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Book Review - Practising positive CBT: From reducing distress to building success

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Practising positive CBT: From reducing distress to building success

Fredrike Bannink
Paperback. 320 pages. €40.00 ($A67.95)

Review by Ian Johnsen
Independent Solution-Focused practitioner, trainer & supervisor.

This book is all about Solution-Focused ideas; however, it is not aimed primarily at Solution-Focused practitioners. Bannink states in the preface that the book is “aimed at professionals who would like to adopt a more positive approach to psychotherapy and CBT or who would simply like to increase the range of techniques available to them.” So, the target audience is CBT practitioners who, the author hopes, might be persuaded to incorporate more positive ideas in their practice. However, she does suggest that therapists trained in Positive Psychology (PP) or Solution-Focused Brief Therapy (SFBT) will
“find useful information on how to combine elements of CBT with their own therapeutic approach”. I am a therapist trained in SFBT but must confess I have never found much of professional relevance in CBT, so I read this book with a cautious interest.

Bannink has summarised and compiled a number of interesting ideas relating to best therapeutic practice, developments in types of cognitive behavioural therapy as well as ideas from PP and especially SFBT. The compilation, although thorough, works against a more intellectually rigorous and coherent argument that would be needed to convince me that Positive CBT was anything more than SFBT with some added bells and whistles. By the book’s end, I was still not in favour of encumbering SFBT with ideas from PP. The book does, however, show that it is possible to turn every problem-focused CBT technique on its head — into a solution-building technique!

The thoroughness and multitude of summaries work well as signposts to key ideas popular in the field of strengths-based work and for the novice in this field the book may be a good introduction to some of the central themes. The work of Positive Psychology heavyweights, Seligman and Fredrickson, is prominent but the book features many others.

There are 31 stories and parables that often playfully or metaphorically illustrate the more academic points made in the chapters. At times they are rather cheesy but they do lighten the tone. There is also a multitude of exercises (68!) that could give a therapist new to the approach some guidance about how to implement it. Again, most of the exercises would be very familiar to Solution-Focused (SF) practitioners.

There are also what Bannink refers to as case studies throughout the book. They are mostly not actual case studies but short scenarios that provide a platform for the author to suggest a question or highlight practice points. I was concerned at times that due acknowledgment for the some of the ideas presented in the text was lacking. For example, in Case 6.1 (p. 82), she writes of how, in her own therapy practice, she uses the taxi driver/passenger analogy to highlight the importance of a goals having a future-focus rather than a concern with the past — the question a taxi driver and a therapist both need to ask is “where to?” not “where from?” Guy Shennan (2014) attributes this analogy to Chris Iveson but there is no attribution in this text. Likewise, I also think of what is known in SFBT as the “best hopes question” as coming from the work of the team at BRIEF in London (George, Iveson & Ratner, 2013, for example) but again there is no acknowledgement of this here.

The book is divided into sections: section one on theory and section two

1. Interestingly, the “Story 10.1: Brilliant Insights” (p. 166), adapted from Paul Watzlawick (1976), might in fact be read as a warning against undermining the radical simplicity of SFBT!
The theory section provides an overview of traditional CBT before moving on to outline the distinction between problem solving and solution building. There is a chart that highlights differences between traditional CBT and Positive CBT. From the point of view of an SF therapist, however, what is called Positive CBT seems so very much like SPBT that I could not help but wonder what a contrast between SFBT and Positive CBT might tell us.

Bannink outlines and acknowledges that there are already “positive” elements in the developments of cognitive-behavioural practice. She is even clearer in saying that she is in particular drawing on two positive sources for Positive CBT, namely “Positive Psychology and Solution Focused Brief Therapy”.

Whilst it is true that both approaches might be considered broadly strengths-based, I feel they make uneasy bedfellows. In a previous and worthwhile article, Bannink (Bannink & Jackson, 2011) outlined the similarities and differences between SF and PP approaches and indeed there is a page summary of that work in the book (p. 50). She is most certainly aware then that trying to combine SF and PP is problematic. The main issue in my view is that all but the most philosophically informed psychologies, such as work in the tradition of discursive and cultural psychology (Harre & Moghaddam, 2012), has a central concern with identifying abstract universal principles. This is still largely true for PP but not at all true for SFBT. SFBT is about helping people to describe their hopes, what realising those hopes in the context of their day-to-day lives would be like, and in affirming (and as the process goes on reaffirming) what is already working. This type of “not knowing” or “non-expert” approach is hard to reconcile with much of the psychology literature that tends to focus on the “fixed” and “immutable”: personality, key character strengths or neurophysiological responses such as the flight-or-fight response. That level of abstraction, in which universal claims are made, works against understanding the unique specific historical, social, material and spiritual contexts in which people live and respond to others.

A good therapist working with SFBT is likely to be quietly mindful that with between 120 and 150 neurotransmitters working across billions of sites between someone’s ears we would be wise not to abstract and generalise in our work with people. Rather, we ask them about their own experience. An interest in what is happening between their nose and the noses of other people in their life rather than an interest on what is happening between their ears. From this perspective I find information about oxytocin, dopamine, endorphins, cortisol and GABA (pp. 56-9) not particularly useful.

The two sections on applications have the same strengths and weak-
nesses: good summaries of research, extensive use of well known SF techniques (and some from PP), good points about goals, the alliance, emotions, the importance of feedback and myriad helpful topics relating to therapeutic work. There is also a section on frequently asked questions that a novice therapist might find useful.

Perhaps I might have been more convinced that there was a distinct practice called Positive CBT if the text had included some transcripts of therapy conversations. These would have shown just how the questions fit together and how the process of this sort of work might be different from SFBT. Unfortunately, transcripts are notably absent.

Overall, I’m not sure that the essential rationale for this book is valid. Bannink hopes that CBT practitioners might blend (my word) SFBT ideas into their work. She also hopes that SFBT practitioners might blend CBT techniques into their work. However, I am not persuaded about the basic compatibility of SFBT and CBT (although, on her web site, Bannink claims “SFBT can be seen as a form of CBT” (Bannink, 2014). I’m not sure if Bannink REALLY thinks they rest on the same theoretical and philosophical foundations (in which case, see McKergow & Korman, 2009; Miller & McKergow, 2012) or if she simply thinks that bringing SFBT and CBT closer together will lead to an increased acceptance of the validity of SFBT.

References


**The reviewer**

Ian Johnsen is a psychologist and independent Solution-Focused practitioner, supervisor and trainer in Wollongong, south of Sydney. Ian has had many years of experience facilitating discussion and reflective practice sessions with management teams and with staff working in direct service delivery or casework, as well as with fellow psychologists and therapists. He continues to work on an ongoing basis as a therapist for families in crisis and as a counsellor in a variety of settings. This ongoing experience ‘at the coalface’ along with decades of experience in child protection and case management in human services informs his work.

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