

Cultivating Hope – Salford 2011

Solution Focused Interventions
with People who have self harmed

Making the most of a single session: why?

- These are often one-off encounters. (Moller 1991) recognised a poor attendance and high drop-out rate
- The mode - or most commonly occurring number of sessions in *any* therapeutic approach is ONE
- Many people only want one session - Talmon 1990 & Hoyt 1992 describe 60% satisfaction rate amongst those who dropped out after just one session

What can we hope to achieve from a single encounter?

- To screen and assess for psychiatric disorders
- To assess safety - or risk
- To form a link with the person as a point of contact for future help
- To have a session which in itself is helpful to the client

How???

- Interventive interviewing (K Tomm 1999)
- Questions are *not* neutral
- Consider everything the worker says or does (or does not say or do) during an interview to be interventive

For example: "I contemplated taking this overdose for 3 days"

- Response 1 - Traditional Approach that would seek to understand the problem
- "Why did you decide to do it?" or "What other ways of killing yourself did you consider?"
- A Solution Focused slant that looks for signs of safety:
 - "How did you manage those thoughts for the first 2 days?"
 - "What did you do that helped you to resist the urge until the 3rd day?"

Solution Focused Brief Therapy

- Problem-free talk
- Establish the preferred outcome for the session
- Problem talk / definition
- Pre-session change
- Miracle Question or preferred future
- Exceptions

SFBT basics continued

- Scales
- Break
- Feedback
- Compliments

A swift exercise:

- In Pairs: on a scale of 1-10 where 1 = you have no confidence whatsoever in hosting a constructive interview with someone who has recently harmed themselves.....and 10 is that you have considerable confidence that you can do this.... Where are you now?
- How will you know that that has increased by one point?

What's the story?

- Relating to the self injury or suicide attempt:
- Can you tell me how you ended up in here?
- I understand that you took an overdose - what was that about / how come?
- You must have had a good reason for hurting yourself
- Did taking an overdose help?
- How did this help?
- What were you wanting to happen?

Where self harming has been helpful

- Excuse my ignorance....but this is useful to you?
- Does it cause you any difficulties? - consider responses in Prochaska/Diclementi/Norcross 'Cycle of Change' model
- How will you know when you no longer need to do that?
- What will be happening for you in your life when you no longer need to cut yourself?
- When was the last time you had the urge to cut, but were able to resist? - How did you do that? What did you do instead? When else have you resisted.....

Scaling of Safety

- On a scale of 1-10 where 1 = you intending to kill yourself at the next opportunity, and 10 = you have no intention whatsoever to harm yourself, how safe are you?
- What needs to happen to increase that by one?
- How will you know when you are at that number?
- When were you last at that number? How did you manage that?

More on safety

- How safe is it for you to go home? (on a scale of 1 - 10? maybe)
- How realistic is it for you to stay safe over the weekend / til we next meet?
- How confident are you that you can keep yourself safe over the weekend?

Where continuing suicidal intent is expressed

- How will this help?
- What will be different?
- An adapted miracle question. Suppose....when you go home tonight...you go to bed..and go to sleep. Whilst you're asleep, a miracle happens, and all these strong suicidal feelings and thoughts are gone. When you wake up in the morning, how will you know a miracle has happened? What will be the 1st thing you will notice. What else, etc, etc.

Continuing suicidal intent - cont'd

- Graveside scenario - Henden 2002
- Just suppose you decided to take this last resort option before considering all the other possibilities. You are in the grave, but your spirit is hovering a few feet above looking down on the crowd below.
- A) who is there?
- B) Who is most upset?
- C) what advice would they have liked to have given you before you took the last resort option?
- D) What would you be thinking in term of the other options you could have tried first?

Continuing suicidal intent....

- We assume that suicide is a means to an end, rather than an end in itself. A solution focused approach aims to have a conversation about a preferred future, and sidelines suicide as one of a number of options.

A Turning Point

- Do you think that after this episode you are more, or less likely to harm yourself / overdose again? How come? What's changed?
- What will you do differently if you feel like that / that desperate again?
- What are you thinking about right now, that did not occur to you when you were taking the overdose?

A Turning Point...cont'd

- Do you think that any good might come out of this?
- Suppose....in six months or so ahead of now, you were to look back and see this as something that turned out to have been for the best - what will be different? How will you know? What will you be doing? What will others notice different about you?

Solution Focused History Taking

- How did you cope with...(whatever trauma)?
- How on earth did you survive that?
- What did you do to protect yourself / others whilst this was happening?
- How did you stop yourself from cracking up/breaking down (use clients language) at that time?
- Where did you get the strength to do that?
- Who else knew that you had this strength?

More on history taking

- Did you learn a lot from that ordeal?
- Looking back would you say that these experiences have made you a stronger or a weaker person?
- In what way? (if stronger)
- What have you done to lessen the impact (if weaker)

Planning to control risky behaviour - with a customer!

- How do you know you can do this?
- Have there been times when you have been as successful as you plan to be this time?
- How did you do that? What was helpful? Who was helpful at that time?
- What did you do to make that happen?
- Where did you get that idea?

More on controlling risky behaviour...

- What resources are you able to draw on to achieve this?
- Who else knows you can do this?
- What does that person know about you that others don't?
- (Turning to a friend or relative) How do you know they can do this?

Ending: Take a break. Give a compliment!

- Compliments may include admiration for efforts (including unsuccessful ones) to resolve problems. For using resources. For resisting urges. For considering others etc...
- Compliment the motivation if you find the behaviour unacceptable.
- Lastly - review the helpfulness of the conversation - and possible future contact.