

'An analysis of narratives describing the experiences of nurses who have undertaken training in solution focused therapy.'

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Objectives

- To generate an understanding of why the course impacted on participants as it did.
- To develop an understanding of the process of learning and change experienced by the participants.
- To construct a theoretical explanation of this process in relation to the relevant literature.

In response to these objectives, this project seeks to develop a complex, inter-personal portrayal of the training experience, generating an emotional response (in addition to an intellectual response) from which an empathic understanding of the training experience can be constructed.

Methods

The design of this study falls into two stages, reflecting Polkinghorne's distinction between paradigmatic and narrative analysis of qualitative data. In the first stage participants were interviewed using a semi-structured interview technique, interviews were recorded, transcribed and fully analysed using a paradigmatic approach to identify emerging themes, enabling the construction of both a 'group narrative' and a typography of experience. This typography has then been used to identify potential participants for the second stage of the study. Participants will be invited to take part in a follow up interview, which will be audio taped and fully transcribed. Participants will be invited to recount their experiences in relation to SFBT training, and to co-construct meaning from those experiences; to begin a fusion of horizons between interviewer and interviewee.

Background

The aim of this project is to answer the question, "What is the experience of nurses who have undertaken training in solution focused therapy?" There is little in the literature to inform this question; however, what there is suggests that solution focused brief therapy (SFBT) is seen by many author's to be congruent with the values and principles of nursing. The nursing literature also suggests that nurses can be trained to deliver SFBT in a very short period of time; as little as twenty hours is suggested. However, the wider literature suggests that training therapists in SFBT can take as long as two years and requires trainees to adopt a significantly different epistemology to that underpinning other approaches.

This study has begun to explore the experience of nurse trainees in SFBT in order to investigate these issues. The study takes a broadly phenomenological approach, using narrative research techniques to generate data for analysis. It is argued, however, that the methodology is specifically solution focused, and brings together principles of narrative, phenomenology and hermeneutic methods. Individual narratives are analysed using a method adapted from Colaizzi's formulated meaning approach. The approach taken reflects both descriptive and interpretive phenomenology, in that it will first describe the experience of nurses undertaking SFBT training, selected transcripts will then be subjected to a narrative analysis through the hermeneutic of Hans-Georg Gadamer in order to give meaning to the stories the participants tell. The meaning taken from these stories will then be explored in relation to the research question posed above.

Key Emergent Themes

Fit with Personal Values

- "I thought, surely I've got to be able to do more than just be with people when they're miserable."
- "I was looking for something. It wasn't just a job; it was something for me ... very much for me."
- "The medical model doesn't sit well with me; but I don't think I knew that until I started the solution focused stuff."
- "It just seemed to click; this was something I could work in."

Success

- "I would use that, I would say, for every advice clinic, every person that comes through the door. So it's worked really, really well."
- "I saw how it worked, and I saw how the patient's responded, and I suppose that made me think, "Oh, this is amazing", y'know - It Works! "
- "I always remember you saying to us that you become so SF that you use it in your home life ... which I do. It really, really works, and that's what's changed for me."

Client Empowerment

- "I don't have that sort of 'heart-sink' feeling about clients anymore. Now I view everyone coming along as having the potential to change. I've a more positive outlook to clients now"
- "They're telling you what they're wanting to do, what they want to happen, as part of the assessment rather than what I think they should be doing"
- "It's not my definition of what their score should be. They tell me how they are better, what it means to be better, what better looks like."
- "When that person walked out yesterday, I didn't need her to come back ... I was happy to say, "if you need to talk again ... and it felt perfectly comfortable."

Framework

- "The other thing I think was resonating with me was the sense of a defined framework of change, as opposed to something that I was just so struggling with, something so undefined and nebulous."
- "I think about using the model more; solution focused principles, but I don't formally do it as taught."
- "A lot of people say they work in a strength based way but, when you look at it you think 'well, how?' I think what solution focused does, is get us to try and look, not so much at the problem, but at the exception"

CBT Based Practice

- "Mostly it was CBT based, the short term CBT based model. But I was in danger of becoming too prop-focused. I'm less focused now on getting stuff done, and more focused on, "Okay, what's happening here today?"
- "I knew that CBT was okay, but it didn't particularly sit with me that well; although I used elements of it and it was useful, I didn't want to go and do CBT training or anything."
- "I guess it was a mix, we did tend to use the ... in terms of the CBT ... I guess the Chris Williams stuff, we used a lot of that material; we did come from that perspective."