

The Analysis of Solution-Focused Brief Therapy from a Clean Language Perspective

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Abstract

Introduction: *This paper compares and analyses Solution-Focused Brief Therapy (SFBT) through the paradigm of Clean Language and Symbolic Modelling at three levels: intention, process and practice.*

Objectives: *The aim is to identify specific similarities and differences between the two approaches in order for practitioners of both to mutually benefit.*

Methods: *A high-level comparison of SFBT and Symbolic Modelling approaches; a line-by-line linguistic analysis of a representative SFBT transcript using models from Symbolic Modelling such as: ‘vectoring’, the Problem-Remedy-Outcome model and Clean Language; an examination of a sample of common Solution-Focus questions for metaphors, presupposition and ‘leading’ syntax, with alternative ‘cleaner’ versions provided.*

Results: *Examples of similarities and differences between the two approaches at the level of intention, process and practice were identified. A selection of SFBT questions were modified to show how they could be cleaner, i.e. simpler, contain less therapist-introduced content (especially metaphors) and fewer leading presuppositions, giving the client a wider scope within which to answer. Areas of SFBT which could be given more attention in Symbolic Modelling were also identified.*

Conclusions: *While Solution-Focused Brief Therapy and Symbolic Modelling have broadly similar aims, these are often achieved by quite different means. With minor modifications, some of the basic principles, process and practices of Clean Language could be incorporated into Solution-Focused Brief Therapy and some of the methods of SFBT could be given more attention in Symbolic Modelling, while preserving the unique nature of both.*

Keywords: *Clean Language, Metaphor, Solution-Focus Brief Therapy, Symbolic Modelling, Transcript Analysis*

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I. Introduction

The Solution-Focused approach

Solution-Focused Brief Therapy (SFBT), sometimes known as Solution-Focused Therapy, is a therapeutic approach developed by American psychotherapists Steve de Shazer and Insoo Kim Berg in the late 1970s (de Shazer, 1994; de Shazer & Dolan, 2007). The essence of a Solution-Focused approach has been summarised by Iveson, George and Ratner (2012, p. 3) as: “to look for resources rather than deficits; to explore possible and preferred futures; to explore what is already contributing to those futures; and to treat clients as the experts in all aspects of their lives.”

In comparison with other more classical therapies, Solution-Focused Brief Therapy is more focused on finding solutions, less interpretative of problems, less instructive and rarely confrontational. Two meta-analyses (Kim, 2008; Stams, et al., 2006) have shown the usefulness of SFBT in individual, family and couple therapy, across a range of age groups, backgrounds and cultures. The approach uses questions as its primary tool and practitioners expect to see changes in a relatively short period of time, often 1-5 individual sessions (Jackson & McKergow, 2002).

Over the years, specific SFBT questions have been defined, the most common of which come under the headings of Miracle, Exceptions, Coping and Scaling. *Miracle* questions are future oriented. They invite clients to consider how their life will be different if ‘a miracle’ occurred and the current problem ceased to exist. Then, by identifying and highlighting *Exceptions* in a client’s life that are counter to the problem, small changes can be identified and implemented. Similarly, *Coping* questions build on the strengths and resources clients already have, which can help them develop solutions that uniquely fit them and their circumstances. *Scaling* questions (from 0 to 10) are used to assess the present state and to measure progress towards the client’s goals.

The structure and flow of an SFBT session

Figure 1 depicts the key elements and general flow of a Solution-Focused Brief Therapy session. Each box represents a number of questions designed to elicit certain kinds of information from the client. Once the initial contract and preferred future are established, the remaining procedures are utilized in relation to the way the client responds. The four shaded boxes represent questions that can supplement or amplify any of the others.

Clean Language

Clean Language is a linguistic method from which a number of facilitatory approaches have been

created. The fundamentals of the approach were developed in the 1980s by the New Zealand-born counselling psychologist David Grove. While working therapeutically with victims of sexual abuse and war veterans, Grove observed that they used metaphors to describe their emotions and traumatizing experiences. He also noticed that when these metaphors were explored using Clean Language, they would develop into a rich embodied perceptual landscape that had a logic and a coherent structure (Grove & Panzer, 1989).

Clean Language combines four aspects of communication (Lawley & Tompkins, 2000), namely *syntax* (the structure of the questions invites the client to attend to particular internal aspects of their experience and minimize the cognitive load on the client), *wording* (the introduction of facilitator content is virtually eliminated while maximum use is made of the client’s exact lexicon), *vocal quality* (voice speed, volume and tone are varied to maintain a congruence with the client and their metaphors, and to maintain the client’s inner-directed state), and *non-verbal* communication (gestures and eye-points used by the facilitator are kept congruent with the client’s perspective and the location of the metaphors in his/ her perceptual space).

Lists of the *basic* Clean Language question set are widely available. They contain between 8 and 12 specially designed questions which ensure the facilitator-therapist’s own metaphors, interpretations and assumptions do not intrude on clients’ perceptions. At the same time these questions allow the facilitator to invite clients to attend to particular aspects of their verbally or non-verbally expressed experience. A systemic feedback loop between the client and their inner-world stimulates the client’s self-learning and self-change process. The basic clean questions commonly account for up to 80 per cent of questions in a session. These however can be supplemented by *specialised* or *contextually clean* questions which are used only when the inherent logic of a client’s information permits (Lawley & Tompkins, 2000).

Although approaches based on Clean Language were originally used in therapy (Hyer & Brandsma, 1997; Lawley & Manea, 2017; Owen, 1989; Pincus & Sheikh, 2011; Rees & Manea, 2016), they have also proven their efficacy in coaching (Doyle & McDowall, 2015), education (Groppel-Wegener, 2015; Nixon & Walker, 2009a), organisations (Barner, 2008; Martin & Sullivan, 2007; Nixon & Walker, 2009b; Robinson, 2013), and more recently as a qualitative research methodology (Cairns-Lee, 2015; Lawley, 2017; Lawley & Linder-Pelz, 2016; Linder-Pelz & Lawley, 2015; Nehyba & Svojanovský, 2017; Tosey, et al., 2014).

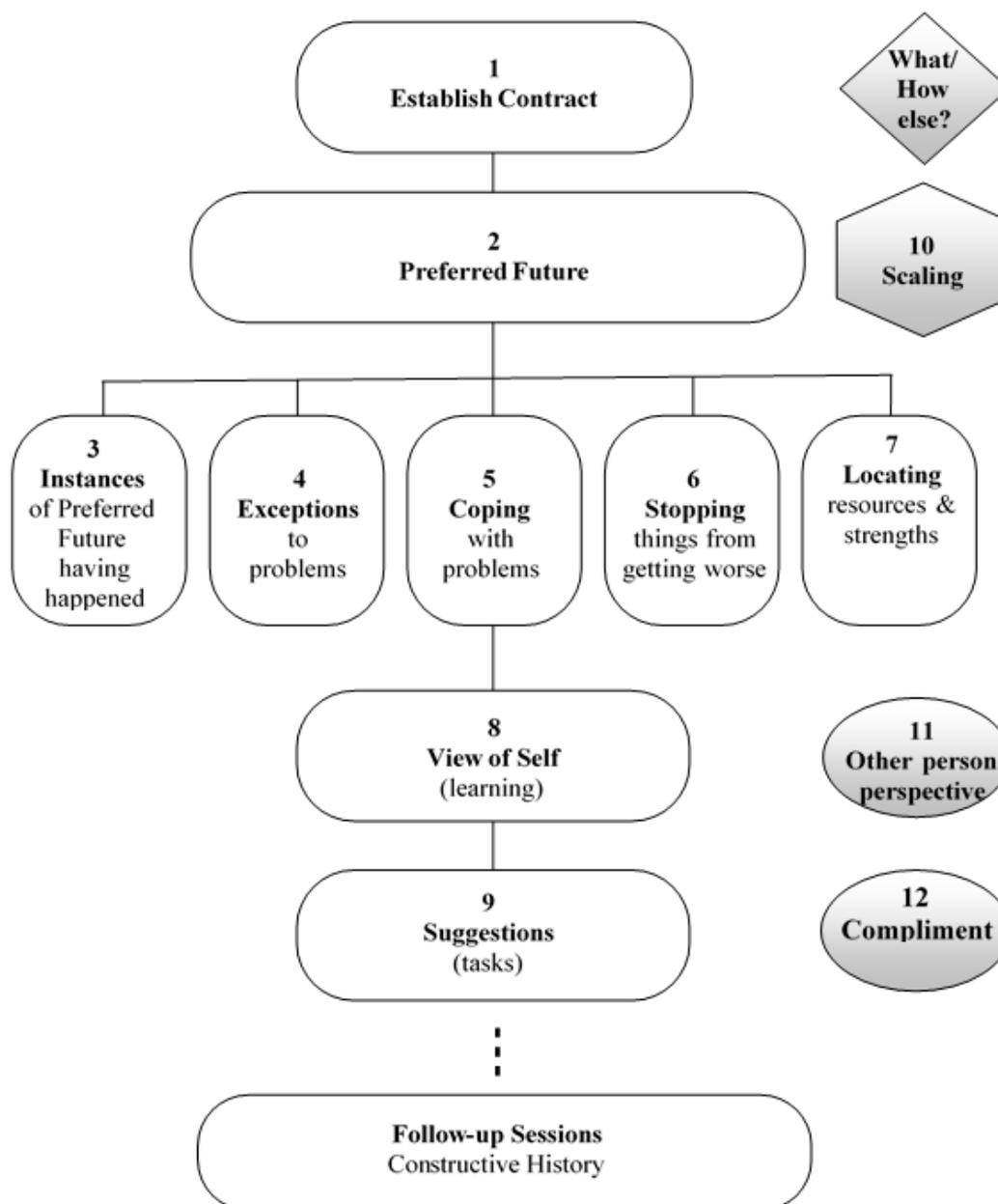


Figure 1: Structure and flow of a Solution-Focused Brief Therapy session (based on Iveson, George & Ratner, 2012)

Symbolic Modelling

Symbolic Modelling was developed by British psychotherapists James Lawley and Penny Tompkins after extensively studying Grove's approach (Lawley & Tompkins, 2000; 2011). It is an outcome-oriented process which uses Clean Language to facilitate the client to self-model how their thoughts, feelings and behaviors work as an integrated whole, and how these can reorganize to produce a more desirable life. The primary content of the client's model-of-self comes from their autogenic metaphors and the idiosyncratic logic that binds them together. As the client's metaphoric landscape

evolves, so do their feelings and thoughts, and so does their relationship with their own perceptions.

Since clients' desired outcomes frequently change as a session progresses (i.e. they are not fixed goals), in Symbolic Modelling they are regarded as a series of *dynamic reference points* that remain central throughout the session. Unless the client's desired outcomes are foregrounded, the facilitator's intentions will likely encroach on the session, and the process will become less 'clean'. Rather than seeking to solve problems or initiate change, the facilitator-therapist waits for a spontaneous change to occur and then 'matures' the change to see what effect it has on the rest of the client's landscape.

Vectors

In top-down approaches to therapy, once the issue has been identified the therapist selects a method or technique with a relatively clear idea of the direction of the process, and his/her job is to guide the client towards that end. However, in bottom-up approaches, such as SFBT and Symbolic Modelling, the developmental pathway is created step-by-step and the end result is not known until the client arrives there. Therefore, the therapist needs to constantly modify the process direction by taking into account each new piece of information provided by the client.

Like SFBT, Symbolic Modelling uses questions as its primary method. The metaphor ‘vector’ is used to represent a set of questions which, for a short time, orient the client’s attention in a certain direction (Tompkins & Lawley, 2008). Vectors do not necessarily have a specific end point. Instead, ‘vectoring’ requires the facilitator to take into account the logic of the client’s content, while keeping the process heading in a certain direction – until a change to another vector is indicated. Retrospectively, the overall flow of an individual session can be represented by the sequence of vectors.

In Symbolic Modelling common vectors include: Identify a desired outcome; Develop a desired outcome landscape; Convert a concept/state to an embodied metaphor; Identify a sequence; Explore the effects of a desired outcome landscape; Identify conditions necessary for change; and Mature changes. Each of the twelve boxes in Figure 1 can be thought of as representing a commonly used vector within SFBT.

The Problem-Remedy-Outcome (PRO) Model

Another important concept within Symbolic Modelling is the PRO model (Tompkins & Lawley, 2006). It provides specific linguistic guidelines which indicate whether, at any moment, the client is attending to one of three classes of experience: a **P**roblem, a proposed **R**emedy or a desired **O**utcome. In each case the client’s experience is acknowledged and a specific clean question invites them to formulate a desired outcome for the particular metaphorical or real context they have specified. The three categories of experience can be summarized as:

Problem — a current difficulty the client does not like

Remedy — a desire for a problem to not exist; to be reduced or avoided

Outcome — a desire for something new to exist

The Symbolic Modelling facilitator uses PRO for two purposes: to model the client’s experience; and to guide their decisions throughout the session. Below, however, it is used to annotate an SFBT session from a clean perspective.

II. Method

The research was undertaken with three objectives: (1) to identify similarities and differences between SFBT and Symbolic Modelling, that illuminate the methodology of both approaches; (2) to suggest ways in which aspects of Clean Language could be adopted by SFBT therapists who wish to minimize the imposition of their content and increase the utilization of metaphors generated by the client; and (3) to identify features of SFBT that could be adapted by practitioners of Symbolic Modelling.

SFBT and Symbolic Modelling were compared at three levels: intention, process and practice. A high-level comparison is shown in Table 1. Later a more detailed line-by-line review of an SFBT session reveals a number of similarities and some subtle but important differences in the choice and use of questions. Lastly, a selection of SFBT questions are analysed from a Clean Language perspective for complexity, presupposition and leading structure. Alternative, cleaner questions are suggested; they have a similar intention while offering the client more freedom to answer using their own lexicon and in their own manner.

III. Case Study

The following transcript comprises the first 70 exchanges of an initial SFBT session (Carlson & Kjos, 2008). It was chosen as representative of the approach since the therapist (T), Insoo Kim Berg, was a co-founder of SFBT and Cotton’s analysis (2010, p. 34) “confirms the accuracy of Berg’s application of solution-focused techniques as noted in the patterns of her question utilization”.

The transcript in Table 2 is annotated using a Symbolic Modelling (SyM) and Clean Language (CL) lens, primarily identifying client-described problems, remedies, outcomes, resources and metaphors which are marked by underlining. Therapist-introduced metaphors and other content are also highlighted and some examples of alternative Clean Language questions (CLQ) are provided. The syntax of CLQs is shown by the words in **bold** while un-bold words originate with the client.

The client (C), Robin, is a white female presenting with an issue of an unsatisfying relationship with her husband. Note ‘V’ stands for ‘vector’ and the numbers refer to the boxes in Figure 1. Many of the therapist’s repetitions and confirmations such as “OK” and “right”, and the client’s “umms” etc. have been removed for ease of reading.

Table 1: High-level comparison of SFBT and Symbolic Modelling

Solution-Focus Brief Therapy (SFBT)	Symbolic Modelling (SyM)	Comparison and comments
<p>Contract “What are your best hopes from our talking together?”</p>	<p>Desired outcome “And what would you like to have happen?”</p>	<p>A similar aim, SyM accepts vaguer, metaphorical, internal, and less under-the-client’s-control desired outcomes than is recommended in SFBT.</p>
<p>Preferred future A detailed description of what will be different in a client’s everyday life of their hoped-for future.</p>	<p>Desired outcome landscape An embodied four-dimensional (metaphoric) representation of the client’s desired outcome.</p>	<p>In SFBT the emphasis is on external behavior in actual contexts (especially those which can be observed by others), SyM accepts whatever constructs the client presents, and pays particular attention to the perceptual structures implied by the client’s use of metaphor.</p>
<p>Negative outcome A desire for the absence, cessation or reduction of a problem. “What will you be doing <i>instead</i> of [problem]?”</p>	<p>Proposed remedy Same definition as SFBT without the negative undertone of ‘negative’. “And when [problem is remedied], then what happens?”</p>	<p>SyM and SFBT have similar aims for similar reasons but these are achieved in different ways: - SFBT is said to ‘overlook’ problems, although they are artfully used in the vectors: Exceptions (V4) Coping (V5) and Stopping (V6). - SyM accepts the problem and asks what the client would like <i>when there is a problem</i>.</p>
<p>Locating resources</p>	<p>Identifying resources</p>	<p>Although SFBT talks about ‘locating’ resources, they do not mean it spatially. SyM supports the client to embody resources through locating them in their perceptual space, e.g. “And where is [resource]?”</p>
<p>Is a conversation, a dialogue</p>	<p>Establishes a triologue – the client’s ‘inner landscape’ is the third party.</p>	<p>A triologue is achieved by: - Facilitating the client to self-model their inner processes - Attending to their embodied metaphors - Use of ‘Where?’ questions - Eye and head pointing to the location of client’s symbols - Regular recapping of the symbols, relationships and logic forming the landscape.</p>
<p>SF therapists focus on observable behaviours and ‘stay on the surface’.</p>	<p>SyM follows the client’s attention into their inner world.</p>	<p>SyM considers that the events which happen inside a client’s mind and body are at least as important as those that happen outside.</p>

Table 2: SFBT transcript annotated from a SyM and Clean Language perspective

Line No.	SFBT transcript	Annotation from SyM & CL perspective
T1	Let me ask you, what do you suppose needs to be different in your life that will let you know it was a good thing that you came and talked to me today? That it was a good thing you had done this?	First SFBT vector (V1): Establish Contract. From a clean perspective this is a highly complex question which contains several leading presuppositions. CLQ: And what would you like to have happen?
C1	Probably, helping me realize that a lot of things that go on are just normal everyday life, that I'm no different than anybody else. My experiences are all the same.	A desired Outcome which is likely to be a means-to-an-end; "realize" for what purpose?
C2	Cause sometimes... <u>I sometimes blow things out of proportion</u> and think only those things happen to me, but when in fact, they're just normal everyday occurrences.	A metaphor for a Problem giving a clear description of <i>how</i> it occurs perceptually.
T3	Okay, okay. So, suppose you find that out. That what's happening to you and how you react to things are pretty normal. How is that going to be helpful, how would that be helpful for you?	Seeking to identify the "ends". CLQ: And when you realize you are no different than anybody else, and things that happen are just normal everyday occurrences then what happens?
C3	<u>It gives me peace of mind.</u>	Desired Outcome metaphor.
C4	It lets me know that I'm not the only one out there <u>pulling my hair out</u> (laughter).	A metaphor (probably) for a Problem.
T5	Okay, all right. And so you have peace of mind and you say, "Ahhh, I'm like everybody else, I'm no different."	Recaps client's description using her words, i.e. uses Clean Language.
C5	Well, in the things that happen to me, how I react to those things is what will make me unique.	
T6	Right. So, you react when you know this. You will react, "Oh well, <u>it was just one of those things that happens to people.</u> "	Therapist paraphrases (i.e. changes) client's language.
C6	Right, instead of <u>getting frantic.</u>	Problem.
C7	I'd be much calmer.	Desired Outcome.
T8	Calm about your reaction to whatever. [C8: Right, right.]	CLQ: And what kind of calm is that calm?
T9	Okay. <u>That makes sense.</u> So, <u>suppose</u> you are calm. You say, "Oh well, you know, one of those things in life" and be <u>able to go on.</u> <u>I guess that's what you're talking about.</u> [C9: Right, right.]	CLQs avoid using any of the underlined words.
T10	Instead of being frantic, you just say, "Okay, well, you know, take it with a grain of salt and just go on with your life." [C10: Right.]	Therapist introduces more metaphors, repeating the "go on" metaphor.

T11	What would that be like for you?	Second SFBT vector (V2): Establish Preferred Future. CLQ: And when you have peace of mind and you are much calmer, where is that calm?
C11	It would be control. I'd have a lot of self-control.	Desired Outcome metaphor.
C12	That's one thing I probably lack the most.	Problem.
C13	I'd be easy going. I wouldn't constantly be thinking all the time and it would just be matter of fact. I wouldn't be over-analysing situations.	(1) desired Outcome. (2) proposed Remedy to a Problem, and (3) desired Outcome. (4) proposed Remedy to a Problem.
C14	I seem to be very analytical.	A meta-comment indicating a Problem with own Outcomes and Remedies.
T15	Okay. So, what would you do <u>instead</u> of analysing then, when you've <u>got that point</u> ?	Rather than "instead" the CLQ asks: And when you over-analyse what would you like to have happen? Therapist introduces a metaphor.
C15	I'd just <u>throw it up to the wind</u> and not worry about it.	A metaphor for a proposed Remedy.
T16	And say, "Oh well, <u>that's life.</u> " <u>That's what you would say?</u>	Puts words into the client's mouth. Tag questions are forbidden in CLQs.
T17	"Oh well, <u>that's how it goes.</u> "	Ditto.
T18	And just may be able to <u>move on with your life.</u>	Introduces a metaphor similar to the "go on" of T9 and T10.
C18	Right, and not think it is <u>going to be the end of the world.</u> Tomorrow's a new day.	A proposed Remedy, "not think", to a metaphor for a Problem.
C19	I sometimes look at a situation and study it too much and think that <u>my whole world revolves around the decision</u> that I make or how I react. When, in essence, it doesn't.	Metaphor for a Problem.
T20	Really, okay, all right. So, suppose you are able to do that. What would people around you notice different about Robin that would let them know, "Ahhh, she is able to let things blow into the wind and then <u>go on with her life?</u> "	New SFBT vector: Other Person Perspective (V11) within a Preferred Future (V2). Fourth introduction of a "go/move on" metaphor. CLQ: And when you'd just throw it up to the wind and have self-control and be much calmer and peace of mind, how will others know that's how you are?
C20	They would probably say that I'm finally <u>growing up.</u> (laughter)	A desired Outcome by others that is likely a means-to-an-end metaphor.

C21	They'd say that I was more easy going, not stressed out, more fun to be around.	Others' (1) desired Outcome, (2) Remedy to a Problem, (3) desired Outcome.
T22	More fun to be around. Okay. Are you married? [C22: Yes]	
T23	Okay. So you live with this man you are married to? [C23: Yeah]	
T24	Okay. What would he say?	CLQ: And what would he like to have happen?
C25	He'd say that <u>nothing gets to me</u> . He'd be surprised that <u>nothing gets to me</u> .	Metaphor.
T26	He'd be surprised. So that's what he would say. "Ahhh, nothing gets to Robin anymore. She is <u>handling it</u> ."	Therapist uses client's metaphor "gets to" and then introduces a new metaphor.
C26	She's handling it, yeah. His question would be so, like, how long is it going to last? (laughter)	Client follows therapist's lead.
T27	Or I was thinking, what have you been drinking?! (laughter)	CLQ: And is there anything else he'd say?
C27	Yes, yeah, well. Usually he's always, "Well, what book have you read lately?"	
C28	"What answers have you figured out now?" Cause he knows I have a tendency sometime to even try reading different books, trying different ideas of how to just handle life. And he'll say, "Oh, so, what are we trying this week."	
T29	So he will see you, what, <u>setting aside those books</u> ?	Assumption. Cleaner question: And what will he see?
C29	If I tell him that I didn't get it from a book, yeah, he'd be like, "She's putting the books", he'd be like, "Okay, what's really going on".	
T30	Oh, really. So, he finds you easy going, fun to be around, sort of, say, you're in control. Well, tomorrow is another day. I'll just start over. When you are able to finally do that, he sees you doing that, what would be different about him? What would he do different?	CLQ: And when you [recap desired Outcome attributes], then what happens?
C30	I think he'd eventually be calmer. Yeah, he wouldn't be, have such a quick temper. Well, actually, in some instances, he might try harder to get at me, to get me going get me upset. But eventually he would give up and just...	
T31	And say, " <u>This is for real</u> ."	Introduced content.

C31	This is the real thing. She has really changed.	Client uses therapist's word.
T32	This time this is for real. Ahh, right.	
C32	Right. Then he'd eventually, well, I, I, I'm a firm believer, and it works. I know it works, but like if he comes home and he's, he's angry and is using a harsh tone or a loud voice if I <u>just remain calm and speak softly</u> eventually, he starts <u>levelling out</u> . So, it eventually <u>rubs off</u> . So, hopefully, he would be the same.	Same desired Outcome as C7 in the Problem context. Metaphors for the <i>effects</i> of the desired outcome happening.
T33	It sounds like you've tried that.	New SFBT vector (V3): Instances of what has worked before.
C33	I do.	
T34	You do? You do try that sometime on him?	
C34	And it works.	
T35	Okay. When was the most recent time you had been able to do that?	
C35	Sunday.	
T36	Sunday? It was three days ago.	
T37	Okay, <u>tell me</u> what happened. What did you do?	Therapist's personal pronoun "me" is not used in CLQs.
C37	[Client's example removed]	
T38	Is that different for you, what you had done on Sunday?	
C38	It takes a lot of <u>initiative on my part</u> to do that. Most of the time I would have probably said, I'm not doing it, and it would eventually would have <u>gotten into a fight</u> . But instead I just, it's one of those, I sort of <u>pick my battles</u> so to speak, what I'm going to <u>stand up</u> and say no, I'm not going to do or what I am going to do, and <u>not back down</u> on it. And if I do that, then I pretty much have my own plan worked out how I'm going to do it. But if I, if I don't know really one way or the other, that's when it usually <u>gets out of control</u> .	- A Resource and a necessary condition for her desired Outcome. - A metaphor (probably) for a Problem. - Three Resource metaphors. - Metaphor for a Problem (same as C11).
T39	So, when you <u>pick your battle</u> , that's when you are in <u>control</u> of things? You are in self-control?	Uses two client metaphors in a leading question structure. CLQ: And when you pick your battle, what happens to self-control?

C40	Yeah. It's like if I know I want to do something, <u>I'm not going to let anything stand in my way</u> . I will be, <u>I won't turn a deaf ear</u> . I'll listen if he has objections or, or, other people have objections no matter, no matter what it is, not only in the marriage, but then I'll say, well I've already made my decision. These are the reasons I made my decision. I'm going to do it. End of discussion. And, that's when I have real control.	Two more Resource metaphors.
T41	Is that what you mean by picking your battles?	CLQ: And is that the same or different to picking your battles?
C41	If it, if it's something I really want to do and believe in.	
T42	And you're <u>definite about...</u>	Introduced content.
C42	And I'm definite about it.	Client uses therapist's words.
T43	<u>This is the right thing to do.</u>	Introduced content.
C43	Right. No one's going to <u>change my mind</u> . I'm not going to <u>let anybody get to me</u> , and I'm not going to get upset by what anybody says.	Remedies that have worked before are therefore now Resources.
T44	I'm going to do that you're not going to <u>let him bother</u> you. No matter what he said. So, how did you know that on Sunday that's your battle?	Therapist changes client's metaphor. Clean question.
C44	That, I, I really didn't know.	
T45	What <u>told</u> you that's the battle.	Assumed representation system.
C45	Well, I guess it was that I didn't want to fight. I didn't want to get into an argument about it. It was not worth it. So, therefore, I just wasn't going to do it. No matter what he said, I wasn't going to <u>let it bother</u> me. Because I didn't want to, ...	- A Remedy that has worked before is now a Resource. - Client uses therapist's metaphor.
T46	And <u>you knew that</u> . [C46: Yeah.]	Therapist tells client her experience, CLQs always ask.
T47	And you knew that. [C47: Yeah.]	Ditto.
T48	<u>Wow</u> . How did you know that?	SyM aims for the client to embody their experience: And when you didn't want to fight, where is that not want to?
C48	I don't know	
T49	How did you decide that?	Use of client's process word "decision" (C19, C40). CLQ: And when you know what you want to do and you've made your decision, what kind of decision is that?
C49	I don't know I was tired for one. Plus, it's a repeat pattern.	
T50	Oh! Okay. So, you've been through this before.	
T51	Okay. So <u>you knew it was coming</u> .	Introduced metaphor.

C51	I knew it was coming. By the comments he made, and I just thought, I'm not going to do it again. I'm not going to argue with him. I'm not going to get upset. I'll just, I'll just, no. I'm just going to get out of here for a while.	Client uses therapist's metaphor. More Remedies that worked and are therefore Resources.
T52	<u>Wow, wow.</u>	
C52	So... It <u>takes</u> almost <u>guts</u> on my part to do that.	Internal and embodied Resource metaphor.
T53	Was it <u>hard</u> Sunday? [C53: Yeah]	Start SFBT vector (V5): Coping with Problems. Therapist changes client's metaphor with a leading question.
T54	It was hard.	Ditto.
T55	For you to decide this is it. I'm <u>going to stick to my ground</u> . This is my ground. I'm <u>not going to move</u> , and I'm not going to argue about it.	Introduces metaphors related to (not) movement again (see T9, T10, T18, T20).
C55	It wasn't hard to decide. It was hard to <u>carry it through</u> .	Client provides her own metaphor.
T56	But you did. [C56: Yeah]	
T57	How?	
C57	I guess it's the <u>will inside</u> of me.	Internal Resource.
T58	Really. Are you that kind of person, that has this <u>strong</u> will?	Leading syntax, aiming to generalize the resource to a personality trait? CLQ: And when there is the will inside of you, whereabouts inside?
C58	Yes and no or it's one of those things. Sometimes I, I'm really <u>strong</u> willed, and other times I'm not. It, it sort of depends...	Client uses therapist's metaphor.
C59	How I'm feeling at that particular moment.	
C60	One thing that I, I really dislike about myself is I <u>let my emotions take too, too much control</u> .	Problem, again using "control" metaphor (see C11, C38).
T61	Really. But you didn't Sunday.	CLQ: And when you let your emotions take too much control, what would you like to have happen?
C61	No, I didn't.	
T62	How were you able to do that Sunday?	
C62	It must have been self-control. (laughter)	Same Resource metaphor.
T63	Yes you were, <u>you definitely were</u> .	Introduced content (same as at T42).
C63	I don't know. I just, it wasn't worth it. It wasn't worth the argument. It wasn't worth the effort to even...	
T64	That's all it took, just for you to decide this is not worth it? [C64: Mhm.]	Leading question structure.
T65	That's all it took? [C65: Yeah.]	Ditto.
T66	And it sounds like he <u>got the message</u> very quickly.	Introduced metaphor.

C67C68	Yeah, it's like, "Ooh, she's really not listening to me."	
T69	Yeah, and <u>she made up her mind.</u>	Introduced metaphor.
T70	Ah-hah. Now you are able to do that with him. <u>I imagine you are able to do that with your baby sometimes?</u>	SF vector (V3): Instances. More therapist-introduced content.
	[Session continues...]	

IV. Results

The following summary of the analysis of the transcript in Table 2 is in three parts. First the vectors used by the therapist are identified and compared to common Symbolic Modelling vectors (Table 3). At a more detailed level, Table 4 presents examples where SFBT and SyM show similarities – of intent if not always of practice. Table 5 on the other hand, focusses on the differences between the two approaches.

Vectors in the SFBT transcript

Our analysis of the first 70 lines of the transcript identified the use of five of the vectors shown in Figure 1. Each vector involves the therapist using a number of questions to invite the client to attend to a particular aspect of their experience. Table 3 shows that for this transcript there were approximately 10-20 lines per vector.

Table 3: Vectors in the SFBT transcript

Vector No.	Solution-Focused Vector	Transcript line no.	Equivalent Symbolic Modelling Vector
V1	Establish Contract.	T1-T10	Identify desired Outcome.
V2	Preferred Future.	T11-T20	Develop desired Outcome <i>landscape</i> .
V11	Other Person Perspective on Preferred Future.	T21-T32	Evidence for desired Outcome having occurred.
V3	Instances of Preferred Future having happened in the past.	T33-T51	Develop a Resource.
V5	Coping with Problems.	T53-T69	No direct equivalent.
V3	Instances in the past.	T70-...	Develop a Resource.

Table 4: Similarities between SFBT and Symbolic Modelling

Solution-Focused	Transcript line no.	Symbolic Modelling
Starts by establishing a Contract.	T1, T3, T9	Similar intent to SyM's request for a desired Outcome using the PRO model.

Invites attention to move from Negative Outcomes to a Preferred Future.	T10, T15	SyM has the same aim when moving from a Remedy to a desired Outcome but uses a different (PRO) question.
Aims to develop a rich description of the Preferred Future.	T11 to T32	Similar intention except in SyM the aim is for client to create a rich 4-dimensional desired 'metaphor landscape' though self-modeling.
Recaps Preferred Future and resources.	T9, T10, T30	Same as in SyM, although in SyM it is done more frequently to facilitate the client to self-model their inner world.
Uses client's exact words.	T5, T8, T9, T10, etc.	SyM limits therapist to <i>only</i> using client's words as the content of a CLQ.
Overlooks problems with "instead".	T15	While SyM also does not dwell on Problems, it acknowledges them more overtly than in SFBT.
Makes use of client-generated metaphors e.g. "battle" and "control".	T39, T41, T44, T45	SyM also invites client to attend to their metaphors (especially the embodied ones) and goes on to explore them in detail much more often than SFBT.
Asks "How <u>did</u> you know?"	T44, T48	Similar to SyM, although more likely to ask "And <u>do</u> you know?"
Focuses on resources.	T39 onwards	SFBT does so more than SyM.

Table 5: Differences between SFBT and Symbolic Modelling

Solution Focused	Transcript line no.	Symbolic Modelling
Introduces an "if/ suppose" frame.	T3, T9, T20	Not done in SyM. CLQs use "when".
Meta-comments on client's experience, e.g. "that make sense".	T9, T16	Not done. SyM avoids implying the client's experience needs to "make sense" to the therapist.
Introduces therapist's metaphors.	T9, T10, T15, T18, T20, T26, T51, T55, T58, T66, T69	SyM aims not to.
Uses <i>therapist's</i> person pronouns e.g. "I", "me".	T9, T37, T70	Not used at all in CLQs.
Asks "instead" questions of problems.	T15	Accepts problem context as is. Asks "And when [problem], what would you like to have happen?" SyM also makes use of Problems in later phases (Explore Effects; Mature Changes).
Uses 'tag' questions and other leading question structures.	T16, T26, T39, T58, T63, T64	SyM aims not to.

Makes statements about client that the client has not made them self.	T16, T33, T42, T51, T63, T70	SyM aims not to, rather only uses inherent logic from the client's information.
Introduces other content.	T29, T31, T43	SyM aims not to.
Expresses admiration at aspects of client's experience, e.g. "Wow".	T48, T52	SyM aims not to.
Frequently asks "how?" client does an ability (e.g. to decide).	T3, T49, T57, T62	Information elicited in SyM less directly through a number of questions.
Frequently requests "differences".	T1, T20, T30, T38	SyM does so rarely, especially during the early stages of a session.
Client's goals ("normal", "peace of mind" and "calm") referenced at the beginning but not again until T110 and T115 [not shown].	T3, T5, T9	The client's desired outcomes act as <i>dynamic reference points</i> referred to throughout a SyM session.
Does not take opportunity for client to embody their preferred future.	C3, C7, C11, C19	A key aspect of SyM.
Does not take opportunity for client to explore their inner-world resources.	C52 "guts", C57 "will", C62 "self-control"	A key aspect of SyM.

Solution-Focus Questions – cleaner versions

Table 6 comments on a selection of Solution-Focused questions (taken from Iveson, George & Ratner, 2012). These examples illustrate the subtle and probably unintended use of leading syntax and the possible introduction of therapist's metaphors and presuppositions into the client's perceptions. The suggested cleaner questions aim to achieve a similar purpose while minimizing the introduction of therapist content and leaving the client freer to answer in whatever way they would like.

Table 6: Solution-Focus questions with suggested cleaner alternatives

	Solution-Focused Question	Cleaner alternative	Comments
V1. Establish a Contract			
1a	What will it take for you to say that this has been worthwhile?	How will you know this (session) has been worthwhile?	Removes the client having to know in advance "what it will take".
V2. Preferred Future			
2a	Imagine that after you have gone to bed tonight, a miracle happens. But since you are asleep, you will not know that the miracle has happened. When you wake up tomorrow morning what will be different that will tell you? What will you see yourself doing differently, what will you	Imagine that after you have gone to bed tonight, a miracle happens. But since you are asleep, you will not know the miracle has happened. When you wake up tomorrow morning what will let you	A simplified and shorter version of the classic "miracle question" which asks the client to take three perspectives (tell self, see self, see others). By removing "different" the client can simply report on their experience

	see others doing differently that will tell you that miracle has happened?	know a miracle has happened?	rather than needing to compare it with the problem situation.
2b	What small step would be a sign of moving in the right direction/ being on the right track?	And what's the first thing that would let you know [client's desired outcome] is happening?	The CLQ removes the four metaphors in the SF version.
2c	What do you hope will replace/ take the place of the [problem]? What difference would it make if your [problem] stopped?	And when [problem], then what happens?	Unnecessary imposition of metaphors ("replace", "take the place of", "stopped") which do not allow for the client to achieve things while the problem still (partially) exists. Also, "difference" requires a comparison with the problem. SyM aims to get to a time <i>beyond</i> the problem.
V3. Instances [of the Preferred Future having happened]			
3a	So, tell me about the times that you are more confident.	When are you [client's word for a Resource]?	"So, tell me about" puts attention on the therapist. CLQ uses "when" instead. "Confidence" is a preferred strength in SF, whereas the CLQ is non-specific and ambiguous, it can refer to one instance or to multiple "times".
V4. Exceptions [when the problem didn't happen]			
4a	When are the times that it bothers you least?	When does it have less effect?	Removes the mind-read, "bothers" and the need to search for the "least" example.
4b	What are you doing differently and what are others doing that is different at those (exceptional) times?	What happens when [exceptional example]?	A complex double question involving differences and two perspectives (self and other). The CLQ lets the client decide what to attend to.
V5. Coping with Problems			
5a	How come you have not given up hope?	How come you have not given up?	"Hope" is redundant and limits the scope.
5b	So, what has been helping you to survive?	So, what's the best you've responded to [problem situation]?	Unless client has used the metaphor, "helping to survive" it comes with several unnecessary entailments.

V6. Stopping things getting worse			
6a	So, what have you been doing to stop things getting even worse?	How come things aren't even worse?	"You" and "doing" restrict client's answer, "stop" introduces a metaphor.
V7. Locating resources, building on strengths			
7a	When you faced this sort of problem in the past how did you resolve it?	Have you had this kind of [problem] before? [If yes] How was it resolved?	Reduces presupposition, removes unnecessary metaphor "faced" and allows more scope to answer.
V8. View of Self (learning)			
8a	What do you now know about yourself that you didn't know last week?	What do you now know about yourself that you didn't know before?	Generalizing original question give client more scope.
8b	Was that a surprise to you?	Has anything surprised you?	Replaces leading question.
V9. Suggestions (post-session tasks)			
9a	Notice what you are doing when you begin to see yourself moving up the scale.	Notice what happens whenever you begin to move up the scale.	Generalizing the original with "what happens" and "whenever" gives the client more latitude. Removing "see yourself" simplifies the instruction and does not impose a (dissociated) perception on the client.
V10. Scaling			
10a	On a scale of zero to ten, how do you rate your confidence that the problem will be resolved?	On a scale of zero to ten, how confident are you that you'll be where you'd like to be?	This version is Outcome rather than Remedy focused.
10b	So, if you are on three, tell me what you will be doing that will tell you that you are on four?	Given you are at [X], how will you know you when are at [X+1]?	Simpler sentence structure that offers greater scope and removes the therapist.
V11. Other Person Perspective			
11a	How will (your colleague) know that the miracle has happened?	How will [others] know that something has (you have) changed?	This generalised version gives the client more freedom to answer.

V. Discussion

On the broad spectrum of psychotherapeutic approaches, SFBT and Symbolic Modelling sit fairly close together. This is to be expected since the work of Steve de Shazer and Insoo Kim Berg influenced the “*Lite*” version of Symbolic Modelling (Lawley & Tompkins, 2011; Tompkins & Lawley, 2008).

Our comparison of the two approaches shows that, in terms of contracting, eliciting preferred futures (desired Outcomes), negative outcome (Remedies), identifying resources and generally avoiding going “deep” into problems, SFBT and Symbolic Modelling have broadly similar aims. However, these aims are often achieved through quite different means. SFBT emphasizes a conversational focus on observable behaviour, while Symbolic Modelling values client-generated metaphor and the embodied nature of mental constructs. In addition, in Symbolic Modelling the specificity of Clean Language places restrictions on the therapist’s language that is not evident in SFBT.

Korman, Bavelas and De Jong’s (2013) conducted a micro-analysis of therapy transcripts. This showed that SFBT formulations (echoing, summarizing, paraphrasing and mirroring) preserved a significantly higher proportion of the client’s exact words and added significantly fewer of the therapist’s interpretations than did Cognitive Behavioural Therapy (CBT) or Motivational Interviewing. Our analysis of the Insoo Kim Berg transcript reveals that the first 55 interventions by the therapist contained at least 20 examples of metaphors and other content introduced by the therapist. Clean Language is a method of reducing such introductions to virtually nil. We can therefore hypothesize that approaches that make use of Clean Language will preserve a significantly higher proportion of the client’s exact words than even SFBT.

Metaphor is central to Symbolic Modelling. There is now abundant evidence that we not only talk extensively in metaphor, our metaphors structure our thoughts, feelings and choices (Casasanto & Gijssels, 2015). Furthermore, a review of the results from metaphor framing experiments concluded that they “can shape the way people think. ... [Furthermore] metaphors can covertly influence how people think. That is, people are not always aware that they have been influenced by a metaphor” (Thibodeau & Boroditsky, 2017, p.825). If a Solution-Focus principle is to treat the client as the expert in all aspect of their lives, then SFBT therapists might want to give more attention to clients’ autogenic metaphors and aim to reduce the introduction of their own metaphors. Clean Language is designed to do both.

On the other hand, practitioners of Symbolic Modelling could incorporate some of the SFBT approach. Some slightly modified Solution-Focus questions could be used to create additional vectors in a SyM session. For example, those that: pursue instances of the client’s preferred future having happened; hunt for exceptions to problems; identify coping strategies; highlight resources; and use scaling.

VI. Conclusion

This paper reviewed the Solution-Focused Brief Therapy approach through the paradigm of Clean Language and Symbolic Modelling. A comprehensive comparison was beyond the scope of this article, however, by analysing the two methodologies at three levels – intention, process and practice – we have provided a starting point from which practitioners of both approaches can mutually benefit.

A detailed linguistic analysis of a representative transcript highlighted many examples of similarities and differences between the two approaches. This demonstrated that while SFBT and Symbolic Modelling have broadly similar aims, these are often achieved through quite different means.

Rather than integrating both approaches into a single methodology, our aim has been to preserve the nature of the SFBT approach while simultaneously adding some of the advantages of Clean Language. Our proposed modifications to some common SFBT questions showed how they could be “cleaner”, that is, simpler, contain less therapist-introduced content (especially metaphors) and fewer leading presuppositions. These adjustments would lower the cognitive load on the client and give them a wider scope within which to answer. At the same time, some Solution-Focus vectors could become part of the Symbolic Modelling repertoire.

We conclude that Solution-Focused Brief Therapy and Symbolic Modelling could both benefit by including, with minor modifications, some of the principles, process and practices of each other’s methodology.

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