

Introduction

Solution-focused brief therapy (SFBT) is a mental health intervention that has received empirical support over the past decade (Gingerich, & Peterson, 2013; Franklin, Trepper, McCollum, & Gingerich, 2012). Rooted in the brief family systems approach, SFBT is an evidence-based practice that was created and first studied at the Brief Family Therapy Center in Milwaukee, Wisconsin in the 1980's by Steve deShazer and Insoo Kim Berg (Gingerich & Wabeke, 2001). Rather than focusing on what the client is not doing well, the SFBT model utilizes deductive reasoning to identify and expand on what already works for a client. In addition to deductive reasoning, SFBT assumes a future-oriented and strengths-based approach. More specifically, SFBT focuses on what the client is doing right in this moment rather than what the client has done wrong in the past (Newsome, 2005). SFBT's focus on finding solutions rather than talking about problems was progressive for its time and has since become a widely used intervention in schools (Franklin, et al., 2012; Thompson, 2011). For example, Kim and Franklin (2009) reported SFBT as an effective approach in working with at-risk students in a school setting, specifically helping students reduce negative feelings, manage conduct issues and decrease symptoms of externalizing disorders. Solution-focused brief therapy has also been deemed ideal for busy school environments serving a range of student needs (Thompson, 2011).

SFBT had been practiced in Mainland China (henceforth referred to as China) since the beginning of its conception, when it was first transported to Hong Kong and then to Taiwan by its American founders, Insoo Kim Berg and Steve deShazer (Liu, et al., 2015). From Hong Kong, SFBT trainings spread throughout China during the 1990's, and Chinese schools became one of the most prominent settings practicing SFBT. Evidence of SFBT prominence in China includes Dong and Huang (2011), which states that SFBT's future-oriented and strengths-based approach has provided a new perspective in counseling, resulting in the use of SFBT in schools and colleges within China.

Applications of SFBT in Chinese schools and colleges are rooted in the Chinese education system's view of mental health services as a method of increasing academic performance. Therefore, the use of SFBT in the Chinese education system has mainly focused on mental health and behavior management as a means of seeking better academic performance. In Chinese schools, the roles of school mental health professionals are slightly different than Westerner professionals, professionals in China have more direct responsibility over student's academic performance. As a result, Chinese literature regards SFBT's solution-seeking and future-oriented approach as a natural fit for school settings and views SFBT to be an effective approach addressing most behavioral and social problems (e.g., Shen, 2005). Moreover, SFBT ideas and techniques such as the positive orientation, exploring clients' own resources, and transforming complaints into goals are believed to weaken

the psychological resistance of students in China and improve their confidence and sense of self-control (Yang, Liu, & Zhang, 2005). Interestingly, the discussion in Chinese literature on the positive change and effective use of SFBT in school settings is similar to the ones in the United States (e.g., Kim, & Franklin, 2015; Allen-Meares, Montgomery, & Kim, 2013) that suggest SFBT is an effective approach for working with school-based problems.

In comparison to the reported evidence of SFBT as a promising intervention for school settings in North America, more studies addressing its adaptability and implementation in different cultures/countries are desired (Franklin, et al., 2012). There is some indication from published Chinese literature that SFBT is being applied and studied in school settings (Liu et al., 2015). In one meta-analysis, Gong & Hsu (2016) identified and examined 24 SFBT group intervention studies from school settings that were published between 2000 and 2014. The results of this review suggest that SFBT is an intervention that is being effectively used within Chinese schools. The meta-analysis yielded large effect sizes for internalizing behavioral problems and family relationship problems adding to the results that SFBT may be useful intervention for Chinese school settings. To our knowledge, however, there is no data that shows how SFBT is being used within Chinese schools from the perspectives of school educators and school-based practitioners.

Aim of Study

To develop further understanding and knowledge for most therapeutic approaches, such as the cultural feasibility and transferability, it is important to understand how it is being perceived and accepted from both a client's and a practitioner's perspective (Ivey, D'Andrea, & Ivey, 2012). Chinese studies provide evidence for the use of SFBT in schools, however, there is limited understanding of how school-based practitioners in China use and understand SFBT. Therefore, the purpose of this article is to examine the application of SFBT in Chinese school settings from educators' and practitioners' perspective by reviewing results from a government survey distributed to Chinese school mental health practitioners. To the authors' knowledge, this is the first paper of such kind in English, hoping to contribute to the understanding of how SFBT is accepted and practiced internationally by practitioners in Chinese school settings.

Methods

The Use of Government Surveys

In an effort to collect information about the perception of school-based services, the Chinese Ministry of Education (MOE) distributed an online survey, Survey on Mental Health Education in Primary and Secondary Schools, amongst practitioners. The analysis of the data was completed using the collected primary survey data. The original survey contained 7 questions (several single questions containing multiple items) and the presented analysis

utilized all 7 questions. Table 1 presents the 7 survey questions translated into English and broken down into 18 items.

Table 1
Translated Survey Questions

<u>Question</u>	<u>Answer Type</u>	<u>Answer Options</u>
1. I first learned about SFBT in	Multiple choice	Before 2002 2002-2004 2005-2007 2008-2010 After 2011
2. Where I learned about SFBT	Multiple choice	Friend/teacher/mentor Conference or training workshop Book or journal
3. I will use the following ways to improve my understanding of solution-focused brief therapy (check all that applies)	Multiple choice	Books/journals Researcher Professional organization Conference training Other (specify)
4. I have participated the following SFBT training session(s) if applicable	Multiple choice	Organizing agency Lecturer
5. How did I pay for the training	Multiple choice	Personal expense School reimbursement Personal and school fund combined

		Third party sponsoring
		Other (specify)
6. I think the quality and result of the training was	Multiple choice	Excellent Very good Okay Not good Poor
7. I think the problem of these trainings include	Open ended	NA
8. It can be further improved in the following way	Open ended	NA
9. I have received supervision from the following SFBT supervisor	Multiple choice	Supervisor I have not received SFBT supervision
10. If you have received SFBT supervision, I think the quality of my supervisor is	Multiple choice	Excellent Very good Neutral Low Very low

11. If you have received SFBT supervision, I think I need such supervision	Multiple choice	Extremely a lot
		A lot
		Occasionally
		Doesn't matter
		No need
12. I know and use the following counseling approaches in my daily practice (check all that apply)		Solution-focused brief therapy
		Behaviorist techniques
		Painting therapy
		Cognitive- \behavior therapy
		Sand play
		Client-centered therapy
		Family therapy
		Morita therapy
		Positive language
		Psychoanalysis
		Dance therapy
		Music therapy
		Gestalt therapy
		Hypnotic therapy
		Group counseling
		Others (specify)

13. Among those interventions, I most commonly used the following approaches (check all that applies)	Multiple choice	Identical answer choices to Question 12
14. SFBT was originally developed in the United States, I think its applicability and relevance to China is	Multiple choice	<p>Very applicable and relevant</p> <p>Applicable and relevant</p> <p>Neutral</p> <p>Not applicable nor relevant</p> <p>Extremely not applicable nor relevant</p>
15. Was there ever a situation that you found SFBT does not fit well with the Chinese context?	Open ended	NA
16. About the value to promote and implement SFBT in China, I think it is	Multiple choice	<p>Extremely valuable</p> <p>Very valuable</p> <p>Valuable</p> <p>Somewhat valuable</p> <p>No value at all</p>
17. I think the promotion and implementation of SFBT in China can be improved in the following ways	Open ended	NA

18. As a school mental health practitioner, I can contribute to the promotion and implementation of SFBT in China in the following ways	Open ended	NA
---	------------	----

The survey was structured to be short to accommodate school-based professionals' busy schedules. Specifically, past experiences with similar populations suggested a survey below 10 questions would strengthen the study's response rate greatly. In the original survey, 7 questions were all multiple choices, with 3 questions containing open-ended follow up questions/cues. The qualitative data for the two open-ended questions were analyzed using a thematic analytic approach (Braun & Clarke, 2006; Vaismoradi, M., Turunen, H., & Bondas, T, 2013). Two independent coders started with an initial round of open coding (of meaning units). A second round of coding meaning units was carried out with insights (coder's subjective reading or summary of meaning units) coded side-by-side to each meaning unit. Similar insights were then clustered together to form themes.

With the intention of collecting description data, the survey was a broad questionnaire that addressed a variety of school services, including questions that specifically targeted SFBT. The first items relating to SFBT asked the participants to recall the first time they became familiar with SFBT. Specifically, the item requested that the participants provide a year and a setting (e.g., professional training, online course, conference). The second item addressed how participants exchanged information about SFBT with colleagues and how the participants accessed SFBT related information/knowledge (e.g., journals, trainers, workshops). Next came two items about quantity and quality of SFBT trainings; how many training opportunities were available and accessible and how helpful were these trainings? The fifth item accessed the participants' knowledge of various psychotherapy approaches. The final two items explored the participants' attitudes regarding the use of SFBT and the promotion of SFBT in China. The survey instrument was developed by a panel of experts including policy makers, school teachers/educators, and university researchers. All items were intended to develop a well-rounded and broad understanding of how Chinese school practitioners view SFBT from its origins in China, to its more recent application in Chinese school settings.

Sample and Response Rate

The study was conducted with a convenience sampling from four selective areas in China: (1) Beijing, the capital and Northeastern China area (N=41, 30.6%); (2) Chongqing, representing Southwest China area (N=33,

24.6%); (3) Shijiazhuang, representing North China area (N=18, 18.4%); and (4) Zhejiang, representing Southeast China area (N=12, 9.0%). The surveys were reviewed and approved by school principals in conjunction with school boards and were distributed to practitioners through official school channels. In total participants from 90 public schools participated in the survey. A link to the online service were sent to either school liaison or directly to school counselor through E-mail. The E-mail explained briefly the background and context of the research. 134 questionnaires were completed (out of 203 surveys), yielding a response of 64%. The survey presented the questionnaire to practitioners as an opportunity for the Chinese government to get feedback on the use of SFBT in schools.

Results

Fifty-two percent (64 out of 123) of the respondents reported they first knew of SFBT after 2011, and only 2.4% of the respondents reported knew of SFBT before 2002. The two questions, "How do you know SFBT?" and "How do you usually get information on SFBT?", were combined for result due to poor response rate. Weisu Hsu from Normal University (Taiwan) was the most frequently mentioned (12 respondent) informer of SFBT in mainland China. Other main contributors of SFBT mentioned were: Wen Hsiao (Taiwan), Sijia Zhong (Taiwan), Richang Zheng (mainland), Weijie Qu (mainland), and Hong Luo (mainland). Most respondents reported getting most information on SFBT through education researchers and books.

Participants frequently referenced SFBT books as a method of disseminating SFBT to Chinese school practitioners. Some books have been written or translated into Chinese and specific books mentioned included: *Application of Solution Focused Brief Therapy* (Hsu, 2009); *Children's Solution Work* (Berg & Steiner, 2005); *Counseling Toward Solutions: A Practical Solution-Focused Program for Working with Students, Teachers, and Parents* (Linda Metcalf, 2007, 2 cases), and *Solution-Focused Therapy: Theory, Research & Practice* (Alasdair J. Macdonald, 2011, translated by Luo Hong et al.). Although SFBT books were reported as a popular and accessible way to learn about SFBT (23.9%), participants most often utilized online trainings to gain proficiency (26.9%). It is worth noting that online learning was not one of the ready-made survey options, rather an overwhelming number of participants made a qualitative comment about the use of online trainings. Other common methods of accessing SFBT resources include: agency protocol (22.4%), SFBT training sessions (20.1%) and supervisors (6.7%).

The Popularity of SFBT in Chinese Schools

Participants were asked about the popularity and cultural compatibility of SFBT in Chinese schools (Table 1). The respondents were school counselors (N=94) of which, 91.5% selected that SFBT had "very good" or "good" cultural compatibility (N=86). When asked to judge the value of

promoting SFBT in China, 90.2% of the school counselors who responded (N=112) selected that SFBT was "very meaningful" or "meaningful" in a school setting (N=101). When asked about need for supervision and support for the successful implementation of SFBT in schools, 86.5% of the respondents (N=37) stated that supervision was "very much" needed (N=32).

Table 2

The Use of Therapeutic Interventions in Mainland China

<u>Therapies</u>	<u>Reported Usage</u>
Cognitive Behavior Therapy	N=56, 18%
Behaviorist Techniques	N=51, 16.4%
Positive Language	N=32, 10.3%
Painting Therapy	N=28, 9%
Solution Focused Brief Therapy	N=26, 8.4%
Client-Centered therapy	N=24, 7.7%
Image Dialogue	N=23, 7.4%
Sand Play	N=22, 7%
Psychoanalysis	N=17, 5.4%
Family Therapy	N=12, 3.9%
Morita Therapy	N=12, 3.9%
Music Therapy	N=8, 2.6%

How Chinese Practitioners Receive Training in SBFT

Participants identified funding as a barrier to continuing education opportunities. Of the 75 school practitioners who reported participating in training sessions, 20 received reimbursement from their school, 19 were self-supported, 6 received partial reimbursement from their schools, 4 reported that the cost is taken on by the program's sponsor and 6 declined to answer. Cost of SFBT trainings arose in the survey data as an inhibitor to the long term successful delivery of SFBT.

This survey identified two common types of learning opportunities for school-based practitioners: trainings lead by professional trainers and trainings led by local trainers. Professional trainers are defined as individuals with expertise in SFBT, who have a nationwide (or worldwide) reputation, who conduct education research or SFBT research, who have rich experience using SBFT in a school setting and who are familiar with the role counselors have in schools. However, it may be costly or inconvenient to invite professional trainers; so many training sessions are provided by local, experienced school

counselors. Often these local trainers have attended national conferences or regional conferences where the professional trainers are present. These local practitioners are then able to deliver the knowledge to colleagues. The survey results showed that the in-person trainings were mostly done by local trainers who had received formal SFBT training. These local trainers served a mixed role as both a presenter and a supervisor in their professional communities. The accessibility of local school counselors made these resources sustainable. It is more cost effective for local trainers to educate their professional community, as they are able to provide follow up training sessions and are familiar with the challenges that are unique to the local population.

Although the focus of this survey was not qualitative, 12 participants spontaneously mentioned the word "dissemination" in the survey. Although the respondents were enthusiastic about the use of SFBT in school settings, most of them seem to lack basic knowledge of SFBT. One respondent noted that SFBT learning materials were not always available to Chinese practitioners and therefore the practitioners could not gain proficiency:

"More promotion should be done. Most teachers around me know nothing about SFBT. Books on SFBT are often translated from abroad; due to cultural differences and limitations of the translators, most of the books are not easy to read, and the cases are not pertinent to daily work of teachers....I have never taken part in any training on it and I don't know if there is any. I hope some free training opportunity could be provided as a beginning for promoting SFBT."

The comments demonstrate a spectrum of abilities and knowledge amongst the participants. While some of the respondents were confused by the core concepts in SFBT, some of the advanced school counselors felt that the existing training were too superficial. The variety of skills and professionals need amongst Chinese practitioners is not fully reflected in the Chinese SFBT literature, which is mostly focused on the theory of SFBT rather than the practice of SFBT (Liu et al., 2015). Experienced participants expressed frustration with the quality of the training and supervision opportunities, generally feeling that these opportunities were too scarce to be meaningful:

"Just theory, no practice. Too expensive."

"There are no follow-ups after the training; we don't have opportunities to practice SFBT with supervision from the trainer."

"There are too many trainees at different levels in the same class, so the learning atmosphere is not good and the session is too short to go deeper."

"The training is provided through internet and we can't have real-time feedback from the trainer."

Practice of SFBT in China

Educators taking the survey were asked about the cultural competency of SFBT for Chinese schools. Of the school counselors who responded (N=94), 91.5% choose "very good" or "good" (N=86) regarding the cultural competency of SFBT. However, no respondent gave an example of how SFBT is cultural relevant for Chinese practitioners. Rather than addressing the question, most of the respondents gravitated toward listing core strength-based concepts of SFBT such as, "focusing on the positive" and "the power of praising". Similar to the school counselors, teachers found it difficult to answer questions regarding the cross-cultural adaptability of SFBT and provide specific examples.

Discussion

Based on the survey results, it seems that SFBT appeals to Chinese practitioners, but there is limited access to helpful, affordable, and informative trainings. The survey maintains that the high interest in SFBT among school practitioners is because of its strength-based model that does not require students to recall past trauma. Despite their interests, survey participants expressed frustration with the available training, stating that there are not enough opportunities to apply SFBT principles to practice. This may be a reflection of the majority of SFBT research and training being conducted in Taiwan rather than China (Liu et al., 2015). As the survey results suggest, the lack of training could be a result of fiscal and geographic barriers. Schools may not have the resources to invite expert trainers to supervise counselors and there are likely not enough local qualified trainers to supervise school-based practitioners. Given that the current public school system, the backbone of Chinese schooling system, offers less competitive compensation to well-trained practitioners, qualifications of school-based practitioners vary which leads to various adaptations of SFBT in Chinese school settings.

The reported geographic, fiscal, and cultural limitations to learning SFBT may hamper the effective use of SFBT in school settings. For example, the survey results indicated that while practitioners utilized SFBT techniques they did not have a firm grasp of the interventions and how to understand SFBT. Specifically, the practitioners had difficulty expanding upon the cross-cultural adaptability of SFBT and wrote most comments on the need for more training and supervision. Interestingly, several relied on on-line trainings suggesting that trainers and researchers may want to make more on-line resources available to Chinese school professionals. More books and training materials translated into Chinese may also facilitate learning since practitioners reported relying on books that were written or translated into Chinese. The current limitations in training could be an indicator of why practitioners reported using other interventions over SFBT. For example, in Table 1, cognitive-behavioral therapy and behavioral therapy were cited as the most popular interventions. One explanation for that is the manuals for those interventions

have been more widely translated and training and supervision are more accessible to Chinese practitioners.

Even though, Chinese professionals did not specifically address cultural adaptations in their responses, future trainings on SFBT may require adaptations in training materials. For example, Hsu & Wang (2011) discussed integrating Asian clients' filial piety beliefs into SFBT, this kind of contribution is rare in Mainland China and yet necessary for the development of effective practice. Adaptations of the miracle question and praising technique have been specifically discussed in literature and this question may be readapted to fit the Chinese culture of modesty. The results of the survey indicate that, the competencies to practice SFBT in schools and the indigenization of SFBT techniques in Mainland China are just beginning and are still in development. Over 50% of practitioners had been introduced to SFBT for less than a decade since 2011. The current state of SFBT, however, may be a normal progression for how concepts from practice that rely on Western philosophies are transported to Mainland China. The immediate results of the transfer may lead to incomplete understanding and a lack of cultural transfer of these interventions. This has been shown, for example, in a literature review on how the concepts of evidence-based practice were translated from Western culture into Mainland China (Zhang et al., in press).

To assure more effectiveness of SFBT in schools, the indigenous culture must be taking into consideration, with adjustment and innovation in the application process. Experts in the language have suggested that the term 'solution focused' is difficult for Chinese teachers and school counselors and is not uncommon for these practitioners to rephrase 'solution focused' as 'focusing on solving problems' (Zhang et al., in press) This rephrasing is an example of how Chinese school-based professionals reframe a Western intervention to fit their cultural background. Chinese researchers have suggested examining the communication patterns and uses of language of school-based practitioners as a method for transferring SFBT interventions rather than just seeking a universal and structured way to teach the therapeutic approach.

The results of the survey indicate that the SFBT theory has already been introduced to practitioners therefore, it is time to focus on more training, supervision, cultural adaptability, and empirical studies leading to greater fidelity of the use of SFBT in school settings. There may be some advantages for SFBT interventions that could be used to facilitate training, fidelity and study of SFBT in Mainland China. The concept of solution-building instead of problem solving is unique to SFBT and may be easier to comprehend by Chinese practitioners who have not been trained in problem solving that originates from Western cultural background (Liu, 2015). Although there is sufficient evidence to support the use of SFBT in schools in China, most of the research done on SFBT as an intervention is set in Western settings. Fortunately, Chinese researchers have started exploring the empirical literature of SFBT more recently. Most relevantly, a recent meta-analysis by Gong &

Hsu (2016) demonstrates how SFBT serves students in ethnic Chinese schools and provides insight on how Chinese school-based practitioners adapt solution-focused techniques. Overall, the results of Gong & Hsu (2016) parallel the survey results; due to its strength-based present focused approach practitioners view SFBT as adaptable to Chinese culture. Gong & Hsu (2016) and the results of this survey indicate the practicality of SFBT in school settings.

Limitations

This survey was an exploratory government tool used to gather information on SFBT as perceived by school-based practitioners. No formal IRB procedure or equivalent was used during the data collection process. The IRB procedure is underdeveloped in the Chinese school system; therefore, there was no formal IRB approval for this study. However, the study was reviewed by the school principals, who provided permission for the study to be conducted. In an effort to control the length of the survey and the time it would take practitioners to complete, limited demographic information was collected. As a result, the collected demographic information related to how long the professionals had been practicing, their years of experience using SFBT and how they heard about SFBT. The researchers did not ask participants about their demographic characteristics as they had found those questions to increase the rejection rate for participation. Demographic information was also not collected on 90 schools where practitioners responded. This was due to the Chinese primary and secondary education system, which is much more homogeneous than Western school systems. For example, the Chinese education system does not have the diversity of public schools, charter schools, and private schools, which all operate differently. Finally, although the survey sought out the true opinion of the school-based practitioners, it is possible that respondents answered out of courtesy rather than honesty. It should also be noted that experiences of the respondents related to SFBT vary widely. Furthermore, this paper did not cover all aspects that are vital for understanding the dynamics of adaptive evolutions of SFBT and other school counseling tools in China, such as the historical background of Chinese school counseling and its financing system.

Conclusion

SFBT is being used in school settings within China. The survey results indicated a desire from practitioners in China to use SFBT and demonstrate an ongoing process of adapting SFBT to Eastern settings. The present study demonstrated that SFBT is perceived by Chinese practitioners as being helpful and effective. Additionally, the strengths-based model of SFBT is a popular approach for helping children, adolescents and families. The survey results, however, show a need for affordable, accessible SFBT trainings and supervision. The participants expressed a lack of resources and geographic barriers that hamper the effective use of SFBT in school settings. On-line

trainings and more training materials that are appropriately adapted into the preferred native language of school practitioners are needed.

References

- Alasdair J Macdonald, 2011. *Solution-Focused Therapy: Theory, Research & Practice*. Translated by Luo Hong, Hong Fang, Shen Xuanyuan. Ningbo Press.
- Allen-Meares, P., Montgomery, K. L., & Kim, J. S. (2013). School-based social work interventions: A cross-national systematic review. *Social Work, 58*(3), 253-262. doi: 10.1093/sw/swt022
- Berg, Insoo K., and Therese Steiner. *Children's solution work*. New York: Norton, 2003. Print
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology, 3*(2), 77-101. doi: 10.1191/1478088706qp063oa
- Chen J. (2005). An experimental research on interpersonal counseling for junior middle school students with SFBC (Unpublished master's thesis). Zhejiang Normal University.
- Dong L., Huang L. (2011). Review on domestic and international applications of solution-focused models. *Chinese Journal of School Health, 32*, 255–256. doi: 10.9867
- Franklin, C., Biever, J., Moore, K., Clemons, D., & Scamardo, M. (2001). The effectiveness of solution-focused therapy with children in a school setting. *Research on Social Work Practice, 11*(4), 411-434. doi: 10.1177/104973150101100401
- Franklin, C., & Gerlach, B. (2007). Clinical applications of solution-focused brief therapy in public schools. In Thomas, F. & Thorana, N. (Eds) *Handbook of solution-focused brief therapy: Clinical applications*, (168-169). The Haworth Press: NY
- Franklin, C., Trepper, T. S., McCollum, E. E., & Gingerich, W. J. (2012). *Solution-focused brief therapy: A handbook of evidence-based practice*. New York: Oxford University Press.
- Franklin, C., & Streeter, C. L. (2003). Solution-focused accountability schools for the twenty-first century: An evaluation of Garza High School. *The University of Texas at Austin: Hogg Foundation for Mental Health*.
- Gingerich, W. J., & Peterson, L. T. (2013). Effectiveness of Solution-Focused Brief Therapy A Systematic Qualitative Review of Controlled Outcome Studies. *Research on Social Work Practice, 23*(3), 266-283. doi: 10.1111/jcpp.12058
- Gingerich, W. J., & Wabeke, T. (2001). A solution-focused approach to mental health intervention in school settings. *Children & Schools, 23*(1), 33-47. doi: 10.1093/cs/23.1.33
- Gong, H. & Hus, W. (2016). The effectiveness of solution-focused group therapy in Ethnic-Chinese school settings: A meta-analysis. *Studies of*

- Psychology and Behaviors*, 13(6), 799-803. doi:
0.1080/00207284.2016.1240588
- Hsu Weisu (2009). *Application of Solution Focused Brief Therapy*. World Publishing Cooperation.
- Hsu W. S. (2009). The facets of empowerment in solution-focused brief therapy for lower-status married women in Taiwan: An exploratory study. *Women & Therapy*, 32(4), 338–360. doi:
10.1080/02703140903153013
- Hsu Weisu, Chiachih D.C. Wang. (2011). Integrating Asian Clients' Filial Piety Beliefs into Solution-Focused Brief Therapy. *International Journal Advanced Counselling*, 4(33), 322-334. doi: 10.1007/s10447-011-9133-5
- Ivey, A. E., D'Andrea, M. J., & Ivey, M. B. (2012). *Theories of counseling and psychotherapy: A multicultural perspective (7th Ed.)*. Washington DC: SAGE.
- Kim, J. S., Franklin, C., Zhang, Y., Liu, X., Qu, Y., & Chen, H. (2015). Solution-focused brief therapy in China: A meta-analysis. *Journal of Ethnic & Cultural Diversity in Social Work*, 24(3), 187-201. doi:
10.1080/15313204.2014.991983
- Kim, J. S., & Franklin, C. (2009). Solution-focused brief therapy in schools: A review of the outcome literature. *Children and Youth Services Review*, 31(4), 464-470. doi: 10.1016
- Liu, X., Zhang, Y. P., Franklin, C., Qu, Y., Chen, H., & Kim, J. S. (2015). The practice of solution-focused brief therapy in Mainland China. *Health & Social Work*, 40(2), 84-90. doi: 10.1093/hsw/hlv013
- Metcalf, L. (2008). *The field guide to counseling toward solutions: The solution-focused school* (1st ed.). San Francisco: Jossey-Bass.
- Newsome, W. S. (2005). The impact of solution-focused brief therapy with at-risk junior high school students. *Children & Schools*, 27(2), 83-90. doi:
10.1093/cs/27.2.83
- Shen Z. (2005). Making counseling more effective: A review on solution focused brief counseling approach. *Thoughts, Theories, Education*, 11, 57–60. doi: 10.6439
- Thompson, A. M. (2011). A systematic review of evidence-based interventions for students with challenging behaviors in school settings. *Journal of Evidence-based Social Work*, 8(3), 304-322. doi:
10.1080/15433714.2010.531220
- Yang B., Liu X., Zhang Y. (2005). Solution focused brief counseling and school counseling. *Journal of Chongqing University (Social Sciences)*, 3, 136–140. doi: 10.989.8
- Vaismoradi, M., Turunen, H., & Bondas, T. (2013). Content analysis and thematic analysis: Implications for conducting a qualitative descriptive study. *Nursing & Health Sciences*, 15(3), 398-405. doi:
10.1111/nhs.12048

Zhang, A, Franklin, C., Ji, Q Y, Chen, Y. T., Jing, S J., & Shen, L. (in press)
Evidence-based practice in Chinese social work: Overcoming language
and developmental barriers. *China Journal of Social Work*.