodding and smiling)

This reading back of Bob's words was to check I had down everything he wanted to say, and, also so that Bob could once again hear his success in his own words. Success it is, for

Bob is verbalising in this scene almost verbatim part of his preferred future when the scale was first started in Scene 1; “Be more happy, be around more friends”. Parts of his preferred future have now become his daily reality.

Summary

How do I integrate Creative Methods and SFBT in my counselling practice when counselling young children in a primary school setting?

- Creative Methods that contribute to the clients preferred future, or show exceptions or instances of success are recorded on their SFBT scale. This is then threaded through and referred back to throughout the work with that client.

What does the integration of SFBT with Creative Methods offer therapeutically for children in a primary school setting?

- The recording of the client’s work on the scale helps connect the sessions together and provides a way for the client to acknowledge to themselves the work they have done, their agency and possible identity changes.
- Offers the possibility of a child being able to thicken their preferred future/identity by taking home work from their sessions either for themselves or to show parents or caregivers.

CHAPTER SEVEN: DISCUSSION

Introduction

This research project aimed to study how Creative Methods and SFBT are integrated into my counselling practice with primary school aged children, and then explore what this co-construction might offer. This was prompted by my moving from working with adolescents, to becoming an itinerant counsellor for a number of primary schools. I was wanting to retain my Solution-Focused stance while also adapting my practise to better suit the age-group of children I was now working with.

In this chapter, I will discuss the implications of my Findings from the previous chapters in relation to the literature. The four areas of focus will be;

1. Creative Methods

This was a focus of this project, and so I will examine what the Findings show regarding how I integrated Creative Methods and SFBT and what further connections can be made to SFBT literature and processes.

2. What was Offered?

Based on the Findings, I will explore what seemed to be produced in the integration of Creative Methods and SFBT for both myself and the client.

3. Silly and Serious

Considering that this project was focused around work with children, perhaps I should have foreseen this would be something that would appear in my Findings. However, the interplay of silly and serious was a surprise to me. I examine how this study's Findings of the interplay of silly and serious connects to the literature around counselling of children.

4. Space

These sessions didn't happen in a vacuum, and the context in which the sessions took place emerged as something that was significant in this project. The discussion will encompass both the physical space, and the possible impact on the sessions of the lack of 'space' in my own life.

Following on from this I also consider the implications of this work both for other SFBT practitioners when counselling primary school children and for my own practice. This distinction is made in the headings which will be *General* and *Personal*. Finally, the limitations of this research are considered along with possible future directions, or next steps for research in this field.

Creative Methods

"The therapist's task is to find methods or languages that are mutually communicative and that fit with the client's views, preferences, and abilities" (Fiske, 2008, p. 176).

Findings indicate that Creative Methods integrate quite easily with SFBT and enhance the conversation process. This confirms the idea that Creative Methods can be "a good support and extension for conversation" (Ratner & Yusuf, 2015, p. 118) although they do not replace talking. The conversation in a session often pivoted around the Creative Method and this then became a jumping pad for SFBT questions. The Creative Method integration also became part of other sessions through conversational linkages and the Scale which will be specifically discussed later in this chapter.

The Findings suggest that no Creative Method is solution-focused in and of itself, rather they are better likened to a tool, similar to scaling. Scaling is used in SFBT and in other therapies, yet the way the tool is used differs (Hanton, 2011). In CBT scaling, the desired outcome is at a 1, so the client is progressing downwards whereas with a SFBT scale the clients progress upwards. This might seem a small difference, however practice exposes theory. In CBT the problem is given the larger number, where in SFBT the solution is given this honour. One shows a problem becoming less, the other a solution becoming more.

This indicates that it is the approach and theory that is taken alongside the Creative Method that is important. In Scene 1 the *Strength Cards for Kids* are used to initially establish problem free talk and find out some of Bob's strengths and how he uses them. It is the theory behind SFBT that then leads me to utilise this Creative Method in support of Bob's preferred future by using a 'seed to flower' metaphor to begin this conversation. In Scene 2 the *My Life Rulz cards* are introduced. Originating from an REBT theory, it could be argued that this Creative Method is not as aligned with SFBT as the *Strength Cards for Kids*.

However, these cards were introduced using the client's construct of Magical Bob and they were used in service of enlarging his preferred way of being. This suggests when integrating Creative Methods into a counselling session, a SFBT practitioner needs to have a clear understanding of the theory that underpins the practice in order that the Creative Method is used in service of that approach. Without this, it ceases to be an integration and becomes eclectic or random.

Similarly, the Findings show that although I introduced or suggested nearly all of the Creative Methods, they became co-constructed activities when integrated with SFBT. In each Scene there were different Creative Methods used, and Bob willingly participated in the use of all of

them. Some were formal materials that I had bought with me and others were co-constructed at the time. In Scene 4, Bob adds his own “mutation” to what could have been perceived as a fixed handprint containing five fingers is an example of the latter. A practitioner might suggest the Creative Method, “however the development must be something the child either leads in or is happy to go along with” (Redgrave, 2000, p. 69). The co-constructed theoretical underpinnings of SFBT led to co-constructed use of the Creative Methods.

The Findings indicate that the recording of some of the Creative Methods work on the SFBT scale was an integral part of how I managed this integration. The scale became something that was threaded through the whole piece of work and helped connect the sessions together. It provided a way for Bob to acknowledge his work, the identity shift he had made and how he had got there. Recording things on the scale also invited an opportunity for Bob to take his work home.

This way of using an SFBT scale is a creative expansion of what practitioners would normally do. Hanton (2011) lists scales as: “being a way to validate client’s experiences and descriptions of their situation in the past, present and future, to serve as a benchmark of progression towards the client’s preferred future, to act as a tool of shared meaning, to act as a goal-orientated part of our conversations, to be an observational and comparative tool, to measure confidence and to measure the likelihood of something happening such as task completion” (p. 67). The scale that was co-constructed between Bob and I encompassed all but the final two of these attributes.

Although I struggled to find literature that discussed using scaling in the same way that Bob and I did, Milner and Bateman (2011) do write about using scales with pictures and characters at either end with children. In their section on scaling with children Berg and Steiner (2003) also give an example of using a rope as a scale and then taking a picture of the child standing at different parts of it and writing on the back of the picture the information or new accomplishments that accompany it. Ratner and Yusuf (2015) also record how they use mind maps to catch and record information from a session, and how they have found that children are often keen to take this home to record noticings between sessions.

Bob's scale seems an amalgamation of the above. It is a visual which records progress like a general scale, while also containing some information about his noticings of things that have been working. It isn't neat or tidy, however it is a slice of our work together that he somehow saw as significant. Today many counselling settings require notes and creative parts of the session to be scanned, uploaded digitally and then destroyed. This study indicates there seems to be some significance in having an ongoing piece of visual work for children that can be accessed and added to in each session.

The research Findings in this project align with existing literature (Bateman & Milner, 2011; King, 2017; Ratner & Yusuf, 2015; Berg & Steiner, 2003; Nims, 2007; Selekman, 1997; Taylor E. , 2009) which indicates that when working with children, Creative Methods are a helpful integration with SFBT and aid the overall aims of SFBT therapy. The Findings also contribute to the existing but scant research around the integration of Creative Methods with SFBT when working with primary aged children (Dell, 2017; Frels, Leggett, & Larocca, 2009) by suggesting this integration supports both a child's **sense of agency** and the ability for the child to remain the **expert** on their life.

What was offered?

“Without the expectation that things can get better, therapy makes no sense. In fact, the expectation that things can get better is the central presupposition behind all therapy” (De Shazer, 1988, p. 191).

The Findings indicate that by integrating Creative Methods into SFBT the child was better able to be positioned as the **expert**. King (2017) writes that “children are so creative and successful when they are acknowledged as their own expert and given a chance to discover their own solutions” (p. 104). The Findings suggest that more than “providing additional ways of looking at, seeing, remembering, expanding, re-describing, including, firming up, finding out, and celebrating” (Ratner & Yusuf, 2015, p. 120) the Creative Methods integration with SFBT offered a way to fulfil this underlying SFBT orientation of the client in a way that talk-therapy only would not. In Scene One, Bob was placed in the position of being the expert in his life with a sense of agency co-constructed by inviting him to choose what he would like more of in his life. The languaging of this however was moderated through the Creative Methods integration of the *Strength Cards for Kids*. In Scene Two there was the utilisation of Bob’s metaphor of Magical Bob. In her recent work around metaphors and SFBT, Pantaleao (2016) writes of how through the metaphoric story, “children can change meanings and develop unique concepts to elaborate on what they see the problem and solution to be” (p. 33). The metaphor of Magical Bob was pivot for the whole of this session, and by using this I positioned Bob as the expert on his life.

In Vygotskian terms, Creative Methods can perhaps be viewed as the tools that scaffold the actual to the possible. The Findings suggest that when working with children, the tool of

language, the basis of talk-therapy, is not enough. In a lovely turn of phrase, Berg and Steiner (2003) describe the use of Creative Methods when using SFBT as “communicating with children on their own terms” (p. 68). The Findings do support this and also suggest that the two tools, talk and Creative Methods, are coming together to *co-construct something more for each participant*. The integration of *The Bears* and the *My Life Rulz* cards added the invitation for languaging around thoughts, and pictures to do with feelings. These Creative Methods used in service of Bob’s preferred future invited an expression of language that Bob may not have been able to come up with on his own. The use of Creative Methods also acted as a bridge between myself the adult and the child. They allowed me to enter Bob’s world and him to enter mine. Without this integration, the power remains more firmly with the practitioner as they have more experience using the tool of language, and the child is less able to express themselves as the expert on their life.

One of the things that emerged from the Findings when integrating Creative Methods with SFBT is that it contributed both to a **sense of agency** in the child, while also acknowledging how the environment around the child might be part of the change. *The Strength Cards for Kids* used in Scene One helped contribute to Bob being able to describe what he initially wanted from our work together. One thing was to grow ‘I am honest’. In between Scene Two and Three a teacher notices the honesty that Bob shows in an interaction she had with him, and, notes it as different. As persons living in community, identity, and the change of identity “is appropriated by the individual through a process of interaction with others” (Berger & Berger, 1991, p. 10). The teacher identifies Bob’s honesty, and in Scene Three, Bob compliments himself on his “*Good honesty*”, a process of self-identification. It seems that here we are witnessing that identity is the interplay between the identification and self-identification, which for children means the significant others around them are part of the

process in reaching their preferred identity. SFBT relationship questions are therefore important when working with a child alone.

The labelling activity in Scene Three also became a springboard for further discussions which enabled a connection between Bob's agency and how the main institution he interacts with (school), contributes to that. This led to me suggesting to the school that they take a more SFBT approach by noticing what is working. Bob may have put words and labels he had heard other children saying about him in the "nuclear testing station", however the school's languaging was also contributing to the construction of 'truth' about this child and these can become normalised for the child and the school. Davies (2011) notes how "a therapist working within a social constructionist framework aims to collaboratively construct a new 'truth' with the child" (p. 81). This Creative Methods activity also invited Bob to be explicit about the actions he would need to take for the school to notice something different about him.

This circles around again to the interconnectedness between our views about ourselves, and professional and institutional discourses (Jones-Smith, 2016). Burr (1995) writes that "social practices are intimately bound up with social structure" (p. 8) Proposing a change to the school acknowledges this connection which has the end purpose of supporting Bob to do more of what is working. It also invited Bob, the school and Bob's family into the possibility of becoming part of a new narrative, essential in working towards preferred futures with children.

Solution-Focused language is structured around the behaviours that contribute to a preferred future. What is apparent in my Findings, is that the Creative Methods interventions I have used have often enabled Bob to redescribe himself in terms of identity, as well as eliciting preferred future descriptions. Scene 1 begins this way with the *Strength Cards for Kids* integration used as both a conversation around Bob's strengths, and an invitation to choose strengths he wanted to "grow from a seed to a flower" in his life. Bob chooses value statements; I am trustworthy, I am fair, I am honest. Similarly, in Scene 3 Bob rips up labels given to him by others that he no longer wants applied to himself, and, writes that he wants to be known as someone who gives nice comments and is trustworthy. In the final Scene Bob speaks in identity and preferred future terms also, saying; "*Now I'm this*". "*I'm here*". This suggests the inclusion of a 'preferred way of being', or the expansion of the preferred future seemed successful.

In her recent book, Metcalf (2017) speaks of this as a blending of SFBT and Narrative Therapy where clients redescribe themselves (narrative) and take new actions (SFBT) in line with this description. SFBT and Narrative Therapy also both align with social construction assumptions about 'self' in that humans are not fixed or immutable, with a 'self' to be found in therapy (Jones-Smith, 2016, p. 512). Rather 'self' is in constant formation (Anderson & Goolishian, 1992, p. 28). Considering continuous development throughout childhood and the re-evaluations that take place in this process, "questions about 'the person you are and the person you want to be' can be enormously revealing" to children (Ratner & Yusuf, 2015, p. 4).

I suggest these types of questions are also **hope inducing** to children, as in line with the tenants of SFBT, they move the child towards the language of possibilities. When a child is

immersed in a problem saturated environment, whether at home or school, they can begin to see themselves as the problem. “In addition to restricting our hope and thinking, problems also limit the way we view ourselves” (Murphy, 2014, p. 7). The Creative Method integrations with both SFBT and the Narrative concept of identity provide a counter to this. Rather than a diminished and restricted view of self, clients are invited into another way of identifying themselves in the present and future. SFBT questions then provide the means to find out how to get there.

The theoretical significance of the linking of identity (narrative) with preferred future (SFBT) was something that I was quite unaware of before undertaking this research, with this dual focus emerging as a particularly useful way of working with Bob. This resonates with the view of Taguchi (2009) that practice is always doing and practising theory whether we are aware of it or not. This practice-based piece of research has made explicit to me the theory that was already present in my work, thus enabling me to more intentionally adapt and mould it in future practice with children.

Silly and Serious

“Sense of humor is more interesting to me than humor itself, more than jokes and comedy skits. It’s a way of perceiving the world. A way of keeping our selves and each other sane, human, open, responsive, playful. A way of connecting, of recognizing each other, of affirming community” (De Koven, 2014, p. 43).

This study demonstrates and supports an interplay of silly and serious when counselling children. Humour and silliness, and the role they play in the counselling process, was not

the focus of this research. It was something that emerged between Bob and me, within and around the integration of Creative Methods and SFBT.

The literature around the use of humor in therapeutic work is minimal, receiving “only ancillary attention in the counseling literature” (Berg, Parr, Bradley, & Berry, 2009, p. 225). However, what literature there is, supports and promotes the appropriate use of humour in a therapeutic context. The Findings show humour, laughter and silliness between Bob and myself sprinkled throughout different sessions. In Scene Five we engage in an organically co-constructed game over the formation of a between session task. This led to an increase of energy in the room, more laughter, and, of course the serious outcome of a well formulated between session task. Humour in the therapeutic relationship can be used to enhance rapport and build trust (Kilgore, 2003) and sharing a laugh can be viewed as “a much quicker way of connecting with a child than is establishing ‘accurate empathy’” (Milner & Bateman, 2011, p. 38). Although writing from a medical context, Harari (2008) advocates the use of some humour and silliness is useful as long as the child still feels they have been taken seriously and their concerns have not be minimised. In terms of meta-communication within therapy, humour says to the child, “I am approachable and I invite your creativity. I take your concerns seriously, but I see you as a person, not as a problem child to be fixed” (Berg, Parr, Bradley, & Berry, 2009, p. 234). There is a lovely synergy between this view of humour and what a Creative Methods integration with SFBT offers. The Findings regarding this integration demonstrate creative engagement and the eliciting of Bob’s strengths and resources. Therapy was also focused around taking his preferred future seriously. The SFBT approach integrated with Creative Methods seems to lend itself to both the initiation and inclusion of humour in sessions with primary school children, which proved essential to the work with Bob.

In another synergy, humour, like SFBT is also collaborative. In a context that also demonstrates the interplay of levity and gravity, Schwebke and Gryski (2003) discuss clown work with children in hospital, suggesting that “in a very real sense, the child and the clown are equal players and partners” (p. 59). Similarly, in Scene Four, Findings show a Creative Method co-constructed handprint, and then an organically co-constructed game as part of the integration. This game resulted in shared laughter, and a humorous exchange regarding session feedback. In Scene Two, where Magical Bob appears, the playful, magical silliness that results is a collaborative effort. Bob’s creativity established Magical Bob and Normal Bob. I accepted and entered the construct by waving my wand, directing my questions to Magical Bob and later joining him in alien talk and some playful language exchange between Magical Bob and Blob. Humour, play and silliness can all be used to flatten the power differential between the therapist and the child because they are collaborative experiences.

While both my findings and the limited literature on this topic might support the appropriate use of humour and silliness in the counselling process with children, my Findings after Scene 2, show engaging in silly, playful behaviour was not always easy for me. “Play and humor are arts of the highest order, but because of their lack of concreteness and structure they are underused, unappreciated, and sometimes misunderstood” (Gladding, 2011, p. 156).

Although it might not always have felt comfortable for me, my co-construction with Bob in humorous and silly exchanges seemed to be an important aspect of our work together.

Kilgore (2003) suggests that when working with children in therapy, humour is “essential to engage the child in a corrective relationship, create an environment of safety and

understanding, and join with the child in respect for our shared humanity” (p. 46). Similarly, Gladding (2011) writes, “counsellors from any theoretical position are frequently quite helpful with clients if they introduce a measured amount of humor into their sessions” (p. 162). The interplay of silly and serious throughout this project is perhaps expressed and summarised best in how Bob chose to introduce me at the beginning of the Findings; “*She is funny, and she helped me with a lot of hard times.*”

Space

“Space is assumption. Space is rendered neutral, reified. We work around and in it, but are otherwise unaffected. Against such a definition, one might understand space as contributing to meaning-making and as, itself, produced” (Kuntz, 2010, p. 146).

During this project I was working as a counsellor in schools. A better, or fuller description, might be an itinerant school counsellor. I do not have a set office from which I practice, rather moving from school to school. Yet, when I began this project, I had an expectation that I would be using one reoccurring space within each school. In my work with Bob I have been confronted with a different reality. The Findings show that the six counselling sessions with Bob took place in five different spaces within the one school. These spaces were the context in which the therapy happened, yet they also need to be considered as more than a blank empty container that we walked into. Rather, the room was already produced before we entered, while also offering the possibility that it could be “altered for newly interpreted social practices” (Kuntz, 2010, p. 151). Qualitative research considers the active contribution space makes to human meaning-making as we are never divorced from our material surroundings.

It is recommended that when working therapeutically with children it “is easier and more effective in a room that has been specifically set up for the purpose.” (Geldard, Geldard, & Foo, 2018, p. 182). Not being able to use a room that is designed for work with children is perhaps one of the main differences when working across schools, compared to working from an agency office or being ensconced as a guidance counsellor in one school. There are limitations on the types of Creative Methods able to be used as everything needs to fit into a manageable sized carry bag. Sand tray, miniature work, and painting for example are not very practical to carry around. Even if they could be carried, all of the spaces apart from our final session would not have been conducive to the use of these potentially messier materials. Moving spaces therefore can have a limiting effect on the therapeutic process and the Creative Methods available to the therapist and child. However, although we were working in spaces that were less than ideal, the integration with SFBT and Creative Methods occurred successfully.

This conversation of space within schools for counsellors, is situated in the wider “spatial configuration of capitalism, in which space is used exchangeability in order to realise greater economic returns” (Hirst, 2011). In her research around hot-desking, Hirst uses the word ‘vagrancy’ to highlight loss of ownership of space, rather than the more popular, and possibly romanticised term, ‘nomadic’. In Scene One, I write of endeavouring to leave the space I was using, *“trying to make it look like I’ve never been.”* In the Intermission I write how I took things out of my bag *“to create a sense that this space is ours for the moment.”* In Scene Five I write of trying to create a sense of *“containment or cosiness”*. Although one piece of writing is focused on erasing presence and the other two on creating presence, both speak

to this issue of vagrancy. Despite these feelings it did not seem to impact on the integration of SFBT and Creative Methods.

Similar to the sessions Bob and I had in the Principal's office, Therese Steiner, another SFBT practitioner working creatively with children, records working with children in a director's office of a refugee centre due to lack of alternative space issues. She did not comment on the effects, rather using it as an example that ideal amenities are not essential for a good therapy session (Berg & Steiner, 2003). Milner and Bateman (2011) suggest that "where you are talking with children makes some difference, but not a lot" (p. 33). My research findings seem to indicate this pragmatic assessment also. When analysing the two sessions in the Principal's office for example, it was almost impossible to conclude any negative impact on Bob due to using a space normally utilised by the Principal. When I discussed with Bob that the issue of 'Space' was part of my Findings, he informed me our constantly changing contexts hadn't mattered to him. This might suggest the relationship with me was potentially more central, or, that possibly due to his primary school Modern Learning Environment, he was accustomed to continually changing spaces.

The Findings indicate the impact is more apparent on myself as the counsellor. As a counsellor and then as a researcher, it was I who noted and considered the changing spatial context of the sessions. There was both physical time and mental thought taken to arrange furniture, choosing how the room might be to best mitigate possible power influences and the setting out my materials. At the time, I was thinking I was (re)producing the room for the benefit of the child however it appears it was more for my own comfort. "Critical examining of these daily practices offers possibilities for more intentionally changing – (re)producing – our embodied social spaces" (Kuntz, 2010, p. 152). What else might I need to do or bring

with me so that I also can say, like Bob; “I belong. I do belong” in each new space I work in therapeutically?

Murphy (2014) writes that “...schools are not set up to accommodate counselling, which means we as counsellors need to adapt our approach to the school setting. This requires flexibility and innovation on our part...” (p. 9). However, I am also wondering what advocating I need to do for myself and this work. Where might the school be able to modify the environment to enhance the therapeutic work being done? With a wider lens, what does this issue say about the value or inherent devaluing of counselling in a primary school setting? This government initiative might currently be a pilot, however it would be unthinkable for counsellors in high schools to be working in such transient space arrangements. This perhaps speaks to governments needing to address the resourcing of space and not just personnel for new initiatives.

What is apparent to me after conducting this research is my awareness of what happens when I go into a school where I have a set office space. I breathe as I walk in. A sense of ‘home’ I said to a colleague recently. This sense of relaxing when walking into a counselling room that is both safe and familiar intrigues me. “Home is a matter of knowing your place and knowing that your place will be respected – therein do we experience both identity and security. Strip a people of that sense of place, deprive them of the kind of space that they feel is necessary to establish such a sense of place, and they are rendered homeless” (Walsh, 2006, p. 241). Perhaps I am taking it too far to talk of a counselling room as ‘home’ for a therapist. However, when therapy itself is often co-constructed conversations around identity and security, a constantly changing therapeutic space becomes part of that process

for the counsellor as much as the client. Space is therefore involved in the construction of narrative (Kuntz, 2010).

The Findings indicated that it was not just the physical space that had an impact on the counselling but also the capacity or 'space' in my own life. A counsellor can be seen as the main instrument for the work of therapy (Corey, 2005; Satir, 2000; Skovholt & Starkey, 2010), and the state of that instrument can be seen to have an influence on the counselling sessions. In this way, "a clinician's self-care is not viewed solely as benefiting the therapist alone, although the direct benefit to the helper is certainly a goal. It is also seen as having a subtle but powerful effect on the therapy process itself" (Wicks & Maynard, 2014, p. 11). In this project the Findings show the interactive influence of personal and work life. This also relates to Skovholt & Starkey's (2010) connection that a master therapist is a master person. In the counselling field it can often be work related experiences such as vicarious trauma or compassion fatigue that negatively influence the ongoing work of therapists and are the basis for the call to participate in self-care (Theriault, Gazzola, Isenor, & Pascal, 2015). However, this project suggests that this way of conceptualising the need for self-care is too narrow. The Findings present a more integrated, interactive and holistic understanding of life. This widens the concept of self-care from a compartmentalised technique that is related to work, to something that might be better described as a way of being.

General Implications

The implications of this project are that SFBT counsellors should feel encouraged to integrate Creative Methods into their practice with primary school children. The integration is less reliant on the counsellor's own creativity and more reliant on a strong understanding of

the assumptions behind SFBT. In this way, Creative Methods can be viewed as another tool a counsellor can introduce, just like scaling. This also may help demystify and bring confidence to those SFBT counsellors who currently work with adults and are feeling unsure of how to work with children in this approach.

This project indicates that keeping a visual scale capturing some of the Creative Methods work was helpful as it invited past work to be threaded through ongoing sessions and offered a 'take home' item to the child at the completion of the work. Counsellors can be encouraged to widen their view of the scale to include it becoming a creative piece that shows, and reinforces, the client's work and progress.

The widening of the preferred future to also include identity, or a preferred way of *being*, also seemed to be successful and this is possibly something that other SFBT counsellors could consider implementing in their work with children.

Alongside this study of Creative Methods, the interplay of silly and serious emerged in, around and within this integration. Engagement with the child's constructs is already an SFBT premise, however this study also suggests to counsellors working with primary school children that participation in humour, games and even what might be termed silliness is also important.

The issue of 'space' also featured in the Findings. Although this may be more relevant to counsellors who are working itinerantly in schools, the Findings have indicated that the

material context we work in has some influence. In this case, it was more obviously noted for me than the client. For counsellors this might mean noticing what spaces work best for them and advocating for the use of those areas above others.

Finally, counsellors need to consider that their overall capacity or lack of space in life potentially has an influence in the situated happening of a counselling session. This is more than caseload management. Rather, it suggests for the benefit of our clients in our professional settings, the integration of self-care is necessary in all aspects of our life.

Personal Implications

As this is a piece of practice-based research, it seems appropriate that I consider the implications this research has had directly on my practice. Before I began this research project, I wrote the following:

Will there be anything useful or helpful in the Findings? This research process seems to parallel a counselling session in that it is a journey into the unknown, a journey where I don't know in advance what might change.

One of the 'changes' that this research has enabled is a sense of increasing confidence in the integration of Creative Methods and SFBT in my practice when working with children. Researching my own practice has made clearer both what it is that I am actually doing in practice as well as *how* I am doing it, while also providing some support of its effectiveness. Alongside this, the theoretical base for my practice has both become clearer and developed

further, with the discovery of Linda Metcalf's work on an integration of SFBT with Narrative practice offering a key resonance for my ongoing practice.

I could cut and paste the general implications listed above in relation to both humour and space. These are directly relevant to my practice, and now that these have emerged, I cannot go back to not noticing them. Regarding 'space', I am aware that the completion of this thesis will create more capacity in my life and a potential slowing down. I am equally aware how quickly this could disappear. This study has confirmed for me that it will require self-care to be integrated into all aspects of my life to maintain the margin and sustainable pace of life required for my own wellbeing and the effectiveness of my counselling practice.

The Findings regarding humour bring me much joy. They were a surprise, and a delightful one at that. My curiosity around the role of humour in sessions is now fully engaged, and I suspect that this will be an ongoing 'study' for me.

Limitations

One of the limitations of this research is that it is a single case study, and it could be argued that this weakens the trustworthiness of this research. However, Morrow (2005) writes that "adequate amounts of evidence are not achieved by mere numbers" (p. 255). Polkinghorne (2005) recommends multiple interviews with each participant to add rigour, and alongside this Morrow proposes sufficient time and intensity in the setting and the use of multiple data sources. There are six interviews in total that have been included in this project and as previously listed, numerous data sources. Having another case study to sit alongside Bob's that involved a child of a different age or possibly gender would be interesting. However, the

lack of one does not necessarily weaken the Findings of this project, generated from in-depth engagement and analysis.

Another limitation considered is the lack of client voice, i.e. specifically capturing Bob's experience of the Creative Methods. This potentially would have strengthened the data collection for the second research question looking at what the integration of Creative Methods and SFBT enabled. This would possibly have required an interview with Bob by a third party after each session, which given the age of the child does not seem therapeutically wise. In lieu of this, I have had to interpret Bob's engagement from the videos and my reflections. I believe however, that the data and analysis is sufficiently robust to support the use of a Creative Methods integration with SFBT when counselling primary school aged children, and that sufficient rigour has been enabled by including Bob's voice in the Findings and sharing Findings with him.

Next Steps

Considering this is a single case study, researching this integration over a larger number of children would be a helpful next step. Researching if a Creative Methods and SFBT integration 'ages out' at some point and returns to language only would be interesting to me, as would researching at what age it potentially 'ages in'. Including a larger range and less formalised Creative Methods, and, also including movement would also be a natural segue from this research to further study.

The interwoven humour and silliness in this case also fascinates me and I am curious to know more. How do other practitioners working with children experience, participate in and

initiate humour in their practice? What do children or adults have to say about the experience of humour in therapy? What about working in cross cultural settings? Is humour a universal rapport builder, even though what is humorous might be localised and culturally specific?

Conclusion

So here we are. The build up to the event is past history, the drama is over and so is the post theatre discussion over supper. All that remains is the taxi ride home with the faint threads of memorable lines, and the echoes of the characters' shared laughter as companions.

However, for one of the characters there is a new show opening tomorrow. Like before there is no prepared script. However, she takes all of the learning from her previous theatre experience to this new show, for it will always be a part of her. In this next drama there will be different words and new lines co-constructed in the moment. Her co-star will undoubtedly be small in stature. That's just the type of roles she gets these days. They may even laugh and collaborate together on something creative. She will be asking questions, that's her skill and is part of why they are paired together. However, her co-star knows that she will follow his lead, and leave enough space for him to reply. The number of times they perform together is never known in advance. Yes, she has some idea due to what they call their scale (a funny theatre term) and sometimes her co-star has started to change costume, modify the way he acts and usually on the last show he appears a lot happier than when they first began. In the end though, it is her co-star who decides when it's the final curtain call.

Right now, that is the future, and since the taxi has arrived home, the present calls for a good night's sleep.

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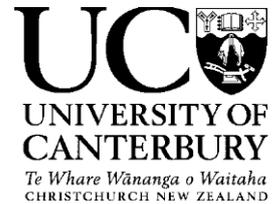
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APPENDICES

Appendix A – Parent, Caregiver and Whānau Information and Consent Form



Researcher/Counsellor

Nadia Dick

Telephone: 0278376013

Email: njf30@uclive.ac.nz

ERHEC Ref: 2018/43/ERHEC

Supervisor of Research

Shanee Barraclough

Phone: 03 3693532 ext 3532

Email: shanee.barraclough@canterbury.ac.nz

“Creating Talk: Integrating creative methods with Solution Focused Brief Therapy when counselling primary school children in New Zealand”

Information Sheet for Parents, Caregivers and Whānau

I am Nadia Dick, and this year I am working as a counsellor within the Mana Ake team. I am also a second year Master of Counselling student at the University of Canterbury. As a requirement of this qualification I am to complete a Research Project that looks into an aspect of my counselling practice. I am interested in the integration of creative methods (drawing, toys, play) within my solution-focused counselling practice with children, and so am asking permission from you for your child to be involved in this study. Solution-focused counselling is the model taught in my Masters course and is a positive and future-focused style of counselling. It can also be brief in nature, meaning children involved may experience benefit from a smaller number of sessions. I am aiming to see whether this talk-based therapy model works well with child clients when creative methods are integrated into it as part of the counselling process. The focus of this research is on my counselling practice, so participants will receive counselling as they would normally would. Even though I am both counsellor and researcher, at all times the therapeutic outcomes for your child will be foremost in my mind.

You have been approached to take part in this study because you have already given permission for your child to receive some support from a Mana Ake worker. However, as your child is under 18 years it is a

requirement of the Ethics Committee at the University of Canterbury to gain your consent for your child to be part of this research project.

If my agency, the school principal, you and your child agree to be part of this study:

- Your child will attend 3-5 weekly sessions of counselling of 30-50 minutes of duration which will be conducted on school premises. As a parent or care giver, you will be asked to attend 1 parent review meeting. This will happen even if you choose not to take part in the research.
- For the research, the sessions will be visually recorded. These will only be viewed by myself, my clinical and university supervisors. They will not be viewed by anybody else as the purpose of recording the sessions is to create transcripts for use in my research. You are also able to withdraw your consent for this at any stage.
- If your child does participate in the research, their participation is voluntary, and they will be asked after each session if they indeed want to continue. If your child does withdraw from the research, this will not affect their access to counselling at any stage.
- If your child does participate in the research, there will be a feedback form given to the child at the end of the research which will need to be filled in and posted. There will be a pre-paid envelope addressed to my agency provided. I will receive this information and it will form part of the data.
- Your child must give their permission to be involved in the research before it goes ahead. A form is included for them.

As a counsellor and researcher, it is my ethical responsibility to ensure the confidentiality of your child's information. In any published documents and presentations, a pseudonym designed by your child will be used, and any identifying information regarding the school will be taken out. Clinical notes will be kept by the agency as is normal for any other child receiving counselling. University of Canterbury regulations indicate that any other research data must be kept for 5 years with electronic data stored on the University server and a password protected hard drive. The transcript of the video will be kept for 5 years, however, the actual videos of the counselling sessions will be completely erased as soon as the project is finished.

As a parent/guardian, you will receive a brief document of the findings, and if you wish, you can also view the full thesis with the results through the UC Library, or on request. Please indicate to the researcher on the consent form if you would like to receive a copy of the summary of results of the project. Further, the study may be published in international journals and presentations.

This project has been reviewed and approved by the University of Canterbury Educational Research Human Ethics Committee, and participants should address any complaints to The Chair, Educational Research Human Ethics Committee, University of Canterbury, Private Bag 4800, Christchurch (human-ethics@canterbury.ac.nz).

If you agree to your child participating in this study, please sign the attached consent form, put it, and the child's assent form, in the envelope provided. If you text me when this is done (027 8376013), I can arrange to collect these when we meet to discuss your best hopes for your child.

Kind Regards

Nadia Dick

**“Creating Talk: Integrating creative methods with Solution Focused Brief
 Therapy when counselling primary school children in New Zealand”**

Consent Form for Parents, Caregivers or Whānau

- I have been given a full explanation of this project and have had the opportunity to ask questions.
- I understand what is required of me and my child if we agree to take part in the research.
- We understand that participation is voluntary and may be withdrawn at any time without penalty. Withdrawal of participation will also include the withdrawal of any information I and my child have provided should this remain practically achievable.
- I understand that any information or opinions I and my child provide will be kept confidential to the researcher and their clinical and university supervisors and that any published or reported results will not identify the participants. I understand that a thesis is a public document and will be available through the UC Library.
- I understand that all data collected for the study will be kept in locked and secure facilities and/or in password protected electronic form and will be destroyed after five years with the actual visual recordings destroyed at the end of the project.
- We understand the risks associated with taking part and how they will be managed.
- I understand that I can contact the researcher Nadia Dick njf30@uclive.ac.nz or supervisor Shanee Barraclough, shanee.barraclough@canterbury.ac.nz for further information. If I have any complaints, I can contact the Chair of the University of Canterbury Educational Research Human Ethics Committee, Private Bag 4800, Christchurch (human-ethics@canterbury.ac.nz)
- I would like a summary of the results of the project.
- By signing below, we agree to participate in this research project.

Name: _____ Signed: _____ Date: _____

Email address (*for report of findings, if applicable*):

If you agree to your child participating in this study, please sign above and, put it, and the child’s assent form, in the envelope provided. If you text me when this is done (0278376013), I can arrange to collect these when we meet to discuss your best hopes for your child.

Appendix B – Child Information and Consent Form

Creating Talk: Counselling and Research with Nadia

When you get counselling with Nadia, you can talk about anything you might be worried about, or if something is troubling you. Nadia will listen to you, and she also really enjoys getting to know you, hearing all about the things you like and what is going well for you. Sometimes Nadia will ask questions to help her understand things better. She also uses creative ways like drawing, games and sometimes toys to help you explain and understand your feelings.



Nadia is doing a research project with her counselling. This project is to find out how using drawing, special toys, games and some questions might help other kids just like you.



If you want to be part of this project, she might take a photo of drawings you do or things you make, and she will use a recording device to video record your session. The only other thing you would need to do for this research, apart from coming to 3 or so counselling sessions is to fill out a feedback form at the end which will go to her agency and then afterwards to her as part of the research.



If you want to be part of this project, she will keep your information safe locked in a metal filing cabinet and also with a password on her computer. It will be also be backed up on the University of Canterbury's server. Counselling notes are kept as per normal online like with any other child receiving counselling. However, any extra data that is only to do with research will be destroyed after 5 years as per the University of Canterbury's policy for Masters research. Please note, the transcript of the videos of the sessions will be kept for 5 years but the actual video will be deleted earlier - as soon as Nadia has completed the research. We will also give you a code name so when Nadia writes and talks about this research, no-one will know your real name, your parents name or the name of your school. If you decide half-way through to pull out of the research and only attend counselling, all research data relating to you will be destroyed but your counselling notes will be kept like any other child receiving counselling.

If you don't want to be part of the research, and just want to get counselling as normal, this is also fine. You don't have to be part of the research to get counselling with Nadia.

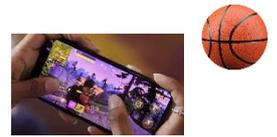


Would you like to work on this research project with Nadia?	YES	NO
I know I can stop at any time, and just have counselling and not be part of the project.	YES	NO
I know that what I tell Nadia won't be shared unless she thinks someone is hurting me or I'm hurting myself.	YES	NO
It's OK to have a visual recording of our session and photos taken of my work, so Nadia can use these in her writing.	YES	NO
Nadia can show the recording and photographs of my drawing to her clinical and university supervisors.	YES	NO
I would like a summary of the results of the project.	YES	NO

Creating Talk:

Counselling and a special project with Nadia

When you get counselling with Nadia, you can talk about anything you might be worried about, or if something is troubling you. Nadia will listen to you, and she also really enjoys getting to know you and hearing all about the things you like!



Sometimes Nadia will ask questions to help her understand things better.

She also uses creative ways like drawings, toys and games to help you explain and understand your feelings



Nadia is doing a special project with her counselling. This project is to find out how using drawing, special toys, games and some questions might help kids just like you.



If you want to be part of this project, she might take a photo of drawings you do or things you make, and she will use a recording device to record your session. She will also get you to fill in a feedback sheet which will go to her agency and then get passed on to her later for the project.

If you want to be part of this project, she will keep your information safe in a locked cupboard and also with a password on her computer and it will be also be kept safe on the University of Canterbury's server for 5 years. Your session notes are kept online like any other child getting counselling from Nadia, but the videos of the sessions will be deleted as soon as Nadia has completed this project. We will give you a code name so when Nadia writes and talks about this project, no-one will know your real name, your parents name or the name of your school. If you decide half-way through to pull out of the research and only attend counselling, all research data relating to you will be destroyed but your counselling notes will be kept like any other child receiving counselling.



Would you like to work on this special project with Nadia?	YES	NO
I know I can stop at any time, and just have counselling and not be part of the project.	YES	NO
I know that what I tell Nadia won't be shared unless she thinks someone is hurting me or I'm hurting myself.	YES	NO
It's OK to have a visual recording of our session and photos taken of my work, so Nadia can use these in her writing.	YES	NO
Nadia can show the recording and photographs of my drawing to her clinical and university supervisors.	YES	NO
I would like a summary of the results of the project.	YES	NO

Appendix C – Information and Consent Form for Principals



Researcher/Counsellor

Nadia Dick

Telephone: 0278376013

Email: njf30@uclive.ac.nz

ERHEC Ref: 2018/43/ERHEC

Supervisor of Research

Shanee Barraclough

Phone: 03 3693532 ext 3532

Email: shanee.barraclough@canterbury.ac.nz

“Creating Talk: Integrating creative methods with Solution Focused Brief Therapy when counselling primary school children in New Zealand”

Information Sheet for School Principals

I am Nadia Dick, and, as you know, this year I am working as a counsellor within the Mana Ake team. I am also a second year Master of Counselling student at the University of Canterbury. As a requirement of this qualification I am to complete a Research Project that looks into an aspect of my counselling practice. I am interested in the integration of creative methods (drawing, toys, play) within my solution-focused counselling practice with children, and so am asking permission from you to conduct this study with students from your school. Solution-focused counselling is the model taught in my Masters course and is a positive and future-focused style of counselling. It can also be brief in nature, meaning children involved may experience benefit from a smaller number of sessions. I am aiming to see whether this talk-based therapy model works well with child clients when creative methods are integrated into it as part of the counselling process. The focus of this research is on my counselling practice, and so I am seeking the ability to use a room to hold and record counselling sessions with participants from your school who have consented to be part of the research. There will be no information gathered or sought from yourself personally. Participants will receive counselling as they would normally would. Even though I am both counsellor and researcher, at all times the therapeutic outcomes for the child will be foremost in my mind.

If my agency, you, the parent/caregiver and the child agree to be part of this study:

- The child will attend 3-5 weekly sessions of counselling of 30-50 minutes of duration which will be conducted on school premises. The parent/care giver will be asked to attend 1 parent review meeting. This will happen even if they choose not to take part in the research.
- For the research, the sessions will be visually recorded. These will only be viewed by myself, my clinical and university supervisors. They will not be viewed by anybody else as the purpose of recording the sessions is to create transcripts for use in my research. The parent/caregiver is also able to withdraw their consent and the child their assent for this at any stage.
- If the child does participate in the research, their participation is voluntary, and they will be asked after each session if they indeed want to continue. If the child does withdraw from the research, this will not affect their access to counselling at any stage. Likewise, if any of the other required consents are withdrawn during the research, the associated research data gathering will stop but the counselling will still continue as per usual.
- The child must give their permission to be involved in the research before it goes ahead. A form is included for them in the information given to parents.

As a counsellor and researcher, it is my ethical responsibility to ensure the confidentiality of a participant's information. In any published documents and presentations, a pseudonym designed by the child will be used, and any identifying information regarding the school will be taken out. Clinical notes will be kept by the agency as is normal for any other child receiving counselling. University of Canterbury regulations indicate that any other research data must be kept for 5 years with electronic data stored on the University server and a password protected hard drive. The transcript of the video will be kept for 5 years, however, the actual videos of the counselling sessions will be completely erased as soon as the project is finished.

As a Principal you will receive a brief document of the findings, and if you wish, you can also view the full thesis with the results through the UC Library, or on request. Further, there is potential for the study to be published in international journals and presentations.

If you agree to your school participating in this study, please sign the attached consent form, and return to me.

Kind Regards

Nadia Dick

Appendix D: Information and Consent for Agency



Researcher/Counsellor

Nadia Dick

Telephone: 0278376013

Email: njf30@uclive.ac.nz

ERHEC Ref: 2018/43/ERHEC

Supervisor of Research

Shanee Barraclough

Phone: 03 3693532 ext 3532

Email: shanee.barraclough@canterbury.ac.nz

“Creating Talk: Integrating creative methods with Solution Focused Brief Therapy counselling with primary school children in New Zealand”

Information Sheet for Agency Services Manager

I am Nadia Dick, and, as you know, I am also a second year Master of Counselling student at the University of Canterbury. As a requirement of this qualification I am to complete a Research Project that looks into an aspect of my counselling practice. I am interested in the integration of creative methods (drawing, toys, play) within my solution-focused counselling practice with children, and so am asking permission from you to conduct this study through my work with students that will come onto my case load through Mana Ake. Solution-focused counselling is the model taught in my Masters course, and is a positive and future-focused style of counselling. It can also be brief in nature, meaning children involved may experience benefit from a smaller number of sessions. I am aiming to see whether this talk-based therapy model works well with child clients when creative methods are integrated into it as part of the counselling process. The focus of this research is on my counselling practice, so participants will receive counselling as they would normally would. Even though I am both counsellor and researcher, at all times the therapeutic outcomes for the child will be foremost in my mind.

If you, the school principal, the parent/caregiver and the child agree to be part of this study:

- The child will attend 3-5 weekly sessions of counselling of 30-50 minutes of duration which will be conducted on school premises. The parent/care giver will be asked to attend 1 parent review meeting. This will happen even if they choose not to take part in the research.
- For the research, the sessions will be visually recorded. These will only be viewed by myself, my university and clinical supervisors. They will not be viewed by anybody else as the purpose of recording the sessions is to create transcripts for use in my research. The parent/caregiver is also able to withdraw their consent and the child their assent for this at any stage.
- If the child does participate in the research, their participation is voluntary, and they will be asked after each session if they indeed want to continue. If the child does withdraw from the research, this will not affect their access to counselling at any stage. Likewise, if any of the other required consents are withdrawn during the research, the associated research data gathering will stop but the counselling will still continue as per usual.
- The child must give their permission to be involved in the research before it goes ahead. A form is included for them in the information given to parents.

Presbyterian Support's 'Feedback Forms' will be given to children participating in this research. However I am seeking your consent that I can place an asterisk on these forms so that these can be passed on to me for the purposes of data collection. The parent and child are aware that I will be accessing these forms. The child will have used their personally chosen pseudonym so that they cannot be identified. I am also requesting that these forms can be used for my research collection purposes only and not for the agency's. This means there is no chance of the child being identified by any other means within Presbyterian Support.

In any published documents and presentations, the child's pseudonym will be used, and any identifying information regarding the school will be taken out. Clinical notes will be kept by the agency as is normal for any other child receiving counselling. University of Canterbury regulations indicate that any other research data must be kept for 5 years with electronic data stored on the University server and a password protected hard drive. The transcript of the video will be kept for 5 years, however, the actual videos of the counselling sessions will be completely erased as soon as the project is finished.

You will receive a brief document of the findings, and if you wish, you can also view the full thesis with the results through the UC Library, or on request. Further, there is potential for the study to be published in international journals and presentations.

If you agree to your agency participating in this study, please sign the attached consent form, and return to me.

Kind Regards

Nadia Dick

“Creating Talk: Integrating creative methods with Solution Focused Brief Therapy counselling with children”

Consent Form for Agency

- I have been given a full explanation of this project and have had the opportunity to ask questions.
- I understand what is required of me if I agree to take part in the research.
- I understand that participation is voluntary and I may withdraw at any time without penalty. Withdrawal of participation will also include the withdrawal of any information I have provided should this remain practically achievable.
- I understand that any information or opinions I provide will be kept confidential to the researcher and their clinical and university supervisors and that any published or reported results will not identify the participants or my school. I understand that a thesis is a public document and will be available through the UC Library.
- I understand that all data collected for the study will be kept in password protected electronic form and will be destroyed after five years with the visual recordings destroyed at the end of the project.
- I understand the risks associated with taking part and how they will be managed.
- I understand that I can contact the researcher Nadia Dick njf30@uclive.ac.nz or supervisor Shanee Barraclough, shanee.barraclough@canterbury.ac.nz for further information. If I have any complaints, I can contact the Chair of the University of Canterbury Educational Research Human Ethics Committee, Private Bag 4800, Christchurch (human-ethics@canterbury.ac.nz)
- I would like a summary of the results of the project.
- By signing below, I agree for my agency to participate in this research project.

Name: _____ Signed: _____ Date: _____

Email address (*for report of findings, if applicable*): _____

Appendix E – Human Ethics Committee Approval



HUMAN ETHICS COMMITTEE

Secretary, Rebecca Robinson
Telephone: +64 03 369 4588, Extn 94588
Email: human-ethics@canterbury.ac.nz

Ref: 2018/43/ERHEC

1 October 2018

Nadia Dick
College of Education, Health and Human Development
UNIVERSITY OF CANTERBURY

Dear Nadia

Thank you for providing the revised documents in support of your application to the Educational Research Human Ethics Committee. I am very pleased to inform you that your research proposal "Creating Talk: Integrating Creative Methods With Solution Focused Brief Therapy When Counselling Primary School Children in New Zealand" has been granted ethical approval.

Please note that this approval is subject to the incorporation of the amendments you have provided in your emails of 17th and 29th September 2018.

Should circumstances relevant to this current application change you are required to reapply for ethical approval.

If you have any questions regarding this approval, please let me know.

We wish you well for your research.

Yours sincerely

pp

R. Robinson

Dr Patrick Shepherd
Chair
Educational Research Human Ethics Committee

Please note that ethical approval relates only to the ethical elements of the relationship between the researcher, research participants and other stakeholders. The granting of approval by the Educational Research Human Ethics Committee should not be interpreted as comment on the methodology, legality, value or any other matters relating to this research.

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