

**Solution Focused Somatic Spiritual Brief Therapy (SFSSBT)**  
**Expressed Visually in a Double Pyramid Mind Map**  
**as a New Holistic Cross-cultural SFBT Technique**

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## **Abstract**

Solution Focused Brief Therapy (SFBT) has been proven to be a positive evidence-based therapeutic counselling approach for individuals and groups cross culturally. SFBT is built on a positive solution forward focused therapeutic formulation, addressing the initial and or presenting issues or problems, bridging towards growth, inner resources, hope and change. The introduction of Solution Focused, Somatic, Spiritual Brief Therapy (SFSSBT) including Mind Mapping is based on a generalist holistic theory of a three-part, mind, body, spirit, problem, bridge, solution, process of change. SFSSBT utilizes a double pyramid mind map as a physical aural or visual representation of change within a psycho-therapeutic counselling session. SFSSBT is a client-centred SFBT approach to counselling that focuses on how change occurs, word by word and is witnessed emotionally, somatically, spiritually and visually, based on the clients' personal resources and cultural narrative. SFSSBT allows for a new holistic counselling technique that is client-centred, simple, positive and a co-collaborative approach, adaptable for clients that are physically, socially, spiritually and cross culturally unique.

***Key words:*** *Solution Focused, Somatic, Spiritual, Brief Therapy, Holistic, Double Pyramid Mind Mapping, Cross Cultural, Collaborative, Client Centered*

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Peace Love Healing Community Unity Dignity and Humanity Always!

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## Chapter 1: Introduction

Solution-Focused Brief Therapy (SFBT) differs from traditional therapies by focusing on and being in favour of, the present and the future versus the past (Truscott et al., 2021, p. 371). It is an optimistic, future-focused, goal-oriented psychotherapeutic approach to brief therapy, developed initially by Steve de Shazer and Insoo Kim Berg, and their colleagues in the 1980s, out of the Milwaukee Brief Family Therapy Centre (Ime, 2019). Berg and de Shazer recognized the need for a positive future solution approach towards an individual or family goal. SFBT believes that an individual can achieve change within a short period of time (Ime, 2019); it evolved into a radical approach that changed the therapy focus, from problems to what was called “solutions” exceptions to the problems, strengths, improvements, and goals (de Shazer, 1994; de Shazer et al., 2007).

SFBT emphasizes strengths, exceptions, resources and resiliencies, in a client-led collaborative process of recreating a new narrative and language, during the counselling session. Narrative research is a design of inquiry in the humanities in which the researchers study the lives of an individuals and ask to provide stories about their lives (Creswell, 2018). SFBT has been described as a practical, goal-driven model, with its emphasis on clear, concise, realistic goal negotiations (SFBT Institute, 2025). It has not only become one of the leading schools of brief therapy, it has become a major influence in such diverse fields as criminal justice, social welfare, education, child welfare, and is utilized in domestic violence offenders treatment. The client works collaboratively with their counsellor, in a client led directive towards presenting solutions for problems and issues. Bidwell (1999) expresses that change is an opportunity to make alterations in life during a solution-focused therapy process, proposing that problems and challenges in life are all temporary, and turn into real problems, depending on the meanings we attach to them. It is important for solution-focused therapists to understand the effect of the client’s worldview on the problem and its solution, in order to understand the world perception of

different cultural groups and the idiosyncratic thoughts of individuals living in these cultures (Ime, 2019). SFBT is a therapeutic approach that emphasizes building solutions, rather than focusing on problems, as a holistic three stage of change, psychotherapeutic technique.

A SFBT miracle question is pertinent in moving a negative narrative forward towards a recognition of resources and solutions, within the reach of the client's control. Zatloukal et al. (2020) describe it as a forward and positive curiosity question, that is simplified, into a series of words, or a one-word question and/or answer (Bannink, 2006). If a client's presenting issue is a problem with their family, a question such as, 'what kind of relationship would you like to have or have had with your family', could represent the miracle question. Researchers have noted that the specific questioning techniques, for example, the SFBT miracle question and the qualitative, scaling, and quantitative questions are proven methodologies that are paramount for facilitating a client's therapeutic change (Franklin et al., 2017). Scaling questions are foremost in being able to have a numerical range, representing from lesser to greater feelings or changes that have occurred, within, outside and or between therapeutic sessions. Sessions can range from one to ten or more, depending on the specific problems or issues being presented.

Ime (2019) noted that a client's range of self-disclosure with a focus on solutions rather than problems, has shown, that a SFBT approach can be used effectively for different cultures and is practiced in various cultures. The fact that the client is active during therapy and the therapist is not an "expert" is significant in SFBT during the therapeutic period, as this type of therapy is not based on a physiological theory. The opening question of "What is your best hope/expectation from working with us?" asked by the therapist is a universally acceptable question. (Ime, 2019). There has been an international interest in the study of SFBT with researchers from North and South America, Europe, Africa, Asia and the Middle East, as discussed in Chapter 2.

## **Overview of the Topic**

SFBT utilized in the field of counselling has led to a diversity of benefits from its relative cultural contexts. It can be used holistically and cross culturally due its client-centred individual approach to their presenting issues and the relative nature of available resources, utilized within their particular stage of personal change (Raihan et al., 2023). I aim to present and critique how SFBT has been used in recent literature and within its origins, holistically and cross culturally. Based on this critique, I will propose an extension that introduces a new three-part methodology that is a solution focused process of change, including somatic movement and spirituality. The goal is bringing in a simplistic creative modality and a new SFBT holistic point of view and a visual representation of a client's process of change, within the counselling container.

My proposed extension to SFBT, which I have termed Solution Focused Somatic Spiritual Brief Therapy (SFSSBT) includes mind mapping, as a creative methodology, is introduced as a simplistic formulation, for incorporating solution focus questions, somatic awareness and spirituality within a therapeutic session. Its methodology allows for deeper clarity and understanding for the client or group, as they become a witness to their own thoughts, feelings and somatic movements. My research has focused on SFBT, Somatic and Spiritual practices and literature from a generalist perspective, while focusing on all three techniques within one therapy, including a creative form of utilizing a double pyramid mind map.

## **Theoretical and Conceptual Framework**

In writing this Capstone, a client-centered, strengths-based, spiritual, somatically informed and culturally-centered approach is used. The client's resources are a prominent factor in the success of SFBT; these resources and powers may include cultural elements. Lee (2003) indicates that cultural power sources are helpful in the healing and recovery period of clients. In 2022, Franklin initiated a global study was done to review the research on the efficacy of SFBT,

and found SFBT is not construed as a particular therapy for specific “disorders”, but as a general procedure that can help all kinds of clients achieve their own goals. Franklin also stated the importance of the counsellor working in collaboration with the client, from a position of curiosity and humility (Franklin et al., 2017). Levine (2023) speaks of how trauma therapy for the future can be more important than trauma therapy for the past, which is in sync with the solution focused forward framework of SFBT.

My lens also includes spirituality, as a vast field that transcends many cultures and religions. In relationship to this three-part process of change, the literature will show how clients responded to and positively reacted to the presentation of spirituality, and their own personal form of it, and what worked for them in counselling. Spirituality is the most fundamental of all human wellsprings inside of us. When we decide to cultivate the inner values that we all appreciate in other people, we begin to live spiritually (Lama, 2017).

SFBT utilized in the field of counselling has led to a diversity of benefits from its holistic and cultural contexts. Introducing spirituality and somatic therapy in collaboration within a three-part mind, body, spirit, process of change, allows for a holistic positive addition to the clients experience within a SFBT counselling session. Creative methodologies within Somatic Expression therapeutic techniques have been proven to be helpful with the incorporation of mind mapping (van der Kolk, 2014).

### **Contribution to the Field of Counselling**

Three-part change is seen in different psychotherapeutic modalities and foundations of solution focused, somatic and spirituality in therapy including creativity. I argue that my proposed extension to SFBT through incorporating mind mapping allows for inclusive and simplistic client counsellor collaboration, observation, visual representation and witnessing of

the client's own process of change. Client change involving three main areas of transition, representing the Issue or Problem, Bridge/Miracle Question and Solution. SFSSBT and Mind Mappings concept coincide with other theories that will be reviewed within the literature, serving as a beneficial approach to holistic and cross-cultural counselling.

### **Reflexivity and Positionality Statement**

I came into this world with love. I was born in England in the 1960's and moved to Canada with my family of seven. My parents are of Jamaican, Scottish, Indian and African heritage. Growing up, I was exposed to a myriad of many different strong and influential cultures and communities that helped shape my personality. I was securely attached to my mother and father and my brothers and sisters. If the quality of the child and parent relationship was securely attached, it allowed for a greater opportunity of success, even in the face of early adversity (Waters et al., 2018). I have carried the love I came into this world with and experienced the first five years of my life with my mother, father and family into my present-day reality, as my core basis, for answers and solutions within my life and work. What would love do, would be the core question I would ask myself. The experience of love is relative to each individual and a word that is reflected throughout the history of the world's great religions (Shealy et al., 2006, p. 119) (see Appendix 6).

We all have our own experiences and definitions of love, personal, familial, religious, societal or cultural, yet there are definite cultural commonalities (Shealy et al., 2006) which are at the foundation of spirituality. Even though I find the word "love" is not used that often in counselling, I have noticed in the literature and in the observation of many families dealing with presenting problems and issues that; couple and family therapy has generally focused on issues of power, control, autonomy, and the mediation of conflict, to the exclusion of nurturance and love (Johnson et al., 1996, p. 27).

I became a conscious observer of actions, words and behaviours by age seven. I was always asking questions, had curiosity and wanted to understand how people ended up in both positive and negative situations. My modus operandi was to repeat the positive, learn from the negative, and try not to repeat negative behaviours, which is at the core of SFBT. I could never understand how there was so much pain, tragedy, sorrow, trauma and suffering throughout the history of humankind, I was more concerned with love, positivity, peace, health and happiness. I am naturally quite altruistic and idealistic and feel there is a solution for every problem. This positive and reflective way of being present in the world, served me well for finding solutions to the separation of my family, when we arrived in Canada and my mother getting unfortunately caught in the mental health system. Our once stable family had been placed within the social welfare and foster care systems, experiencing times of cultural displacement, oppression and racism. Outside of the social systems my father was able to gain guardianship and take care of all five children, until we were old enough to make our own decisions. My loving mother got stuck in the revolving door of the mental health system and sadly passed away when I was 18 years old. No matter the disruption and despair that happened within my young family there was always this deep thread of love that flowed through my blood. That beautiful foundation of love I experienced as a child, allowed for me to have hope and to continue walking forward in my own life, developing positive relations through family, love, creativity, spirituality, health, happiness and humanity.

Throughout my entire youth and adult life, I have spoken to and worked with psychiatrists, psychologists, therapists, managers, healers and helpers, within the walls of many mental, social, spiritual, creative, disciplinary, academic and holistic health care institutions and establishments. My personal and professional experience was diverse and extreme, working as an advocate with people on the streets and as a professional manager for individuals on the cover of global magazines. I have always held hope, compassion, loving kindness (Salzberg, S., 2025)

and understanding of how individual lives and cultural circumstances and narratives can lead an individual down one path or another, manifested in both incredible visions and dreams or tragedy and sorrow.

My name “Olive” means peace and was my grandmother's name. I first studied and learned about energy, meditation and metaphysical holistic healing at the age of 13. The first book I ever consciously chose to read was about “energy.” As a young teen I was chosen to be alone on stage, at my very first energy course/conference, demonstrating the power of meditation and metaphysical healing. My mother sang gospel music, and both my parents prayed at every meal and attended church. My brother had a copy of the first little blue self-printed version Louise Hay, *You Can Heal Your Life* (Hay, 1984). I began writing poetry at the age of 16. My best friend gave me my first journal to write in, because I was so intense, deep and thoughtful, and questioned everything. She felt I should get my thoughts out of my head and heart and that writing would be a good release for my emotions. I am forever grateful to Lisa, for that profound observation. My favourite poet is Kahlil Gibran, who wrote “The Prophet.” I became a certified practitioner of acupuncture and traditional Chinese medicine over 30 years ago. I recognized the need for a therapeutic method of releasing trapped emotional, psychological and physical energy.

My focus is on the healing and the helping elements that are within the foundation of solution-focused, somatic and spiritual therapies and other therapeutic techniques and practices, through a holistic, feminist, cross cultural, spiritual and mindfulness lens. My purpose as a counsellor is to allow for clients to be in a safe warm and loving place, where they can freely express and release their unique narrative, their pain, joy, needs and path to their authentic self.

Working with clients in a person-centred, problem, bridge, solution focused framework, is my therapeutic goal, within the counselling container. My core belief of love and safety has been a foundational element in all the different kinds of work I have done, with people throughout my life. I have had a deep and broad array of experiences, leading to a collective cultural

container, of working with thousands of individuals and professionals in a variety of capacities. I also pursued an undergraduate degree in Anthropology and Psychology, to understand the history of humankind, and the human mind. Mind, body, spirit, balance, positivity, creativity, and a holistic and cross-cultural approach to life, love, growth, energy and healing, is a position that has been my stance throughout my lifetime. It is these elements that I bring to the field of counselling and to the healing arts, with my theory of Solution Focused, Somatic, Spiritual Brief Therapy and Mind Mapping.

### **Definitions of Terms**

**Altruism** - The willingness to do things that bring advantages to others, even if it results in a disadvantage for yourself (Cambridge Dictionary, n.d.).

**Co-construct** - Increasing numbers of counsellors practise using social constructionist (e.g. narrative, collaborative language systems and solution-focused) approaches. Social constructionist theory holds that matters such as 'understanding' are constructed and upheld in human interaction (Strong, 2006).

**Collaborative** - We identified three major themes related to practitioners' experiences of collaborative practices: (1) walking alongside through negotiated dialogues, (2) maintaining human relationships, and (3) maneuvering relationships and services. (Ness et al, 2014).

**Compassion** - A strong feeling of sympathy and sadness for other people's suffering or bad luck and a desire to help others (Cambridge Dictionary, n.d.).

**Core** - The basic and most important part of something or someone. (Cambridge Dictionary, n.d.).

**Cross Cultural** - An examination of how behavior & experience are influenced by culture & intersectionality. Emphasis is given to increasing counselor self-awareness, knowledge, & skills

necessary to apply counseling theory & technique to diverse populations & settings. (Pedersen & Ivy, 1993).

**Culture-centered counseling theory** - emphasizes social-cultural conditions by examining contextual factors that influence client empowerment and self-awareness. (Pedersen, 1991; Pedersen & Ivy, 1993)

**Cultural Imperialism** - Eurocentric philosophy of education has alienated and affected some of Africa's indigenous education systems. Missionary excursions in Africa and the subsequent colonisation, modern forms of schooling were introduced and expanded phenomenally and with it came notions of cultural imperialism, which tended to denigrate many if not all forms of indigenous knowledge education systems (Lukong, 2020).

**Holistic** - Holistic counseling is based on a belief that each person is an integrated whole. This integrated whole includes physical, social, psychological, and spiritual concerns. (Lair, 1996)

**Implicit Memories** - Are memories that are laid down in other parts of the brain, including "how to" memories in the striatum and emotional priming memories in the amygdala; there is evidence that trauma-related memories may be stored. (Payne et al., 2015, p.12).

**Introspection** - Introspection boosts self-awareness, emotional regulation, resilience & personal growth. Effective self-reflection uses mindfulness to identify feelings, align actions with values & manage discomfort. Self-reflection questions should explore values, experiences & patterns to foster self-discovery and growth (positive [psychology.com](https://www.positivepsychology.com), 2025). Introspection differs from cognitive therapies in that its major interventional strategy involves bottom-up processing by directing the client's attention to internal sensations, both visceral (interoception) and musculo-skeletal (proprioception and kinesthesia), rather than primarily cognitive or emotional experiences. (Payne et al., 2015, p.12).

**Love** - Love is patient, love is kind. It does not envy, it does not boast, it is not proud. It does not dishonor others, it is not self-seeking, it is not easily angered, it keeps no record of wrongs. Love

does not delight in evil but rejoices with the truth. It always protects, always trusts, always hopes, always perseveres. (Bible Gateway - 1 Corinthians 13:4-8) (see Appendix 6).

**Mindfulness** - A state of awareness involves attending to one's present-moment experience without judgment. Often referred to as a practice in which individuals develop an increased capacity to orient attention toward moment-to-moment experience (including, but not limited to, emotions, thoughts, physical sensations, or movement) with a sense of openness and acceptance (Complex Trauma Resources, 2019, February 24).

**Mind Mapping** - "Mind mapping or "idea" mapping is a "visual, "non-linear" representation of an idea and their relationship, and aims to find a creative association between ideas... promotes creative thinking and encourages "brainstorming" (Davies, 2011, p.281)

**Multiculturalism** - Multicultural counselling seeks to understand how cultural and identity issues impact an individual's mental health and how those factors might influence a patient's relationship with counselling itself. (Sehgal et al., 2011).

**Noble Eightfold Path** - The Noble Eightfold Path is a core Buddhist instrument that is used within a secular scope and is a practice to be implemented when a person chooses to address the issues of suffering (Marques, 2017, p. 1-5).

**Pendulation** - Used in resolving implicit traumatic memories. Pendulation refers to the continuous, primary, organismic rhythm of contraction and expansion. Traumatized individuals are stuck in chronic contraction (Levine, 2015, p. 55)

**Procedural Memory** - Procedural memories start to form very early in life as you begin to learn how to walk, talk, eat, and play. These memories become so ingrained that they are almost automatic (Cherry, 2023). Procedural memory is the memory of how to do things, such as riding a bicycle. It is not accessible via thoughts or images but via physical sensation (proprioception and kinesthesia) (Payne et al., 2015, p.12).

**Proprioceptive** - often referred to as the “sixth sense,” which involves the body’s ability to sense itself in space. Proprioceptive activities in somatic therapy, such as mindful movement and posture awareness, enhance bodily awareness and promote healing. By improving proprioception, individuals can achieve a greater sense of bodily autonomy and control, key components in recovering from psychological trauma and stress (Brenner, 2024).

**Regulation** - The ability to recognize the body sensations and exert control over bodily processes, including breathing, heart rate and muscle tension (Complex Trauma, 2019)

**Renegotiation** - There will be Somatic movements, that could illicit few, or broad steps towards a renegotiation. A new perspective or point of view. (Levine, 2015, p. 36, 43)

**Self Awareness** - Good knowledge and judgment about yourself (Cambridge Dictionary, n.d.).

**Solution focused brief therapy** - Solution Focused Brief Therapy (SFBT) realizes that people are actually quite resourceful, and by focusing on the future instead of the past, resulted in viewing new ways of resolving presenting issues and problems. (Prochaska, 2018).

**Somatic therapy** - Various terms exist for this type of body-focused therapy including somatics, body psychotherapy and somatic psychotherapy. The word somatic means “of, relating to, or affecting the body.” Somatic psychotherapy places importance on awareness of the body’s senses and sensations in connection with emotions. Somatic Experiencing is a specific approach developed by therapist Peter Levine that focuses on the physiological aspects of trauma.

(Lanners, 2024)

**Somatic Experiencing® (SE)** - is a form of trauma therapy that emphasizes guiding the client's attention to interoceptive, kinesthetic, and proprioceptive experience. SE™ claims that this style of inner attention, in addition to the use of kinesthetic and interoceptive imagery, can lead to the resolution of symptoms resulting from chronic and traumatic stress. (Payne et al., 2015, p.12).

**Spirituality** - The difference between religion and spirituality is that religion tends to establish ritual and dogma to support their particular ideological beliefs, whereas spirituality is a personal communion with God, soul or divine energy. (Shealy, 2006, p. 121). (Appendix 5)

**Stages of Change** - The factors that influence “change behavior” have been significantly researched, yet one model is the standard-bearer for change. The transtheoretical model (TTM), and its easy-to-follow steps toward change, make understanding human behavior one of the easiest filters to follow. TTM stages include: 1. Precontemplation 2. Contemplation 3. Preparation 4. Action 5. Maintenance (Raihan, Cogburn, 2023).

**Titration** - It is the middle stage of somatic experience therapy that involves working with the client to process traumatic memories and experiences. This involves working with small pieces of the traumatic experience at a time rather than the entire experience all at once (Marleau, 2023).

### **Outline of Capstone Chapters**

In Chapter 1, I have presented an overview of the Capstone, including a purpose statement, theoretical framework, reflexivity and positionality as well as definitions. In Chapter 2, I will review the literature on the cultural effectiveness of Solution Focused Therapy, as well as how this model can be improved. In Chapter 3, I will propose Solution Focused Somatic Spiritual Brief Therapy (SFSSBT) as a holistic and cultural extension of SFBT.

## Chapter 2: Literature Review

The development of SFBT began with de Shazer and Insoo Berg observing the language or behaviour. Repeated behaviours that led to positive movement in the direction of the client's goal. These qualitative findings were quantified, preserved and incorporated into a Solution-Focused approach to language and behaviour (Lipchik et al., 2012). Steve de Shazer and Insoo Berg (1997) were innovative in reversing the traditional psychotherapy interview process, by asking clients to describe a detailed resolution and answer a miracle question for adults, and the "mission impossible" questions for children (Zatloukal et al., 2020).

### Context

Zatloukal, Žákovský, and Tkadlčíková (2020) conducted an in-depth exploration and comparison of two SFBT models "Kids' Skills" and "Mission Possible" both rooted in SFBT principles, emphasizing strength-based and goal-oriented approaches for children and adolescents. The authors explore and identify three pivotal areas for enhancement, future direction by integrating specific skills and goals. Resources, utilizing techniques such as "small talk," progress and confidence scales, identification of exceptions, use of metaphors, and the engagement of supporters to strengthen the client's resourcefulness and initiation of change (action): Transitioning from a focus on skill practiced by children and youth to implementing experiments or actionable steps toward goals, allowing therapists a broader range of the client with a greater flexibility in facilitating positive change. Rather than conducting empirical research, the authors draw upon their clinical experiences and existing literature to analyze and refine the "Kids' Skills" and "Mission Possible" models. The article employed a qualitative, practice-based methodology and utilizes case examples to illustrate the application of revised techniques, providing insights into how these models can be adapted and expanded in therapeutic settings. This model

approach allows for a nuanced understanding of the models' benefits, effectiveness and adaptability, while emphasizing the importance of flexibility, resourcefulness, and actionable strategies in a real world and SFBT therapeutic context of change.

The central principles of solution focused therapy include “if it isn’t broken, don’t fix it” once you know what works, do more of it; if it doesn’t work, try something different; small steps can lead to big changes, the solution is not necessarily related to the problem; no problems happen all the time, there are always exceptions; future is both created and negotiable” (Connie, 2009). In solution-focused therapy, the therapist is not the sole power holder, a collaborative approach is promoted instead. The therapist and client identify the problem together and find a solution, and then they apply this solution to the problem (Ali et al., 2004).

SFT is practiced in various cultures. Most significant reason SFBT is practiced in different cultures, include the fact that client is active during therapy, therapist is not an “expert” during the therapeutic period and therapy is not based on a physiological theory (Ratner., et al 2012). Therapeutic literature shows the significance of the relationship between the counsellor and the client as a common factor for therapeutic change. Contrasting to the clinical literature on SFBT which discusses the importance of the collaborative, empowering, cooperative, and flexible relationship style as being important to success with clients (Lipchik, 2011).

It is important for solution-focused therapists to understand the effect of the client’s worldview on the problem and its solution. Thus, solution-focused therapists try to understand the world perception of different cultural groups and the idiosyncratic thoughts of individuals living in these cultures. Furthermore, solution-focused therapists acknowledge that their own worldview can unavoidably influence their clients (Guterman, 2013). This world perception and cultural sensitivity would be reflective of the bridge or miracle question, between the problems and solutions/spiritual pyramid, within the SFSSBT mind mapping framework.

SFBT has some similarities to Narrative Therapy (Freedman & Combs, 1996) in that both take a non-pathology stance, are client-focused, and work to create new realities as part of the approach (Institute for SFBT, 2022). SFBT allows for the therapist and client to carefully search through the client's life experience and behavioural repertoire to discover the necessary resources needed to co-construct a practical and sustainable solution that the client can readily implement. Typically, this process involves identifying and exploring previous "exceptions" e.g. times when the client has successfully coped with or addressed previous difficulties and challenges.

In a safe, respectful, compassionate, holistic and cross-cultural interview process, counsellors and their clients consistently collaborate in identifying goals reflective of clients' best hopes for developing satisfying solutions (Institute for SFBT, 2022). Realistic goals are set forth by the client that are meaningful, positive, tangible, and within the clients' control. Meaningful changes that can be a vision of their future, by focusing on the exceptions, strengths and resources of the client. The counsellor collaboratively scaling the client's motivation, confidence and ability to dialogue in new meaning and solutions to prior problems or issues (Institute for SFBT, 2022).

Hope and expectation are two of the strongest outcomes for the client during therapy. SFBT makes maximum use of hope and expectation concepts by shifting the client's problem-focused and negative perspective to a more positive perspective (Reiter, 2010). Hope and focusing on future, which are important elements in solution-focused therapy, are compatible with Islamic principles (Rassool, 2016). The word hope, which is generally used to mean anticipation in Qur'an, is mainly used to describe situations where individuals work hard but fail to achieve and are nevertheless in anticipation. In addition to this general meaning, the concept of hope is mentioned using different words in various verses of Qur'an which address a different function each

time. In this regard, Qur'an points out that hope is a trait that should be acquired in case of its absence, not a personality trait inherited via genes. Qur'an verses encourage being hopeful and state that people must have hope even in the most difficult times (Sürücü, 2017)

## **Methodology**

For this literature review, I identified relevant studies using the databases from City University of Seattle, UVic, Research Gate, Taylor Francis, Sage, American Psychology Association, PubMed, Google Scholar, ChatGPT and Google, using the following search terms: SFBT, somatic and spiritual therapy cross culturally and the usage of mind mapping in psychotherapy. My research question, 'What is the cross-cultural efficacy of SFBT?', with the key words— SFBT, benefits, critiques, cross-cultural, found research sourced from SFBT, spiritual and somatic, international qualitative and quantitative evidence-based research studies, data base analysis, lectures and most recent publications, from 1990's to 2025.

## **Results**

A systematic review and meta-summary of process research empirically supported that SFBT is a strength-oriented technique where questions and scaling are significant in the co-construction and collaborative process in counseling (Franklin et al., 2017). Quantitative Process Outcome Design (QPOD) is considered to be the most rigorous research method for studying mechanisms of change because this approach aims to establish a causal relationship between specific therapeutic process(es) and therapeutic change (Franklin et al., 2017). Bavelas, J. (2014) in a special issue of The Journal Systemic Therapies introduced four articles that focused on language that is used in SFBT and how language influences the therapeutic process. Each article covered specific communicative practices in therapy. I chose to review the article by Richmond et al. (2014) and how shifting the language from problem-focused to solution-focused allowed for a significant change within the client's initial responses in their intake interviews. Questions

that are solution-focused in nature presuppose hope, strength, and resources: for example, “So what will things look like when you reach your goal?” Presupposing that the client has all the resources to reach his or her goal, in contrast to “So what will things look like if you continue to have these problems?” (Richmond et al., 2014). Empirically the author compared and measured the outcome of traditional problem focused intake questions with solution focused questions framed in a different manner. Resulting in how intake questions can shift the perception and response of a client even before the first formal counselling session begins (Richmond et al., 2014)

An eclectic counselling model utilizes a wide range of practices, methods and theories of different therapeutic schools of thought and approaches (Rassool, 2016). In a SFBT process of change, an eclectic model can be effectively used for clients with religious and spiritual inclination, allowing for the client’s personal narrative, that matches their worldview (Gutermen and Leite, 2006) to be forefront in a client led counselling setting.

Franklin et al., (2017) conducted a systematic review and meta-summary of 21 qualitative studies published between 1990 and 2014 to examine the therapeutic processes underlying Solution-Focused Brief Therapy (SFBT). The authors conducted a comprehensive search of multiple databases (e.g., PsycINFO, ERIC, Academic Search Complete). They identified common client and therapist behaviors that contribute to therapeutic success, using Sandelowski and Barroso’s meta-summary methodology. The findings highlighted therapist techniques such as scaling questions, compliments, goal co-construction and the importance of the identification and use of client strengths and resources and the benefits of future-oriented conversations. The methodology is a systematic review and meta-summary of qualitative research focused on the processes involved in Solution-Focused Brief Therapy (SFBT). Their research included a Systematic Literature Search utilizing qualitative methods with a focus on the SFBT process (how therapy works, not just outcomes) with the inclusion of data from therapists, observers and the clients involved in SFBT. They incorporated a Study Selection that ranged in populations of children,

adults, families, and settings such as mental health clinics and schools. Twenty-one studies met the inclusion criteria from the initial pool of research (Sandelowski, Barroso, 2003); meta-summaries were utilized to extract findings (key observations/themes) for this qualitative study. Within their methodology they abstracted themes into broader conceptual categories into thematic analysis of behaviours between the client and therapist that were recurring with successful SFBT outcomes. The study quantified the frequency of each theme to calculate “frequency effect sizes” — showing how often certain findings appeared across studies. The use of scaling questions, compliments and goal setting was evidence of a structured quantifiable way of analysis based on client engagement in future-focused thinking, self-identification of their own resources and noticing change in their behaviour. This methodology offered a greater view beyond what quantitative outcome studies typically captured and offered a deeper insight into the active and beneficial ingredients of SFBT (Franklin et al., 2017).

In 2024 an umbrella review of twenty-five systemic reviews, including fifteen meta-analyses were analyzed resulting in significant positive outcomes, across different issues, settings and cultural contexts (Žak et al., 2024). The authors conducted an umbrella review, which involves synthesizing evidence from multiple systematic reviews and meta-analyses to provide an overarching understanding of a particular intervention's effectiveness. Key methodological steps included the inclusion of reviews that employed systematic search methods and quality assessments focusing on SFBT's effectiveness, quality assessment and evidence grading. The authors conclude that SFBT is an effective therapeutic approach for a wide range of psychological and social issues, particularly in adults dealing with depression and those seeking progress toward personal goals. This same review concluded that SFBT is an effective therapeutic approach for various psychological, social, school, medical, couple or self-related issues, with no consistent evidence of harm. The effectiveness of SFBT appeared to be consistent across different cultural

contexts, populations and settings. The authors recommended further research to strengthen the confidence of SFBT's effectiveness across other areas by employing rigorous methodologies.

SFBT has generated outcome research worldwide and in a variety of intervention contexts. A systematic literature search yielded 251 published outcome studies on SFBT was found superior to control groups or at post-test in almost nine out of every ten studies. Taking only 91 randomized controlled trials (RCTs) into account, SFBT was still found superior in seven out of every ten times. Results varied slightly according to intervention type and format, manualization, and components of SFBT. They also varied more according to type of comparator and use of diagnostic criteria. These results widen the evidence base for the benefits of SFBT across various populations and settings (Neipp et al., 2022).

Over the past 3 decades SFBT has expanded well beyond the geographical context in which it first developed; Neipp et al. (2022) provided a comprehensive review and meta-analysis of the effectiveness of SFBT across various populations and settings. The authors found 365 outcome studies on SFBT, carried out in 33 countries from all continents, on all kinds of samples and on a variety of intervention formats: psychotherapy, coaching, school and college counseling, child protection, community interventions and organizational interventions. They concluded that SFBT has been applied and researched globally, with a balanced distribution of research between western and industrialized *versus* non-western, not industrialized countries. However, the results of these outcome studies were not analyzed, so the question of to what extent the tested SFBT interventions had been effective was not addressed (Neipp et al., 2022).

A review on the current evidence of SFBT and a meta-analysis of psychosis outcomes and moderating factors was conducted in 2024 by Vermeulen-Oskam and associates to provide evidence of the benefits of SFBT and its applicability for a variety of cross-cultural clients and psychosocial problems. The World Health Organization (WHO, 2022) states that one in eight people in the world are affected by mental health problems and there is a lack of mental health

professionals to provide treatment. There is a need to identify interventions and treatment modalities that are effective, short term and cost efficient. Past reviews of SFBT studies have proven that on average six SFBT sessions are required for positive change. (e.g., Neipp & Beyebach, 2022). The outcome of this study showed SFBT to be effective in reducing 59% in psychosocial outcomes in comparison to 32% of treatment as usual (TAU) problem-based therapy (Neipp et al., 2022). This meta-analysis study was conducted with open transparency and no conflicts in regards to funding or personal interest. This current meta-analysis provided empirical evidence that SFBT has a substantial effect on a range of psychosocial outcomes for clients and is a beneficial therapeutic treatment cross culturally.

A study completed in 2021 with South African trauma survivors, identified that therapeutic relationship and collaborative-language process are essential components of building hope and subjective well-being. Strength, resource oriented and relational questions were highlighted in this proposed model, “Journey of Possibilities” (Joubert et al., 2021).

Finally, a microanalysis study done by Smock-Jordan and Bavelas (2013) and Bavelas and Jordon (2014) demonstrated important aspects of the co-construction process within the SFBT session. The studies showed that SFBT used more of the client’s exact words and used more positive language, than other therapies such as CBT and Motivational Interviewing (Bavelas et al, 2013). Results such as these would be beneficial in a cross cultural and disability conscious type of counselling, validating the importance of a competent solution-focused therapist with respect for the different cultural values of clients and recognizing that their unique cultural elements will be a part of the solution (Guterman, 2013).

## **What additions could be made to enhance the holistic approach of SFBT?**

There have been many meta-analysis studies conducted and evidence-based research supporting the benefits of SFBT. However, there are limitations in the cross-cultural literature reviews measuring trauma symptoms and how well SFBT works and how spirituality is also beneficial, including the positive effects of mind mapping and creativity. There are numerous studies since the 1990's that endorse the cross-cultural research and benefits of SFBT, Somatic Therapy and Spirituality as individual psychotherapeutic techniques for healing. Kuhfuß (2021) mentions how studies are able to measure thoughts, feelings and behaviours, yet health related studies and assessments have difficulty mapping and reporting the effects of social and environmental qualities of life. Mind mapping helps clients with trauma where there have been limitations to their inner words and ability to express themselves (van der Kolk, 2014). Yet there remain questions as to the validity of creative tools being utilized within counselling therapy. Contemporary psychological counselling can view spirituality as an essential part of the individual (Boyalı, 2022). In contrast to a positivist perspective, which disregards the individual and clients' spiritual beliefs and needs as part of their process of change. There remains an opening for further research in the effectivity of SE and the holistic collaboration of somatic and spirituality within the solution focused therapeutic area of counselling and psychotherapy. In the following sections I will introduce aspects of Somatic and Spiritual Therapy as a way to introduce my proposed SFSSBT framework that I present in Chapter 3. In this model, I include the utilization of a Double Pyramid Mind Mapping Chart (Appendix 1) as a visual tool and technique, to aid in a client/counselor collaborative and holistic 3-part SFBT process of change, within a therapeutic counselling session.

## **Somatic Therapy**

Somatic therapy begins with the psychological and physiological nature of your mind and body's initial responses to trauma. Responses that are felt through Sensation, Image, Behaviour, Affect and Meaning (SIBAM) (Levine, 2015). Somatic therapy operates on the premise that trauma and stress are stored in the body, not just the mind. By focusing on bodily sensations (interoception, proprioception, and kinesthesia), clients can access and process traumatic memories. Therapeutic techniques and practices for somatic experiences often include body awareness, movement and touch, visualization and breath work. These cross cultural and holistic somatic movements are gentle, calming and grounding (Marleau, 2023). I have outlined this model further in Appendix A.

Somatic Experiencing for Posttraumatic Stress Disorder: A Randomized Controlled Outcome Study (Brom et al., 2017) presents the first known randomized controlled study evaluating the effectiveness of somatic experiencing (SE). Sixty-three participants meeting DSM-IV-TR full criteria for PTSD were included in this study for the efficiency of SE with individuals experiencing PTSD. Results indicated SE may be an effective therapy method for PTSD. SE is an integrative body-focused therapy for treating people with posttraumatic stress disorder (PTSD). Further research is needed to understand who shall benefit most, from somatic therapy (Brom et al., 2017).

Between 1990 and 2022 from an initial screening of 769 articles, Kuhfuß et al (2021) performed a review of sixteen peer-reviewed articles were imperially investigated for the effectiveness and key mechanisms of SE. The authors employed a scoping review design, based on the framework developed by Arksey and O'Malley (2005), which is commonly used to map the existing literature, especially on topics that are emerging or complex. Out of an initial 769 articles, duplicates and irrelevant records were removed through title and abstract screening, followed by full-text review. A final set of 16 empirical studies was included. The finding from this review

suggest that SE may be effective in reducing symptoms of anxiety, depression, post-traumatic stress disorder (PTSD), individuals with chronic stress and somatic complaints across diverse populations, war veterans and trauma survivors. The therapist's role was essential in coregulation and fostering a sense of safety for the client and highlighted as important and the central foundation of somatic experiencing (Kuhfuß et al. 2021). The results were categorized into two main themes, effectiveness of SE and key therapeutic factors/mechanisms. The review elicited positive and promising results yet was still limited due to small sample sizes, variability in outcome measures and a lack of randomized controlled trials. Similar to limitations with other SE studies the author called for more rigorous and standardized research to validate and confirm SE's efficacy and to further explore its underlying mechanisms through the recommendation for future studies (Kuhfuß et al. 2021).

## **Spirituality**

Spirituality is found to be of benefit, for clients of all ages, stages, gender and identities (Rosen, 2023). Spirituality is a proprioceptive piece of a final stage of acceptance, including revelation, peace, acceptance, and compassion. The Dalai Lama speaks of compassion as being essential, at the very foundation of the ethical system (Lama, 2017). When clients reveal their spiritual and religious interests during the solution focused therapy process, such interests can be regarded as exceptions like other problems faced by the clients (Guterman, Leite, 2006). A spiritual moment of revelation, or core understanding, will differ from client to client, based on their own values, core, religious or spiritual beliefs. The counsellor needs to be open to the diverse range of spirituality that is a completely individual experience.

Jo-Ann Rosen who is a Buddhist Nun and Counsellor, worked closely with the late Thich Nhat Hanh and speaks of the cyclical nature relating to the Noble Eightfold Path of Buddhist practice; "The eight-fold path is like a wheel that carries us deeper and deeper into the realities of

life” (Rosen, 2023, p. 75). These eightfold elements of, right view, right thinking or intention; right speech; right action; right livelihood; right effort or diligence; right mindfulness and right concentration, will help a client in their spiritual and counselling journey, to learn new ways of being, in their own world, and within their community.

Due to a client’s limited self-disclosure because of religion, language skills, understanding, values and ethics, the focus on solution rather than the problem, as the foundation of the SFBT approach can be used by clients from different cultures. Studies demonstrate that this therapy method can benefit Muslim clients, in particular, due to its emphasis on solution and future-focused and the hope-oriented nature of SFBT (Ime, 2019).

Some clients may be more scientific or atheistic, requiring a more analytical approach to counselling. Their own personal inner science, within this client-led and -centred SFSSBT process of change, will vary. Introducing a DBT three-part approach to a clients’ thoughts, emotions and behaviour (van Dijk, 2012) can aid in a counselling session. Understanding how a client thinks, expresses their emotions and acts will be an intricate aspect of how they will respond to SFSSBT. There is the potentiality to lead a client, forward towards a moment of inner contemplation, mindfulness, (Hanh, 2023) awareness, consciousness, or many other internal and external, implicit or explicit (Levine, 2010) feelings and emotions.

As an outcome of faith, belief and related religious practices, individuals can be provided with a peace of mind as a result of practicing religious rituals as well as a sense of transcendence/enthusiasm about the present and hope and optimism about the future (Sürücü, 2017). In chapter 3, I propose that SFSSBT allows for new awarenesses for a client to surface, based on their own inner resources, thoughts, emotions, strength, core or spiritual understanding. Looking at healing somatically as a future goal, is similar to Sürücü (2017) definition of hope meaning anticipation from a spiritual perspective. Sürücü, İ. (2017) conducts a study that adopted a qualitative, literature methodology, involving thematic content analysis of Qur’anic verses that are relevant to

psychological well-being. The paper highlights the complementarity between religious values and scientific psychological principles, suggesting that Qur'anic values not only shape spiritual life but also contribute positively to emotional and psychological health. The author positions the Qur'an as a source that fosters positive emotions, moral development, and resilience. Selected moral and spiritual values from the Qur'an aligned with the core principles of positive psychology, with an emphasis on resilience, personal strengths, optimism and meaning in life. Sürücü argues that many Qur'anic teachings such as gratitude, patience, hope, forgiveness, and trust in God — serve to promote personal growth and psychological well-being, which are the key goals of positive psychology and major spiritual elements of awareness in SFSSBT.

Although the importance of spirituality in a client's life is addressed, many modern psychotherapy theories still overlook the spiritual dimension of an individual and focus on cognitive and behavioral changes (Crockett et al, 2013). It is interesting how we can find the spiritual in the smile of a passing stranger, a piece of music, the color of the sky at dusk, a piece of poetry, in silence or a daily prayer of gratitude upon awakening. Paradoxically, the presence of the spiritual dimension can also be felt in feelings of grief, loss and emptiness, in questions about meaning and purpose, in a sense of alienation and abandonment, or in cries about injustice and unfairness (Pargament, 2007).

Smith (2020) conducted a quantitative research approach using data from the General Social Survey (GSS). He employed statistical analyses to examine the sociodemographic characteristics of the "spiritual but not religious" (SBNR) group, from a demographic that tended to be younger, unmarried, and more educated. The study compares the SBNR health measures to those of other religious and secular groups. This study conducted a quantitative research approach using data from the General Social Survey (GSS). The SBNR group fared better on some health

measures, suggesting potential protective health factors associated with being SBNR. Smith recommended that future research and further investigation of these comparative factors to understand how varying degrees of secularity influence the relationship between religion and health.

Spirituality may be a dynamic shift in the client's understanding and perception of a problem. In a therapeutic relationship, it is useful to understand to what extent religious and spiritual beliefs, values and practices influence the client (Bray, 2011). It is essential to review the client's current practices, rituals, beliefs and any community involvement to understand the client's cultural, religious and spiritual participation (Bray 2011). Spirituality cross culturally can include new indigenous views of helping and healing individuals. Recognizing the indigenous relationships of oneself, family, community, land/environment, and a wider society (Jones, 2020) presents another positive holistic lens of healing.

### **Mind Mapping**

Mind mapping has been used for centuries by artists such as Leonardo de Vinci and became popularized in the sixties, introduced around the world, by British psychology author and education consultant, Tony Buzan (Boise State, 2021). Mind mapping is a simple technique for gathering information in a creative and logical non-linear diagram built around a central concept. In this research study with SFBT, the mind mapping was built around the first word described by the client to the counsellor. A process of change is reflective in the building and connecting of each word around the initial issue or problem, in a double pyramid mind map (see Appendix 1

Irman (2019)'s research aimed to determine if mind mapping could help university students to memorize their work more effectively. Twelve students were tested before and after the use of mind mapping techniques were applied. Results demonstrated that the mind mapping techniques were effective in helping students to remember their lessons (Irman, 2019). In this same study, the mind mapping techniques were used in a five-stage counselling process. The

process involved building psychological relationships with counselee, exploring problems related to the counselee's memory, implementing mind mapping techniques and reflecting on mind-mapping activities (Irman, 2019).

Presenting issue and or problem words, are shifted with a miracle question from the counsellor, towards a solution focused pyramid of words, initiated by the client. Buzan felt that mind mapping was the perfect platform to see the overall landscape of a situation that provided a full picture in one visual snapshot (Boise State, 2021). Introducing mind mapping provides a bridge from a traditional psychotherapy approach to an approach that expresses the issue or a pyramid of problems, in a manner that is linked and connected through the clients' words. Words, feelings and thoughts that are in the client's mind, are mapped and witnessed by both the client and their counsellor. Problematic words or situations are written word by word on a blank piece of paper. The key to mind mapping research is that there are three main areas of change and transition: before middle and after, which represent the issue or problem, leading to the bridge which is the miracle question, towards a solution and/or the client's core. Word by word, the client creates an emotional and visual map, of a new understanding of their own core observations, resources and future goals. The mind map may also serve to direct the focus on the causal relationship between a client's trauma, and then how to alter one's thinking regarding said events, or at the very least bring it to the forefront, so that an individual can witness and begin to understand the why part of their problem (Mind Map Therapy, 2024).

## **Summary**

In Chapter 2, I reviewed the literature on Solution Focused Therapy and culture, as well as additions could be made to enhance the holistic approach of SFBT such as Somatic, Spirituality and mind mapping. This sets the stage for Chapter 3, where I will propose an extension to SFBT called Solution Focused Somatic Spiritual Brief Therapy (SFSSBT) as a new therapeutic

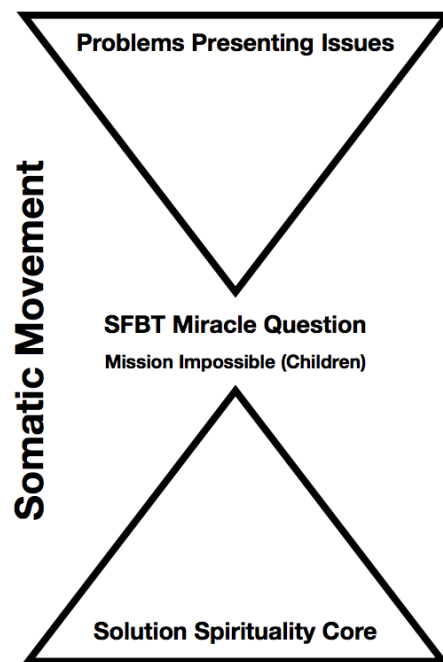
technique in the field of holistic and cultural counselling psychology. SFSSBT introduces spirituality and somatic therapy including mind mapping, as an opportunity for the client to get inside their mind and explore and witness their own thoughts, feelings and ideas visually (Buzan, 1993, p. 85).

In the next chapter I will propose how the process of therapeutic change within a SFSSBT approach can be measured through outcomes that are scaled after each session within a research study. The process of change could be measured as a pluralistic approach to research including, quantitative, qualitative and mixed methodology (Elliot, 2010; Nock, 2007). Based on the problem, solution, somatic, spiritual therapeutic approach, a recommendation of future research addressing how and why this new SFSSBT technique could be beneficial as a cross cultural holistic SFBT new therapeutic technique.

### Chapter Three: SFSSBT as an extension of SFBT

SFBT is an evidence-based therapeutic technique that has been researched and identified as beneficial holistically and cross-culturally to a diversity of individuals and groups. In this chapter, I build on the SFBT model with a proposal of my SFSSBT model that focuses on the benefits of somatic movement and the language of spirituality in a client's therapeutic encounter. Introducing a double pyramid Mind Map (see Appendix 1) as a creative visual aid that allows utilizing a collaborative, co-constructive and culturally creative process, within a counselling session allows for a visual narrative of the process of change. Mind mapping is a "visual, "non-linear" representation of an idea, (Davies, M., 2011) and can be used as an added creative dynamic that can aid in the client's perception and negotiation of a new narrative, meaning or perspective, to a particular issue or problem (Bavelas et al., 2014, p.5).

**Image 1: SFSSBT Double Pyramid Mind Mapping Template**



In a therapeutic encounter, Levine focuses on good therapy and learning about the felt sense and “notice that” and “notice what happens next” (Levine, P., 2015, p. 17). When an animal is frightened or threatened, they will freeze or flee the situation. If there is any contact or pain inflicted, they may try to run, shake, or roll it out of their body (Levine, 2010). If they are sick or weakened, it will try to find a quiet place to rest and remain still and quiet, until they are strengthened. It is interesting how much we can learn from how animals behave, when threatened by violence and trauma or when they are depleted. Trauma is considered not to be a disease or a disorder, it is viewed as an injury caused by fright, helplessness, and loss. A deep wound that can be healed, only if we attend to the wisdom of the living, knowing body (Levine, 2015). The body-oriented therapeutic approach Somatic Experiencing® (SE) treats post-traumatic symptoms by changing the interoceptive and proprioceptive sensations associated with the traumatic experience, which opens a new door in the spectrum of trauma treatments (Kuhfuß et al. 2021).

SFBT and SFSSBT are all flexible in their unique individual and specifically person-centred approach towards change. There is not one specific way of addressing a problem, a behaviour or expression in counselling. The double pyramid mind mapping chart is simply a visual representation for each client, to witness their issue, problem and solution.

The positive aspects of SFSSBT and mind mapping is being in the here and now (Alexander, 2022), in the present moment with the client. SFSSBT focuses on forward nature, of problems, within this new conceptual framework. It allows us to look at the whole person, problems and issue from a solution, somatic and spiritual perspective, with the visual aid of mind mapping. SFSSBT represents a new therapeutic, three-part process of change, for people of all cultural backgrounds, social status and levels of ability, to be able to express themselves within a framework, that is guided by their own words and intentions and is also time and cost effective.

## **Discussion**

I propose SFSSBT, utilizing a Double Pyramid Mind Mapping (Appendix 2), introducing a new Mind, Body, Spirit, Three Stage (Problem-Bridge-Solution) collaborative therapeutic approach to healing. SFSSBT includes mind mapping, reflects a goal of bringing into the forefront a new point of view. The process of incorporating solution focus questions, somatic awareness and addressing the spirit or core, through this three-part process of change, proves to be positive holistic and cross cultural.

SFBT's opening question of "What is your best hope/expectation from working with us?" asked by the therapist is a universally acceptable question cross culturally (Ratner et al., 2012). The miracle question of "what would hope or positive future goal look like to you" as with other questions asked during the therapy process, is determined by the client, therefore, cultural imperialism will not be possible in solution-focused therapy (Ratner et al., 2012). Consideration needs to be addressed that some clients may get defensive in the event that the therapist mentions religious and spiritual subjects during therapy, because they may think that the therapist is trying to impose his or her own values on them (Bischof and Helmeke, 2006). Solution-focused therapy differs from conventional counseling and therapy models in that the therapist has little self-disclosure (Rassool, 2016). The entire principle of my proposed SFSSBT, is for the client to feel safe to raise and release their culturally unique problems and issues, verbally, physically, somatically and spiritually in a counselling session.

Working with a client with mutual empathy and constructive collaboration, promotes transformative experiences within the counselling container (Arthur, 2018). All creative methods within the counselling container can include focusing on and encouraging traumatized clients' that are not able to vocalize their thoughts and feelings with words (van der Kolk, 2014). SFSSBT allows for the client to experience and witness their own stream of thoughts, actions and words, that can be personified visually, on a double pyramid mind map (see Appendix B).

SFSSBT would be beneficial, for all individuals or groups and is also a positive psychotherapeutic modality for individuals or groups, not of a dominant social identity (Ime, 2022). Indications and contraindications for SFBT and empirical data on the effectiveness of the therapy are discussed both with regard to clients with or absent intellectual disabilities. Suggesting that tailoring SFBT to clients with an Intellectual Disability (ID) can be done by using simple language, modified interventions, and inserting other adaptations into the therapy process (Roeden et al., 2009).

### **Recommendation for Practice**

SFSSBT is a generalist approach to all three therapies. Three-part change is seen in different psychotherapeutic modalities and foundations of solution focused, somatic and spirituality in therapeutic counselling, including creativity. SFSSBT and the concept of Mind Mapping coincide with other theories that have been reviewed within the literature reviews, serving as a beneficial approach to counselling. The key to this SFSSBT Mind Mapping research is to introduce “a simplistic process of change,” where there are three main areas of transition.

The SFSSBT and mind mapping technique would be for situations where there is not the time or money available for long-term therapy. For clients or groups seeking immediate solutions. Individuals who are desiring to explore a three-part therapeutic technique to move forward in their personal growth and understanding of their own narratives and behaviours.

### **Recommendations for Future Research**

There is a substantial amount of research in the areas of SFBT, Somatic Experiencing and spirituality. Many of the research studies observed, recommended future research to find out the beneficial and cross-cultural effects of these therapeutic techniques in other areas of social and mental health. The World Health Organization (WHO) recognized the extent to which people are affected with mental health problems and the growing need for more mental health professionals to provide solution focused treatments that are economically viable (WHO, 2021; WHO, 2022).

The efficacy of experience and traits of a SFBT counsellor needs more focus for future research. Funding that is transparent and researchers who are cross culturally open to working with a diverse and global range of health problems that are beneficial without bias. It is therefore important to identify interventions like SFBT that can be utilized across a range of mental health problems and issues, which is low cost and effective in the short term. SFBT and SFSSBT are both therapeutic techniques that are strengths and resource based, mental health interventions, with origins in systemic, brief family therapies and can be holistically and cross culturally of benefit to many people.

A research study would be of great benefit to prove the validity of Solution Focused Somatic Spiritual Brief Therapy and Mind Mapping (SFSSBT). A study that included a cross-culturally diverse group of individuals utilizing the mind, body, spirit, problem, bridge, solution theory of change. Research based on a non-biased, feminist, holistic, humanitarian and cultural inclusive lens (Arthur, 2019). Neipp (2022) writes:

SFBT is more than a set of techniques and the global pattern of conversation is more important than the use of any separate part of it. On the other side, the fact that interventions in which the SF component is mixed or integrated with other techniques and approaches are as likely to produce superior outcomes as interventions where SFBT is the only component provides indirect support to the idea that SFBT can be integrated with other techniques and approaches without weakening its impact. Direct comparison between “pure SFBT” and “integrative SFBT” approaches would shed more light on this question, but no such comparisons have been carried out so far. (p. 22).

Due to traditional therapies being more problems based, time-consuming and rigid, clinicians are seeking other approaches for trauma therapy that are effective, flexible and brief (Cloitre, 2015). With many meta-analysis and research-based studies completed, more qualitative individualized

cross cultural solution focused studies due the counsellor/client collaboration would be of benefit. Joubert (2021) research relating to South African trauma survivors utilized a solution focused approach as an intervention strategy to avoid the disregard of the client's natural resiliency and the primary focus of pathology. Further cross-cultural research opens the door for a closer review of holistic psychotherapeutic techniques that are somatic, spiritually and socially based.

## **Applications**

SFSSBT could be considered to be an integrative SFBT approach to counselling. A research study could involve a multicultural and diverse group of participants. At each session the client or group will receive: several blank pieces of paper and a selection of pens, pencils and other coloured markers. The client may choose whatever tool/s to write with on blank paper. Initial opening statement questions from the SFBT counsellor to the client may be: What word expresses how you think or feel about your presenting issue? Is it possibly a person, place, or thing? What is the first word that comes to mind? Please write down that word. The next question from the SFBT counsellor might be: How does that word make you feel? What connection, words or feelings, does that have to the last word? Please write that down. Word by word, the counsellor and client will work together, in collaboration, in a private, face to face, confidential, safe, secure and comfortable environment. They may be seated at a round table or across from each other. This first word will be the locus or focus, word that begins the mind mapping process. (Boise State, 2021). Allowing for the contemplation of the client led picture of words, created by the client and witnessed by the client, in a problem, bridge, solution container for change.

At this stage the SFBT counsellor will ask the "Bridging Question" which would appear to look like "the miracle question" (Corey & Hoyt, 2020) or the "mission possible" question for children (Zatloukal et al, 2020). This type of mission impossible question may be: What would it look or feel like if these issues were solved? What ideas do you now have (eg., about yourself)

that are different from the ideas you had before? (Bannink, 2006). What could you do now to change these words, towards words, thoughts, feelings and actions that make you feel good? Please write down in the lower pyramid the first word or thought that comes to mind? The three-part process within the client, is a beginning of discovery to feel and witness their own core or inner spirituality. The client or participants, recognize their own positive feelings and thoughts that are good, and goal-oriented words, towards a future vision. A vision or dream of what their life could look like, when they can witness one, some or all of their issues or problems, visually and emotionally, outside of their mind, versus being stuck deep within.

Within the research and during a SFSSBT session, there may be a somatic reaction--crying, shifting, tightening or loosening-- as the words are written, arise from deeper, non and positive memories from the core of their being. Words that are spoken, written and connected through, their own double pyramid of initial or presenting problems, questioning a new perspective, towards a solution or a new awareness. SFSSBT is a therapeutic technique and visual process of growth and collaborative stages of change. SFSSBT is an extension, of Steve de Shazer's and Insoo Berg's, minimalist philosophy, and view of the "process of change" as an inevitable and dynamic part of everyday life (Berg, 1997) as clients shift the focus of treatment from problems to solutions (Trepper, et al., 2006).

SFSSBT is a beneficial therapeutic technique, that allows for a multicultural and accessible form of therapeutic change, accommodating a diverse range of individuals and groups of people, based on its individualistic future oriented client-centred approach. SFT suggests that clients possess the power, strength, resources and problem-solving skills needed to solve their own problems. Clients' strengths, which are individual and multicultural, include their values, beliefs, experiences and spirituality (Ime, 2019). SFBSST is a multidimensional counsellor client collaborative co-constructed creative and therapeutic technique, aiming to produce 'holistic meaning-

making ... using the heart (emotions), mind (intellect), body (physical actions), and spirit (spirituality) (Jones, 2020, p. 4).

SFSSBT is a holistic approach allowing for the client to move at a self-directed and witnessed pace, leading towards their own authenticity, as they present their issues, and uncover potential solutions. Mind mapping is a chance to get inside the mind of an individual/client and explore their thoughts and ideas (Buzan, 1993, p. 85). Feelings and words are reflective and in forward motion, beginning with the client's initial issue or problems. Allowing the client to move and change at their own pace, towards solutions or visions of a future, authenticity, spirituality, a new awareness. The client's own words are spoken, felt, heard and visualized in a collaborative therapeutic container (see Appendix 2).

Some drawbacks of this new SFSSBT therapeutic counselling method would be that not all clients may want to step into the present or their future self, authenticity, or future goals. Depending on the severity and the complexity of a person's state of mental health, they may need other long-term therapies, such as a psychodynamic modality. van der Kolk (2014) notes that some clients will need medication beyond psychotherapeutic techniques to help with their brain function.

A SFSSBT counsellor, needs to be positive, culturally and holistically open, believe in hope and faith and in the intention that the client wants to change, towards a future goal or solution. Considering that spirituality is important in a cross-cultural therapeutic relationship and is a tool for solution, the therapist should be competent enough to integrate meaningful spiritual practices into the therapeutic process (Crockett, et al 2013).

Therapists who seem to embrace and excel as solution focused therapists have these characteristics: (a) are warm and friendly; (b) are naturally positive and supportive (often are told

they “see the good in people”); (c) are open minded and flexible to new ideas; (d) are excellent listeners, especially the ability to listen for clients’ previous solutions embedded in “problem-talk: and (e) are tenacious and patient (Solution Focused Brief Therapy Association, 2013).

A SFSSBT counsellor, will hold a space of safety for their client, with core values of a therapeutic relationship, vulnerability, congruency, genuineness, understanding and unconditional positive regard (Rogers, 2007). Every client will be from a different background, with unique problems, and situations needing to be solved. Country, culture, age, social status, class and gender will always be different in each client. The key for the SFSSBT counsellor, utilizing mind mapping, is to be fully attentive and present to everyone's particular problem, or situation, that needs a solution. Creating a peaceful therapeutic container for their clients to fully express their feelings and emotions, aurally and somatically, through their spoken words that are mind mapped on paper or recorded.

A 6-phased model presented by Crockett and Prozek (2013) pursuant to the solution-focused therapy, in which spiritual aspects were integrated into the therapeutic process according to the client’s holistic culture and needs, is as described: 1- Grounding and introduction of solution-focused perspective: Client presents his/her concern, and the counselor promotes change with a warm and supportive attitude. Counselor introduces a present/future oriented approach and uses a solution focused language. 2- Identification of exceptions and symbolic ritual practices: Counselor explores and identifies the exceptions. Therapist introduces symbolic ritual practices and tries to help the client to shift from a problem-focused perspective to a more positive solution-focused perspective. Therapist and client plan a symbolic ritual for the next session (writing letter, sharing a picture). 3- Acquisition of a present/future-focused approach: Therapist and client start a symbolic ritual practice concerning the current issue of the client (such as planting seeds, growing plants, burning papers or letters). 4- Assignment of tasks and client-deter-

mined rituals: Client identifies potential solutions utilizing personal strengths and resources (Client and therapist can plan small, solution-focused and achievable rituals together). 5- Celebration of growth and change and evaluation of tasks: Therapist and client discuss the progress of the tasks and goals. New tasks can be given as necessary. 6- Closure and individual plan for future: Client identifies the solutions that work well in his/her life. Client and therapist plan the rituals the client can use in the future (Crockett, et al 2013).

Spirituality within a therapeutic counselling session allows the client, to awaken to their own sense of their inner needs, responsibility, empowerment and control (Truscott, et al 2021). Spirituality allows the client to be their own ethical counsellor, with a more balanced inner and outer subjective and objective perspective, of their presenting issues and past problems or situations. The client slowly moves forward as they reframe, renegotiate and create a positive new view of their past, present, and future, life and goals (Raihan et al., 2023).

## **Conclusion**

Global evidence-based research, throughout past and present literature, has proven the benefits of SFBT as a positive cross cultural psychotherapeutic collaborative counselling modality. My proposal of an addition to SFBT which I have called SFSSBT enhances holistic and cross-cultural utility and addresses the cultural sensitivity of each client, by introducing somatic movement and spirituality within each counselling session. SFSSBT is beneficial in counselling by removing barriers of stature, language and abilities within its therapeutic formulation. Each client has the opportunity to access their own resources as they are able to reframe and renegotiate their presenting problems and issues, with a positive focus towards solutions. A SFBT practice model has been successfully applied to diverse cultural contexts around the world in a wide range of psychotherapeutic and social work practice areas. SFBT offers a positive therapeutic

holistic approach, consistent with social work values, cultural humility, strengths and empowerment-based practices (Lee, 2024).

It is important for a client's mental and emotional needs being accommodated, no matter their cultural background, gender, identity or disability. SFSSBT allows for a client to be able to express a full range of feelings, while in the presence of “goodness,” as mentioned by Peter Levine (2010) based on his initial experience with trauma. The client may discover a slight or deep core somatic shift, from problem-based thinking, towards an inner awareness or experience a sense of mindfulness and self-compassion and or a slight or major change in their interpersonal relationship. (See sample chart above) The client is not only speaking and feeling, but also seeing their own words, strengths, resources, hope, desires and goals, written on paper or spoken on tape. This three-part process of change empowers the client to become the witness of their own unique presenting problems and solutions.

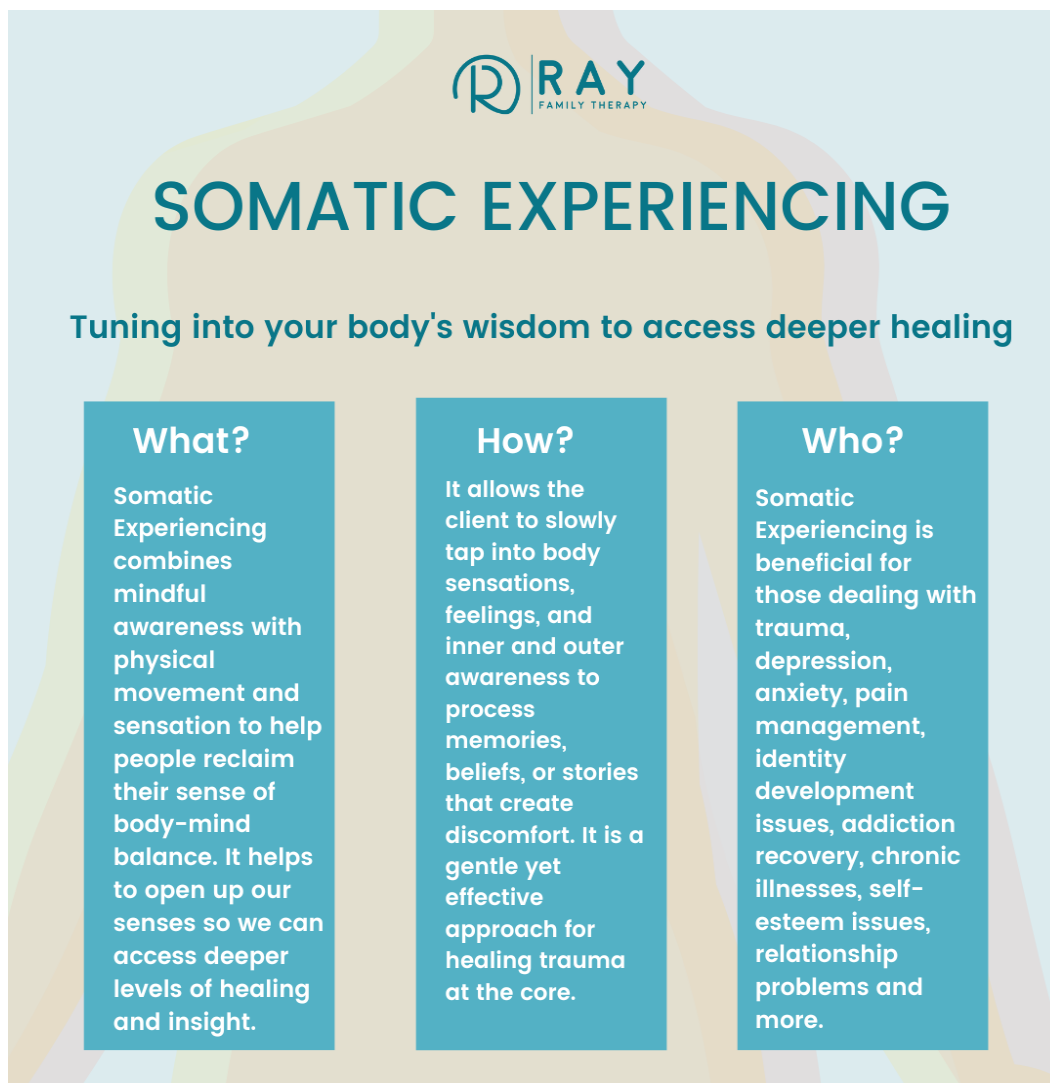
SFSSBT is a solution focused simple, yet relevant, problem solving, somatic, spiritual, counselling technique and creative opportunity for a client or groups to be in the here-and-now, working in collaboration with their counsellor, towards positive forward movement, future goals, solutions and change, within an affordable and culturally sensitive holistic environment. My research has focused on SFBT, Somatic and Spiritual practices, introducing SFSSBT which focuses on all three techniques within one therapy, including a creative therapeutic form of double pyramid mind mapping, to aid in an aural visual expression. SFSSBT and Mind Mapping is for any interested client, individual, group or community, including individuals, looking for solutions to their problems and issues, those who may have experienced trauma, and find it difficult to express their thoughts and feelings.

“One word frees us of all the weight and pain of life: that word is “love.”

SOPHOCLES (c. 496-406 B.C)

## Appendix A: Overview of Somatic Experiencing (SE)

The key factors contributing to SE's therapeutic effectiveness include interceptive awareness, resource orientation, titration, pendulation and a resolution of incomplete defensive responses (Kuhfuß et al. 2021).



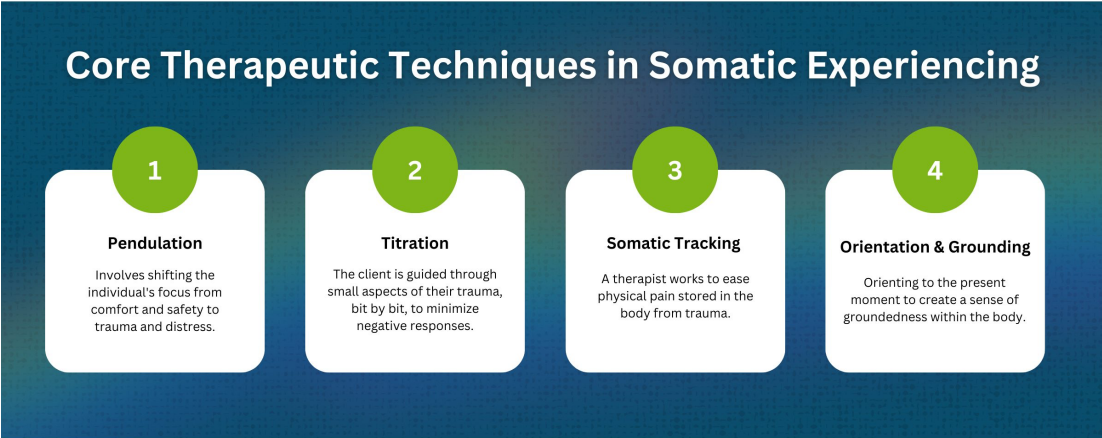
**RAY**  
FAMILY THERAPY

# SOMATIC EXPERIENCING

Tuning into your body's wisdom to access deeper healing

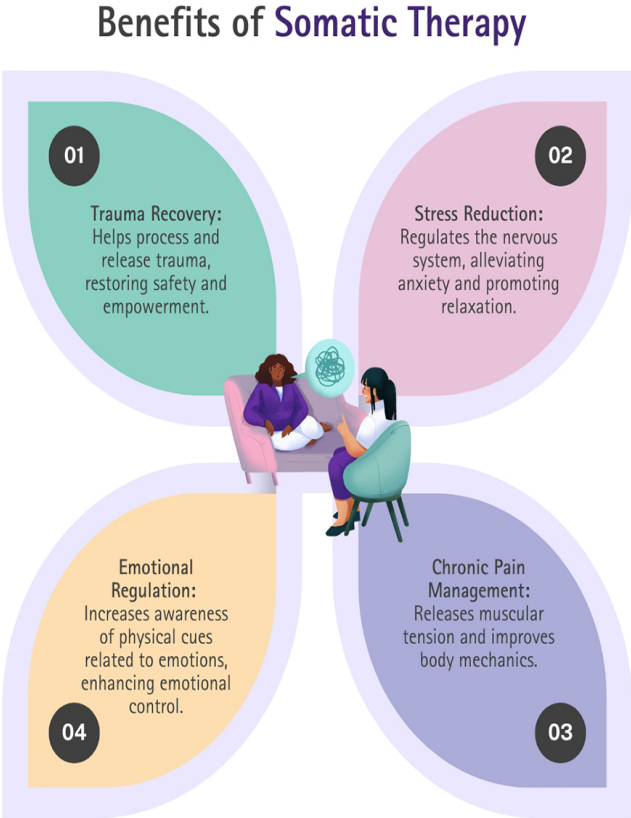
<b>What?</b> Somatic Experiencing combines mindful awareness with physical movement and sensation to help people reclaim their sense of body-mind balance. It helps to open up our senses so we can access deeper levels of healing and insight.	<b>How?</b> It allows the client to slowly tap into body sensations, feelings, and inner and outer awareness to process memories, beliefs, or stories that create discomfort. It is a gentle yet effective approach for healing trauma at the core.	<b>Who?</b> Somatic Experiencing is beneficial for those dealing with trauma, depression, anxiety, pain management, identity development issues, addiction recovery, chronic illnesses, self-esteem issues, relationship problems and more.
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OpenAI (2025). *Somatic Experiencing for Anxiety*. Retrieved from <https://images.openai.com/thumbnails/d96bcb7b5e39a3cc19c4626a776e76b4.jpeg>

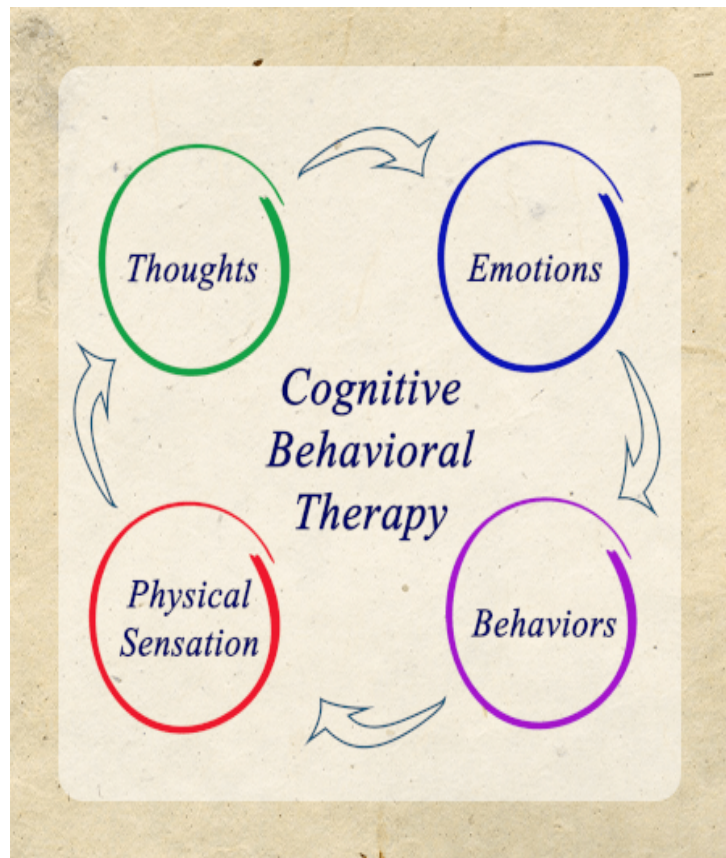


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OpenAI (2025). *Somatic Therapy in West Palm Beach, FL*. Retrieved from <https://images.openai.com/thumbnails/c222e1098d1fb67e9d2b1286b8512a3d.jpeg>



OpenAI (2025). *What is CBT vs. Somatic Therapy*. Retrieved from <https://images.openai.com/thumbnails/b1b352a6c4f4073c6d525abba80a49a9.jpeg>

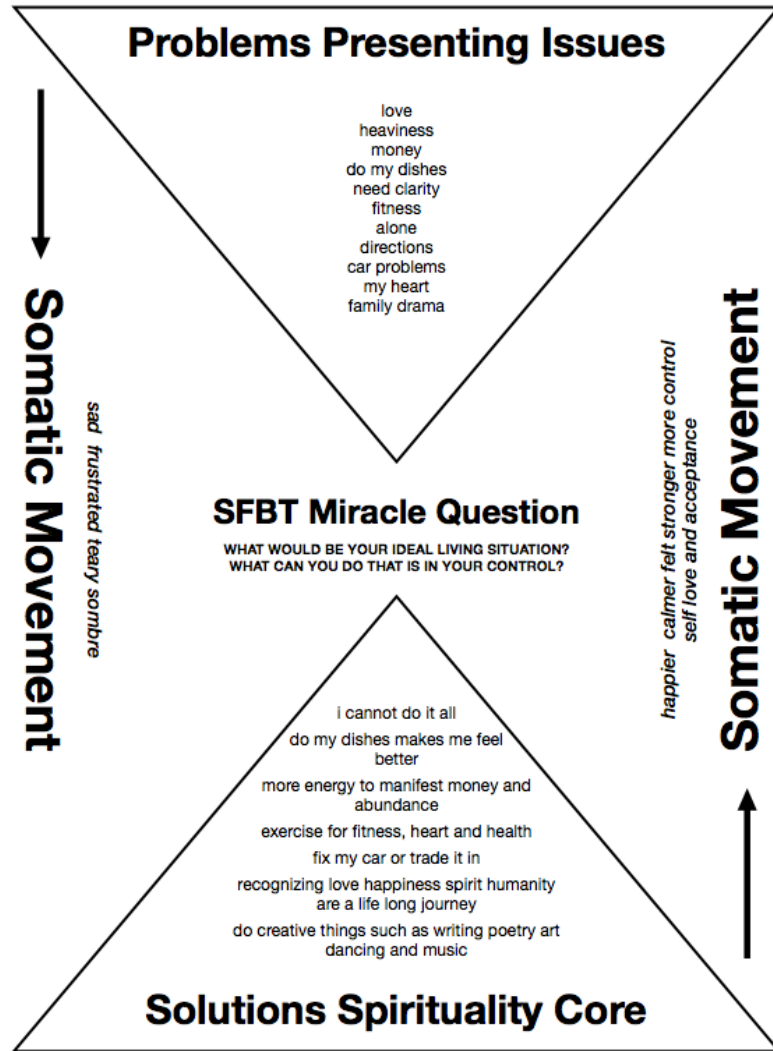
## **Appendix B - SFSSBT Double Pyramid Mind Map**

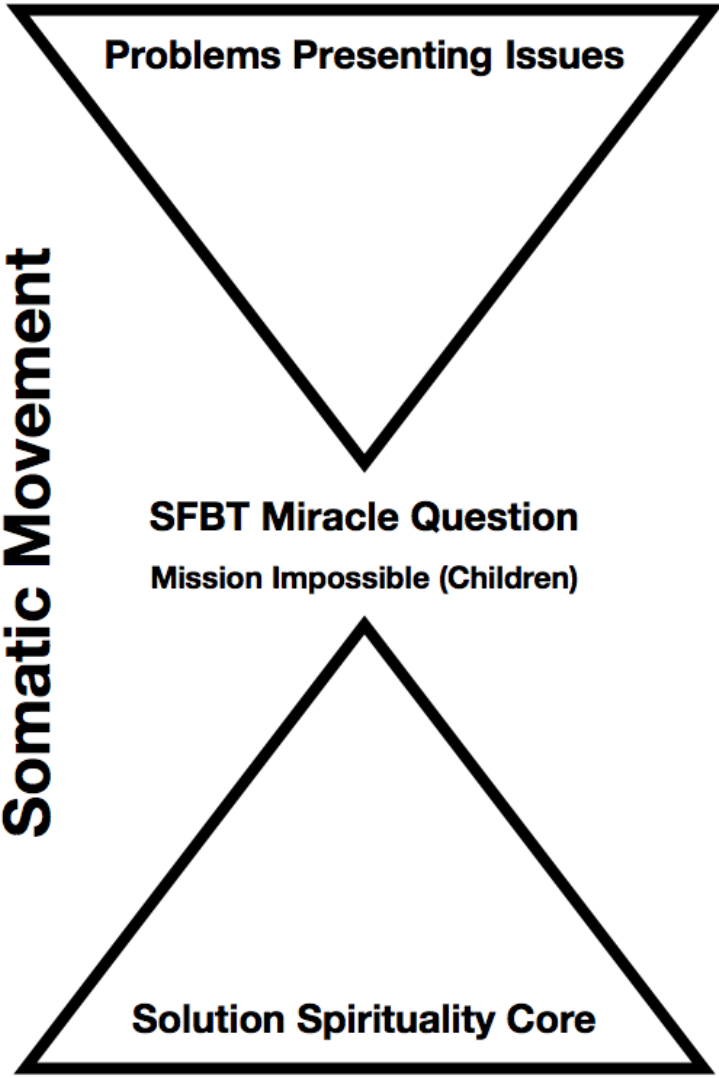
- Upper Pyramid - Problems, concerns, presenting issues
- Middle - Exceptions and Solution focused miracles question
- Lower Pyramid - Solutions and Spirituality Core Awareness
- Throughout the upper, middle and lower pyramid - Somatic Experiences

Counselling Sessions are collaboratively facilitated by the counsellor allowing for a natural flow of change, one word at a time, defining the problem, word by word, connecting to a bridge/miracle question, word by word, defining a solution, word by word towards a solution. This process allows a client to gain and visual view and a new perspective and understanding of their own strengths, resources and future goals. The client's own words are spoken, felt, heard and visualized in a collaborative therapeutic mind mapping SFBT visually or aurally recorded counselling session. During a counselling session, the client's feelings and words are reflective of change and forward motion. Within a confidential therapeutic container, the client experiences the safety and trust of their counsellor, allowing for a full range of feelings and expression towards authentic and positive change. The client has the opportunity to view their own narrative, individual and a glimpse into their authentic voice, while changing at their own pace, as they work towards solutions, feelings and or visions of a new future.

See SFSSBT  
Chart Sample

Client  
Below:





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