

Politics of Deconstructive Questioning –

Deconstruction has to do with procedures that subvert taken-for-granted realities and practices – disembodied ways of speaking that hide their biases and prejudices, familiar practices of self and of relationship that are subjugating of person's lives. (Michael White)

Dominant stories can be subjugating of person's lives. Subjugating stories can be of gender, race, class, age, sexual orientation, religion (to name a few). So permanent and entrenched in our culture that we can get caught up in them without realizing it.

Deconstructive question takes a stand against certain practices of power in society

By taking a stand, does not mean lecturing people we work with. In the context of therapy, like it or not, even with steps to minimize, the therapist's words are privileged. Inflicting our beliefs on those we work with would replicate the dominant culture's privileged knowledges and practices on those in subjugated positions.

However, not taking a stand supports the status quo

Develop ways of collaboratively examining the effects of stories, when dominant subjugating stories are sensed to be at work.

The therapy room is like a mirrored room. Can only reflect discourses brought into the room. If affecting discourses are not in awareness, then will not be part of reflection.

Therapists must continually reflect on the discourses that shape perceptions of what is possible. For both ourselves and those we work with. We can open up, rather than close down, the number and variety of possibilities available in the mirrored room.

Reflect upon the power relationships implicit in each possible discourse; see new possibilities through external education and consultation.

Externalization and Deconstructive Questioning

People can most easily examine the effects of problem-saturated stories on their lives when they do it in the context of an externalizing conversation.

Step 1: take the language the person uses to describe the problem, modify it so the problem is objectified, and ask the person questions about it.

Example: someone labelled as co-dependent, they are objectified that way. But there are a multitude of lived experiences outside that label. Other, once vibrant aspects of their experience cease to count. Begin asking how X (co-dependency) has influenced their life.

If person joins in conversation, person and therapist together are turning the tables on the internalizing discourse, placing it outside the person. Not defining self that way anymore.

Then free to reclaim other aspects of self and experience.

Now in a position to decide what to do with X .. rename it, play with it and modify it, kick it out of life.

To get there say things like: "So I just want to really, really slow this down.....And hear what it is."

Ask how the X knows when it can get to a person? And what does it pair up with?

Naming of the Plot

Naming of the plot is a useful adjunct to externalizing the problem. Often the same name works for both the problem and the associated narrative. Sometimes different names work better. (i.e. Anger for the problem" and "getting tricked into flying off the handle" for the plot.)

Naming of the plot pathologizes the pathologizing process. Facilitates finding out about tactics and means of operating that the problem employs.

Relative Influence Questioning

People asked to

1. map the influence of the problem in their lives and relationships.
2. Map their influence on the life of the problem

Establishes that person has a relationship with the problem. Rather than being the problem. Everyone, not just the problem bearer, has a relationship with the problem.

***Description of a 7 year old with behavior problems {lovely description} unhappiness has made an appearance in Lynette's life, and it has recruited her into a lying and stealing lifestyle.

Establishing effect on a number of people

1. keeps the identity of the problem separate from any person.
2. Creates a broader landscape.
3. Mobilizes people to join together in working to oppose the effects of the problem.
4. Particularly helpful when the problem has kept them apart, and unhappiness has come between them.

"Opening space questions" are used to bring forth "unique outcomes" –experiences that would not be predicted by the plot of the problem-saturated narrative. Such as exceptions to the problem. (been happy instead of unhappy.)

Unique outcomes –openings—can be expanded to develop a less problem-dominated strand in the narrative.

Begin to see that people’s lives are more multi-storied than the problem would have us believe.

Exposing the Role of Subjugating Dominant Discourse

Can expose role of subjugating dominant discourse by asking about contextual influences on the problem. What feeds it? What starves it? Who benefits from it? What sort of people would advocate for the problem? What groups of people would be opposed to it and its influences?

Many power imbalances in families are coached and supported by power imbalances in the larger culture. Asking questions that help them consider the discourses of power that shape ideas and actions.

Not teaching or imposing.

STORY DEVELOPMENT – CHAPTER 4

Stories have real, not imagined effects. These stories provide the structure of life. (Michael White, 1991)

Our prevailing narratives provide the vocabulary that sets our realities. Our destinies are opened or closed in terms of the stories that we construct to understand our experiences. – Harry Goolishian

There are always “sparkling events” (White, 1991) that contradict problem-saturated narratives.

Look at how we can invite people to take such events and transform them into stories that they can live. In the living know themselves in preferred, satisfying ways.

Narratives are the stories people *live*. Not “about” life; they *are* life as we experience it. It makes all the difference in the world what sort of narrative is open to a person: meaning, hope, fear, understanding, motivations, plans.

When people are leapfrogging over stuff, ask if it is okay “to slow things down a little so that I could keep up with you?”

Important Considerations in Story Development – Transformative Stories are Performed Stories

It becomes more real when you say it out loud. When the person says something, ask more and more about it to develop the story. The “performance” of stories does not happen automatically or every time someone tells a story. It does happen when a person is immersed in the story and when they experience the story as meaningful.

Therapy, or transformative relationships, have a quality that is like a ritual or a ceremony that centers around the “performance of meaning” – about themselves, their relationships, their experiential realities. Stories become transformative only in their performance (Bruner).

Intention is to co-construct stories through which people can live in preferred ways.

The People We Work with Are the Privileged Authors

Stories are authored through conversation. Are deeply personal. We can’t know where people’s stories will go. We can only co-author a story a piece at a time. Each detail stands on the one before and can only be constructed as the one before begins to find form and definition.

This is very different from developing a goal.

It calls for curiosity and involvement in each bit of the story as it emerges. Each bit of conversation can be responded to with an infinite number of questions, each of which would lead in a different direction.

Important part of the job of co-constructors is to be very alert to the verbal and non-verbal communication in order to recognize and respond to experiences that are most meaningful to them.

Use would or could, rather than will ... trafficking in human possibilities rather than in settled certainties.
(Epston)

OPENINGS TO NEW STORIES

Listening for Openings

The way unique outcomes or “sparkling events” become apparent varies tremendously.

Sometimes very dramatic. Sometimes so subtle it is easy to miss.

When people get involved in re-authoring their lives they will save up unique outcomes to tell in transformative relationship. But sometimes have to listen very carefully not to miss unique outcome.

Asking for Openings

Openings often develop spontaneously in the process of listening to people and asking questions to deconstruct. Straightforward way is to ask about the influence of the person on the life of the problem.

Making Sure the Opening Represents a Preferred Experience

Ask questions that invite them to discover whether they want more of this in their life. Is it surprising?
Life Giving or Life Denying?

Questions invite persons to discover whether the possible opening is really new and whether it is a direction they prefer over the problem-saturated story.

Pay attention to nonverbal communication. Easy and willing response to question indicates good direction to go. If person does not respond readily, drop inquiring and go back to listening.

Attempting to move too quickly can be yet one more violation and disqualification by a powerful other.

DEVELOPING AN OPENING INTO A STORY

In order to make a ritual space in which performance of meaning can occur, strive to maintain focused attention and mutual respect that will make it easy and natural for people to become experientially involved in the stories they are telling. Ideally, people should be reliving the events as they tell them.

Think Like a Novelist or Screenwriter

Good novels, plays, and poetry create worlds that the reader enters into. One way authors/storytellers make their stories experientially vivid is by including detail. Creates the scene, pulling us into it. When people search for specifics of detail in memories, become experientially involved.

Develop as rich, detailed, and meaningful a counter-story to a problem-saturated narrative as possible.

Events lie around disconnected and gathering dust in seldom-visited memories. Include different modalities. What were you thinking? What were you feeling? What did you see, hear, do?

Characters and Multiple Viewpoints

Ask about other people's points of view. Changing POV brings out different details, different emotions, different meanings. Looking through the eyes of other people. Looking through one's own eyes at a different age. Looking back from the future, forward from the past, and so on.

In performing the ceremony –ritual—allow the new emotionals, beliefs and actions associated with telling the new preferred story to become part of the official record of the person's life.

Dual Landscapes of Action or Consciousness

Should inquire about both

Landscape of action – plot sequences of events through time.

“detail in multiple modalities involving the viewpoints of multiple characters in a particular scene or setting.” What we need to add now is the action itself. What happened, in what sequence, involving what characters?

In the landscape of action, interested in constructing an “agentive self” with people. Re-authoring requires personal agency. Ask in a variety of ways how people have accomplished what they have.

Asking “how” is especially useful for inviting stories of personal agency. Answers to how questions make stories vivid and develop sequences of events through time.

Think about the *shape* of a story as it comes forth. How smoothly did it unfold? Were there false starts? What did it lead to?

*****Especially interested to know if there is a turning point, a place where the story changes for the good. The turning point is a significant event we can plot in time, so it becomes a story.**

The turning point creates the focus for when a problematic story becomes a preferred one. Useful to focus special attention upon it, bringing forth even more shape and detail. Making it the story-within-the story.

No matter how vivid a story is in the landscape of action, if it is to have *meaning*, it must also be developed in the landscape of consciousness.

Landscape of consciousness is imaginary territory where people plot the meanings, desires, intentions, beliefs, commitments, wishes, motivations, values, and the like that relate to their experience in the landscape of action. Reflecting upon implications of experiences storied in landscape of action.

Invites empathic and experiential involvement.

Ask “meaning questions” to explore the landscape of consciousness. Invite people to step back and reflect on meanings, desires, etc.

Co-authoring the story means to move between the landscape of action and of consciousness, weaving the 2 again and again and again.

Hypothetical or Speculative Experiences

Fiction teaches us that truth can be found in descriptions of events that never occurred.

Stories generate meaning between hypothetical past and anticipated future.

Isolated sparkling moments can easily be lost. Once they emerge, using them as basis to speculate how things might have been or could be is one more way to keep them alive and storied. A hypothetical story can become the basis for actual and future events.

DEVELOPING A “HISTORY OF THE PRESENT”

Michael White: I striving to make sense of life, persons face the task of arranging their experiences of events in sequences across time in such a way as to arrive at a coherent account of themselves and he world around them.

When a preferred sparkling event is identified, want to link that event to other preferred events across time, so that their meanings survive, and so that the events and their meanings thicken a person’s narrative in preferred ways.

Adopting a narrative map:

1. Preferred event developed and storied
2. Ask questions to link it to other events in the past and in the future

Leads us to devote much of time and energy to re-viewing, re-experiencing, and linking together antecedents to present unique outcomes – results in a history of the present.

EXTENDING THE STORY INTO THE FUTURE

Ask how the emerging new story influences a person’s ideas about the future. As people free more and more of their pasts from the grip of problem-dominated stories, they are able to envision, expect, and plan toward less problematic futures. Extending the good story into the future.

PRACTICE FORMAT FOR STORY DEVELOPMENT

Potential shape for transformative conversation. In actual conversations, things rarely follow this shape exactly. As with any interesting conversation, there are digressions, recapitulations and changes of order.

1. **Begin with a unique outcome**
something different that seems to be sparkling rather than a problem
2. **Make sure the unique outcome represents a preferred experience**
was it a good or bad experience? Do you want more of this kind of experience?

3. Plot the story in the landscape of action

How did you prepare to take this step?

What do you think was the turning point?

What exactly did you do?

How did it happen?

Were you guided by an image or something you said to yourself?

Did you have a plan?

What did you say, do, feel, see, hear, touch? Others? How about them?

4. Plot the Story in the Landscape of Consciousness

What does it say about you that you could do this?

What personal characteristics does it show?

What do you see in your relationship when you look at this event?

What did you learn that would be important in other areas of life?

What went into doing this at this point in your life?

What does this show about what you want out of your life?

{questions from 3 and 4 can be woven back and forth}

5. Ask about a Past Time that has something in common with the unique outcome or meaning of the unique outcome.

Examples of times you've done this kind of thing before?

Who would have predicted this event, believed you would be able to do this?

What time in your life best illustrates your perseverance?

6. Plot the Story of the Past Event in the landscape of action

7. Plot the Story of the Past Event in the landscape of consciousness

8. Ask questions to link the past episode with the present

Now that I understand your past, do you see how this recent good development makes even more sense?

If I could ask you back then what your self thinks of these recent developments, what would she say?

When you think of the past time, does it put this current experience in a different light?

9. Ask questions to extend the story into the future

What do you expect the next step will be?

Given these good experiences, what do you predict for the coming year?

QUESTIONS – CHAPTER 5

Every time we ask a question, we're generating a possible version of a life (Epston)

There are some questions that linger in the minds of clients for weeks, months, and occasionally years, and continue to have an effect. (Tomm)

***We've all been asking questions for almost as long as we have been talking.

***As narrative therapists we think about questions, compose them, and use them differently than we did before. The biggest difference is that we ask questions to *generate experience* rather than to generate information.

When they generate experience of preferred realities, questions can be therapeutic in and of themselves.

Change can occur in questions and listening, without any final intervention.

This was our turning point in our own stories of ourselves as therapists.

Question series to a 12 year old: "Would it help you to do something that seemed dangerous if you knew that it was really benefitting someone important to you?"

She said that it would.

I asked, "How would it help?" and she answered the benefit to another person would put things in perspective. She would have a compelling reason for facing the danger (going to school, which was causing repetitive OCD behavior).

... I asked "Even if it is really difficult, if you agree to do something are you a person of your word?"

She said she was.

In the mental search of answering questions, people find a different way of being. They enter a different reality than the one they inhabit.

Turning point... up till then grounded in importance of associational searches, experiential learning, and alternative realities

Questions go back to experiences, open way for people to experience—relive them—so that past event takes on a new meaning.

Up until this time, we had thought of experience as simply what happens, and we thought all experiences were stored as they happened and were retrievable through memory. We now think that experience is colored and shaped by the meaning people make of it and that it is attended to or not as it seems relevant to the stories people are living. Therefore, when we ask questions, rather than believing

that people can retrieve particular experiences with particular predetermined meanings, we are very aware of how our experiences *co-author* experience. They put a spin on the experiences they call up; they suggest beginnings and endings for those experiences; they highlight portions of experience while dimming or excluding others.

Our questions don't access experience. They generate it.

We are reminded of this each time one of our questions is met by a long pause, after which a person says "I never thought of this before ... I didn't know this until you asked that question."

Footnote: Part of what we are trying to express in this critique of our own work is that we are part of the dominant power/knowledge domain. We cannot be completely outside of dominant practices, but we can take responsibility for working to see through dominant cultural stories. This requires that we deconstruct our practices and situate our ideas in experience.

We think it is not just that the person did not know it; we think it have been so until the question and person came together to constitute it that way.

A therapist's values shape the questions that she asks.

Story about wishing to travel back through time to change the questions they asked!

In this work, we hope to privilege the knowledge of the people we work with over ours. For this reason, we think it is very important to be aware of the influence our questions have in setting the direction of the conversation.

Periodically ask questions that invite people to evaluate the process. Modify questions in response to answers. Ask questions about questions.

Tomm: in general, statements *set forth* issues, positions, or views, whereas questions *call forth* issues, positions, or views. In other words, questions tend to call for answers and statements tend to provide them.

When we ask a question, the person who answers it determines the direction it will take.

Strive to work from a "not-knowing" position. Try not to ask questions that we think we know "the" answers to, or ones that we want *particular* answers to. That is, not asking questions from a position of pre-understanding.

But do have intentions and purposes. Intentions: ***hope to engage people in deconstructing problematic stories, identifying preferred directions, and developing alternative stories that support these preferred directions. The narrative metaphor shapes our curiosity, but doesn't stifle it.

Although there is a structure for asking "types" of questions, need to be careful with this. Every question is contextual – comes from what has just been said in the conversation. Questions are in response to moment by moment shifts in the conversation. There are no idealized structures.

Questions involve words, voice tone, gesture and relationship. The emotional posture from which questions are asked is of primary importance.

But in the face of hesitation, and not wanting to restrain creativity, we will offer examples!

*****The shift from gathering information to generating experience is a monumental one. It is not an easy one to make.** Helps to study other people's examples of experience-generating questions. Stop time and focus on single questions, one at a time.

Using narrative as a guiding metaphor is another large conceptual and practical shift. Requiring particular kinds of questions. Coordinating both curiosity and the narrative metaphor while at the same time attending to the relationship feels like a lot of juggling at first.

But having categories can help to train thinking on process, so categories provided as a training device for practice and learning.

DECONSTRUCTION QUESTIONS

Help people unpack their stories or see them from different perspectives. Asks how the stories are constructed. Encourages people to constitute their narratives in larger systems and through time. Brings forth history, context and effects of stories. Learning about the landscape that supports problems. When the landscape is broadened, the "sparkling events" can be discovered.

Bringing forth problematic beliefs, practices, feelings, and attitudes

Questions address something that is part of a problem-saturated narrative. Question to hear about beliefs, practices, feelings, and attitudes.

Questions like: What conclusions have about your relationship have you drawn because of this problem? What behaviors have you found yourself resorting to? Does this situation encourage particular feelings? What attitudes must there be to justify the behaviors you've described? What gets in the way of developing the kind of relationships, life situation, future you would like to have.

Asking about

- history of person's relationship with the belief, practice, feeling, attitude
- contextual influences on the b,p,f,a
- effects or results of b,p,f,a
- interrelationship with other b,p,f,a
- tactics and strategies of the b,p,f,a

All asked in context of externalizing conversation

History of Relationship with the B,P,F,A

Asking about this may expose role of dominant cultural practices or knowledges that support the problem.

Lynn Hoffman – once people subscribe to a given discourse – a religious discourse, a psychological discourse, or a discourse around gender – they promote certain definitions about which persons or what topics are most important or have legitimacy. However, they themselves are not always aware of these embedded definitions.

Questions like: how did you come to share this way of thinking? Where did you witness these ways of responding? What experiences in the past encouraged these feelings? Has X always been alive in your life? When in history did these sorts of ideas gain prominence?

Contextual Influences

Naming contexts that serve as support systems for problematic stories. Also role of cultural practices or knowledges

Questions like: in what situations does this most show up? Who supports this problem taking over? Who benefits from this way of doing things?

Effects or Results

Broaden domain of problematic story by showing impact of problem in people's lives and relationships. Seeing real effect of b,p,f,a can put it in a different light.

Questions like: what are the effects on your life of this b,p,f,a. What has X talked you into doing in your relationships? How has this pattern influenced other people important to you? How does X affect your relationship with yourself? If you step further into this b,p,f,a, how would that affect your future?

Interrelationship

Help deconstruct web of b,p,f,a that constitute the life of a problem.

Questions like: Are there other problems that X teams up with? Does the b,p,f,a take over or leave room for other b,p,f,a? What conclusions have you drawn? What feeds the problem? If we look at the effects, does it match your hopes?

Tactics or Strategies

Since b,p,f,a are treated as externalized entities, can think about them as having plans and preferred ways of working. Unmasking tactics and strategies can have a powerful deconstructive effect.

Questions like: How does the X worm its way in? If I were going to be the X, how would I make my presence known? How would I make things worse? What times would I pick? What does the voice whisper in your ear? How does it manage to be so convincing? What does X do first to pull you in? What ways of life does X ride piggy-back on?

OPENING SPACE QUESTIONS

Once the landscape of the problem is broadened through deconstruction questions, there are numerous vantage points from which unique outcomes or sparking events (lie outside problem-saturated narrative and not predicted by it) might be brought forth.

Use opening space questions to construct unique outcomes. Called opening space because each inquires about possible presence of opening that, if taken, may lead to an alternative story.

In practice, people are likely to mention unique outcomes or demonstrate them spontaneously. When they do that, we can simply respond, most likely with a preference question or a construction question. If they don't emerge we can co-construct by asking:

1. questions about unique outcomes.
2. Or, ask about unique outcomes in the realm of imagination through hypothetical experience questions
3. Questions that ask about different points of view
4. Future oriented questions

Unique Outcomes

Inviting a search for exceptions is most straightforward way to contribute to constructing an opening.

Questions like: has there ever been a time when X could have taken control, but didn't? Have you ever stood up to X and decided to do something your own way instead? In what situations could you do something else easily?

***A unique outcome does not have to be triumph over the problem. A thought at odds with the problem, doing something different, even if the problem keeps dominating, or making preparations to have a different relationship with the problem can all be unique outcomes.

When asking questions along these lines, often useful to acknowledge the hold of the problem so that people know its presence and influence are understood. Often this frees them to describe instances when it doesn't have a hold.

Questions like: Even though X is here, when have you been able to hold out against its arguments longer than other times? I understand that X is keeping your life narrow and confined, but do you have a sense you are working up to changing that? So I know X has continued, but are there any points, even for a moment, you felt hopeful?

Hypothetical Experience Questions

If people have difficulty locating exceptions to dominant stories in their lived experience, hypothetical experience questions may help them imagine those experiences.

Questions like: If this had happened, do you think you would have {insert preferred reality}?

What would happen if you didn't do what you normally do {that isn't your preferred action}? If you were to discover with certainty that {the preferred reality/future} is true, how would that knowledge change things?

Point of View

{see other document for example of therapist colleague}

People outside of the story are more free to make different meaning of the events the person in the problem-saturated narrative experiences.

As a person considers the meaning from someone else's perspective, they can adopt the meaning as their own (or at least try it on). It may provide an opening to an alternative storyline.

Questions such as: Can you understand from my point of view how you're ready to X? What do you think I've noticed that makes me think these good things about you? What do you think others you care about are learning when they see you doing X? What do you prefer them to see? Have there been times when they've seen what you hope they will see? Are there people who influence you to be the way you don't prefer? Are there others who are an influence to act/be in preferred ways? What are you aware of about yourself that your critics don't see?

Different Contexts

When someone is living a story dominated by things that bind they probably think of themselves that way. Even when there have been countless events that don't fit with the story. Since people are living stories, not simply reporting them, problematic stories often blind them to the significance of contexts other than the problem-saturated one.

***In other ways, problems often stand between people and their knowledge of themselves in such a way that they lose preferred aspects of their identities.

Questions like: I understand anger has really come between the two of you as you work on building your partnership together and has caused you to say things that are not representative of how you most want to be. But I'm wondering about the situations when you've been able to keep anger in its place? Has X affected all of your life or are there places it lets you do something else? Can you understand how I have a different picture of you because of this....?

Different Time Frames

Problematic stories that drive people to consult with us do not represent the entirety of their lives, even if they seem to fill the present.

Questions like: Was there a time when X played a lesser role, even if it is dominating today? At what time in your life did you feel best about yourself and your life? During which period of your life were you least susceptible to X? What is a particular incident when it didn't have this power over you?

PREFERENCE QUESTIONS

Since the therapeutic work is to co-construct alternative stories that do not fit with dominant, problem stories, it is important to check to make sure that the direction or meaning of the alternative stories is preferred to the problem-saturated ones.

We are not always right about what people actually prefer.

This is not a simple matter of providing an occasion for people to make their preferences known.

***To choose a preference out loud is to commit oneself to a direction in life.

Many questions ask people to choose between 2 possibilities. These pose particular dilemmas. People often then approach the 2 possibilities as if they really are the only two available choices and stretch to align themselves with one or the other.

Tomm....bifurcation questions. Obviously loaded. Helpful in mobilizing and aligning emotional responses. When a person chooses one, different sets of emotion become oriented to each branch. Positive emotions get oriented toward the branch chosen. In offering a choice toward one direction, the other is often implied but not stated.

Questions like: Is this useful? Why? How? Is this a good thing or a bad thing for you?

STORY DEVELOPMENT QUESTIONS

Once a unique outcome/sparkling event is identified, we can ask questions to develop the story of it. Questions are used to invite the re-authoring of stories.

Story development questions invite people to relate the process and details of an experience and to connect it to a timeframe, to a particular context, and to other people.

The event is expanded in space and time, it is peopled, and it is re-experienced in a detailed way. It becomes a story! Can be constructed from real events or hypothetical ones.

The alternative stories must be developed in ways that are compelling and experientially vivid.

Process

Invitation to slow an event down and notice what went into it. As a person works to retrieve the sequence, they relive it. Opportunity to create a map that will then be available during future challenges. Since it is the reviewing of the person's own actions, rather than what happened to them, it is about stories of personal agency.

Questions like: What steps did you take? What was first? Then what? As you look back, what do you see as the turning points? Were there particular things that you said to yourself to support this new resolve?

Details

Details help make an event vivid. Questions about details offer people the opportunity to remember aspects of events that may have been neglected or forgotten.

***Full, detailed descriptions foster an intensity of experiential involvement that generalized accounts do not. True for hypothetical events as well.

Questions like: What would I have noticed if I had been there when you experienced this breakthrough? What was it like in that moment (seeing, feeling, hearing, touching, etc)

Time

Find the historical antecedents of sparkling events and preferred outcomes. They have historical roots to which problems have blinded people. History questions can help identify and reclaim them.

Questions like: Who would have predicted that you would have made this shift? What events would they recall? When in the past did something like this happen?

Future oriented questions can extend alternative stories into the future, changing people's experiences about what is ahead for them. This cuts into ideas of pre-determination.

Questions like: What do you think the next steps might be? Now that you have discovered this, do you have a different vision for the future? A year from now, what will be better because of this?

Questions that contrast the past and the present/future emphasize changes a story takes over time. Commits people to a new direction.

Questions that link the past, present and future dramatize this timespan and directionality of a narrative and make events in different timeframes relevant.

Questions like: How is this different from what you have done before? And now?? If we link the past X with this present X, where do you think the future might go?

Context

As people construct alternative stories, new contexts become important. Every story has a setting. Asking questions about context anchor stories in particular places and situations. And invite people to extend stories into new places and new situations.

Questions like: What in your life/culture supports your new choices? Where in your life does your new direction show itself more? What does your culture say about how you should meet these kinds of challenges?

People

Most stories have more than one character. People questions invite individuals to re-collect the cast of characters contributing to an emerging narrative or to consider how particular people could play a role in the development of a story.

*** These questions point to the importance of people in alternative narratives.

They also invite people to consider the effects of their alternative stories in the lives of other people— family, friends, sometimes even strangers.

Recognize the importance of recruiting audiences.

Questions like: Who played a part in X no longer controlling your life? If you keep this friend in your heart as you make this change, what difference will it make? Who will be the first to notice this change in you? Who will celebrate it?

Hypothetical Event Questions

Authoring a speculative history.

Questions like: If you had known how well you could collaborate on this, how would things be different?

Once an alternative history is established, people can speculate on process, details, context, and people. These hypothetical pasts have a real effect on people's lives.

MEANING QUESTIONS

Reflecting position from which people can regard different aspects of their stories, themselves, and their various relationships. In naming the meaning, the construct new meaning.

Meaning and Implications

Most open-ended kind of meaning question.

Questions like: What does it mean to you that someone did this, or this happened? If you were to apply this knowledge now, what difference would it make? What is the significance of this new experience/thought/action?

Characteristics and Qualities

Focusing meaning on self-image or relationship-image.

Update the identify of a person or relationship to fit with a developing alternative story.

Questions like: What does it say about you as a person that you would do this? What characteristics does it show? How would your partner describe the relationship you have, in light of what you've accomplished together? What qualities do you see about this person who is taking steps to a new reality?

Motivation, Hopes, Goals

Invite people to notice how particular developments reflect larger life projects.

Questions like: What do you think motivated person to take this new step? Do you think the way you did this {good thing} shows what you hope for your future relationship? In looking at what you've accomplished, what does that say about your goals?

Values and Beliefs

Questions about values and beliefs look beyond specific events and reflect on moral, ethical and spiritual dimensions.

Questions like: Why does this new way of thinking suit you better than the old way? From what I've heard, what would I say you value in your friendships?

Knowledge and Learnings

We see therapy as an "insurrection of lost knowledges." Believe it is important to bring forth people's specific local knowledge concerning unique outcomes and preferred directions.

Questions like: What did you used to know that you might have lost track of about X? What can you learn that will be important in other aspects of life? When you see how far you've come, what do you learn about yourself?

STORY CONSTRUCTION

Questions that are asked , and the stories that are picked, play a powerful role in determining the kind of stories that will be constructed. Questions therapists ask play a role in which events will become storied.

We offer our ideas as based in particular experiences, not a truth claims. Invite people we work with to ask questions about our questions.

Particular strands are thickened by weaving back and forth between story development and meaning making.

WHAT TO ASK WHEN

These questions are not sequential. Might help some people to have a particular order in mind when learning and practicing. But other orders might work just fine.

Get to know people as people, not as problems. Then follow their interests. Use deconstruction questions until there is an opening for story development questions. Can always go back. May not use some types of questions at all.

Deconstruction and opening space in early part of conversation about a problem. Preference questions throughout interview, particularly to make sure unique outcomes are preferred outcomes.

Once preferred outcome is identified, ask story development and meaning questions.

*** Once underway, people often use therapy as a way to tell their developing story. Continue to ask questions, but role more and more that of a listener and scribe – documenting, witnessing and performing meaning on the preferred story as it develops.

As people become more and more involved in living alternative stories, they generally decided they can do just fine without therapy. Often want to leave door open for occasional consultation. In terminating, review story as it has developed. Contrast past and present. Ask future oriented outcomes.

Celebration can be end outcome.

QUESTIONS IN ACTION: CHAPTER 6

Effective therapy must be continually re-created in the context of participant interaction. Otherwise, it quickly deteriorates into a series of canned routines. (Elfran and Clarfield)

...client and therapist are seen as mutually creating meaning, and mind becomes a mutual intersubjectivity...a new narrative, a new story is created (Anderson and Goolishian)

From a transcript –kid not doing homework

Gene (the therapist)...I can't...that was one of those "yeahs" that I can't be sure whether you're saying it because you really believe it or because it seemed like it was a good idea and you didn't want to disappoint me.

Rick Oh no. (laughter) Well.....I believe it....sort of.

Gene: You believe it, but you're not sure, even though you believe it, that you'll be able to put it into action?

Although we did not talk about this explicitly at the time, Allison the mother later told me that the expectations she accompanied her to the therapy meeting included the strong possibility of mother blaming. Assuming that the problem was the problem, rather than that Allison or her parenting activities were the problem, made a difference in Allison's story of herself as a parent.

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Maggie and Richard – patriarchal patterns took over after birth of child, robbing them of what had been unique in their relationship and determining their roles and responsibilities as mother and father. Lack of room for Maggie for her voice and desires encouraged blame and anger to come between them. Blame and anger led to distance and fear.

A lot of talking about how they would like their relationship to be. A lot of renegotiating of tasks and responsibilities. This was not easy. The habits that they now thought of as bad had made quite an inroad in their lives, and they sometimes found themselves pulled back into their old ways of relating, in which fear and anger took over.

..discussion about this quickly gave anger and feelings of being misunderstood an opening to take over their relationship.

Transcript – talking about how they got into a horrible fight, and then managed to move through it.

Therapist to Maggie: What do you think that he sees in you that you may not have recognized in yourself, that he would give you a larger percentage?if you owned the warmth that Richard experiences in you for yourself, what difference would that make for your future?

Maggie: if I owned the warmth?

Jill (therapist): if you felt it, experienced it, believed it about yourself, the way that Richard experiences it in you. What difference would that make for your future?

Seeing the different story give ability to bounce back better.

Couple learns to coach changes in each other. Become very good at complimenting each other.

Jill : knowing {all the good things and good changes} how do you think that those things can begin to make a difference in the future about the 5% that is still problematic?

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Jill: What do you think is important for you to know or do to be able to look back on that without feelings of stupidity coming in? I mean, what would it take for you to be able to look back on that and say "I'm glad that's behind me"? Or, you know, "I've learned something"? Or whatever? Do you know what I mean? (pause) Or maybe, what would have to happen for you to feel like, in your present life, or in your future life, that that wouldn't happen to you?

Hollie: -- learning to be trustworthy to myself

REFLECTING – Chapter 7

The power of the reflecting room is not in the switching of rooms, but in the switching of perspectives (Davis and Lax)

The use of the reflecting position .. is in essence a political act whose function is to distribute power among all the different voices in this discourse, dominant and nondominant. (Griffith and Elliot)

There are multiple ways to describe a particular event or relationship.

Reflection promotes experience of experience. It is through experience of reflecting upon our experience that we make meaning of it. “Natural” reflection does not necessarily focus on the preferred experiences or new narratives that are developing in therapeutic conversations.

One way mirror – reflecting *position* – relatively out-of-the-fray listening position from which one can reflect upon events as they unfold...available to therapists since the 1950s.

***Bicameral format—jump to a new perspective or emergence of new possibilities that follows placing together of two eyes, two hands, two chambers of the brain. Screen turned psychotherapy into a bicameral interaction that offered a similar chance to explore a new dimension. One had two places to sit. One could take a position, and have somebody else take a position commenting on or reviewing that position. (Lynn Hoffman)

In top-down (old style for them) therapy, screen used in 2 ways. Vantage point from which to phone in directives or suggestions to therapists and a place from which to gather information. Sometimes discussions/debriefing after interviews. Other times would take a break, the front of the mirror therapist would go behind the mirror to discuss, then come back in front of the mirror to deliver strategies, messages or interventions.

Old style: compliments. Composting a list of exceptions to the problem. Finally delivering an assignment that has to do with noticing, cultivating, and performing more of those exceptions. Team engages in conversation the family is not privy to, composing a single message and delivering it through the front of the screen therapist.

Reflecting team format in narrative therapy is radically different. In this format the therapist and people meeting with the therapist talk together in front of the mirror. With team observing behind the mirror. At some point the therapist and family switch places with the team, so the team is in front of the mirror, observed by the family and the therapist. The reflecting team members discuss their ideas, questions, and thoughts in response to the conversation they have just heard. When the team finishes their reflections, the family and therapist again switch places. Once back in front of the mirror, family members have the chance to comment on what they’ve just heard from the team.

In front of the mirror, reflecting team exercise values of multiple perspectives, horizontal, collaborative relationships, and transparency into action. Literally changing places with clients and talking openly

about multiple ideas may be the most dramatic example so far of the differences with this kind of therapy.

Reflecting processes are characterized by the attempt to say everything in the open. Everything the professional says about the client's situation is said so that the client can hear it. (Anderson)

Open inquiry and frank discussion of life dilemmas ... models. But do not attempt to instruct specific choices. (Griffith and Griffith)

This approach discourages reflecting team members from engaging in time-honored structuralist and functionalist truth discourses of the psychotherapies, and focus on family member identifications of preferred developments.

***First time had the opportunity to participate, had no idea what to reflect. Part of a group of beginners. Behind the mirror we would diagnose what was "really" going on. But that seemed inappropriate when we knew the family was listening. Uncomfortable with what we used to do. But didn't know what else to offer. Awkward silence reigned, until someone haltingly described observations. Speaking was in a state of discomfort. Subjected selves to critical second thoughts, and furious editing while trying to speak. Quite relieved when could retreat behind the mirror again.

Early awkwardness and confusion. Made them glad to try out a structure.

Now wish we could use them in every therapy conversation. Found a structure that seems helpful.

REFLECTING TEAM PRACTICES

Lynn Hoffman – her only guidelines for reflecting teams are that participants are encouraged to take an affirmative and affiliative stance and to have "relentless optimism."

***It is attitude, not technique, that are central to this working. So there is a caution. Cannot let worrying about what to *do* divert from the more important issue of how to *be*.

***Structure is in service of keeping awkwardness and confusion out of the room, so that we can cultivate affirmative, affiliative genuine curiosity and wonderment that are more important than any technique or guideline.

3 primary tasks:

1. Joining with the family
2. Supporting the development of new narrative
3. Facilitating deconstruction of problem-saturated narratives

Initial include acknowledgement of what led family to seek therapy. Brief situation of what the understanding of the present situation is. After that bulk of questions and comments should focus on supporting and thickening new narrative developments. Recount what people do and say that do not seem to fit the problem narrative. Team members to wonder aloud if it could be the preferred narrative.

Team plays tentative role. Wondering. Speculating. Not trying to sell. Process is quite different from pointing out positives.

When people lay bare deep suffering, a team focus on sparkling events can feel disrespectful or disregarding of their experience. So that begins with talking about the problems they talk about. Questions about the effect of feelings. Questions about inviting construction of alternative stories might be more welcome when interspersed with reflections on difficulty of present situation.

GUIDELINES FOR REFLECTING TEAMS

We reflect upon our reflecting. Guidelines particularly helpful in early experiences of being a team. Once the attitudes and postures are learned the guidelines may no longer be so relevant.

1. Reflecting Team members participate together in a conversation

In the beginning people would be eager to put their ideas in. What was supposed to be conversation was a series of discontinuous ideas. Even worse, comments were jarring or competitive. Real conversation rather than bombarding with points. Ideas develop and new ideas are born in real conversation.

2. Team Members don't talk behind the mirror

3 reasons. Keeps conversation fresh and multiple possibilities. Second, want family to be privileged authors of their own stories, not a version we have become invested in. Third, behind the mirror talk can all too easily become disrespectful or pathologizing.

3. We try not to instruct or lead the family

Ask and offer reflections tentatively. Use subjunctive: could, might, perhaps.

4. We base our comments on what actually occurs in the therapy room

5. We situate our ideas in our own experience

helps flatten hierarchy and contribute to the transparency of the process.

6. We try to respond to everyone in the family

7. We aim for brevity

REFLECTING TEAM PRAGMATICS

Very flexible about number. Works with 2. Works with a dozen.

Make sure family has been introduced and understands process. With beginning therapists helpful, because they can ask for reflecting process if they become tongue-tied. Families can ask for reflecting team to switch places. Team generally reflects for 10-15 minutes. Can signal from both sides by knocking on window. Without a mirror talk as though there were a mirror.

Can create distance as reflecting team of one by leaning back, looking at ceiling, reflecting upon reflecting. Can leave and come back and say "when I was away, I had these ideas." "Thinking back on what you've said so far, I've had some ideas. Would you like to hear them?"

REFLECTING WITHOUT A TEAM

Inviting Reflection on Others

We used to watch family members talk directly to each other so that we could gather information about their patterns or let them rehearse a new way of interacting. This way of working made sense when we believed that we could identify what was “underneath” a problem and when we emphasized changing behavior. In this sort of therapy, people were either doing something active or they were listening to us. They usually did not have the opportunity to voice their reflections in therapy.

In narrative therapy, instead of asking people to talk with each other, we learned to ask one of them at a time circular questions that focused on interactions between other family members. Circular questions invite people to become an audience to themselves, their families and their situations.

Questions invite people to reflect on a new narrative as it is evolving.

First and most important task for the therapist to insure that people stay in a listening position. Tell people how we would like to proceed is simplest and most direct. Most of the time, talk with one while the others take on a reflecting position.

Even when people agree, old habits may take over, getting them to interrupt and offer their description or evaluation. If interrupting continues, invite them to listen from behind the mirror. Setting up a structure for the conversation seems to loosen the grip of problem-dominated narratives. Perhaps because there is no opportunity for those listening to bring up problem saturated narratives while the other is speaking. Allows them to make new meanings at odds with the dominant problem narrative.

Ask questions to encourage the reflections. Invite general reflections upon the conversation. What thoughts were you having while we were talking? One person listening while the other talks lets each witness and bear the other’s pain without moving into defensiveness. Which then allows to re-interpret what the other’s actions mean because now can understand.

Then invite reflections by asking questions designed to draw attention to events that don’t fit the problem-saturated narrative. What have you learned or gained that will help you in the future that you would not have gained if this event did not come along?

Inviting Reflection Upon People’s Own Emerging Narratives

Can do this with or without other people present in the meeting. Thinking back on today’s conversation, what new developments stand out for you? Invite people to evaluate the experience, rather than the therapist doing the evaluating. This does not mean encouraging self-criticism. Therapist as expert vanishes, and person decides what is helpful for them.

When people move from being in a conversation to reflecting upon it, they become an audience to themselves.

THE PLOT THICKENS – Chapter 8

The words in a letter don't fade and disappear the way conversation does; they endure through time and space, bearing witness to the work of therapy and immortalizing it. (Eptson)

It is in the performance of an experience that we re-experience, re-live, re-create, re-tell, re-construct, and re-fashion our culture. The performance does not release a preexisting meaning that lies dormant in the text. Rather, the performance itself is constructive. (Bruner)

A common dominant story is how fears coach habits.

In recounting stumbling around not knowing what they were doing, and then dropping it, they say "looking back at that session now, we are amazed that the one conversation in which we used narrative therapy went as well as it did."

We didn't understand that these ideas work in the context of a worldview and set of attitudes. The least important part is the technique. We also didn't understand how persistent problematic stories can be. People have mostly been living them for a long time. Often their local culture includes attitudes and practices that support the problem-saturated story. It is not at all unusual for an alternative story to fade between therapy conversations.

But there are things to do to keep the story going. This chapter has 2 purposes:

1. Keeping stories alive – during conversations themselves and between sessions
2. Ways to help people make the stories they are authoring thicker and more multi-stranded

Some seems to happen automatically. As we construct self-narratives to search our pasts for small stories that can help explain or account for these narratives.

In addition to what happens automatically, asking questions invites people to thicken and add complexity to an emerging alternative narrative by connecting it with stories of past events and hypothetical future events.

Supporting Stories and their meanings add strands to and thicken narratives. Repetition and thoroughness are extremely helpful. Get to thoroughness by

1. Asking about detail
2. Inclusion of more people
3. Inclusion of various perspectives

These are all ideas that may be useful or not depending upon the person

BEGINNING INTERVIEWS WITH A REVIEW OF THE PREVIOUS MEETING

When someone enters into an alternative conversation, perceptions about self, relationships and dilemma causing struggle can sometimes shift so they very quickly are living a new story. Others can be in the same conversation and not have a perceptual shift. Sometimes because they see things different

during therapy conversation, but doesn't last once the conversation is concluded. Inquiring about times they didn't live the dominant problem story can help to keep perceptions from fading.

For many people in the beginning of therapy, there are moments and contexts in which they are living the alternative stories they have begun to construct and other moments and contexts in which they are immersed again in the problem stories. For others, they may have had glimpses during therapy session, but not impact once session is over.

For both situations often helpful to begin interview with some reference to the sparkling moments of the previous meeting. Beginning this way orients the conversation to the reauthoring process and offers an invitation to continue redescribe and reauthor stories.

Can ask how something developed from the previous discussion. Or can offer a more extensive summary of the previous meeting, inviting people to reenter the conversation with us. Then ask them to fill in how things continued.

This lets them see life events that have gone unnoticed that are part of the emerging narrative.

***If people do not discover unique outcomes in this process, they very likely can name different aspects of the problem. These aspects of the problematic story can then be deconstructed.

RELATING THERAPY CONVERSATIONS TO PROBLEMS AND PROJECTS

Naming problems and projects or plots and counterplots are often helpful. When named people recognize when the culprits are around and when they themselves are moving into preferred territory. With naming people can choose what they want to do.

Naming the Plot Questions:

- This problem you've been telling me about, what can we call it?
- Would you say that it's X that is coming between the 2 of you or causing the problem? Is that a fair thing to call it?
- What keeps you from realizing the dreams you just mentioned?
- What gets in the way when you set out to do what you decided to do?
- Naming the counterplots: You escaped from the grip of X on at least 2 occasions this last week. If you were to give a name to the new direction you are taking, what would you call it?
- Sorting events by plot or counterplot: Was this more on the side of X or Y?
- Do you think that was X or Y?

If people don't explicitly name the problems they are struggling with and the projects they are engaging in, we can offer candidate names. As people respond to the candidate names over time, they will expand, evolve and refine the names.

***Having names enables us to ask people whether particular events are on the side of the problem or on the side of the project.

When people decide to align themselves with projects, they are constructing alternative stories in which they experience personal agency. Bifurcation questions mobilize people's emotional responses, aligning positive emotions with the project, when a person has committed to a project, and aligning negative emotions with the problem, which can be helpful in opposing it.

Posing dilemmas between problems and projects keeps therapists and people they are working with on a re-authoring track.

Asking people if events, thoughts, feelings, and the like are on the side of the problem or the side of the project is the answers offer opportunities to thicken narratives. As people sort conversations, television programs, films, comments, books, activities and so on, into these categories, the tension between the plot and counterplots extends into the nooks and crannies of their lives. The activities of daily living become decisions by which they must align themselves either with alternative stories or problematic stories.

Makes life an opportunity for the dramatic performance of preferred narratives.

Posing dilemmas alerts people to traps the problem may set. As people begin to ask themselves and answer questions of this type they tend to choose behavior supporting their preferred narratives. This creates a new positive loop that creates new supporting events and stories for the preferred story.

Can be a loop when people turn their back on problems and live their projects, and others turn their backs on negative expectations that they will be living problems.

NOTETAKING

Using notetaking to record and repeat not their own ideas but some of the important-seeming words the people they work with say.

Person says something significant about themselves.

Therapist says "Is it all right if I write this down? I'd like to get the exact words."

Person says yes. Repeats what they said. Therapist reads it back. Slowly.

So the significant event is stated 4 times.

Different experience to hear something than to say it. This process affords both perspectives. There may also be accompanying thoughts and associations with each repetition; so each repetition thickens the story. The notes become the "official record" of the counterplot.

The more people read and hear these notes about them, the more alive they can feel. They can see movement in their lives. They can feel like a valuable person who is making life better every day.

This can lead to transformation. People glow in hearing and reading about themselves not as problems.

*** The permanent record comprised by our notes on people's projects can become a sacred text that enshrines a person's preferred story, making it canonical and "real."

TAPES

With permission, sometimes tape sessions. Tapes belong to people in the conversation, not the therapist. Sometimes helpful to watch an early tape later in the process.

People move in and out of new stories. For someone experiencing a backslide, watching a tape that documents their living in more preferred ways can be very helpful.

LETTERS

Some people surveyed said a letter was worth 3-4 therapy interviews. Can be used for many purposes. The only limit is the therapist's creativity.

Letters thicken the story and help the people we work with stay immersed in it. Also involve us more thoroughly in the co-authoring process, giving us an opportunity to think about the language and the questions that we use. We find that in writing letters we have ideas we might not have had otherwise. This may be because we write letters from a reflecting position. We are removed from the actual conversation, but thinking back and referring to it.

Letters serve 3 main purposes:

1. To summarize and recap meetings
2. To extend ideas or stories that were initiated in a therapy conversation
3. To include people who didn't attend a meeting

Summarizing meetings

Write letters directly from notes. Highlight aspects of conversation that build and reinforce preferred stories. Requires either taking very good notes, or remembering very well. Organize notes in terms of the narrative metaphor, keeping track of plot and counterplot.

On left side of page note problematic story. Keep those notes in externalized language. On right hand side of page, keep track of alternative story that is developing. When we note something that may be a unique outcome, put a star next to it. More likely to take down people's exact words on the righthand side of our paper, so that we can go back and ask about them or refer to them in suggesting word choice that seems fitting in naming the project. Recording people's exact words also allows us to quote them in letters.

Care and feeding of new ideas.

Ask, can you see how I can look at this as a story of progress?

Extending Ideas or Stories that Begin in a Therapy Conversation

Letters don't need to recap the sequence of an actual conversation. They can focus more on amplifying ideas or stories that started in an interview.

"as I look back over my notes from our last meeting, I find a smile growing on my face and in my spirit. To me it feels really good that you"

Including People Who Didn't Attend a Meeting

When someone who has been attending misses a meeting, we often write a letter to keep that person included in the story and updated on its developments. Relate what happened and ask them to interpret in light of emerging "good" story

Clients' Writing

Asking people they work with to write between meetings.

*** Writing down slows down our perceptions and reactions, making room for their thickening, their gradual layering. And that this process, which could be described as poeticizing, encourages us to develop many different readings of our experience. Finally this writing, something to keep, to study, to revise, to show, enables us to hold our many stories in tension.

...The participant text as the vehicle for growth transfers new knowledge from the inside of the session to the outside, as well as from the outside to the inside. This movement has an integrative function, sowing possibilities between our lives and our transformation, and giving voice to our many-faceted selves. (Frankfort)

Sometimes people ask to write. Sometimes we ask them to.

Documents

Documents make concrete important intentions and are for celebrating significant achievements. Ask people if they would be interested in having one to declare their position or mark their accomplishment. Usually co-create documents. Certificates. Membership cards. Project lists. (Carrie's bravery project).

Lists can be helpful as a project list when people aren't happy with the idea of talking or developing much.

SYMBOLS

For some people, symbols and concrete representations of portions of what they are working on make it seem more real and graspable.

Symbols of project/good plot. What is happening. What is hoped to be happening.

Symbols can be held on to, make dreams and hopes seem more real and clear.

SPREADING THE NEWS – CHAPTER 9

As “self” is a performed self, the survival of alternative knowledge is enhanced if the new ideas and new meanings that they bring forth are put into circulation. (White)

The hard-won meanings should be said, painted, danced, dramatized, put into circulation. (Turner)

If people constitute their preferred selves by performing their preferred stories, then it is important that there be an audience for those stories.

Once they exist, those audiences make up local communities (subcultures) which construct and circulate alternative knowledge—knowledge that provides new lenses through which to interpret experience. As preferred stories circulate and are shared in a community, *all* the participants in that community construct each other according to the values, beliefs, and ideas carried in that subculture’s preferred stories.

This whole process constitutes the “insurrection of subjugated knowledge” (Foucault).

Propose name “Communities of concern” for such participant audience subcultures. {churches. Leader Team. Cherry Street.}

Although in the dominant culture therapy tends to be a secret enterprise, in the narrative subculture the people who consult with us are usually enthusiastic about the idea of letting other people in on the process. We find that externalizing and antipathologizing practices offer people a different kind of experience.

When therapy becomes a context in which people constitute preferred selves, they have nothing to hide and much to show.

. . . in this therapy, people emerge as heroes and they often want that heroism acknowledged in some social way. They want to communicate with others and tell their stories. (Epston)

This chapter is about how to foster communities of concern.

QUESTIONS TO IDENTIFY AND RECRUIT AN AUDIENCE

Asking questions is easiest way for therapists to encourage the people they work with to identify and recruit an audience – first to name candidates, and then consider recruiting them.

- Who would be most interested to learn of this step you’ve taken? Why would that interest her or him? How could you let her or him know?
- Who in your current life could have predicted you would make this kind of commitment? What do they know about you that would have led them to make this prediction? How would knowing about this step support this preferred knowledge of you? Would that be helpful to you? How? How could you let them know?

- Who would most appreciate this event we've been talking about? What might he or she learn about you if you let him or her in on it that would be of interest to him or her? What might they say to you about this? How could you initiate such a conversation?

These questions all presuppose that the person might actually initiate the conversation. Such conversations, when they occur, are very valuable. They constitute lived experiences that can become important incidents in people's life narratives. Simply entertaining the idea of such conversations often motivates people to initiate them.

We've found that even if the conversations do not actually happen, an audience still develops in people's thinking or imagination. Even an imaginary conversation can constitute real experience of a supportive audience. It is not unusual for someone to name a particular person who would be interested in their story and then, without ever letting that person in on it, assume support and appreciation from her or him.

This assumption makes it more likely that the person will perform preferred versions of themselves when they are around the unknowing audience. In this way, the unknowing audience becomes an actual audience.

Other questions:

- Who will be most pleased to discover that you have taken this step? How might they discover it?
- Who will be most affected by this development? What will they notice that will let them know?
- Who from your past would have predicted this development? What did they know about you that would have led to that prediction?
- Who would you like to talk with about this that you have not yet talked with? It could be anyone, living or dead, here or far away. What might they say?

INVITING AN AUDIENCE TO THERAPY MEETINGS

Problems are maintained through language and social interaction. One strategy is to invite members of the "problem-dominated system" – those who are in language about the problem—into the therapy room.

Introduce the possibility – because request for presence of friends, relatives, co-workers, or representatives of involved agencies can be an occasion for distress.

*** When most people seek therapy, the dominant discourses lead them to assume that something is wrong with them. If we suggest including other people in the process, they may imagine experiences of embarrassment, shame, and possibly of social control.

As assumptions are deconstructed, people tend to be more open and even enthusiastic about inviting others to join in. The final choice is always in the hands of the people who consult.

Story about Donna, who had been coached by fear and distrust after being abused. “The fear and distrust not only made Donna withdraw from social situations, but also paved the way for anger and bitterness to take over, often with little current provocation. Social isolation characterized most of Donna’s life. She told me that other people thought she was difficult to get along with, suspicious, and touchy.

In our work together, I felt very honored to witness her perseverance and integrity. ..She began to be more open to people. As she began to constitute herself as someone who could be connected to others, we were both disappointed that there was seemingly no recognition of her change outside of the therapy room. It seemed that her reputation was blinding others to the current developments in her life.” (p 240)

Donna wanted to bring her principal where she taught school to therapy. Threatening to therapist at the time. Used to talking with employers *about* someone. But Donna wanted someone from work to see her the way she was when we interacted in therapy. She thought that having someone experience that view of her would help her to keep the person she was becoming alive.

Even though I (the therapist) was already abandoning many of the therapy ideas I learned, this idea flew in the face of everything I had been taught, which was difficult to let go of.

In the session, Dan the principal, blurts out changes he has seen in Donna.

“Donna looked at him dumbfounded.

‘Did you know others were seeing you this way?’ I asked.

‘No,’ she said, and began to weep.

‘This might seem like a strange question,’ I said to Dan, ‘but before this conversation had you recognized the steps Donna had taken to connect with people?’

‘No, I hadn’t thought about it,’ Dan said. ‘But now I see.’

Dan’s “seeing” made a difference in how he subsequently responded to Donna at school. His different responses helped Donna maintain her new vision of herself and supported her in taking risks to be in relationship with others.

Doris and Wayne ... “the depression coaching Wayne had come between them and coated their relationship with hopelessness.” . Doris and Don the friend invited to list ways they’d seen Wayne take back his life.

Helpful to invite people to a summary meeting, to tell the developing alternative story or a celebration of accomplishments. Although people may or may not contribute to the therapy conversation, their bearing witness to alternative stories and preferred versions of selves is often important to the people we are working with. This witnessing almost always makes a difference in the witnesses’ perceptions of the people they witness. Different perception then becomes part of developing new relationship in the alternative preferred story.

TEAMS

Nurturing Teams – inviting people to attend meetings in a different direction. Nurturing Teams (Michael White) can serve as a counterweight to that “abuse teams” that have typically been at work in the lives of some people. White notes that many people who have been subjected to severe abuse come to see themselves as having “dependent natures,” and to criticize and pathologize themselves for having such natures.

To deconstruct these dominant, oppressive stories, White inquires about the presence of an abuse team. Has there been such a team? Who are its members? He then calculates the weightiness of the abuse by multiplying abuse team members by number of years per member by level of intensity. Then wonders what might serve as a counterweight to the abuse.

Proposes Nurturing Team, wondering how big a team it would take, over what amount of time, to balance the effects of the abuse team.

White suggests that people can actually invite those they believe they have been dependent upon, as well as other people they think would accept the invitation, to join such a nurturing team.

Constituting a Nurturing Team

1. Start with account of abuse team, activities, duration, long-term effects.
2. Notion of nurturing team introduced, thoughts about how the nurturing team could undo effects of the abuse team.
3. Work that has already been done in this direction by prospective team members is acknowledged, along with effects of this work
4. Prospective team members talk about the sort of ongoing contribution to nurturing work they believe might challenge the work of the abuse team. That might fit with the necessities of their lives in a way that would not be burdensome to them.
5. Person who called the meeting responds to proposals, makes suggestions about what might work best for them.
6. All of the proposals and suggestions are negotiated. Plans made for their introduction. Plans worked through in their particularities.
7. Therapists should attend at least the first meetings and be available to support and clarify the process.

In structuring support systems in this way, people are not so much being asked to respond to crises, but instead, are being filled in on the story and given the opportunity to play a role in creating a new culture in which a preferred story has a chance to flourish.

Advantage that teams meet and share responsibilities, and can be planned for.

Proposing the idea of a team to hold close in one’s thoughts and heart has been quite helpful. After a project/counterplot for a good narrative is named, ask questions to help a person identify who is on the team for what project.

Question – Who from anywhere, anytime, would support what you’re accomplishing? What team do you want in your heart and mind?

Gives people the opportunity to decide who they want to be in their community and on their team. All of us hold people in our hearts and minds. Teachers. Admired athletes. “we are sure that they would be honored.”

- What good things about you would this person know? What events could they tell me about?
- How does this knowledge they have of you qualify them to be on your team?

People often have creative ideas for making team members present in their lives.

- How can the team help you prepare for the job interview?
- Now that you have a team with you, how is facing this process difficult?
- Who on the team might you count on if terror and despair sneaks into your life?

REFLECTING TEAMS

When working with couples, families or groups, talk to one person at a time, while inviting others to take up a reflecting position.

When someone tells a story about putting a problem in its place, and acting in a new way, help the story to become even more robust by asking the audience questions: What do they think this new development meant about the fate of the relationship between the person and X? What does it say about the person that they took matters in their own hands this way? Etc.

This helps the story about the person to be spreading. Now it is not just self-knowledge. It is family or group knowledge. There is an audience for the victory.

Even if 2 people are in therapy to work on “relationship problems” each can serve as an audience to the other. When one person witnesses the other telling a story about the relationship (which is in some ways different for each partner) his or her ideas both about the relationship and about the partner can change. Such is the nature of an audience.

The structure of the conversations ... one person talking while the others listen to the story, and then the listeners reflect on the talker’s story, maximizes the possibility that each will serve as a witness or audience to the others and minimize the chances that people will dispute or contradict each other’s stories.

A formal reflecting/nurturing team provides the “insurrection of subjugated knowledge.” The diverse people who constitute a reflecting team are the participant audience of individuals ... each situated with their own experience and stories...for people’s emerging stories.

CIRCULATING THE STORY THROUGH LETTERS, TAPES, DOCUMENTS, CEREMONIES

Witnessing can happen anywhere, and not just in therapy rooms. In addition to thickening stories by sending to the person, can be used to recruit an audience by spreading the news of an alternative story.

Helps with establishing reciprocity in relationships, when reflecting, nurture, witnessing and audiencing becomes 2-way.

Through letters (emails), celebrations, declarations and the like – in each of these situations something new about a person’s story was made public to a participating audience.

LEAGUES

Leagues are “virtual” communities of concern, with names that show a group conquering a problem. “Monster Taming and Fear Catching Association of Australia.” When leagues are used this way, there is often discussion of what would qualify a person to become a member of such a league. Usually no mention of any league activities following membership. Joining the league signifies the person has reached competence in a particular arena. Membership certificate recognizes achievement of new status.

{obvious parallels with gamer theory/leveling up}

Archives/collections of stories of people in their own words in the leagues, available to others. Unites and circulates the voices of people involved in a common struggle. Their words, not the therapists, are privileged.

When combined with the externalization of problems, a community such as a league not only provides an audience for the circulation of stories of resistance and accomplishment, but also changes the context of people’s lives. {written pre social media, which has completely reformed what is available.}

Turns table on isolating, silencing, shame and self-revulsion effects.

Leagues intend not only to create a subculture, but to change the dominant culture as well.

Groups are the audience for the telling of stories in a safe setting where there is validation, commonality, affirmation . discover exceptions and notice differences.

“By the end of the meeting, people were talking about Misha’s problems as though they were an interesting challenge for their creativity rather than a drain on their time and energy.”

When people become an audience to a preferred story, their participation can change dramatically. Teams create plans the therapist couldn’t have anticipated or put in place, ones that work and further stories.

It helps to go in person when teams are being created to make sure the preferred story is shared rather than written about or told over the telephone.

Whatever the medium, a role of the therapist in communicating with others is that of message bearer of the preferred story and facilitator of communication.

CHAPTER 10 – RELATIONSHIPS AND ETHICS

If we accept that when we enter into a dialogue we *both* change; if it is true that we *co-create* that reality, which in turn creates us—then we are called to a new kind of community. If I can only ever be a part of this new creation I must act humbly, I'd take that over being a goddess. (Maureen O'Hara)

Transformative relationships are a two-way phenomenon. All of our lives are changed (Michael White)

***We got into this work by falling in love with Michael White's ideas (and those of other people working in this realm), but in stages, a little at a time. At first we didn't really recognize the significance of the ideas or the shift in worldview they reflected. What we fell in love with first were the relationships we saw in Michael White, and then David Epston, and the people they worked with, creating with each other. We witnessed how people could transform themselves and their lives in preferred ways within those relationships.

This kind of work by stories and narratives and metaphors fosters different kinds of transforming relationships than we had before – relationships that are decidedly two-way in fostering membership in new communities and new life stories for both therapists and the people who consult with them.

Much of the unique character of these relationships has to do with the ethical practices that shape their construction.

What we left behind was the modernist project that centers on sweeping meta-narratives and perfectible scientific theories. Modernist ethics tend to be based in rules that can be prescribed and enforced in a "top down" way, as in codes of ethics of associations.

What emerged is ethics that focus on particular people in particular experiences, and how to put ethics into practice.

THE CONSTITUTION OF SELF AS AN ETHICAL PRACTICE

Core: asking questions that are experientially compelling so that meaningful stories are brought forth. Stories seem to be both already there and not-yet-developed. Once they are developed, the stories speak important "truths" about people—about their lives, relationships, and possibilities. People who observe these conversations generally see the people in client positions in a new light. Then they usually think the therapist {preacher??/COM liaison??} had something to do with the new light.

Modernist explanations would focus on either personality traits of the therapist or certain quantifiable techniques that will bring predictable results.

From this standpoint not as interested in personality styles or exact techniques as how the therapist {etc} constitute themselves in relationships with other people. Interested in how they actively participate in forming their identities so as to contribute to a transforming kind of relationship.

Remember that the self is what we constitute in relationship with other people.

As therapists, situate selves in discourses and in communities that support them in constituting themselves according to certain ethical principles and values. {you have to be the people of God, before you can do the work of the people of God.} Then when they enter a new situation they can carry those communities and discourses – and therefore, the values they support—with them in their hearts.

***To the extent that we have choice in the matter, the choice of a community or discourse is an ethical act.

Questions to ask in choosing or not choosing models, theories and practices

1. How does this model/theory/practice “see” persons?
2. How does it press you to conduct yourself with people who seek your help?
3. How does it press them to conduct themselves with you who offer help?
4. How does it have them “treat” themselves? “See” themselves?
5. How is this person being redescribed/redefined by it?
6. Does it invite people to see the therapist or themselves as experts on themselves?
7. Does it divide and isolate people or give them a sense of community and collaboration?
8. Do the questions asked lead in generative or normative directions?
9. Does the model require the person to enter the therapist’s “expert” knowledge or does it require the therapist to enter the “world” of the client?
10. What is the definition of “professionalism”? Does its idea of “professionalism” have more to do with the therapist’s presentation of self to colleagues and others or with the therapist’s presentation of self to the person(s) seeking their assistance?

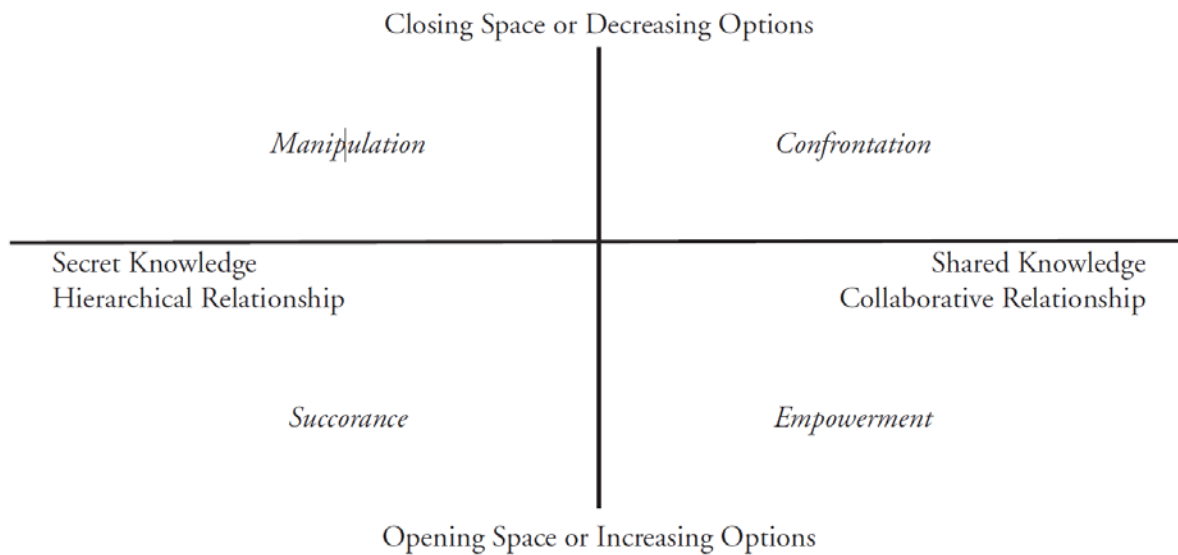
3 things impress about these questions (which were White’s and Epston’s). First, they are questions. Ethical guidelines are not rules or formulas, but rather questions that invite therapists to examine their practices and revise them in terms of the values and relationships that those practices bring forth. Very different from compliance to top-down rules.

Second, these ethics are about people and relationships.

Third, the questions focus largely on the *effects* of practices, so that what therapists do is not evaluated by how well their actions follow rules but by the actual effects of those actions on people’s lives.

ETHICAL POSTURES

Karl Tomm's grid of ethical postures as delineated by two continua (axes)



Karl Thomm --Schema used by therapist to constitute self in relation to people in consultation. Horizontal axis: way knowledge is shared in the change process. Left end is change based in totally secret (professional/diagnostic) language. The right end is change based in shared knowledge, so that all parties are informed and collaborating in the process.

Vertical axis is intended means through which the therapeutic change is to occur. Reducing options or closing space at the top to increasing options or opening space at the bottom. (considerating suicide, top of vertical axis; close options through hospitalization.)

All models of psychotherapy use all quadrants, but are based in one as primary. Each posture redispotes therapists to a different kind of relationship.

Tomm—primary, collaboration. Secondary, succorant.

Pays attention to how he sees people and describes them to himself. (i.e. learning, rather than uneducated). Will choose empowering methods when he doesn't label people. Makes posture in self to be attacted to questions that open space rather than questions that close space.

Four guidelines that he follows in empowering himself and others:

1. Grounding (being sensitive) – attending, listening carefully, sharing descriptions rather than keeping them private
2. Recursioning (being mindful) – listening to others listening and assuming that one is assuming
3. Coherencing (being congruent)—identifying inconsistencies, privileging emotional dynamics
4. Authenticating (being honest)—privileging direct experiences over explanations, performing one's own explanations, being open to see oneself through another's eyes

Each guideline has an “ing” – a degree of verbness {gerunds!!!}

Invents language to fit his postures when none exists in order to constitute self in relation to others to remind himself to make the ethical choices he wants to make.

ASSUMPTIONS ABOUT PEOPLE AND THERAPY

Atmosphere of curiosity, openness and respect. James and Melissa Griffith

A student: “What originally drew me to seek supervision with you was wanting to better connect with my clients as I had seen you do, but I was so intent on organizing my next question that I didn’t even flinch when the father revealed he had been diagnosed with cancer. That is not like me.”

The Griffiths decided they had not sufficiently emphasized relationships and emotional postures in their teaching. Revised their class so the first 10 weeks out of 30 were spent developing skills in creating a therapeutic relationship, and didn’t teach specific procedures or questions until after that.

Stress attitudes and beliefs that are conducive to the curious, open and respectful atmosphere they desire in therapeutic conversations. The language and assumptions that we choose will contribute to the co-creation of particular emotional postures in the therapy room. {or sanctuary or session room or presbytery}.

Griffith’s Assumptions:

- These family members and I share more similarities than differences as human beings
- Family members are ordinary people leading everyday lives who unfortunately have encountered unusual and difficult life experiences.
- When a person or a family with a problem requests psychotherapy, it is because they are struggling with a dilemma for which the kind of conversation needed for its resolution cannot occur.
- Persons and families always possess more lived experience as a resource than can be contained by the available narratives of the problem.
- Persons and family members in their deepest desires do not wish to harm themselves or others.
- I cannot understand the meaning of the language the person uses until we talk together about it.
- Change is always possible.
- A person or a family with a problem wishes to be free of the problem.
- I cannot know for sure what actions family members need to take for the problem to be resolved.

THE ROLE OF COMMUNITY

Important to have experiences of belonging and being accountable to communities that support power-with, collaborative relationships, rather than power-over expert relationships.

When communities of accountability privilege these ethics, it constitutes the selves of those who belong along these norms. The ethics that are being privileged, in turn, attract members to the community. People hunger for ethics that separate people from problems and don't use power as top-down.

ETHICS IN PRACTICE

Therapeutic practices are not prescriptions that must be adhered to. Rather they are ways of practicing attitudes. Some practices:

Situating Ourselves

Clearly and publicly identifying aspects of our own experience, imagination and intentions that guide our work. Enter therapeutic relationships as fallible human beings rather than as experts.

Transparency – situating one's self in the conversation while not dominating.

Debriefing and deconstructing conversations after they occur with a reflecting team, and with the family members –can ask how therapist experienced the conversation and made decisions.

Therapist transparency offers a way for us to practice horizontal, collaborative relationships (or at least to begin to flatten the hierarchy and to live in the posture of intention to do so.)

Listening and Asking Questions

At one point in our work we would structure interviews with particular, goal-oriented questions. Our rationale was that if we just allowed people to talk, they would become immersed in their problems, which isn't helpful. Now we begin by listening deconstructively to people's stories. Listen to understand their local culture and their particular dilemmas, while at the same time opening at least a little space in the problem-saturated stories. Instead of inviting them to become further immersed and isolated in their problems, we seek to *join them* in their experience of the world. Initial listening sets an ethical tone in which we commit to joining people in their struggles.

In our interactions, we seek to ask questions rather than to interpret, instruct, or more directly intervene. For reasons having to do with ethics. First, although questions are not neutral, they are more open-ended than statements. People can choose how to respond to a question, and when we genuinely listen to and value people's responses, their ideas, and not ours, stay at the center of therapy.

For the therapist to resist declarative language and to stay in a questioning and speculative mode...acts as a counterweight to the inherent properties of language that represent reality without the humility of understanding our not-knowing. Reconfigures hierarchy and the idea of the therapist as a top-down expert. Continuing to ask questions overturns this perception by the person who wants to place the therapist in this position.

How people's answers to questions are received is very important. In this we are interested and often delighted when people come up with expansive answers in which they recount events and tell stories.

Particularly if the stories represent preferred paths in their lives. In our own work have moved to thinking about ourselves as audience and co-authors.

Asking Preference questions: is this what you want to be talking about? Is it okay if I ask about this?

Asking about effects: Has this been helpful? How is it helpful? What difference is this making that you find useful? Or not useful?

Accountability Practices

Problem that is built in is that therapists are in a privileged position in the context of therapy, particularly when working with people from marginalized cultures. Where to be in an expert position reinforces cultural dominance. Want to avoid replicating the oppression that contributes to problematic narratives. Can easily and mistakenly assume people are part of our dominant culture (like assuming they have a car to drive to an appointment).

Can respond by committing to scrutinizing own work and as assumptions become apparent stop imposing them on others. Can intentionally raise the issue of false assumptions with all the people who come to see us, letting them know we take responsibility for any misunderstandings that occur.

People from dominated cultures can be invited to caucus – so individual people can be heard as members of a collective, which may be vital to their willingness to speak out in situations where they are outnumbered or in positions of low status. {both the Kathy Shellys and the pastors/congregations who are leaving and feel marginalized. How to let both be caucuses?? Hear each other? Can they? Would they?}

Accountability is primarily concerned with addressing injustice. It provides members of the dominant group with the information necessary for them to stand against the oppressive practices implicit in their own culture, of which they will often be totally unaware. (McLean)

Partnership accountability is the name for these practices, which are so different from the hierarchical practices so often associated with accountability.

Externalizing Conversations

Every time we engage in an externalizing conversation with someone, we practice seeing them as separate from and in a relationship with the problem. Practice has a snowballing effect. To frame an externalizing question, must see the problem as a separate entity. This perception alerts to new areas of inquiry, which sharpen perception of the problem as separate from the person. At the same time, offer the person a view of themselves that is not obscured by the problem.

Lets us be in a collaborative relationship with the person against the problem. Acknowledge their expertise and follow their lead.

When someone sees the problem as separate from themselves, they can see the possibility of resisting, protesting, or renegotiating the relationship. When people see themselves a problematic, they often

feel helpless to do anything about their plight. There is little room to get free of a problem when the problem is oneself.

Reflecting Practices

By opening space, and sharing knowledge ... coming out from behind the mirror.....reflecting teams support “empowerment.”

The purpose is to share power among all the participants in therapy.

Counter-practice in that it turns the dominant story of who should be doing what on its head.

There is nothing as effective as public reflection in training therapists to think and talk in respectful, non pathologizing terms about the people they work with. If our words are not respectful, our thoughts are not respectful.

Years of this work has shaped us. We like to think that we are more respectful than we used to be. Nowadays, even when the people we are working with aren't actually present, we strive to talk, think, and act as if they were. This, to us, is a central practice in constituting the kinds of relationships that bring forth our preferred ways of being.

Relationship Practices That Counteract Hierarchy

When we situate ourselves, we do so in part so that people will view us as particular people rather than as generic professionals. When we listen and behave in ways that are collaborative, we counteract the hierarchy implied by our professional position. Reflecting practices and accountability practices are both anti-practices that intentionally invert the dominant discourse about whose voice is most important and powerful in the relationship.

Can enter into co-research projects with people. Document and circulate their knowledge. Pay them for consultations and working in their areas of expertise.

In a very real sense, all narrative therapy is co-research.

Acknowledging the Effects of Relationships on Us

Every day that we go to work, people entrust us with stories of heartfelt pain, life-and-death struggle, and finding the courage to fight back. What an honor it is to be let in, not just on another's life, but as a partner in another's struggle.

We tell people about their effects on us. When we hear people's stories of pain and injustice, we cry with them. And when they recognize that self-hatred or despair is not them, but a problem that had become internalized, we rejoice. Knowing that we can be such teams, and that we can have such depth in our relationships makes work and life very rich, indeed.

Point of View Anecdote (which will preach)

We have a colleague who has more referrals than she can see. She sometimes asks us if we have time to see a person or family who has been referred to her. We have discovered that, if we are very interested in working with the people she describes, although she originally set out to refer them, by the end of the conversation she decides to see them herself. The way we make sense of this experience is that she has entered our point of view. If we are interested or excited about working with the particular family or person, she begins to see the individuals involved as we do, to notice what is interesting or exciting to us about them. Even though she is short on time, she does not want to lose the opportunity.

Time constraints, or her perception of them, blind her to what could be interesting.

People outside of the story are more free to make different meaning of the events she experiences.

Sermon use: Noticing of Lydia (swapping in for Emily)

What Lydia notices. Color purple. Noticing what God notices ... God noticing what is so good that others will be excited to notice as well. Lydia notices like that. (think it pisses God off when we don't notice the color purple.) Lydia notices, is how her business developed. But she notices new reality.