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## Book Review / Compte rendu

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Froerer, A., von Cziffra-Bergs, J., Kim, J., & Connie, E. (Eds.). (2018). *Solution-Focused Brief Therapy with Clients Managing Trauma*. New York, NY: Oxford University Press. ISBN: 9780190678784, 246 pages.

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*Reviewed by:* Serena Makowecki

### ABSTRACT

*Solution-Focused Brief Therapy with Clients Managing Trauma* is an edited book written by authors with expertise in using solution-focused brief therapy (SFBT) with traumatized clients. The editors propose that SFBT is a well-founded and efficient modality to use within trauma-informed treatment. The SFBT approach is not without its critics, however, and some cautions are outlined in this review. Overall, the authors provide a unique interpretation of how the underlying tenets of SFBT offer both the therapist and the client a hopeful and effective path toward managing various types of traumatic experiences. They also provide specific strength-based SFBT tools for clients.

### RÉSUMÉ

Le livre intitulé *Solution-Focused Brief Therapy with Clients Managing Trauma* est un ouvrage d'édition rédigé par des auteurs ayant acquis une expertise dans le recours à la thérapie brève centrée sur la solution (*solution-focused brief therapy* ou SFBT) auprès de clients souffrant d'un traumatisme. Les éditeurs avancent que la SFBT est un outil bien fondé et efficace pour intervenir dans le cadre d'un traitement basé sur la compréhension du traumatisme. L'approche SFBT n'est cependant pas à l'abri des critiques, et la présente analyse souligne certaines précautions à prendre. Dans l'ensemble, les auteurs proposent une interprétation unique de la façon dont les principes sous-jacents de la SFBT mettent à la disposition du thérapeute et du client une démarche efficace et prometteuse de prise en charge des divers types d'expériences traumatisantes. Ils fournissent également des outils précis fondés sur les points forts de la SFBT et destinés aux clients.

*Solution-Focused Brief Therapy with Clients Managing Trauma* provides a comprehensive overview of the intersection of trauma and solution-focused brief therapy (SFBT) and offers practical therapeutic applications based on the underlying tenets of SFBT. Each of the four editors contributes a different academic and clinical lens for applying SFBT to work with clients managing trauma. Froerer comes from a marriage and family therapy background, Cziffra-Bergs is an educational psychologist, Kim offers a clinical social work perspective, and Connie holds SFBT training seminars and is a licenced counsellor. All four editors have a strong background in SFBT and teach, provide training workshops, and/or contribute to SFBT organizations.

The first three chapters serve as an introduction to the book, detailing how solution-focused conversations foster hope and resiliency, noting the efficacy of

using SFBT in trauma-informed treatment and highlighting the importance of intentional language use by clinicians. The authors use current and relevant research studies to support the application of SFBT in trauma-related therapeutic conversations by detailing a neuroscience-based perspective, as well as providing counselling case examples.

The postmodern theoretical ideology of the therapist taking a “not-knowing” stance with clients has led critics of the SFBT model to label it as culturally unaware and insensitive to diverse populations. The editors of this text help to dispel the idea that SFBT is ignorant to cultural diversity by providing information from a sociocultural lens on various types of trauma with which a client or family may present.

Multiple authors write the remaining 11 chapters, and each chapter offers a summary of the kind of trauma and its prevalence. The authors highlight ways in which the trauma may be experienced by the individual or family and how the clinician can offer an SFBT approach to manage that trauma. For instance, in Chapter 7 the author focuses on SFBT with survivors of war and international conflict. The author provides a brief introduction to the topic, details how this type of trauma has and continues to impact society, provides therapeutic case examples, and yields a practical application of SFBT with survivors of war and international conflict. The author offers specific tools to support clients within this particular trauma group that focus on systemic and practical strategies to reflect on client resources, successes, strengths, and best hopes.

The other chapters follow a similar structure, with each author contributing possible SFBT approaches for addressing the following: violent crime, preventing suicide in the aftermath of trauma, interpersonal violence, substance abuse and recovery, infidelity in marriage and relationships, PTSD and the military, child sexual abuse, childhood trauma, loss, grief, and bereavement, countering systemic retraumatization for sex-trafficking, and vicarious resilience.

Critics of the SFBT model contend that a future-focused perspective could convey insensitivity to clients’ issues by avoiding problem talk and ignoring the broader context that may be contributing to the pain and struggles clients are experiencing. In Chapter 10, Crow acknowledges this criticism of SFBT by stressing the significance of “staying in the emotion as long as it was needed and to acknowledge and validate the client’s experience” (p. 161).

By honouring the devastating trauma experienced by the client while moving toward a solution-focused orientation, the editors propose to co-construct a reality that focuses on the client’s ability to reflect on their strength and resiliency and to look forward to a hopeful future. Although the editors extend their research to include culturally relevant information and focus on how different groups may experience trauma, there was a noticeable absence of practitioners’ acknowledgement of privilege and how the perceived therapist-client power differential may impact cultural sensitivities. As Thomas (2007) concludes, “dismissal of personal prejudices or ignorance of cultural influences while attempting to ‘not know’ may be a more risky position than alternatives that sensitize us to beliefs and experiences that limit our ability to not-know” (p. 15).

The final chapter of the text focuses on the vicarious resilience often experienced by the SFBT practitioner, and the editors share the multiple benefits they have each experienced as a result of working from the SFBT approach, including experiencing gratification, hopefulness, and personal growth. For the same reasons, it is important that SFBT therapists remain sensitive to the impact of trauma on clients. It is also important not to negate the vicarious trauma experienced by the therapist when supporting clients in their work. Understandably, a solution-focused orientation has the ideology to incite a more favourable therapeutic experience for the practitioner, but it does not eliminate the possibility of a therapist experiencing vicarious trauma. Hoping that vicarious resilience is the byproduct of working within an SFBT model is not enough when considering the implications for therapists who are working with this population. The editors could have provided a more balanced view of vicarious outcomes for the practitioner.

The editors organized the book in an easy-to-follow manner with a chapter on each type of trauma while threading practical SFBT techniques throughout to solidify this unique, strengths-based way of thinking. The writing style of the authors is straightforward and feasible for a clinician who is new to the SFBT model and lends a new perspective for experienced practitioners seeking alternative approaches to traditional trauma-informed models.

The editors do an effective job of reiterating the underlying tenets of SFBT throughout the book, highlighting various strategies in each chapter. By the end of the book, I found solution-focused questions coming readily to mind during sessions. I began solidly applying the SFBT lens in counselling sessions; the strengths-based questions were tripping off my tongue because I truly believed in my clients' capabilities and skills to manage their problems, even those who had gone through unimaginable trauma. In particular, I found a dramatic shift in how clients saw themselves and spoke about their future. By establishing an empowering stance of surviving their painful experiences and our co-constructing conversations, they regained control from a situation they previously had no control over.

As a recent master of counselling psychology graduate who is developing a foundational modality from which to practice, I find the tenets of SFBT outlined in this text a practical and hopeful path forward in my practice. I am a family therapist at an agency that supports clients managing trauma ranging from survivors of war to post-traumatic stress disorder. I find the systemic and strengths-based approach described in this book extremely useful in informing my family therapy practice. I have already begun to adopt many of the SFBT principles and techniques to co-construct hopeful futures with the clients I support.

### *References*

- Thomas, F. N. (2007). Possible limitations, misunderstandings, and misuses of solution-focused brief therapy. In T. S. Nelson & F. N. Thomas (Eds.), *Handbook of solution-focused brief therapy: Clinical applications* (pp. 391–408). Binghamton, NY: Haworth Press. <https://doi.org/10.4324/9780203836606>

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