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# Co-Constructing Cooperation with Mandated Clients

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*Dominant practice models for social work were originally developed and intended for work with voluntary clients. The professional literature indicates that use of these models with involuntary clients often alienates rather than engages. This article describes the use of solution-focused interviewing as a way to engage involuntary and mandated clients. A conversation with a court-ordered client is presented and analyzed to demonstrate how practitioners can begin the co-construction of cooperation with mandated clients through adopting a not-knowing posture, focusing on and amplifying what clients want and client strengths and successes, and asking relationship questions to generate possibilities for change specific to the mandated context. The ethical implications of this noncoercive, nonconfrontational approach are addressed, along with its implications for a view of how clients change.*

**Key words:** *co-construction; engagement; mandated clients; motivational congruence; solution-focused therapy*

If there is to be a place for social work in the social welfare system, the profession must make . . . an academic commitment to the development of improved practice models for social work with mandated clients.

*E. D. Hutchison (1987, p. 595)*

The term "mandated client" evokes strong and predictable reactions from practitioners, most of them negative. Ask practitioners for word associations with this term and they reply: "resistant," "difficult," "uncooperative," "negative," "full of attitude," "in denial," and "often hostile." These associations are alarming because it is likely that the majority of clients seen by social workers in public agencies are mandated, or at least to some degree involuntary (Ivanoff, Blythe, & Tripodi, 1994; Rooney, 1992).

There is no relationship between the frequency with which practitioners see mandated clients and the number of articles and books devoted to dis-

cussing practice with them. This is not surprising because the field's practice procedures have been developed assuming that practitioners work with voluntary clients (Ivanoff et al., 1994). The prevailing paradigm in the field directs practitioners first to engage clients through active listening and empathy and, once trust and cooperation are building, move to problem assessment and intervention. This paradigm assumes that clients have chosen to get help and, although possibly anxious and uncertain about changing, are motivated to figure out their problems so that they can be solved.

This paradigm often does not apply to mandated clients, who frequently see practitioners against their wills, believe that "the system" has made errors and has its own interests at heart, and do not believe that they need help. They frequently view contacts with practitioners as unwanted intrusions into their lives and the remedies recommended to them as meaningless or

harmful (Miller, 1991). Ivanoff et al. (1994) pointed to research that indicates that mandated clients often do not respond to warmth, genuineness, and empathy and were not likely to own their problems—especially as the mandating agent perceived them. Consequently, these authors like others (Cingolani, 1984; Hartman & Reynolds, 1987; Hutchison, 1987; Milgram & Rubin, 1992; Rooney, 1992; Slonim-Nevo, 1996) indicated that work with mandated clients commonly breaks down right from the outset at “engagement.”

Cingolani (1984) was one of the first to write that working with mandated clients requires a different practice model. She suggested working from a social conflict model that assumes the client and the mandating agent have potentially conflicting interests and different definitions of the mandated situation. She suggested that the practitioner assume no responsibility to resolve the conflicting views of the mandating agent and client, but function as a negotiator who acknowledges and respects the reality and right of clients to make choices about what to do in their circumstances. Although she discussed different forms of a negotiator role, she did not offer specific practice procedures.

Two more contributions to working with mandated clients discussed practice procedures (Ivanoff et al., 1994; Rooney, 1992). After reviewing related research and practice wisdom, these sources maintained that developing “motivational congruence” between clients and practitioners is crucial for effective practice with involuntary clients. Ivanoff et al. and Rooney wrote about involuntary clients or those who feel “forced or pressured” into services. Mandated clients were involuntary clients who had been ordered into services by the court and were distinguished from clients informally pressured into services by, for instance, a school, a parent, or a spouse. The challenges for practitioners at engagement are similar for both categories. Rooney (1992), for example, drawing on Reid and Hanrahan (1982), defined *motivational congruence* as a fit between client motivation and the services that practitioners attempt to provide. He wrote that past research indicates that motivational congruence can be enhanced by emphasizing client choice whenever possible, informing clients about what to expect during treatment and their part in it, contracting around goals and treatment proce-

dures, and fostering client participation and choice in treatment design throughout the treatment process.

The Rooney (1992) and Ivanoff et al. (1994) sources are important contributions to the field because they suggest strategies that simultaneously attempt to maximize clients’ sense of choice and control while, at the same time, being clear about any nonnegotiable matters such as those mandated by the court. Within the context of the task-centered model of practice, they suggest using five strategies: (1) nonjudgmental acceptance to explore clients’ views of their problems to reduce reactivity; (2) reframing to increase the fit between client motivation and outside or mandated pressures; (3) inducements to increase compliance with nonnegotiable requirements; (4) exploring the client goal of “getting the system (or the pressuring other) off my back” as a motivation for compliance; and (5) informing clients of their rights to choose not to comply along with the likely consequences as a motivation for compliance with minimal requirements. Both sources also address the use of confrontation, generally favoring its less intrusive forms and reserving its more direct forms for use around nonnegotiable matters.

In summary, current major sources in the field suggest that practice with involuntary clients can best be advanced by developing additional procedures that enhance motivational congruence between clients and practitioners and maximize client choice and control in the treatment process. As Rooney (1992) stated:

The pursuit of motivational congruence is promising toward a goal of legal, ethical, and effective practice with involuntary clients. Such efforts deserve experimentation and study to enhance compliance while respecting involuntary client legal rights and their self determination. (p. 89)

### **Taking a Solution-Focused Approach**

This approach, although similar to Rooney’s (1992) in its emphasis on building motivational congruence, does not seek congruence as a strategy to increase compliance but as recognition that clients are people who make choices about future acts. It also uses different procedures, ones devoted to co-constructing expanded possibilities for clients’ futures without the use of advice or

confrontation. These procedures were originally developed at the Brief Family Therapy Center (BFTC) in Milwaukee, Wisconsin, through 20 years of thick observation of client-practitioner interactions (de Shazer et al., 1986). The observers, using a one-way mirror, paid attention to which clients were making progress and what practitioners were doing to be useful. Especially noteworthy is that these procedures were developed through ongoing work with involuntary clients. Research on clients seen at BFTC from 1992 to 1993 revealed that more than 50 percent were referred (and often mandated) for services by public agencies such as the courts, schools, and social services (De Jong & Hopwood, 1996).

The solution-focused approach is unusual and progressive in that it invites clients to be their own authority on what they want changed in their lives and how to make those changes happen. It contrasts sharply with approaches that attempt to promote client change through practitioner assessment of and intervention with perceived client pathologies, deficits, and problems (De Jong & Berg, 1998; De Jong & Miller, 1995; Miller, 1997). It is best known for interviewing procedures such as the miracle question, which invites clients to develop well-formed goals in their own frames of reference, and exception questions, which focus on clients' past successes and strengths related to what they want to be different (Berg, 1994; de Shazer, 1985, 1988). Descriptions of the use of a solution-focused approach with involuntary clients have begun to appear (De Jong & Berg, 1998; Tohn & Oshlag, 1996; Walsh, 1997). This article extends that work by presenting a more detailed description and analysis of the use of solution-focused procedures in the process of engaging involuntary clients, the point at which Ivanoff et al. (1994) and Rooney (1992) stated that client resistance is first encountered and at which current models of practice have not been useful. The research unfolds by presenting segments of a first-session, solution-focused conversation with a court-mandated client (Diana) together with discussions of the procedures used by the practitioner (Insoo Kim Berg). (The session "Talking Solutions with Mandated Clients" is available on videotape from BFTC, P. O. Box 13736, Milwaukee, WI 53213. The authors are indebted to Gale Miller, Ann Lutz, and John Lutz for offering their observations about solution-focused work with mandated clients. Their obser-

vations are reflected in this article and included on the videotape.)

### Case Illustration

Diana is a 34-year-old white woman referred to Berg by a foster care agency. She was referred because she was at odds with her agency worker over requirements the latter was insisting on before her children would be returned to her care. The agency hoped that a consultation with Berg would help to open up new possibilities for cooperation.

### Getting Started

Berg began by asking about Diana's family situation and how she had gotten into services:

*Berg:* Hello.

*Diana:* Hi.

*Berg:* How old are you, Diana?

*Diana:* 34.

*Berg:* Do you have any children?

*Diana:* Yes, I have four children and a grandchild.

*Berg:* A grandchild? You are a grandmother? Oh my goodness!

*Diana:* Yes, but I don't allow anyone to call me that. I am a me-ma, not a grandma.

*Berg:* And how old are your children?

*Diana:* 15, 13, 10, and 4. And my grandbaby is 7 months.

*Berg:* And your grandbaby is seven months; wow! And your grandbaby lives with you?

*Diana:* No, none of my children live with me at the present.

*Berg:* Oh, where are they?

*Diana:* The grandchild and the daughter who bore her are in Virginia with my mother. The 13-year-old is in a locked facility getting extensive therapy and treatment, and the two boys are in placements, foster placements within the city.

*Berg:* So you are living alone at this time? Are you working?

*Diana:* Yes.

*Berg:* What kind of work do you do?

*Diana:* I upholster chairs for the AMC theaters.

*Berg:* Really? Where did you learn to upholster?

*Diana:* They taught me.

*Berg:* Great. So, are you good?

*Diana:* I'm pretty good for just starting out. I've only been doing it for two months.

*Berg:* Do you like it?

*Diana:* It's hard work, but it's fun. It's different; it's a big change.

*Berg:* Uh huh, it's a big change. So I understand that you were sent to this agency. So, who suggested that you must come to this agency?

*Diana:* The courts, the courts mandated it.

*Berg:* Where did the courts get this idea that you needed to come to this agency?

*Diana:* Um, I got in trouble with the law and I was incarcerated, and because I have no family in the city, they could not place the children with family, and so they placed them directly into protective custody services.

*Berg:* And so that is the reason why the children are placed and so on.

*Diana:* Yes.

*Berg:* So what is the court expecting you to do by coming and talking to the people here? They think that coming to talk to the agency people, that somehow that is going to be helpful to you?

*Diana:* They have . . . what they do is once you get into the court system you have to go through a lengthy court action. They determine whether it is founded for the children to be removed from your home which, in my case, they had reasons to believe this and from there, once you get into an agency, there are a number of agencies throughout any city, they come up with a parent program, what would be the right word for it, a contract, with no specific dates, times, or anything, but they suggest a possible placement of when the children can be placed back in the home once the requirements are fulfilled.

*Berg:* So coming here is part of the requirements, coming to this agency to talk with the staff here.

*Diana:* Yes.

*Berg:* So what are they expecting will come out of this?

*Diana:* Hopefully, my parenting skills will be more in tune with what society feels is acceptable now-a-days. We learned anger management, to live a sober life, just a whole bunch of positive things.

*Berg:* So this is their idea about what you ought to accomplish by coming to this agency.

*Diana:* Yes, they have all the say so; the client has none.

*Berg:* None, so I was going to come to that, what do you think about what they say you have to do?

*Diana:* Well, some of the things I agree with, cause I mean everyone needs help, especially being a single parent with four children. God knows I needed it. My two older ones were in gangs. And I screamed for help. And of course, unless it is a major city, there is not any help for a child who gets involved in that gang situation, unfortunately. A lot of things everyone does they need help with. Everyone needs help as far as that anger goes. Sobriety, if you are an alcoholic you definitely need to get in tune with that. As I said there are a lot of things that go on, some things I agree with, some I don't.

Pivotal to a solution-focused approach is inviting clients into the role of expert; that is, treating them as being most knowledgeable about their own lives, experiences, and perceptions. This is accomplished by practitioners adopting a "not-knowing" posture (Anderson & Goolishian, 1992) wherein they formulate their questions in ways that place clients in the position of informing practitioners about themselves. This posture is especially important for engaging mandated clients because they are asked to take control of describing their mandated situation and themselves.

In the above exchange, like practitioners using other approaches, Berg began by getting acquainted with Diana. However, unlike other approaches in which practitioners turn next to reviewing information already in the case record with which mandated clients often take issue, Berg remained not knowing and asked how it was that the court came to send Diana to this agency. She also asked what the court wanted to be different as a result of her contact with the agency and what Diana's view was about the court and agency's expectations for her. In addition to keeping Diana in the role of expert, these questions also differentiated Berg from the court and agency with their expectations for Diana. This differentiation set the stage for Berg and Diana to co-construct a way to cooperate regarding what Diana wanted to do about the circumstances she faced in her mandated situation.

The practitioner's differentiation from the mandating agent's expectations is clearer in some practitioner roles than others. It is immediately apparent here because Berg was consulting on

Diana's case and she had no hand in setting the court's expectations. It would be less clear if Berg were Diana's foster care worker who did have a hand in formulating expectations for Diana that the court later accepted, possibly revised, and mandated. Although the practitioner roles are different, we believe the interviewing approach should be the same in both instances.

The practitioner should ask several questions that draw out what the client perceives the mandating agent expects to be different and what the client thinks about the expectations. Asking for these perceptions in a way that puts the client in charge of describing them in detail and on her own terms sets the stage for the co-construction of cooperation. In our experience, the sooner in the work with a client the practitioner begins asking such questions, the better. Thus, for example, in foster care cases we recommend that workers incorporate this approach in formulating parent-agency agreements before they are proposed to the court.

Consistent with a strengths perspective (Saleebey, 1997), solution-focused practitioners notice and affirm client successes and strengths (De Jong & Berg, 1998). Although there were several openings to inquire into problems (such as how it was that the children were placed in a locked facility and how Diana came to be incarcerated), Berg ignored these because examination would lead the interview in a very different direction. Instead, once she learned that Diana upholstered chairs, Berg asked where she had learned these skills and whether she was good at her work. This put Diana in the position of describing a success in her own words: "I'm pretty good for just starting out; I've only been doing it for two months." Exploring and indirectly complimenting client successes by asking for details about them is a key procedure used in the co-construction of competence that is characteristic of solution-focused work (Berg & De Jong, 1996). It conveys that practitioners assume that clients have competencies and that solutions to their difficulties will arise from these. For mandated clients who often expect to be judged harshly for the events that brought them into services, this is an unexpected and engaging message.

### **Focusing on What the Client Wants**

When mandated clients enter services, they assume that practitioners will focus on telling them

what they have to do to satisfy the mandating agent. A solution-focused approach moves the conversation in a different direction:

*Berg:* OK, so now that you got here because of what the court says, what do you suppose this agency can do that will be helpful to you? What needs to come out of this, so that you can say, okay, this was not my idea, but hey, this turned out to be good for me? What needs to be the outcome?

*Diana:* That is kind of hard to say because that is a long goal. I've already had one parent contract. I did, I would say, seven-eighths of the things on my contract . . . and . . .

*Berg:* Say that again . . . seven-eighths?

*Diana:* I did about seven-eighths of what I was supposed to do on that contract. I did almost everything. Before we went back to court, they wanted me to sign another contract stating another series of things I had to do. Things can range from different types of parenting classes to treatment centers. I was given my boys back on the weekends—they took that from me. We took it to the courts.

*Berg:* What did the courts say about it?

*Diana:* The courts said I have no say. Whatever they say I do.

*Berg:* I guess that was enough to make you angry.

*Diana:* To put it nicely, yeah. I walked out of the courtroom.

*Berg:* You did? You had some pretty strong feelings about that.

*Diana:* Still do. I refused to sign the contract.

*Berg:* You did.

*Diana:* I do what's in the contract because my boys mean everything to me. But I disagree with what it says.

*Berg:* So what the agency says is, and the court agrees with the agency, is that in order for you to get your children back you must fulfill all these requirements, and you are saying you have accomplished seven-eighths of the first requirements and they have added more requirements for you. And so, what . . . they are saying unless you finish these second requirements you are not going to get your children back, if anything they took the children away from the weekend visits.

*Diana:* Correct. Well, due to the laws now—a-days once your children are in protective

services and they have found their right to take the children from your home, regardless of what the first reason was, let's say for a untidy house—a poor house setting, even though they took them out for that reason they find out that your husband beats you and you all drink a little excessively, they can take every area in your life even if it has nothing to do with you keeping your house and you have to work on every area before the children can be placed back in your house.

*Berg:* So what part of what they are asking you to do, do you disagree with?

*Diana:* They state that I need to go to a domestic violence counseling now. Which I disagree with. I have had domestic violence with the father of my two daughters, severe violence—four years of it. I lived through it. I overcame it. I got out of it. I did not have another episode of physical violence until a year ago. I feel I do not need it. They also mandated me so many times I had to go to AA and I had to get slips signed to show proof. And the worker states she needs this for her. She just wants this because she wants this. For the first six months that I was with the agency, I was going on my own. I do drink excessively. I'm what you call a problem drinker. I get a problem, I drink. That's just a nice way of putting it. I'm an alcoholic. And I feel, cause her and I have a good rapport . . .

*Berg:* Who? You and who?

*Diana:* Me and my worker. My worker and myself we have a good rapport. But we do hit heads. We are both very strong-willed people. And as I told her, I feel I don't have to show her diddy-squat. I said, "You know I'm sober." I also have to do random urinalysis whenever they say. So I could get something in the mail tomorrow saying I have to go. I've never had a dirty urine—never, since I've been on the system. And as I told her, I don't mind going to AA. I like AA. I like NA. It's a lot of helpful things I learn in there. But I don't feel I have to prove it.

*Berg:* That's the part you disagree with. Having to prove yourself.

*Diana:* Right. And then she wants to meet with my sponsor. And everyone knows who knows anything about AA, it's an anonymous program. And that's the way I feel. So that's the way it stands. It's really a head off.

Instead of reviewing the court's orders or the expectations of the foster care agency, Berg began by asking Diana to define what outcomes she wants from her contact with the agency. This line of questioning set the tone for the whole session; namely, finding out what Diana believed would be helpful to do in her situation. It also reflects the fundamental assumption stated earlier that clients are assumed to be competent to figure out what they want to have different in their lives and how to go about making that happen. If a client wants something that is clearly harmful to self or others, De Jong and Berg (1998) have discussed how to remain not knowing and thus increase the chances of co-constructing cooperation.

As is commonly the case, Diana was unable to define right away what she wanted. Instead, she offered her perceptions of the transactions between herself and the agency saying: that she met seven-eighths of the requirements in the first parent-agency contract; that she was angry because the agency had formulated a new contract with additional stipulations; and that she disagreed with the requirements of attending domestic violence counseling, repeated random urinalysis, and her worker meeting with her AA sponsor. Throughout this sequence, Berg treated Diana as the authority about what was happening. In so doing, Diana was not put into a defensive position; she was allowed to describe the situation in her own terms, which was accepted without challenge. Berg also clarified Diana's evaluative perceptions, often by asking her to expand on her own words, as in: "So you disagreed with their plan for another parent contract." Frequently, as here, the clarification reveals those parts of the mandated requirements that the client agrees with and those she does not. Clarifying in this manner puts the client in a more reasonable light: Although Diana disagreed with certain parts, she recognized that she, like everyone, had things she can work on. The practitioner can then, as Berg did, mark the particular objections and affirm the client's perceptions as her own: "That's the part you disagree with. Having to prove yourself."

By exploring and accepting the client's frame of reference, the client is not required to "own a problem" so that productive work can begin. Instead, the clarification of the client's frame becomes the platform for further co-construction of what the client wants. Consequently, as in the case example, once both Berg and Diana

understood Diana's view about a second contract and now realized that they shared this understanding, Berg could circle back and return to asking what Diana might want. This time Berg did so by reducing the scope of the question:

*Berg:* So let's come back to this. In this talking between you and me, what needs to come out of this, so that you can say: hey that was helpful! It's not the solution to everything, but hey it's been helpful.

*Diana:* I guess to get it off my chest—a place to vent positively.

*Berg:* So, venting positively—that would be one thing to let you know this has been useful.

*Diana:* Definitely.

*Berg:* OK, what about it would be useful, being able to vent positively? What difference does that really make for you?

*Diana:* Better ways to control anger, to deal with reality in the ways that you have to. That's about it.

*Berg:* Say some more about that. What is there about it that will make a difference?

In solution-focused work, it is critical to explore and respect client meanings when co-constructing what clients want. However, these meanings usually are not self-evident to the practitioner or the client. Therefore, here, rather than assuming she knew what "venting positively" means to Diana, Berg asked: "Say more about that. What is there about it that will make a difference?" In so doing she invited Diana to conceptualize how venting positively will be helpful to her. Besides being an invitation to construct personal meanings, Berg's questions also respectfully required Diana to be accountable for her stated understandings and perceptions. Notice that this is a very different request for accountability than asking clients to own and account for their problems as mandating agencies perceive them. Berg's question is nonjudgmental and, therefore, Diana readily answers:

*Diana:* Well you learn to control your anger. Because, yes, I'm very angry about this situation. It's been since December. So I'm going on two months of anger. And it does eat you. I have lost 12 pounds in two months. I get migraines. I have been sick since the end of December. And no matter how hard you want to buck the system—fight the system, you're not going to beat them. I know I am going to have

to go through everything they say which, OK fine, you're not going to take my boys from me. I'm not going to turn my back and walk out, like their fathers did.

*Berg:* That's very important to you.

*Diana:* Extremely.

*Berg:* So you are a very committed mother to your children?

*Diana:* Yes.

*Berg:* How do you get that across to them?

*Diana:* I think . . . Um . . . I went to college when I was pregnant with my last child, and we all sat down and would do our homework together. They thought that was real neat. We go on camping expeditions. We used to have our own Friday night bash. We'd make Kool-Aid and put fruit in it and we'd cut off some of the lights and we'd play different games in the house. Do dances in the house. A lot of quality time together.

*Berg:* My goodness, it sounds like you have been very creative and committed. Do they understand that? About you? Do they know that? What difference would that make for this worker to realize . . . what would it take for this worker to realize this about you?

*Diana:* That, I don't know. I have even asked for the visits for that one hour to be placed in the home. In one hour in a strange dwelling there is only so much you can see. Um . . . you can't really get the full effect of how people interact and react with each other when you put them into a strange place for a very short period of time. You can't get the full effect.

*Berg:* So as far as you can tell, there is no way that you're going to convince this worker that you are a good mother. What would it take for them to be convinced about that? That you are a good mother?

*Diana:* For me to become totally submissive. Sign the contract. Do everything they say without any arguments, any voice, don't show any anger. And just do it. That would probably be their perfect mother, to them. But that's not me. I live in a reality world.

*Berg:* So you're not going to do it?

*Diana:* No, it's not that I won't do it. I will not sign the contract. I flat out refuse that. I will not sign that.

*Berg:* Um huh. Wow, tough situation. So, tough spot you are in?

*Diana:* Yeah, catch 22.

*Berg:* What's your way out of this?

*Diana:* I'm just doing what I have to do. I'm still doing what's on the contract, but I'm not signing it. And a few of the things I procrastinate about.

*Berg:* Is that helpful for you? I mean how helpful is that for you to not sign the contract and to procrastinate?

*Diana:* The procrastination is due to my health. The not signing it is . . . I guess for my mind. Because I totally disagree with it.

*Berg:* Right. So, say that again—how helpful it is for you not signing it, this contract?

*Diana:* It's peace of mind. I just, I disagree with it totally. There're some parts I agree with and there're other parts, like I stated, that I just flat out disagree with.

*Berg:* Wait a minute. What the contract says you disagree with?

*Diana:* Certain parts. Yes. Certain aspects of the contract.

*Berg:* I thought it was just an out right rejection of the principle? That's not it.

*Diana:* No, no. Not the whole contract.

Here, in the course of conversing about the need to control her anger related to her mandated situation, Diana indicated that the bottom line for her is to get her children back. When conversing with clients, it is critical to notice what is important to them because peoples' motivation to act is directly tied to what is important to them. Here, Berg punctuated the importance of Diana getting her children back with a statement to that effect. She then both implied that this is a strength and began to amplify it through indirect complimenting: "So you are a very committed mother to your children. . . . How do you get that across to your children?" Berg recognizes that at this point any choice on the part of the Diana to do something different, if it comes, is more likely to come out of Diana's frame of reference than anything that she might offer. Having been given the opportunity, Diana has much to say about the degree and nature of her commitment to her children, both reinforcing in herself and informing Berg of her commitment and strengths in this respect.

Once Diana has described how much she loves and cares for her children and her creative involvement with them, Berg asked an intriguing question: "Now what difference would it make for

this worker to realize this about you?" What Diana wanted, at least in a general sense, was already clear—to get her children back. Less clear was how this might happen in her current circumstances. Because any new solutions Diana might settle on would involve doing something different (de Shazer, 1991), and because any solution must involve her mandated context, Berg here began to invite Diana to think about possible elements of a new solution that are context specific. Berg did this by asking whether Diana thought that it would make a difference if her foster care worker understood what a committed mother she is. This question invited Diana to consider whether somehow getting the worker more in touch with her mothering commitment and capacities could amount to "a difference which could make a difference" (de Shazer, 1991) in her "head off" with the agency. Notice how this question does not contain veiled advice from Berg's frame of reference; Berg remains not knowing and impartial about what Diana should do in her situation. This question is also what, in the solution-focused literature, is called a relationship question (Berg, 1994; Berg & Miller, 1992; De Jong & Berg, 1998). Relationship questions are formed around significant individuals and forces in a client's context. They are very helpful to clients in expanding their constructions of what they want, their successes and strengths, and what they might do differently. With mandated clients it is natural for the solution-focused practitioner to ask relationship questions formed around mandating agents.

### **Amplifying Possibilities in the Mandated Context**

As the session with Diana continued to unfold, Berg invited Diana to expand her possibilities of what she wants and how to make that happen by using the miracle question, scaling questions, and more relationship questions:

*Berg:* Well I'm going to ask you a rather strange question. The strange question is this . . . after you and I talk, you are obviously going to go back home . . . right? And after . . . at the end of the day you are going to go to bed, I hope, sometime. And while you are sleeping, obviously the place is very quiet you are in a deep sleep. In the middle of the night, a miracle happens. And the miracle is the problem that got you to come and talk today, the problem that you have with your worker,

you have with your contract, all the problems you have with not seeing your children enough, with not having your children with you, all of that just solved.

*Diana:* OK.

*Berg:* But this happens while you are sleeping, so you have no way of knowing that. So when you wake up tomorrow morning, what might be the first small clue that would let you know, oh my gosh, there must have been a miracle in the night while I was sleeping?

*Diana:* I'd probably get a phone call first saying, are you home? We're bringing the kids home.

*Berg:* So suppose you get that phone call. What would be different about you?

*Diana:* Oh God, I'd be happy!

*Berg:* You would be, uh huh. So how would you show your happiness, how could I tell?

*Diana:* I'd probably faint.

*Berg:* Would you?

*Diana:* In disbelief!

*Berg:* Really.

*Diana:* Oh gosh. I probably would faint, and I don't faint.

*Berg:* No, I don't think you're the type that would faint. So, after you wake up from this fainting, what would you do?

*Diana:* I'd definitely have to go get a baby sitter because I wouldn't want to miss work, because I'm definitely going to need the money even more.

*Berg:* OK, all right. So you'd have to figure out how you're going to make an arrangement so you can still keep going to work.

*Diana:* Oh, I've already got that arrangement. Then we'd probably go away for the weekend.

*Berg:* When your children show up at the door, what will they see different about their mom that will tell them "Oh my gosh, a miracle must have happened to my mom"?

*Diana:* We actually get to come home and stay this time. Because they promised them three different times that they could actually come home and stay, and they have taken it away from them three times.

*Berg:* Since they have been placed.

*Diana:* Yes.

*Berg:* So they will be able to follow through with that. The miracle is that they will follow through with that this time. So suppose they

do, what will be different about you?

*Diana:* Oh God, that's harder to answer.

*Berg:* I know that is a tough one.

*Diana:* Probably a peace of mind and serenity.

*Berg:* You will have serenity. And how will that show?

*Diana:* Well you've seen people scrunch up their face when they're mean or ugly or just in a bad mood. I mean your face says a lot of things about you.

*Berg:* So what would I see in your face?

*Diana:* Peace, happiness, joy, serenity. It's about time. Thank God. I mean.

*Berg:* OK, so when you have this peace in your face, this serenity, this joy, what will be different between you and the children?

*Diana:* I don't think nothing will ever be different between me and my children. Like I said me and my boys we have a real good rapport, we have a real good rapport. I don't think anything would be majorly different between us because you can't break the love.

*Berg:* No. What will be different with the children? What will you notice different about your children that will let you know, phew, finally the problem is solved and we can go on with our life together?

*Diana:* The agency won't be involved anymore.

*Berg:* Ah. So the agency will be out of the children's life, your life, your life entirely. All right, so suppose they are, what would be different about you and the children? What would be different for the children? What would be different for you?

*Diana:* Well they'd get to go back to their old schools. Be around their friends again.

*Berg:* So what else would be different?

*Diana:* I'm not really sure.

*Berg:* OK, all right. Let me come at this, what would your worker say when this miracle happened and the problem is all solved. What will the worker say she will see you do that will let her know that the problem is already solved.

*Diana:* Say that again.

*Berg:* OK, what will the worker say—How she could tell the problem is all solved for you?

*Diana:* If I can't speak on how my children would say, I know, sure as heck, I could not say what that woman will think. That I just

cannot answer. I would have no idea.

*Berg:* You have no idea about how she could tell.

*Diana:* If it's not documented in black and white, they don't see it.

The miracle question offers clients the opportunity to construct a different, more satisfying future (de Shazer, 1988). Its several follow-up questions, used to sustain the conversation about the miracle, invite the client to develop a vision for the future which is as vivid and concrete as possible, including definitions of what the client might do differently (Berg, 1994; Berg & Miller, 1992; De Jong & Berg, 1998). Like many mandated clients, Diana included in her answer that the mandating agency would no longer be involved with her life. Berg also incorporated relationship questions about the children to expand possibilities of what might be different in Diana's miracle picture. The mandated context was introduced again with the question: "What will the worker say she will see you do that will let her know that the problem is already solved?" Being part of the miracle question conversation, all of the follow-up questions were related to generating possibilities for doing something different to create a more satisfying life. Notice that no attempt was made to educate directly or confront Diana because, as with other clients, it is more useful to help her construct her own ideas for solutions because then she will be most invested in making them a reality. Proceeding this way, choices about how to think about her situation and what to do remain Diana's responsibility:

*Berg:* Let me ask it this way, in terms of your level of confidence that somehow you're gonna get out of all this mess you are in right now, so that you eventually get your children back, that's ultimately what you want right?

*Diana:* Right.

*Berg:* Um . . . let's say on a scale of 1 to 10, 10 is where you are very confident that someday, someday, you're going to get your children back. That stands for 10.

*Diana:* Um hum.

*Berg:* And 1 stands for let's just forget the whole thing. Just forget this. It's not going to happen. Where would you say you are at in terms of how confident you are that you will get your children back someday?

*Diana:* Probably about a 7.5.

*Berg:* 7.5! Whoa! That's pretty high.

*Diana:* It's actually quite low. It was up to about a 9. But that got knocked down.

*Berg:* Really, you were at 9 one time?

*Diana:* I've been at 9 a couple of times.

*Berg:* Really. OK, if I were to ask this worker where she thinks you're at on the same scale of 1 to 10—what would she say?

*Diana:* Depending on the days I talk to her, between a 5 and probably a 6.5. That'd probably be about how she'd answer it.

*Berg:* What would she say you were like when you were at a 9? Did she ever think you were at a 9?

*Diana:* Yes, she was the one who stated that the placement was going to happen by a date. She even gave me a date and a time.

*Berg:* Oh.

*Diana:* And due to the lack, as I said, the lack of communication within the agency, it got changed back two different times, and right now it's really all up in the air.

*Berg:* Wow. So at this point, not two months ago, but at this point, what would the worker say she needs to see you do for her to say Diana is at a 10?

*Diana:* Comply with the contract and sign it and do what it says.

*Berg:* That's it. So just follow the script, whatever they tell you, to do it. And you're saying you're not going to do that?

*Diana:* I won't sign the contract. No.

*Berg:* It's doing what's on the contract? Or signing the contract?

*Diana:* When you sign a contract, I don't care if it's for this car, but you're not going to sign it if they leave a blank spot where the money amount should be, or they don't have your warranty involved in it or they put a clause in it that you don't like, you're not going to sign it. Because a contract is legal and binding. And there are parts I disagree with, so I do not want to be bound by this. Because I disagree with parts of it as I stated before. A contract is a contract. I don't care if you want to go from dealership to a house lease to an agency agreement. A contract is a contract.

*Berg:* And you are very strong about that.

*Diana:* Yes I am.

Scaling questions are useful for getting information about many aspects of clients' current lives and future possibilities (Berg & de Shazer,

1993). Here Berg asked Diana to scale how confident she was that she would get her children back. So far it was clear that Diana wants her children back, but she had been unable to generate any possibilities for doing something different to ease the impasse between her and the agency. Despite this, she surprisingly answered with a 7.5 on the 10-point scale, on which 10 means she is very confident that the children would be returned home. Wondering if this number was unrealistically high based on the session so far, Berg asked her to contextualize the estimate by asking what number she thought the foster care worker would give on the same scale. This question gave Diana a chance to rethink and consider revising her estimate by looking at the situation through the eyes of the worker. Any revision, which Diana might keep to herself, might prompt her to think about doing something different. Berg also used another scaling question to offer Diana yet another opportunity to generate possibilities for doing something different by asking her what she thought the worker would say that she (Diana) would need to do for the worker to say that there was every chance that the children would be returned. At this point the conversation had come full circle with Diana saying she would have to sign the second contract, something she emphatically stated she would not do.

It would be very tempting at this point for Berg to advise Diana to "just sign the contract; you are doing what's on it anyway." Berg, however, persisted in her belief in client competence by assuming there must be a good reason for not signing if Diana is so adamant. She, therefore, asked Diana for the personal meaning of not signing, something which Diana readily provided.

### **Providing End-of-Session Feedback**

It is clear from her comments that Diana was struggling and suffering in her current circumstances. She was at an impasse with the agency, feeling as though she could not contractually agree to its requirements without unacceptably compromising herself. Again, it can be imagined that Berg might be tempted to say: "Yes, I hear what you said, but . . ." and turn to interventions of confrontation and education blended with empathy. To do so, however, would be to fail to listen carefully to Diana, to disrespect her current constructions, and to undermine her taking responsibility for what to do next. One solution-

focused option at this point is to affirm that Diana is struggling and ask questions about how she is managing to cope in such difficult circumstances (Berg, 1994; De Jong & Berg, 1998). Berg did this and Diana responded with details about how she was drawing on God, friends, and her love for her children to keep herself going. The use of coping questions is consistent with a strengths approach to practice (Saleebey, 1997), which assumes that even under the harshest of conditions clients are taking actions on their own behalf by drawing on their competencies.

Before ending a session, it is useful for the practitioner to take a break from the interview and formulate feedback based on the constructions revealed by the client during the interview about what she wants different and what she is willing to do to make that happen. As in the interview, the practitioner assumes client competence and does not presume to give advice or confront the client from her own (the practitioner's) frame of reference. Experience has taught us that client constructions are always in process and that the not-knowing questions asked during the interview continue to be processed by the client after the client leaves the sessions. The practitioner's role is to note what the client wants and to reinforce through complimenting what the client is doing to make that happen:

*Berg:* OK. Well, Peter and I had some chance to talk about what we just talked about, and so I am speaking for both of us. One of the things we just really want to emphasize for you is how much you have been through in your life. A lot! I mean a lot and yet, maybe because of it or maybe in spite of it, I don't know, you have such a strong sense of what is right for you and what is not right for you. You have this trust in yourself that you are doing the right thing for right now. And absolutely amazing! It is just absolutely amazing that you have just hung on to this principle that is just so important to you. And in the process of it, you have done a lot. You have stayed sober since August. You have continued to visit with your children. You have done the things on the contract. You have somehow managed to convey to your children how much you are committed to them, how much you love them, and how important they are to you. And you are working. You are doing everything. It's just incredibly productive in many ways. And so

you have this phenomenal drive to do what is right for you. Very, very impressive. So since you are doing what you need to do right now, I guess you just have to keep doing it.

*Diana:* That's all it is.

*Berg:* That's all you can do, right? You just have to keep doing it. Until, who knows, what's down the road; you never know. But this unshakable belief you have that you are doing the right thing. It sounds like that's what kept you going. That's what held you up, going through all these difficulties in life that most women won't go through in their lifetime.

*Diana:* I wouldn't wish this on my worst enemy.

*Berg:* No. So, we both really admire you and respect you for hanging in there in a very tough situation. Well, I hope this has been helpful. We wish you a lot of luck. You're gonna need it!

*Diana:* Thanks, definitely yes.

## Implications

The literature reviewed at the beginning of this article indicates that work with mandated clients is most likely to break down at engagement. Rooney (1992) suggested that the field address this problem by developing more ways of engaging mandated clients that enhance motivational congruence between practitioners and clients and maximize client choice and control in the treatment process.

As stated earlier, although we agree in concept with Rooney's (1992) recommendation, we are inclined to be bolder yet and, as the illustrative interview demonstrates, assert that co-constructing a basis for cooperation is the sole productive way to engage mandated clients. (We prefer to use the word cooperation rather than motivational congruence because it is less technical and denotes a collaborative process.) Moreover, we have come to recognize from our work with mandated clients that improved cooperation cannot be a matter of adopting particular strategies to create an illusion of choice; instead, it must be the natural consequence of asking clients about what they want to be different and asking them how to make that happen. In other words, when we work with mandated clients we do not attempt to transform potentially resistant clients into cooperative ones by influencing techniques; instead, we attempt to co-

construct a way to cooperate with them by asking for and listening to their expertise about their mandated context in relation to their hopes for the future. As they reflect, puzzle, and struggle to answer solution-focused questions, new possibilities for doing something different often emerge and cooperation naturally happens.

Of course, one might protest at this moment and state that cooperation with Diana was not established because she still refused to sign the contract. Experience increasingly teaches us that the role of the practitioner is to find a way to cooperate with clients, not to cajole, persuade, or pressure them to comply when they have thoughtfully reached a point where, for the present, they have chosen not to comply with an agency or court's wishes. To confront or otherwise challenge a client such as Diana, who has respectfully answered all the questions as she did, would, in our judgment, not bring compliance but indicate that we had not listened carefully and respectfully to her answers. In short, it would be to assume that she is not competent unless she complies with the agency's demands. We have found that maintaining a not-knowing posture and assuming client competence also leaves the door open to additional co-construction of possibilities. Diana, for example, remained engaged at the end of her session with Berg.

We also believe that this way of engaging mandated clients is more ethical than trying to motivate them in certain directions. In interviews we discipline ourselves to ask questions with no investment in client outcomes. This posture does not represent an uncaring attitude toward clients or the welfare of the community but an acceptance of the reality that we are working with human beings who make choices. As choice makers, all people's sense of personal dignity and competence are tied to the choices they make. Therefore, we as practitioners can be most useful by inviting clients to co-construct the widest and most informed range of choices possible in their contexts. Client self-determination and respect for human dignity are the worthiest of practice principles and have deep roots in the social work profession (NASW, 1997; Richmond, 1917; Towle, 1952).

The corollary of respecting clients as choice makers is respecting them as agents worthy and capable of living with the natural consequences of their choices. In Diana's case, for example, even though she loves her children very much and

wants to be the kind of parent her children deserve to have, her insistence on doing it her way rather than submitting to the agency's demands is worthy of respect. At the same time, we are aware that some mandated clients insist on doing harm to themselves and to those around them. Common examples are physical and emotional abuse of children and family members, giving birth to drug-affected infants, and otherwise doing harm to others in the community. These behaviors violate community standards and responsibilities all of us must accept. When clients choose such behaviors, we believe they should bear the consequences, including the removal of their children from their care and the penalties required by law. Experiencing the consequences can then further inform their frames of reference out of which they will answer any future co-constructing questions. To expect anything less from our clients than we expect from all others in the community is dehumanizing and demeaning to them.

## Conclusion

With respect to the co-construction of cooperation, there is great similarity between working with mandated and voluntary clients. Consequently, this conceptual distinction that has been prevalent in the field generally has not been as important in solution-focused research. In solution-focused practice, assumptions about clients and practice procedures are the same for mandated and voluntary clients. To most practitioners in the field, however, working with mandated clients seems very different. When asked why, they respond that mandated clients seem more resistant to their efforts to help. Several years ago de Shazer (1984) suggested that the field reconceptualize client resistance as a form of cooperation. We believe that his reconceptualization remains noteworthy and useful. He wrote that client resistance is not contrariness, but represents clients' unique ways of perceiving and being. The implication for us as practitioners is that whenever we believe that we are encountering resistance, it is most useful to remind ourselves that our clients are competent and that we have not yet found a way to cooperate with them. Perceived resistance, then, should prompt us to struggle to formulate and ask more not-knowing questions about what clients have just said to us, not to educate or confront. Doing so will keep the door open for continued co-construction and cooperation. ■

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