# A qualitative study investigating the experiences of using Solution Focused Therapy in a paediatrics diabetes team.

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# Background:

A key component of effectively managing a chronic condition in children and young people (CYP) is an approach that establishes and maintains motivation to enable CYP to achieve the complex juggling act required to manage their condition (Christie, 2012).

It is known that CYP have difficulty achieving and maintaining target glycaemic control due to a number of factors (Borus and Laffel, 2010).

Generic education classes that focus on the development of knowledge and skills were found to have only 'small to medium beneficial effects on various diabetes management outcomes' (Hampson et al, 2002; Murphy et al, 2006).

## What are solution focused approaches?



Problem free talk



Hopes for outcomes 'the preferred future'

# A solution-focused approach (SFA) offers an

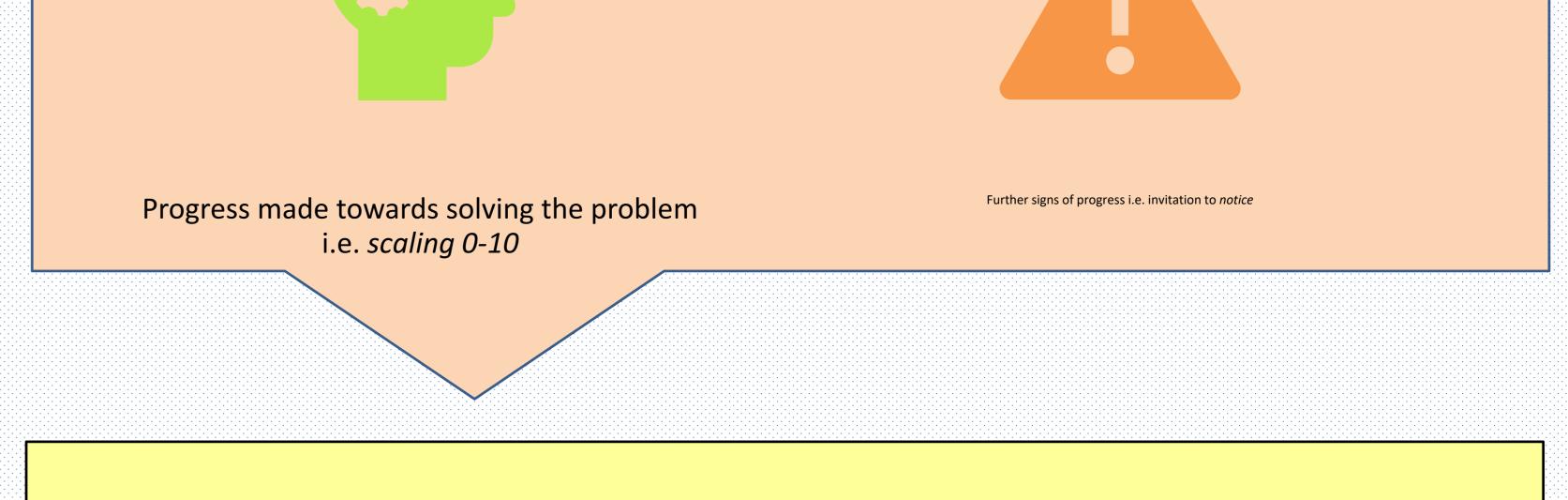
alternative to a 'fix it' or advice-driven approach. This easy-to-learn approach is derived from a psychological talking model and can be applied in practice by HCPs in order to enhance engagement with patients (Simm and Saunders, 2017), including CYP with diabetes (Christie, 2008). It essentially, through sensitively asked questions, establishes what patients already know about managing and amplifies those resources and strengths.

With this in mind, it is of interest to discover the attitudes and common themes a paediatric diabetes team describes and how it impacts on their

work.

#### SFA Questions:

"what are your best hopes for our time together? What are you hoping will be better? How have you got through this before? what would you notice if that was to happen? On a scale of 0\_\_\_\_\_10 how confident are you? what makes it that number? What do you already know? How would your family describe your qualities



# Methods:

A qualitative descriptive design which was considered the best method for describing the team's experiences with solution focus therapy. Polit and Beck (2012) said "the goal of qualitative studies is to increase our understanding of a phenomenon as it exists in reality".

# Data was collected using semi-structured interviews, all conducted by the first author.

#### The data was analyzed using qualitative data analysis

## **Practitioner Benefits**

**Confidence – Skills - Solutions rather than problems** 

"it's about finding the time for when they [patients] do these things, what works for them.

one of the teenagers who said to me 'take it away from me, I don't want it anymore' and I never knew how to broach that and it [SFT] gave me the confidence to carry the conversation on Results: Patient & Family

Benefits

**Trust - Relationship - Involvement** 

"Relying and trusting what he [patient] already knew worked

she decided to go back to using the pump [...] instead of giving her rules, it was all about her time, and she now

## Service Improvements

**Compliance - Team work - Consistency** 

"I do think we are good at praising each other's positives, what works well

I think the team is a lot more integrated

There is zero solution focused stuff in the majority of things; it's always the medical model. They [patients] don't like the model – nationally, DNA rates, reaching 60-70%, it's horrible"

[...] if something is going well, focus on what is going well and how it's going well as opposed to necessarily going wrong and how it's going wrong, so working on what is good and praising what's good it something worthwhile"

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thriving on it, doing well.

I think the biggest thing that they [family] say is that we listen"

### Conclusion

Based on the collected evidence, SFAs seem a promising addition to support practitioners, patients and their families and the service. The evidence gathered in this study lays the foundation for further research into other aspects of SFAs.

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More information/resources on solution focused approaches: Available on request and by contacting markguyers@gmail.com





