

Extract from **‘The narrative metaphor in family therapy an interview with Michael White’**

What were some of the possibilities that this story or narrative metaphor opened up in your therapeutic work?

When people consult therapists they tell stories. People don't come along and sit there and say 'depression'. Rather, they say, 'I've been feeling depressed lately and it's something that has been getting worse. If I think back over the last three or four years I can pinpoint some events which have contributed to this. Let me tell you about them ...' People are pretty specific about how these events of their lives are linked to each other in sequence. They are also very specific about time. A couple might say: 'So, this brings us up to three months ago. Then we had another crisis in our relationship, and that was back in June or May. Actually it was early June. Now it is September and let us tell you where we are at now in our relationship.' The narrative metaphor encouraged me to pay more careful attention to this temporal dimension of people's lives, and to the part that this accounting of events played in their developing experience of the problems they were seeking consultation over. The stories that people tell about their lives are also shaped by particular themes – themes of loss, themes of tragedy, and so on. These themes have a historical trajectory and are engaging of many of the figures of people's histories. People's orientations to what they discern to be the problems of their lives are significantly influenced by these themes. Observations of this sort that are informed by the narrative metaphor made it possible for me to think more broadly about the problems that families were bringing to therapy, and, in response to this, I entered into more significant explorations of the various elements of narrative. At this time I also began to think through how I might be more effective in engaging people in conversations that would identify and give meaning to some of the more neglected events of their lives, and that would take these events into alternative storylines that would open up gaps in their otherwise problem-saturated accounts of their lives. Engaging with the narrative metaphor in the development of therapeutic practice invites us to think about how can we encourage people to do what they routinely do – to place the events of their lives into storylines – but in relation to some of the more neglected events of their lives. This opens possibilities for the further development of therapeutic practices that are more de-centring of the therapist

and centring of the meaning-making skills of people who consult us. This has been one of the big attractions for me about the narrative metaphor.

Are there any other things that attracted you to the narrative metaphor?

I often think about how there are many parallels between effective therapeutic skills and skills of literary merit. Good writers have a way of actively engaging the lived experience and the imagination of the reader, and of inviting him/her into new territories of life. There is something about the structure of the text in well formed stories that is exercising of the reader. The plot line is not fully spelt out, and the reader has to fill many gaps in this plot line to stay engaged with the text. In well formed texts, these gaps are not so large as to frustrate and exhaust the reader, and they are not so small as to bore the reader. Not only does the reading of these texts of literary merit exercise the reader, but stretches them as well. There are other gaps as well that are set into a well formed text. Good writers encourage readers to reach their own conclusions about the motives of different characters in the story, and about their pre-dispositions, their intentions, their attributes and traits, and so on. This triggers presupposition, which engages the reader very dramatically with the text. As a therapist, I believe I have a somewhat similar task. Within therapeutic conversations I see it as my task to build a scaffolding, through my questions, that is exercising and stretching of the families that consult me, and that make it possible for them to step into some of the less explored territories of their life.

Can you perhaps offer an example of how this takes place in a therapeutic conversation, of the ways in which you scaffold therapeutic conversations?

I might be meeting with a family that is struggling with a problem which is considered to be chronic and intractable. Having explored some of the effects that this problem is having on the lives of the family members and on their relationships with each other, I invariably discover that family members have already initiated steps that might not have been predicted and that are outside of the problem-saturated territories of their lives. At this point I usually find myself thinking about the sorts of questions that might assist family members to attribute significance to these steps – that would create the conditions that would make it possible for family members to load these events with meaning. I'd ask questions like, 'Does this fit with what ADHD had planned for James' life? Or does it

represent some other development? What do you think James? Were you doing what ADHD was telling you to do, or was this something else? Let's look at what ADHD has been up to in your life, and see if what you did here fits with that.' When we discover that we can't fit this or that event into the dominant storyline, then family members can be encouraged to assign these events alternative meanings. Further questions can provide family members with assistance in this. I might say, 'If we were to give a name to these steps, if these steps are to do with another theme in your lives, one that is distinct from the theme associated with the problem, what would we call it? What possibilities does this other theme potentially bring to your lives and relationships? Where do you stand on this development? For example, how is this for you, and how do you feel about it?' Invariably family members judge such steps to be positive developments, and I can then inquire as to why they would judge them so. This inquiry provides family members with an opportunity to speak about purposes that they have for their lives that they have rarely, if ever, given expression to before. In response to extended conversations about these purposes, family members often for the first time name what it is that is associated with these purposes – specific dreams, hopes, aspirations, longings, pledges, visions and so on. The questions that shape this inquiry all contribute to the development of possibilities for family members to load these steps with significance. Once done, I am then interested in hearing about how family members prepared the way for these steps: 'What were the foundations that made these steps possible? What was it that went before these steps, and that prepared the way for them? I guess this didn't come out of the blue, so would it be okay if we had a conversation about what prepared the way for it?' And so on. We might then continue to reflect on these steps and on what they speak to about the purposes, intentions, hopes, values, and personal qualities of family members.