

RESEARCH REVIEWS

Solution Focused Practices: Pick of the (Other) Papers 9/2

Mark McKergow¹^a, Andreea M Żak²^b, Rytis Pakrosnis³^c

¹ Centre for Solution Focus at Work, ² "Differently" Psychotherapy Centre, Wadowice, Poland, ³ Vytautas Magnus University, Lithuania

Keywords: research review, practice description, effectiveness, outcomes

<https://doi.org/10.59874/001c.154352>

Journal of Solution Focused Practices

Vol. 9, Issue 2, 2025

This current edition of the Pick of (the Other) Papers includes a selection of six articles published in 2025. Four separate papers describe intervention programs based on the solution-focused approach in the social care, clinical, medical, and coaching settings. One paper presents the validation of a translated version of the Solution-Focused Inventory. One paper explores the evolution of the Solution-Focused Brief Therapy via bibliometric analysis.

In this latest edition, we have selected a variety of papers published in other journals in 2025. Once again, these publications from very different corners of the world. Four separate papers describe intervention programs based on the solution-focused approach in the social care, clinical, medical, and coaching settings. One paper presents the validation of a translated version of the Solution-Focused Inventory. One paper explores the evolution of the Solution-Focused Brief Therapy via bibliometric analysis. More references can be found on the online lists hosted by [EBTA](#) and [SFBTA](#).

Recommended Papers Ordered Alphabetically by Author's Name

Development and psychometric evaluation of the Hebrew version of the Solution-Focused Inventory (SFI-H).

Authored by: Atad, O. I., Spence, G. B., & Grant, A. M.

Published in: *Consulting Psychology Journal. Advance online publication*, 2025, <https://doi.org/10.1037/cpb0000307>

Availability: Subscription or purchase required

This paper presents the validation of the Hebrew version of the Solution-Focused Inventory (SFI). SFI was originally developed by Anthony M Grant and his colleagues in 2012 (reference below) to assess solution-focused thinking style. It was based on the tripartite solution-focused thinking model comprising Problem Disengagement, Goal Orientation and Resource Activation. SFI contains 12 items assessed on a six-Likert scale (four items per scale).

a Mark McKergow is director of the Centre for Solutions Focus at Work, based in Edinburgh, Scotland. He is also editor-in-chief of the Journal of Solution Focused Practices. Email mark@sfwork.com

b Andreea is research editor of the Journal of Solution Focused Practices; email info@psychoterapia-inaczej.pl

c Rytis Pakrosnis - Vytautas Magnus University, Kaunas, Lithuania; email: rytis.pakrosnis@vdu.lt

The scale was validated on a total of 1,095 Master of Business Administration students. The three-factor structure was confirmed as in the original Australian study. Additionally, the convergent and divergent validity of the measured construct was confirmed in comparison to other validated scales, showing that SFI measures a specific thinking style not encompassed on other measurement tools. Additionally, SFI was found to be a better predictor for entrepreneurship performance compared to other measurements of psychological capital, thus confirming the potential beneficial effect of building a solution-focused thinking style.

The relevance of the paper consists in the cultural extension of the validity of the solution-focused thinking as conceptualized in the SFI. This study adds to existing validation studies of SFI in Chinese, Spanish, and Turkish languages. The replication of the good psychometric properties and identical factorial structure extend the possibility to study solution-focused concepts across cultures, allowing not only for cross-cultural comparisons of results, but also potential cross-cultural research using a similar methodology.

- Grant, A. M., Cavanagh, M. J., Kleitman, S., Spence, G., Lakota, M., & Yu, N. (2012). Development and validation of the solution-focused inventory. *The Journal of Positive Psychology*, 7(4), 334–348. <https://doi.org/10.1080/17439760.2012.697184>

Mapping the Landscape of Solution-Focused Brief Therapy: A Bibliometric Analysis

Authored by: Fernandez, J. A., & Fernandez, J. A.

Published in: The American Journal of Family Therapy, 1–23, 2025, <https://doi.org/10.1080/01926187.2025.2472775>

Availability: Subscription or purchase required

This review paper contributes to the accumulating body of the literature aiming to look at solution-focused approach from above and grasp development and evolution trajectories of the approach. Specifically, this paper presents results of a quantitative bibliometric analysis of SFBT to assess the main trends, impact and evolution of SFBT research, identify key contributors, identify gaps and potential directions for further development.

A Scopus database was used as the primary source, limiting the coverage of available research on SFBT and at the same time guaranteeing that only papers published in well-established and impactful sources were covered. In addition, only papers published in English were included. The search resulted in the pool of 458 papers published between 1990 and 2024.

Results of the bibliographic analysis revealed number of interesting trends, suggesting the rapid growth of SFBT research literature, particularly in the last three decades, reflecting its increasing global dissemination across diverse geographical regions and spread in various contexts including mental health, education, and social work. The reader can find intriguing facts such as

which countries, institutions and authors have been the most productive in publishing, which journals have been publishing the most of papers on the SFBT, which papers have been cited the most and so on. The authors also provide a visual map of the main keywords used in the papers.

Concluding their work, the authors suggest that the scope of SFBT research should be expanded to include more diverse populations and settings, and that long-term outcomes of SFBT interventions should be studied more. Overall, the paper provides a valuable and detailed picture of the main trends and trajectories in the solution-focused literature.

Enhancing performance, self-efficacy and well-being: A randomised controlled study in solution-focused business coaching

Authored by: Gerhát, R., Ocsenás, D. and Münnich, Á.

Published in: International Journal of Evidence Based Coaching and Mentoring, 23 (1), 24-48, 2025, <https://doi.org/10.24384/7s2w-9g73>

Availability: Open access

The paper is a valuable contribution to the research on the solution-focused coaching in business context – a subject that has been lacking scholars' attention, despite the widespread use of the solution-focused approach in organisations. An important highlight of the paper is that it presents a comprehensive overview of the literature on the solution-focused coaching and related research, followed by the formulation of the research question, i.e., whether participation in a solution-focused coaching (SFC) enhances performance and the likelihood of successful goal attainment, while also increasing self-efficacy, well-being, positive affect, and reducing negative affect.

Another advantage is that the presented study was conducted using a randomised controlled trial with 84 employees of a large international company randomly assigned to either an experimental group ($n = 43$), participating in three individual SFC sessions, or waitlist control group ($n = 41$). To measure the effectiveness of the SFC immediately after the intervention and at the four months follow-up, multiple assessment methods were employed including self-report questionnaires and 360-degree performance evaluations.

Results revealed that the SFC, as compared to the waiting list control group, had a significant positive effect on employees' performance, self-efficacy, well-being, positive and negative affect. Importantly, part of these significant improvements was also maintained at the follow-up assessment four months after the coaching programme.

Authors also provided several recommendations for future researchers and practitioners, stressing that the SFC could and should be implemented in business organisations looking for brief, goal oriented, engaging and effective coaching model.

Feasibility of Solution-Focused Brief Therapy for individuals with alcohol use in primary health care

Authored by: González-Suitt, K., Barriá, R., & Iturrieta, V.

Published in: Journal of Ethnic & Cultural Diversity in Social Work, 1–11, 2025, <https://doi.org/10.1080/15313204.2025.2510210>

Availability: Subscription or purchase required

The paper investigates the feasibility and effectiveness of Solution-focused Brief Therapy (SFBT) for individuals with hazardous alcohol use in primary health care settings in Chile. The authors review what is known about alcohol misuse in the Chilean context - it has the highest percentage of the population with Alcohol Use Disorder (AUD) in the Americas at 8.5%. According to the Chilean National Survey of Health, 11.7% of adults 18 and older had risky alcohol use. Alcohol use is one of the main causes of the loss of healthy life years in this territory.

The study employed a single-group pre-to-post-test design to assess the feasibility of SFBT. Eight primary care social workers from four clinics were trained in the SFBT model in a 16-hour training based on the manual published by the Solution-Focused Brief Therapy Association (SFBTA). These workers then carried out SFBT interventions with a convenience-based sample of patients based in Renca, Santiago, Chile. The intervention consisted of 3 to 4 individual 30-to-40-minute-long sessions. 34 patients signed up to start, which ultimately reduced to 14 after drop-outs (mainly people who signed up but did not start the programme) and two cases eliminated for non-adherence to the protocol. Pre- and post-intervention measures used included a Timeline Follow-back of alcohol consumption, PHQ-9 depression scale and family health scale SALUFAM. Non-parametric statistical analyses were conducted to evaluate changes in alcohol use and mental health.

Statistically significant decreases in alcohol use patterns, consequences of alcohol use, and depressive symptoms were identified. Average alcohol use decreased from 2.6 to 0.9 drinks per week post-intervention. Maximum alcohol use on one occasion decreased from 9.6 to 3.8 drinks. Depressive symptoms decreased significantly, with scores dropping from 12.167 to 4.000 post-intervention.

The findings support the feasibility and effectiveness of SFBT in primary care for hazardous alcohol use. However, no significant changes in family health variable were observed; future interventions should consider including family members in sessions or discussions. According to the authors, greater inclusion of support networks aligns with systemic-ecological theory. The study highlighted a significant gender disparity in alcohol use, with only two out of the 14 participants being women. The low female participation was attributed by the authors to stigma surrounding alcohol use among women in Chile. They recommend primary care teams to adopt specific relational techniques to engage women in discussions about substance use.

Limitations identified in the study are the small sample size of 14 individuals and no comparison group. There was an approximately 50% attrition rate among participants who signed informed consent. Nonetheless, the authors present several important signposts for the future:

- Social workers were trained in the SFBT model, enhancing evidence-based intervention options.
- Non-medical practitioners can effectively provide healthcare services for hazardous alcohol use with proper training.
- Policymakers should consider adopting SFBT for brief interventions in Latin American countries due to its cultural sensitivity and efficacy.
- Further research is needed to explore the effectiveness of SFBT and other brief interventions for substance use.
- The study concludes that SFBT is a promising approach for addressing alcohol use in primary health care in Latin American countries.

Bringing solution focused practice to frontline social care in England

Authored by: Harrison, A.

Published in: Child Protection and Practice, 5, 100177, 2025, <https://doi.org/10.1016/j.chipro.2025.100177>

Availability: Open access

This article presents the development, outcomes and implications of an intervention project employed in the context of social care in the United Kingdom. Following the 2007 death of Peter Connelly (“Baby P”), social care in England became more risk-averse, leading to rising numbers of children in foster care. Essex County Council launched the Divisional Based Intervention Team (DBIT) in 2012, using the Solution Focused (SF) Approach to keep children safely at home. The outcomes of the pilot year were described as ‘phenomenal’ in terms of feedback from the families and measured quality of life outcomes. There were also significant cost savings connected to keeping children out of foster care. DBIT became a permanent service in 2013.

In the following years Essex expanded SF services, training staff internally and externally, and hosting national conferences. In 2018, the Essex Solution Focused Centre (ESFC) was formalised to deliver training and support. This paper describes the Concept Team Project (2021–2022), consisting of Newly Qualified Social Workers (NQSWs) which were created during the COVID pandemic.

ESFC designed a wraparound SF training program including weekly workshops for NQSWs (including teaching and reflection), alongside regular training and reflection sessions for managers and practice educators. The aim was to embed SF practice, support wellbeing, and strengthen professional identity.

The NQSWs reported clear progression in using SF techniques, improved confidence, stronger relationships with families, and wellbeing benefits. Managers and practice educators found the training relevant, supportive, and effective in embedding SF practice. 100% of NQSWs passed their Assessed & Supported Year of Employment (ASYE), a notable achievement given national disparities for minority ethnic groups. Wider service feedback highlighted improved resilience, competence, and positive family outcomes.

Success factors included involving multiple stakeholders, ongoing feedback loops, safe learning environments, regular, short, contextualised training, balancing SF teaching with wellbeing support and including managers and educators in training. The model has subsequently been repeated with similar success. ESFC is rolling out SF training to other UK local authorities (2024–2025) and is now being scaled nationally as a model of best practice. Future work should include more robust long-term evaluations, including direct feedback from families, to guide future investment.

Effectiveness of a Remote Intervention Program for Self-Management Behaviors in Adolescents and Young Adults With Inflammatory Bowel Disease Based on the Self-Determination Theory: Randomized Controlled Trial Across 2 Centers

Authored by: Zhu Y, Chen Y, Hu J, Wan X, Guo H, Zhou X, Wang D, Zhang X, Zheng X, & Wang H

Published in: Journal of Medical Internet Research, 27, e79370, 2025, <https://doi.org/10.2196/79370>

Availability: Open access

In this paper a multicomponent intervention program was evaluated in the context of adolescents and young adults (aged 13 to 24 years) with inflammatory bowel disease (IBD) confirmed by ulcerative colitis or Crohn disease diagnosis. The program included solution-focused intervention combined with health education, peer support and mindfulness training. The effect of the intervention was examined for self-management behaviours, disease activity, perceived social support, anxiety, depression and basic psychological needs, in line with the self-determination theory for self-management behaviours in chronic conditions.

For this purpose a randomised controlled trial was performed simultaneously in two separate health centres in Chongqing, China covering a period of seven months. 74 participants were recruited and randomly assigned to the intervention or control group. The control group received only routine care: health education during hospitalization and doctor-patient online contact following discharge. The intervention group received the

routine care alongside the multicomponent program provided by nurses in a weekly remote conference format, over a period of 9-weeks. The participants, recruiter, evaluator and statistical data analyst were all blinded in what concerned the allocation of the participants.

There was no significant difference between groups on the outcomes of interest prior to the intervention. The multicomponent intervention group reported statistically significant better results on self-management and perceived social support compared to the control group at both post-intervention and 12-weeks follow-up, though the effect sizes were in the small range (η^2 = between 0.082 and 0.206). Also, the intervention group reported significantly lower anxiety and depression scores post-intervention and at the follow-up compared to controls. While no difference in disease activity was found between groups at post-test, significantly more participants from the intervention group experienced remission at follow-up compared to controls, confirming the positive effect of psychological health on physical health.

The findings extended the self-determination theory for self-management behaviours in chronic conditions by showing its application in the context of inflammatory bowel disease. Within this framework, the solution-focused intervention was used to activate personal resources and increase participants' satisfaction of basic psychological needs. This study adds to the evidence of positive effects of solution-focused interventions in the medical context.

Submitted: December 08, 2025 BST. Accepted: December 14, 2025 BST. Published: December 19, 2025 BST.



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