

Interview

Chris Iveson: Striving towards minimalism in changing scenery

By Mark McKergow and Carey Glass

*Chris Iveson is a founder member of BRIEF. He is also a Member of the Institute of Family Therapy. He is author of 'Whose Life', which describes how systems theory and solution focus can enhance service delivery to isolated and vulnerable older people. He is also co-author with Evan George and Harvey Ratner, of 'Problem to Solution' the UK's best selling introduction to solution focused (SF) brief therapy. Chris is passionate about applying an SF approach to **anything** and came to coaching primarily because senior professionals he taught earlier in their careers began to approach BRIEF for coaching and leadership training.*

What are your best hopes for the interview?

Be reasonably coherent and say something pertinent! It doesn't always happen.

How did you get involved in SF practice?

By the time I came across SF, I was ready for it to speak to me. When I first came across it, it felt like a homecoming. It offered me a way to do what I had been striving to do for the previous 25 years. Indeed, I was once accused of having been doing it in 1972! A course participant who worked for Barnardo's had been looking at my notes from a case from that time, which she said were very strengths-based and completely different from everyone else's notes. So it was a

long journey to get to 1986 when I first started to read about SF as it has now become.

What is it that you saw that led you to the conclusion that you had been doing it?

It wasn't that I was doing it – I was striving towards it! It was exceptions – a straightforward and obvious route into people solving their own problems. It was totally mindblowing for me – a lightbulb moment.

Tell us about the belief that people could solve their own problems – where did it come from?

Partly it was preached in social work education – even from a psychoanalytic point of view – even though they didn't talk respectfully of clients. I have always thought that. The whole psychodynamic approach seemed to me to be fundamentally disrespectful as it was practised, even though it wasn't intended as such. The language was easily turned to blame and power, with nasty words to describe people.

I recently read *Whose Life – Working With Older People* (Iveson, 1990), which I loved. At that time you were on the way to SF, it was revised in 2001 and you have moved more to SF in the intervening period. How much of your other thinking and learning do you bring to your work now?

As little as I possibly can, and if I catch it I try to filter it out. That stuff was all great fun at the time, it was part of striving towards the thing I didn't know existed. I was part of this group of social work assistants and health organisers, we did this amazing 'Cinderella' service that no-one would know about, and I wanted to write it down. Those were stories from other family therapy models. The early part of the book – strategic family therapy – is pretty interventive, getting people to do things. What HAS been of use was the

15 years of sitting down with clients before I got into SF – I am very comfortable sitting down with anyone in the therapy room.

What are the things you brought from your 15 years of sitting with clients?

I had a client in the early 70s who was a complete and total nightmare – eight children in care all over the country. You needed a wheelbarrow to get all the paperwork around. Week after week I added to this sorry tale of her life. Then she appeared on Panorama (a BBC current affairs TV programme) on a panel of experts and local people on this very hot issue of the time, and she was this amazing, articulate, stunning woman who stole the show. I was horrified at myself that I had never seen this woman in my work with her. My service to her was to destroy all her files and it went from a seven volume case to one slim volume, and many of her problems with the local authority then disappeared. It was a transforming experience for me in how I look at people.

Also, I was the first person in Britain to be appointed to a family therapy post! In about 1972, I got a post working for the local authority with people who didn't pay their rent. So I was a sort of rent collector who did family therapy. My assumption was that if people wanted to pay their rent they would, and if they didn't they wouldn't. So I talked to them as if they wanted to pay their rent, and I covered three times my salary in rent payments. I never ever suggested to them that they should pay. On reflection, I had the idea that people will make their best choices – and most people don't like being in debt.

How did you come across SF?

I was given two books to review for the Journal of Family Therapy. One was *Shifting Contexts* by Bill O'Hanlon and Jim Wilk, which I found absolutely fascinating and couldn't understand. Then I saw that Bill was doing a workshop in

Oxford, 30 people, a lot of hypnosis stuff and was absolutely bowled over by Bill and vowed to practise like him but couldn't – he is a bit uncodifiable! It added to my sense of people's strengths and my repertoire.

The other book was *Journeys*, edited by Don Efron – different family therapists' journeys to where they were, including one from the Milwaukee team, and also Bill O'Hanlon and the Galveston team (Harlene Anderson and Harry Goolishian). Then Harvey, Evan and I taught family therapy together. I think we have a tape of Harvey asking the miracle question in 1986. Then after two minutes he asked about the problem!

We were recently discussing the case of a woman with a big interview coming up. You wrote in and suggested taking the pressure off and asking about how her life would be better if she was moving in the direction in which she wanted to go – nothing about the interview. No-one else came up with this – it seems like your accumulated wisdom in action.

Not really – it's an idea that we have that it's often more productive to help someone develop a sense of the life they would like to be leading. It's like the Miracle Question in reverse ... not that the problem is solved, but when your life is going forward in a way that is right for you, what would you notice when you woke up tomorrow. So when you come to the interview you'll just take it in your stride and do it. I struggle with this word 'solution' – if a solution is a process, a way of getting on with life, that's fine. But people often see solutions as something to be attained like a goal, going to an interview. You may be investing too much in a specific aspect of the future which could turn out to be the wrong bit of the future. If we can live our lives as if we are functioning at our best, then we are well equipped to handle what life throws at us, for example if we are run over by a bus on the way to the interview and have to go to hospital instead.

One of BRIEF's goals is to be as brief as possible ...

No – to continue to be minimal, which is a changing scenery. It's not a reductionist minimalism, trying to reduce it to a single question or something. It's Steve de Shazer's idea of constantly looking to see what's necessary. What seems necessary at one point may not seem necessary later on. The biggest thing was this realisation that it didn't seem to matter if people did their tasks or not. So we stopped giving tasks. Actually this added something to the interview – we didn't have to be thinking about what task to give, so we had more scope to listen to the client. If you watch Steve de Shazer's interviews you will see a time when he starts thinking about the task – what he says comes not just from the client but from his ideas of what might be a good task. So when you are not having to think about tasks, you can listen for other things, like preferred future descriptions. We went away from specific goals and into more wide-ranging descriptions of the future.

More recently we have worked very hard at trying to take away our intentionality – to be neutral about what our clients do tomorrow. That's their business. I might hope they do well and hope they are happy, but that's not my business. So we stick with getting descriptions of what things would look like if..., and not being at all concerned about how they might actually happen. Stopping trying to help them get from A to B and focusing on describing A and B – where you want to get to and what you've already done without any hint about what you need to do about it. This has contributed to a reduction in our average number of sessions.

Do you have a view on why this has an impact?

Yes – as soon as you think that someone WANTS you to do something, you will examine the situation closely, it feels like interference. Someone else has a view about what's good for you, and you have to be careful about following such people's ideas! It's a form of interference, a lack of trust in people making their own decisions.

If we have setting tasks on the one hand, and simply describing B on the other hand, how about asking people what they might do?

It never occurs to me to do it. Steve did ask it – “What are you gonna do?” ... I think he asked it without intentionality anyway. I see it as a redundant question – if they see something to do they will do it. Asking the question won’t make any difference. I might ask about what people might do in a dilemma... what might you do (supposing life was moving in the direction you want it to). In response to someone saying they can’t do something, wondering what might be another thing they COULD do... it’s more description.

In the therapy world I can see this operating. In an organisational world where there are certain expectations of outcomes, how do you see this operating?

I don’t see it as any different. I did two sessions recently. One was with the manager of a hotel having difficulty with one of his bar managers. I asked about if when you’ve got back the bar manager had upped his game, getting micro-descriptions of the bar manager’s new behaviour and the hotel manager’s possible responses to it. At the end, the hotel manager said he had a clear idea of what to do. I did another one, very similar, at the end of which the client said, “Are you telling me this bloke will be changed by the time I get back to see him?” I said, “There’s a good chance.”

I did some training for a big coaching company who work at the top of the range: they have some very senior former executives from household name companies among their coaches. They still say it was the best training they have ever had, the only training that everyone uses bits of. It was the removal of action plans that they said liberated their work enormously – the idea that you don’t have to get people to do things.

How are you seeing the organisational use of SF developing from your perspective?

We at BRIEF are only a small corner of the field – we enjoy it, we do bits and pieces which we like, but it's not the centre of gravity of our work, which is free therapy work with public sector clients. It's a little dalliance for us, but interesting. More widely, these ideas do seem to be rampant, and not necessarily being called SF. They may be coming from other sources, perhaps NLP-related.

We do like working with schools and public sector organisations. For example, one of the worst moments of my life was the last day of a four-day course at a special school in Dublin. The 51 staff were being awful to each other. The Head took me aside and said "I don't suppose you've noticed, but there is a lot of conflict." I offered to do something after the break. It had opened a new residential department and there were three factions at each other. I did this activity that was so misconceived – I wondered what to do, and said "Let's have a group of 51". They sat around and I asked, "What do you like about working here?" – to each person in turn.

I got bland answer after bland answer – "I like working with children." "It's an easy journey from home." I kept thinking that they would warm up. More bland answers. Then after 10 people I realised I had gone too far and couldn't go back, I had to finish. I thought I was going to die. It took an hour and 20 minutes. I said, "It's lunchtime" and ran! I felt sickened, nearly ran for the airport and left the country. Then the Head came up and said, "Thank you! That was amazing!" And that was the beginning of lots work in Ireland – people kept hiring us. Keeping it that simple. I did it again the other day with 19 hotel managers – at the end the Managing Director was crying with what people had said. Something so little and so apparently inconsequential can have this staggering effect.

Another thing I learned – doing a three day consultation for a public sector organisation in massive disarray, one of the people at the end said, "When you look at what's wrong with an organisation you become immobilised: it's like you are

living in a heavy fog. I thought looking at what was working was just being Pollyana-ish, but actually by looking at what's working it's thrown a light on everything. I can see much more clearly what's wrong AND I have a sense of what to do about it." Looking at what's working does throw a light on things, while looking at what's not working switches the light off.

How has SF practice come on during the last 24 years, between 1986 and 2010?

It's come on apace. Stephen Palmer got it right at the UKASFP conference where he said that it had spread so far and was so thin and so close to the ground that it could get subsumed by more hierarchically organised things like CBT. Its future as a separate entity is by no means certain. What I am most proud of is that we have been a small but significant part of this big shift towards looking at appreciation and valuing strengths and resources that is creeping into everyday work. SF is not the only thing that does this but it has made a great contribution. One of the most common pieces of feedback we get from people who did courses years ago is that they don't use it, but they are not afraid of taking on tough cases ever since. This is a massive shift in social work and the public sector – which suggests that they seem to be looking at their clients as people (with strengths) rather than problems and deficits.

In education it's in incredibly high places without being mentioned – there are so many people in the upper echelons of education who are ex-educational psychologists, and almost all of them did courses with us. I bump into people who say, "It's been with me ever since the course in 1990". You wouldn't know they were SF, but it is there in their minds.

Does it matter that you wouldn't know they were SF?

This is one of the difficulties – lots of people have been touched by it, but because it's what it is, it doesn't stop you from getting on with who you are. You can do a course and love it and be influenced by it for the rest of your life without actually thinking, "I am an SF person".

So is it frustrating that you have trained so many people – over 100,000 at BRIEF – yet the number of people who use SF as their main approach is so small?

If I was 10 years younger it might! My future has visible limitations on it now, and I can't keep working for ever.

So if people are going off and using it in their lives rather than as an approach or technique, perhaps that is the revolution succeeding?

Yes, it has changed some of the underpinning ideas in social work and mental health. In organisations as well, though a lot has come from NLP, which is to some extent charting the same ground.

So how would you LIKE to see the SF world developing?

I would like to see it become a recognised therapy, so people can do it under its own name legitimately. I would like to see it accredited within a national accreditation – not just with UKASFP but linked to UKCP or one of the other organisations – a Government recognised accrediting body that doesn't just accredit itself. Everything is changing so much that it's not easy to see how this will happen. I must say that, having been involved in getting family therapy accredited, I wouldn't fancy the sheer bureaucratic drudgery that goes into it. It also suffers from the name a bit – everyone can say they are solution-focused – it's just a description.

Have you ever thought of an alternative name?

No – that would be like stealing something, like stealing a car and changing the number plate. We owe an enormous debt to Steve and Insoo, and it wouldn't be right to tamper with it – though if our survival depended on it I guess we would.

How do we bridge the gap between matching national UKCP standards even though this is a much simpler model which can be learned much more quickly?

This is a really difficult one. We at BRIEF can imagine running a training which fits UKCP – four years with clinical this and that – and you could teach people to be better and better at it (or you could think you were doing that anyway). The probability is that they were just as good before they started – just not necessarily as elegant. There is this dilemma that when you are teaching close up you can get ever more picky in your standards. So it may be that it won't be accredited by the overarching bodies because they have a different view of therapy. I would prefer it to be shorter rather than longer.

Maybe SF will become a sub-therapy model – a level of training for non-therapist practitioners. I can see there being a level of training, and it could be that SF becomes a basic approach. If I was organising IAPT (Improving Access to Psychological Therapies) around the country, I would have loads of SF practitioners with a few days training doing the front-line work. They wouldn't have to be brilliant at it: half their clients would be dealt with adequately, then you could have other more trained people picking up the rest. I can see SF working better at that than any other therapeutic model. It would downgrade it in therapists' eyes, which might get in the way of it being seen as a model ... but there would be something to be said for a massive army of not massively trained but competent junior counsellors.

So would it be OK for it to be seen as a junior counselling approach? It's surely a mistake to think this is only applicable for mild disorders.

Yes, of course. But if this is your screening process, then you see everybody. And if they improve in response to a low level person, then they must have been mild! (Laughter.) That's what the mental health profession does – it must have been mild or it

wouldn't have worked. It's a tough one though – thousands of SF counsellors doing a good job and being looked down on by other therapists, or a few super-SF therapists still being looked down on by other therapists for being shallow.

Finally, do you see SF as a revolution in how we look at people, or a nice little technique?

It's part of a revolution. The Recovery model, which is big in Scotland, is nothing to do with SF but SF is exactly the right language. SF conversations fit this for taking Recovery down to front line professionals. Like all these revolutions, something at a deeper level moves and the revolutions spring up in different places and start bumping into each other – different reactions to current philosophy. No doubt there will be a hardening reaction to the perceived softness of SF at some point in the future, and all the therapists will put their big boots on again. I see the survival of SF as an issue for the younger generation!

What else should we have asked you about?

I would not be here without Evan George and Harvey Ratner – we have been a threesome for 24 years now. Our conversations have always pushed my thinking and these thoughts are not from my head alone.

Thank you very much

Reference

Iveson, C. (1990). *Whose Life? Working with older people*. London: BT Press, revised and expanded 2001.