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Editorial

Dear Reader,

Welcome to this special issue on experiences of war, moral injury and narrative repair.

It's a collection that spans many different contexts and realms of suffering.

Part I focuses on the experiences of women and children in war and crisis.

It begins with a paper by Adelite Mukamana from Rwanda. Adelite is a psychologist and survivor of the 1994 genocide against the Tutsi and worked with Ibuka, the national genocide survivor organisation for many years. In this paper, Adelite conveys the double-storied testimonies of young people who were born out of rape during the genocide. It is a powerful and poignant paper that explores the legacies of sexual violence during armed conflict for both women and children. It is followed by a reflection from feminist journalist Jaya Luintel who uses narrative practices with her work with Justice Reporters in Nepal. These are women survivors of gender and sexual violence during the civil conflict in Nepal and family members of those who were killed, disappeared, injured, made disabled and displaced who now document the stories and skills of other women survivors. Jaya describes the significance and possibilities that Adelite's work has sparked for her in relation to a Nepalese context. A second reflection on Adelite's paper is offered by Jewish narrative therapist Ruth Pluznick whose family members were killed during the Holocaust.

Closing this first section is a moving paper by Fariba Ahmadi, an Afghan narrative practitioner who describes the ways she has been responding to Afghan children in Australia in the aftermath of the Taliban claiming Afghanistan. Her skilful use of narrative practice has involved consulting with children, documenting their stories and skills and knowledge and share these with others.



Editorial *continued*

Part II of this special issue focuses on the concept of moral injury and the possibilities of narrative repair and collective action. It begins with a rigorous paper by David Denborough that is a response to three recent events in relation to the Australian military. First, the Brereton Report was launched alerting all Australians to allegations of war crimes committed by our troops in Afghanistan. Second, Australian and US forces left Afghanistan and the world witnessed the Taliban reclaiming control of the country and desperate Afghans seeking safety. And third, a Royal Commission was announced in relation to Defence and Veteran suicide. Each of these events represent stories of suffering for so many families both Afghan and Australian. This paper seeks to offer practical ways forward for responding to the anguish produced in contexts of war: the anguish of military veterans (and their families), interpreters, human rights workers and civilians. This paper is then followed by three reflections about responding to experiences of war. The first by Victoria Grieve-Williams who is Warraimaay (Aboriginal Australian) and an historian. The second by Tyler Boudreau who is a former Marine and now adjunct professor at the Smith College School of Social Work. The third by military chaplain Zachary Moon.

The first paper of Part III is by Lauren Caulfield about the Policing Family Violence Storytelling Project – a narrative practice innovation at the nexus of intimate partner violence and state-sanctioned violence, where the harms of family violence intersect with, and are amplified by, the harms of policing. The second, by Kwong Ka Fai, conveys accounts of one-to-one and community work with people affected by the recent violence and political unrest in Hong Kong.

This collection of papers represents responses to profound hardships in many different contexts. We will very much look forward to hearing your responses.

Warm regards,
Cheryl White



Ways of living and survival by children born out of rape during genocide

by Adelite Mukamana



Adelite Mukamana has 16 years' experience working in trauma management and healing services in Rwanda. As a clinical psychologist, she works with individuals and groups, and is responsible for supervision and strengthening staff capacity. Adelite is a former head of psychotherapy and healing at Never Again Rwanda and is currently senior psychologist at Prison Fellowship. She is also a regular consultant at Rwanda Biomedical Centre during the commemoration period and offers training and workshops. Adelite holds a master's degree in clinical psychology and therapeutics and has been trained in narrative therapy. She can be contacted c/o madelite06@gmail.com

Abstract

During the Rwandan genocide in 1994, rape was used systematically as a weapon of war and a means of genocide. Many children were born as a result. Now young adults, these children have faced significant stigma and ongoing hardships. Using a narrative framework developed for receiving and documenting testimonies of trauma, this paper presents the stories of five children born of rape following the genocide against the Tutsi in Rwanda. It documents some of the ongoing effects of the genocide, the hardships these young people have faced, both within their families and in the broader society, how they have survived, and their hopes and commitments for the future.

Key words: *Rwanda; trauma; collective testimony; rape; genocide; war children; narrative practice*

Background

While working with Ibuka, an organisation that supported and advocated for survivors of the Rwandan genocide, I met many women who had been raped during the genocide against the Tutsi, and who had given birth to children as a result. We were supporting these mothers during Gacaca¹ community court processes, to help them to testify and to overcome the hardship moments. Later we then made it possible for these women to meet in groups together.

Some women were living with shame and regret and thinking they should have died during the genocide. And others were living with ambivalence towards their children who were sometimes their own remaining living family members.

During group sessions with these women, many talked about their relationships with their children, their relationships with the rest of their families, and their children's relationships with their mothers' families and others. One of the things that these women frequently came back to was how difficult it was to live with children who were a constant reminder of traumatising experiences.

At least in these groups, however, there was a chance for the women to speak and for shame not to silence them. We found some spaces for them to speak about their experience and to feel recognised, to speak about grief and sorrow and to find ways of overcoming guilt and shame. This was a form of 'social' justice.

In the work I am doing now, more than twenty-five years since the genocide, I have come to have the opportunity to meet children who had been born from rape. I have tried to understand how they lived with the shame, guilt and identity conflicts that had resulted from things they didn't participate in or choose. Many of these children were experiencing problems of identity. They were not considered to be victims of the genocide against the Tutsi, and therefore didn't benefit from survivors' funds for expenses such as school fees, even though their mothers were so poor that they could not afford school fees or other social basics.

These children were often not loved in their mothers' families. They were treated as children of killers: *interahamwe*. Some were classified as children of *ibitero* (loosely meaning attack) because their mothers were raped by so many men that the children could not know the identity of their father. Children who happened to be born after a single rape were classified as

ababohojwe (meaning taken hostage) because in many cases their mothers had been raped by a man who had taken them hostage. Some so-called *ababohojwe* young people had come to know their fathers, some of whom had been imprisoned following the testimony of their mothers. When a child wanted to get to know their father better and visit him in prison, this could sometimes be a source of conflict between the child and their mother.

These children have now reached the age of adulthood. In my work with them, I wanted to apply a narrative practice lens to better understand the continuing effects of genocide on children born out of rape and to learn about their ways of living under these difficulties: What sustains children born out of rape as they live and survive in complex identity situations? How have they responded to difficulties in their relationships with their mothers and other family members? How might healing be fostered? To explore these questions, I arranged to meet with five young people in their early twenties, four female and one male, whose mothers had given birth to them after being raped during the genocide against the Tutsi.

Inviting participants

I felt that a group discussion would help me elicit rich information in a short time. I also thought that being together would help the young people feel empowered to speak their testimonies while feeling supported by story mates.

Two of the young people who agreed to meet with me were referred to me by an employee of the association of genocide widows, AVEGA. The other three were referred to me by an employee of Sevota, an organisation that cares for women who were raped during the genocide. I initially invited each of the young people to meet with me individually at my office. I introduced myself, explained why I had invited them, and asked them if they would be willing to share their history in a group interview with other young people who shared the same experience. Each of them accepted and I organised a focus group discussion.

Our focus group took place at my office where I receive people who need psychotherapy. It is a safe, private place, free of noise. When we met together, I thanked them for agreeing to have this conversation with me and reintroduced the idea that I was requesting their

testimonies to help others who had been through similar experiences. I said that our conversation would help me to understand the hardships they had been through and how they had found ways to survive. I invited everyone's response to this proposal, and all affirmed that they were willing to participate in a group interview. With this assent, I explained that their participation would be anonymous, and that if anyone had any questions about the conversation, I was there for them.

I explained that during the conversation, if anyone felt that they were not okay, they could pause for a moment and decide whether or not to continue. If there were any questions they did not wish to answer, it was completely okay to not respond. The young people were invited to take a break or even stop the process entirely at any time. I assured them of my support if any of them didn't feel okay after the conversation. I explained that because we are many, our interview might take some time, and I suggested that we plan a 10-minute break after an hour and a half, so that those who needed to go for a short call or drink water could do so. They agreed to this suggestion. I added that I would regularly check in with them about how they were experiencing the interview and whether it would be good to pause for a moment or to continue.

Focus group process

Using the framework for receiving and documenting testimonies of trauma developed by David Denborough (2005), I had prepared questions to guide the interviews. Here I will share the questions I asked and some of the responses.

Can you share with me some of your hopes in giving this testimony today? Why have you decided to do this?

When I heard that I was going to testify about what happened to my mother and devastated my life, I immediately felt happy that there were people who are still interested to know about our history. It is because of testimonies that I was able to get help from Sevota to study. When people don't know what happened to you, they cannot help you accordingly. I don't know what would have happened to me if people hadn't come to my mother to ask because she was very poor and maybe I wouldn't have had the opportunity I have now to study.
(Kaliza², female participant)

To testify is for me a great contribution to the fight against genocide ideology. There are people who deny it, but when we testify, people really know what happened and it helps to put in place a plan so that it will never happen again and to help the survivors heal the wounds left behind by genocide. (Cyusa, male participant)

The reason why I testify is to make me feel released because my mother is a person who never wants us to talk about genocide. I feel like I need to know what happened but it's impossible. I once asked her, and she fell into a coma and I was immediately scared. The fact that there are people here who share the same problem I feel helps me to feel not alone.
(Sangwa, female participant)

I am determined to testify because I feel it will help others like us to understand that they are not alone, and I hope it may help them to take steps to overcome their sorrow.
(Uwera, female participant)

Testimony helps me understand that I cannot change what happened, but life must continue and I strive for a better future.
(Benita, female participant)

What does this say about what is important to you, about what you care about and value in life?

I feel the most important thing in life is not to give up. (Sangwa)

I think the most important thing in life is to know that your history should not be the definition of your life. It is up to us to choose the right life even if problems are inevitable. (Kaliza)

The thing I value in life is to make sure that what happened during the genocide doesn't happen again. I will give my life if necessary. (Cyusa)

I feel like I have to strive for a better life and not be a hostage of my history. (Benita)

Have these things always been important to you? What is the history of this?

I grew up and found my mother to be isolated, a person who never had any friends, and even no-one in her family to care about her. One day

my uncle told me not to cut corn on our farm because it was not on my father's farm. I learnt that my father had raped my mother during the genocide against the Tutsi. It saddens me that I always have to fight against its denial. (Cyusa)

I grew up and found out that my mother had a conflict with her family members because she refused to have an abortion after she was raped during the genocide. When I grew, I began to feel that I had to overcome my history, succeed my studies and strive for a better life. (Kaliza)

I grew up and found myself living with my mother alone. I came to know that she was raped, but she changed my birth certificate so that I would not know my history because she told me that my father died when I was kid. Unfortunately, I ended up knowing my history. Later, she told me that she did it to protect me. At first, I felt that this story was unbearable, but lately I've felt like it's no longer harming me, even though my mother is always in trouble with trauma. (Benita)

Can you tell us about the trauma that you were subject to? Did these abuses take different forms?

When I grew up, I found out that my mother was not in good relationship with her brother because he asked her to have an abortion as soon as she found out that she had become pregnant by rape. My mother refused and the conflict started from there. When I was born, my uncle rejected me. My mother was not able to show me love, and whatever happened to her, she would always say that all her troubles were because of me. I was always alone, and I didn't know what to do. Now I understand that she was very traumatised by what happened to her during genocide and after. (Kaliza)

I found out that my father was an *interahamwe* when my uncle told me that I was not theirs and that I was a child of the enemy. My mother didn't have the strength to protect me, and every time I saw people come to trial in the gacaca or come to TIG³, I thought that my father might be there among those people, even though I didn't know him. I felt depressed. I felt like no-one loved me and I felt like I didn't love anyone. (Cyusa)

The first trauma I have is not knowing my history. My mother is always so upset that I have nothing to ask her. I always wonder who I am. (Sangwa)

My mother was raped by the man who killed her first husband. So, I have siblings and they hate me because my father killed theirs. They used to tell me that I was *ikimanyi*.⁴ And when it comes to the property, they cannot even give me a single square metre of land. I look after myself in my life and my mother seems to be on their side. I am just shunned. (Uwera)

The first question one faces is wondering who you are. When I see members of the families of those involved in the genocide, I wonder if you can see that they are my relatives. I feel afraid of marrying a Rwandan because I don't know who I'm related to. (Benita)

During the time when you were being subjected to this injustice, how did you try to endure this? What did you try to think about? Were there any memories you tried to hold on to? Any dreams? What sustained you through these most awful times?

My mother loved me even though she always said that her problems were caused by me. She refused to have an abortion. I decided to help her in her battle. It is during the commemoration period that she becomes more and more stressed. I am always there to stay close, and when she needs to go to the doctor, I help her get there. I think I cannot change the fact that I have come from a father who did wrong acts, but my mother did her best to let me live. She put me through school and cared for me in everything, and that gives me the energy to thrive and achieve something good in my life. (Kaliza)

After I found it too difficult to live with my uncle, I got a chance to succeed in my exams and go to high school. I stayed there during my holidays. I had a dream that when I graduated, I would go and help the children who needed it and I would help my mother get out of her home and find a place to live in peace. When I graduated, the first thing I did was to look for a place where my mother could live. And now, there are also some children that I help with small things like getting books and buying for them health insurance. (Cyusa)

The thing that makes me feel great is to help my mother because she is always in a state of severe depression that makes it impossible for

her to do anything. She was a good parent to me and my father betrayed her so I have a responsibility to take care of her. Although I don't know the history of exactly what happened to her, I feel like I will continue to help her and maybe one day she will have the strength to tell me. (Sangwa)

I have a dream of working hard and getting to where I want to be. My siblings look at me as if I am useless, but now I am working hard and I will achieve my goal. I feel like I want them to see that what I really need is not things, because I have the strength and I can buy things on my own, but what I need is for them to treat me like their sister instead of seeing me as their enemy. (Uwera)

I got a chance because my mother cared for me. Even though she tried to hide my history, she loved me so much. I am the only child she has and that gives me the strength to feel that I am the one to take care of her. She has depression and I live close to her, and now that I have graduated, even though I don't have a permanent job, when I get jobs, I help her. (Benita)

Were there different ways that you tried to endure the different forms of trauma?

When you are a kid, it is difficult because you do not know why you are treated in such a manner. When I grew up, I heard my history and I started to understand the reasons for my mistreatment. I started to think about how to deal with it. When I finished primary school, I said that I had to study hard and come out as a great person so that people will not only see me as an *interahamwe* child, but also as a capable girl. I have been helped by Sevota, an association that helps children born out of rape, even though the problem will be always there in our lives. After my secondary school, I fell in love with a boy who made me pregnant, and I felt it would be okay. But while we were preparing to get married, he learnt that I was not a 'survivor', but instead that I was born out of rape. He immediately declined the marriage and told me that he could not live with an '*interahamwe* girl'. Now I am raising the child alone. That hurt my mother again because her older brother, my uncle, said that he was not surprised that this

happened to me. He said nothing good can come from *interahamwe* and reiterated that he had advised her to abort and she had refused and now the girl from *interahamwe* had given birth to 'a bastard'. At that moment, you feel like history repeats itself. But it didn't discourage me. Now I'm back at college and I will be graduating this year and I feel like I have a goal to go as far as possible. (Kaliza)

One of the things that helped me was to go to school and find a place to live. Another thing that helped me was that my mother loved me, even though she didn't have much ability to get me out of the problems I was having. When I was in school, I went to the AERG family⁵, which made me feel like I had another family of people who cared about me. Compassion International also helped me pay for school so that I could study without focusing on my sorrow. (Cyusa)

One of the things that helped me was that my mother loved me and that she had been looking for NGOs to help me, especially in my studies. Since children born out of rape are not supported by FARG, my mother searched for other ways and got help from Sevota, which paid for my schooling. Another thing Sevota has helped us with is to feel that we are children like others. Sevota organises meetings with other children born out of rape and we feel that we are not alone. (Sangwa)

When I grew up and found that my siblings didn't love me, I struggled a lot and found myself working hard to survive in everything I did. I was studying hard to see if I could succeed, but after my primary studies I didn't manage to continue and after a while I got a man and went to live with him. Now I'm trading and I feel it's going well. It is something that always gives me courage to continue and one day I will reach my goal of being self-sufficient. (Uwera)

The first person who has helped me is my mother because she always strives for a better life. She has not kept secrets from me since she confessed to me about her rape during the genocide even though she didn't want people to know about it because she thought that they would stigmatise me. She empowers me a lot and I feel capable and confident that I will achieve more. (Benita)

Why is it important to you for other people to know about this?

It is good that people are aware of the history of our parents and the impact it has had on others so that even those who were afraid may be able to dare to make their testimonies public. Even now, if our parents did not give evidence, we would not have received help to go to school. AVEGA has also been very helpful to our parents in treating their trauma, so you feel that if they didn't know about their problem, they wouldn't have been helped. (Kaliza)

Testimony is good because it is one of the proofs that the genocide against the Tutsi took place. So that helps us know how to fight and belittle those who deny it. (Benita)

It's good that people know the testimonies of others because it makes one feel not alone. Now even though I don't know my history well, when I hear the testimonies of others, I try to understand how serious it is and why it might be difficult for my mother to tell me. (Sangwa)

Testimony helps one not to blame oneself in place of others. I used to walk around feeling ashamed as if I had been involved in the genocide because of my father's acts. But now I know that I have nothing to do with it because I have seen people tell me about it and no-one is judging me, but they have compassion for me. Even at AERG I found that people listened to me and cared for me more than I thought they would. (Cyusa)

What were some of the most difficult effects for you? Why were these the most difficult?

The big challenge in my life was when my fiancé rejected me because of my history. That's hard to bear because you can't escape it – it's your history and even though you were not involved in the history, it will be always there. (Kaliza)

The first impact on a person is that they always look at you in the image of an *interahamwe* child. So that is very difficult because you are also a victim of what your so-called father did and yet people do not look at you as a victim and look at you as if you are also a perpetrator. (Cyusa)

The first thing that bothered me was hearing people saying that we didn't survive and only our mothers are survivors. You always wonder, but who am I? (Sangwa)

Accepting that you are born with people who are cared for as genocide orphans, who have their school fees paid for by FARG, and you – you are called an *interahamwe* child. It is just unbearable. I didn't manage to go to secondary school because of the school fees, but my siblings were supported by FARG and got to go. Sometimes I think that in itself can create conflict and hatred because you feel like you did something wrong when you are just a human being like others. (Uwera)

Are there any ongoing effects of this trauma in your life?

Since the betrayal of my fiancé, I don't trust any man. And I didn't ever find something good that has come from a man. My uncle hates me because my mother refused to kill me when she was pregnant with me, my father is a murderer, and someone whom I love very much didn't want to marry me just because I was born out of rape. That is just beyond my understanding. (Kaliza)

The first problem I faced was seeing how society behaved towards me. There are people who judge you as if you had chosen to be born out of rape. The problem is very much in believing that someone can love you as you are. Now I'm a young man of age for dating, but I'm scared. I think I will finally find someone who has the same history as me. (Cyusa)

I still wonder who I am, and I don't get the answer. I always feel insecure. (Sangwa)

I always feel unsecure and suspicious. I cannot trust anyone, and I feel like I don't know who I am. (Benita)

At the beginning of this interview, you spoke about those things that are important to you in your life. How have you been able to keep in touch with these values, these hopes for your life, despite the abuses that you have been subjected to?

I like to listen to others a lot. Every person, if you listen to them, is comforting. (Kaliza)

I like to help others because I am where I am because there are those who help me. (Cyusa)

I feel happy to help my mother because she also cares for me. When I have children, I will not hide anything from them because I have found it difficult not to know your history. (Sangwa)

What I've learnt is that there are things that no-one can change. What is important is to know how to deal with them in a good way. (Benita)

Have there been ways in which you have been able to reduce the effects of the trauma in your life, and if so, how have you done this?

One of the things that helps me in life is making friends. Some of the people we met in Sevota we could talk to and we felt supported. There were others we met at school who knew my history but loved me. Another thing that helped me a lot was wanting to have the strength to help my mother during moments of hardship like the commemoration period. I am in college and I am in my final year and I feel confident about the future. (Kaliza)

When I got to high school, I went to the AERG family and had friends to talk to, those who would help you when you had a problem. I had other opportunities – Compassion International paid schools fees for me so I felt much supported. I feel useful because there are some who I help and I like to talk to other young people in the cooperative that we are meeting in terms of development, and I tell them that it is up to them to set the direction for their lives no matter how they were born. (Cyusa)

Something that gives strength is helping my mother. I am there when she has a trauma episode or other illness. I am the one who helps her in the household chores and I have the physical and emotional strength to survive. (Sangwa)

The thing that gives me strength in life is the feeling that I will achieve something if I work hard. I am with my husband who loves me and that also gives me a lot of strength. I am now in business, and I see it going well. My children are learning, my husband is helping me in our development and I feel I have no big issues. (Uwera)

The first thing that gave me strength was my mother's love. (Benita)

Are these ways of reducing the effects of trauma newly developed? Or have they been around in your life for some time? What is their history?

New ways of reducing the effects of trauma include going into activities that connect me to others. I am now a gender representative at my college, so I often undertake training to help others. That boosts my confidence and the confidence of others in me. (Kaliza)

The way I try is to share the knowledge I have with others. When I meet with other young people in savings and loan groups, I help others to think about a project that can help us to improve our livelihoods. Some of us now raise small animals such as chickens, goats and pigs. I am the president of that group and many of them come to me for advice. I am proud of what members of our group have achieved so far. This helps to boost one's self-esteem and make one less vulnerable to history. (Cyusa)

A new way that has helped me is the church choir. I spend time with others praying and singing and I feel happy and forget about things that hurt me, and I feel that God is on my side. (Sangwa)

I am the president of the business association in our community. People trust me. And the fact that they chose me to be a leader as a woman is a testament to their belief in my ability. (Uwera)

I found new ways when I graduated. I make money that is helping me and my mother. Otherwise, it was difficult to satisfy basic needs because my mother was the only one who struggled to find work. Now we work together and find a way and we have the inner security. (Benita)

Have there been particular people who have made a difference? If so, what have they done or said that has been significant to you?

The transformation of my mother after the help she got from AVEGA and Sevota has allowed me to have a relationship with her even now. Even when I was in trouble, she supported me a lot.

I am still in school, and she is the one who is raising my child. That is the main reason for the change in my life. (Kaliza)

An important person who changed my life is my mother. She helped me to find someone to pay school fees and Compassion International accepted me because of her. This meant that I could study in high school. If I hadn't studied, I don't know where I would be now. The other people who have changed my life the most are the AERG community. I went to the AERG with hesitation because of the identity issue. But I found good people who accept me warmly and help me to endure. (Cyusa)

The first person I admired in life was my best friend who took me to the choir. It made me feel not lonely. Otherwise, I would go to the church and go home, but since I started going to the choir, I feel like I have siblings. If am sick, they visit me. When my mother gets sick, they visit me. Sometimes in the choir we have to buy new clothes but when I don't have money, they all come together to contribute for me. I have gained brothers and sisters who do not care about who you are. We are just brothers and sisters in Jesus Christ. (Sangwa)

The first person who brought about change in my life is my husband. He showed me that all people are not the same and he loves me and supports me in everything I do. He showed me that I have to trust myself before people can trust me. (Uwera)

The person with the most significance in my life so far is my mother. My mother did not abort me and even she was abused. My mother decided that instead of marrying a man who would not love me, she would remain alone with me. That gives me the strength to say that I should strive to live in better way. (Benita)

If someone else were to go through similar experiences to you, what suggestions would you offer them? What stories could you tell them that would convey some of the steps you have taken to reclaim your life from the effects of this trauma?

One thing I would say to someone who is going through a similar situation is that no matter what, one has the strength to deal with the bad things in life. Our choices alone define our future. (Kaliza)

One thing I would say to someone who is having a hard time is that in life, it's good to count on the help of others and to remember that not everyone is bad. You have to look around and you will find good people who you can trust. They will help you with a lot of things that you cannot achieve on your own. (Cyusa)

One thing I would advise people to do is to pray, because God answers and gives you peace of mind and gives you people to help you even if you are not aware. Prayer has helped me so much that I have not given up on my history. (Sangwa)

One thing I would advise someone who faces a problem like mine is not to accept being made to carry a history which is not theirs. The fact that one's parent has committed a sin does not make one a sinner. (Uwera)

Ending the interview

To conclude, I thanked each of the people who had participated in the interview. I said that their stories were full of skills that I had learnt a lot from. I explained how their testimonies would bring a change in my own life, my work and my way of seeing the world, and that I was sure they would also bring changes for those who will have a chance to read them, especially those who face the same problems. I acknowledged their strength and drew attention to the ways everyone had found ways through times of hardship and had developed confidence in a better future. I also invited them to contact me if they had any concerns or wanted to speak more after the interview.

When I look back and think of the women I worked with many years ago, I realise now that it was not only those women who suffered from rape during the genocide. The children who were born from rape have also suffered.

As a survivor of the genocide myself, it's not always easy to work in these realms. Some years ago, I only wished to work with other survivors. Now, however, I wish to work with anyone affected by the genocide – including those who perpetrated terrible harms.

When I think about future work, I would like to learn more and research more about how different groups continue to be affected by the events of genocide and

then take action on this research. I am also interested in reaching out to others abroad. I have recently been learning about the work of Jaya Luintel who is working with women survivors of sexual violence in Nepal (see Luintel, this issue). I hope there will be opportunities for international collaborations with other narrative practitioners.

Notes

- ¹ Rakiya Omaar (2007) explained why Gacaca processes were engaged:
[After the genocide] it was very apparent from the outset, that given the unprecedented level of popular participation in the killings in Rwanda, unprecedented in world history in terms of the percentages of people from the very old to the very young who participated, that it was never going to be possible to achieve justice using

the formal western justice system. If there was even an attempt to put the majority of detainees through the courts, let alone all those yet to be arrested, then they would die of old age in the prisons because the entire system would be overwhelmed. The formal court system was simply not a viable option. (2007, p. 54)

Gacaca community courts were therefore established as a method of transitional justice, designed to promote three imperatives (which were sometimes competing and conflicting): justice, truth and reconciliation. For more information see Omaar (2007)

- ² Pseudonyms are used throughout.
- ³ TIG is a program allowing people who have been found guilty of involvement in the genocide to serve part of their sentence through community service.
- ⁴ The word *ikimanyi* is pejorative because it's normally used in relation to animals; for example when a cow is inseminated, her mixed calf is called *ikimanyi*.
- ⁵ AERG (Association des Etudiants Et Éléves Rescapés Du Genocide) is an association of student survivors of the genocide.

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The Story Kitchen in Nepal:

Igniting and building the courage for justice

A response to Adelite Mukamana's 'Ways of living and survival by children born out of rape during genocide'

by Jaya Luintel



Jaya Luintel is a prominent, nationally acclaimed journalist and women's rights activist in Nepal. She is passionate about creating space for women, girls and people from marginalised and minority communities so that they can share and amplify their stories. For this, she co-founded The Story Kitchen, where she works with communities in Nepal to make them feel powerful through their own stories. Since 2015, she has been working with the women survivors of Nepal's 10-year-long armed conflict to create a safe space so that they can boost their confidence, get organised and make their voice collective to seek justice. Through this work she has trained women survivors of conflict-related sexual and gender-based violence in Nepal to become justice reporters and gather the stories of women who faced violence during armed conflict. Jaya carries a strong conviction that everyone has stories, and all stories matter. She can be contacted c/o jaya@thestorykitchen.org or www.thestorykitchen.org

Abstract

This paper is a response to Adelite Mukamana's (2021) paper 'Ways of living and survival by children born out of rape during genocide'. It draws connections between Mukamana's work in Rwanda and the work of The Story Kitchen in Nepal. In both these locations, narrative practitioners are applying the tools of collective narrative practice to ensure that women who have been subjected to sexual violence during armed conflict are not left with a single story or identity, to bring forth the hope in people's experiences of survival, and to support a collective voice for justice.

Key words: *Rwanda; Nepal; rape; sexual violence; gender-based violence; war; armed conflict; women; children; collective narrative practice*

When I read Adelite Mukamana's paper, my heart shattered at the idea of children being seen as 'of the enemy', of them not being loved and welcomed in their mothers' families. I saw the mothers as being so brave in choosing to bear and raise these children in the face of such opposition and with so little support. They resisted the idea that the children had created the problem. I say this not to glorify motherhood or to raise this choice over the choice not to continue with a pregnancy conceived through rape, but to acknowledge the impacts that the choice to raise these children had on the women's lives.

What really struck me in Adelite's paper was how the young people had found ways to support their mothers. I was surprised and humbled to see the strength of the bonds between mother and child, even where there had been so much trauma and stigma for the mothers and for their children. In response to Adelite's questions, the young people shared once-subordinated stories about a sense of shared identity with their mothers. There had been conflict between them too, it was clear. There was mutual hurt and blame. But this seemed to fade away as the stories developed, and Adelite asked the young people about their values and about who had been there to support them. When Adelite asked, 'Have there been particular people who have made a difference?', different stories emerged. We heard about young people and their mothers becoming each other's strength as well. The young people described how their mothers had given them courage. They had found harmony, love and shared identity. I had an image of them holding hands and supporting each other, understanding each other's feelings.

I found it really interesting that some of the mothers had chosen to tell their child the whole story of the rape and becoming a mother as a result, and to pass on those memories and share that trauma. The young people were able to acknowledge the suffering and hardship that their mothers had been subjected to, and could step into becoming allies and supporters of their mothers.

Adelite asked, 'Are there any ongoing effects of this trauma in your life?' Kaliza's response really stood out to me: 'this is just beyond my understanding'. Listening to the stories of these five young adults, and reflecting about the events that have taken place in Rwanda and in Nepal, they are indeed beyond understanding. How can people treat others as if they are not human? How can governments neglect children born as a result of rape as an act of genocide, as if it were their fault? I felt deeply connected to Kaliza's words, and could

imagine that I was sitting in the circle with this group of young people listening to their stories, seeing the sparks in their eyes and the sorrows reflected in their faces.

Rape during conflict in Rwanda and in Nepal

It has been valuable for me to hear about work that has gone further than we have yet travelled collectively in Nepal. It was very interesting that Adelite was engaging with children who had been born after rape. In Nepal, the existence of children born out of rape during armed conflict is not yet a subject of public conversation. I have worked with many women, and am yet to hear someone disclose that she bore a child after being raped during conflict. Women are not only afraid to talk about it, but they have been silenced by the family, society and the state. There has been little public recognition of women's experiences of rape and sexual violence during the Nepalese armed conflict, and it has been difficult for women to define a position from which to speak out as survivors of the conflict. The government has acknowledged those who were disappeared, injured or killed during the war, but the survivors of sexual violence, rape and torture are yet to gain wider recognition as conflict victims.

The situations in Nepal and Rwanda have important differences. The armed conflict in Nepal (1996–2006) was a political conflict between the then Communist party of Nepal (Maoist) and the then government. There is fear in both of our countries, but this operates in different ways. Sexual violence was used as a weapon against women in both Rwanda and Nepal. In Nepal, it was used both by the state and by the then rebellion. The state, which has the legal obligation and duty to respect, protect and fulfil the human rights of its citizens, was also involved in committing such crimes against women and girls during the armed conflict. While the rebellion demanded equality and justice, they were also involved in committing these crimes against women and girls during this period. The leaders of the conflicting parties who committed these crimes are now in positions of power in Nepal.

The conversations that have happened in Rwanda about the use of rape and sexual violence as weapons of war and genocide are yet to happen here. Nobody wants to talk about it. But people know what happened in their communities, and who was responsible.

When we visit communities to talk with people including human rights defenders, we find that they are aware of many cases of rape and sexual violence during armed conflict, but they say, let's not talk about it. It will destroy their homes, their families'. Women who speak out are seen as bringing about the destruction of their families. This is an additional blame and stigma they face.

Most of the women who were subjected to sexual violence during the armed conflict in Nepal are now married. Most have never talked to their husbands about what happened. Even those who are fighting for justice are doing so without the knowledge and support of their husbands or children, so there is additional hardship in maintaining this secrecy, and there are few spaces where their testimonies can be heard. Children born following the use of rape during the Nepalese armed conflict are still young; some would only be 15. These young people will not yet know what happened to their mothers. They will not yet have shared their stories.

The Story Kitchen

The Story Kitchen was started in 2012 to look at Nepalese history from women's perspectives because we realised that women's voices, their experiences, their perspectives and their contributions, had been silenced and were not documented in the history of Nepal. Along with other histories, we wanted to look into the 10 years of armed conflict from women's standpoints. In 2015, the Truth and Reconciliation Commission and Commission of Investigation on Enforced Disappeared Persons were established to investigate human rights violations that occurred during the Nepalese armed conflict. These commissions did not create safe spaces for women to speak about rape and sexual violence. Women's experiences were being silenced.

The Story Kitchen took a survivor-to-survivor approach, providing training to survivors who became 'justice reporters', gathering the stories of other women. We identified women survivors who had started speaking out. We equipped them with some basic skills in sensitive interview techniques and audio recording, and they started seeking out other women with stories like their own. We created safe spaces for women to share their stories and to listen to each other. The knowledges the women had developed were centred. We focused on how they responded to the hardships they had endured and on how they had survived. When we started out, we were not aware of narrative practice,

but from 2017 we have been applying collective narrative practice approaches to our gathering of testimonies.

We use audio recording, radio programs, story workshops and digital storytelling to make these women's stories more widely known. In the last seven years, justice reporters have recorded the stories of more than 1000 women. I have personally met with nearly 400 women in our story workshops and digital storytelling workshops. In the past seven years, I have seen them getting organised, presenting a collective voice for justice, forming a national network of women survivors of armed conflict (the Conflict Victim Women National Network) and demanding that the state become accountable for the human rights violations committed during armed conflict.

The Story Kitchen organises three- to four-day-long residential programs which we call story workshops, in which women gather in a circle to talk about their experiences, and link these to the struggles of women in other contexts, including other instances when rape has been used as a weapon of war, and how women have resisted this and continue to struggle for recognition of its effects. In this way, we are on a quest to redefine justice, not as it is understood by the state or its legal frameworks, but what it means to the women. Central to this sense of justice is realising that what happened was not their fault. When the women gain space from guilt, they become leaders and supporters of others, and when they gather courage to break the silence, they also shift the blame and shame to the perpetrators who are protected by the state or the system.

Links with Adelite's work

When I read about the processes Adelite had been using in her work, I recognised these as being just like what we do in Nepal. Not only because of the questions asked or the act of eliciting people's experiences, but because of the creation of a safe space in which people can come together and feel empowered by each other's stories. Enabling that feeling of not being alone is the most important part of our work, both with the people in the room, and with others who hear their stories. That 'I am not alone' feeling is the key to our work at The Story Kitchen.

When Adelite asked about her participants' hopes in sharing their testimonies, Kaliza replied that she was happy that people were still interested in their stories,

their history. This is what I have heard from women who have shared their stories through The Story Kitchen. One woman said, 'I was at home, doing my household work, taking the cattle out, and I got a phone call inviting me to come to this Story Workshop, and I hadn't known that there were still some people who are interested to know what happened to us, how we survived and how our life is. That is why I have come'. After the program, one elderly woman said, 'Today, my voice is heard by the earth and my voice is heard from the sky'. She had never previously been asked about what had happened to her. In Nepal and in Rwanda, knowing that people are interested in women's stories and their lives is a source of hope.

Adelite's contribution

It gave me strength to read about Adelite's work, and to know that I am not alone in this journey of creating safe space for women and girls so that they can make their voice collective for justice. There are others around the world working with a similar kind of passion, bringing people together and helping them find hope in their own lives and values.

Using a narrative approach, Adelite brought forth multiple stories about how people are responding to hardship and supporting each other. I was fascinated to see the way Adelite applied the tools of collective narrative practice to ensure that people were not left with a single story or identity, and how she was able to bring forth the hope in people's own experiences.

I was left hoping that the mothers of Adelite's young participants might come to richly understand how much

they are valued by their children. What difference might it make for women whose children have been a 'constant reminder of traumatising experiences' to hear about how these children look to them as sources of courage and strength? I imagined the young people writing letters of acknowledgment and appreciation to their mothers, and how the mothers might feel receiving these.

Adelite's work has also made me think about how we might plan to reach out to young people in Nepal who were born after their mothers were raped during the armed conflict. I had never before heard stories from the perspective of people born as the result of rape. This offered me a fuller picture of the stories that must exist in my own country. While I am yet to meet with a person born after the rape of their mother, I now feel that I know something of the complex stories they may have. We will need to exercise great caution. The armed conflict ended only 15 years ago, so many of these children will still be very young. Adelite's paper has given me ideas about how to talk to women about sharing their experiences with their children in careful ways if they wish to do so, and about how we might eventually work with the children themselves.

I am grateful for the experience of meeting these five young people from Rwanda through their testimonies, and for the experience of meeting Adelite through her writing. I feel connected with them all, and would like to salute their work and their courage in bringing about change. I am left feeling that I am not alone in the journey of working together with people whose voices have been silenced to make their stories and histories known to the world. I look forward to more sharing of stories.



Reflections on Adelite Mukamana's 'Ways of living and survival by children born out of rape during genocide'

by Ruth Pluznick



Ruth Pluznick is an independent practitioner in Toronto. For 25 years, she was clinical director for the narrative therapy team at Oolagen, a publicly funded children's mental health centre dedicated to social justice practices with marginalised communities. Ruth is a founding member of Narrative Centre of Toronto and a member of the international faculty of Dulwich Centre. Ruth can be contacted at ruthpluznick@rogers.com

In 2010, I attended an international narrative practice conference in Rwanda. It was co-sponsored by Dulwich Centre and Ibuka. When I signed up for the conference, I was interested in learning more about the genocide in Rwanda and the narrative practices that were most meaningful for survivors of genocide. I came away from the conference with an understanding of genocide that had previously eluded me, and with a deep appreciation for all that we can learn from Rwandan people about genocide, its effects and what people might do to get through it.

What I didn't expect from the conference was my experience of resonance with the stories told by the Rwandan survivors of genocide. As a person from a family with Holocaust survivors, I was struck by the profound connection that I and other Jewish persons felt with our Rwandan hosts. I had always thought about the Holocaust as a unique event, but now I understood it to be an expression of genocide, which linked me and my people with other communities who've had this experience. Our stories can challenge complacency when politics of division prevail, and our survival might offer skills, wisdom and hope for other persons and communities subjected to hatred and oppression.

There is more to learn about genocide from Rwandan colleagues, as Adelite Mukamana makes clear in her powerful and politically significant paper.

We talk about rape in the Western world, but I can't remember any conversations that have highlighted the specific concerns of children born to women who were raped. And yet there is likely no place in the world where women have not experienced rape, as a consequence of war and conflict or simply an aspect of daily living in a patriarchal world, and there are countless children born to those women. Why do we hear so little about those children?

In this article, Adelite provides a unique account of the lives of young people born from the rape of their mothers during the Rwandan genocide in 1994. The stories she offers are not stories told *about* these young people, they are stories told *by* them.

The framework Adelite used to receive and document these testimonies of trauma provided an opportunity for people to tell multiple storylines of their lives. It made visible the hardships endured by these young people and their mothers, while also providing opportunities for the young people to shine a light on the relationships that sustained them, and to identify and describe their skills and knowledge for getting through difficulties. In this way, participants were invited to challenge

problem-dominated descriptions of their lives, relationships and identities, and to develop alternative or preferred narratives.

This had me remembering a practice of storytelling described by Barbara Wingard (Wingard & Lester, 2001) as 'telling our stories in ways that make us stronger'. I think Adelite provided an opportunity for these young Rwandans to do just this.

The document generated by this framework also reveals the power of collective storytelling. Something that might be considered to be a 'private problem' is transformed into a 'bigger story'. In this case, the bigger story might be the injustice of rape as a weapon of war (as well as in the everyday lives of many women), the challenges of identity for children born to women who are raped, the wrongful assignment of blame to these mothers and children, and the effects of stigma on their lives and relationships, to name but a few of the contextual issues. In this way, collective storytelling honours the narrative principle that 'the problem is the problem, the person is not the problem'.

In this guided sharing of stories, an experience of solidarity is created ('I feel it will help others like us to understand that they are not alone, and I hope it may help them to take steps to overcome their sorrow'). Common themes emerge (being treated differently than other victims of the genocide, feeling 'like you did something wrong'). Skills and wisdom can be shared ('I used to walk around feeling ashamed as if I had been involved in the genocide because of my father's acts. But now I know that I have nothing to do with it'). Alternative and preferred storylines can be generated, documented and shared with others in the same boat. Sharing your story to improve the lives of others can foster a sense of purpose, and a collective telling of the story might lead to significant change. One participant noted, 'To testify is for me a great contribution to the fight against genocide ideology. There are people who deny it, but when we testify, people really know what happened and it helps to put in place a plan so that it will never happen again and to help the survivors heal the wounds left behind by genocide'.

With the framework for receiving and documenting testimonies, Adelite brings awareness and understanding of the lives of young people born to women who were raped during the Rwandan genocide. I feel gratitude to her and her participants for the introduction to their lives. Their collective document also reminds me that multiple storylines are always present and influential, no matter what or how difficult the circumstances we face.

Wingard, B., & Lester, J. (2001). *Telling our stories in ways that make us stronger*. Adelaide, Australia: Dulwich Centre Publications.

Free resources and events in relation to **NARRATIVE PRACTICE**

*If you are
looking for
further hopeful
stories of
practice,
you may be
interested in:*

Friday Afternoon video series

From 1983 onwards, Dulwich Centre has been known for holding free events on Friday afternoons. These 'Friday Afternoons at Dulwich' would begin at 4.30pm so that people dropped by on their way home after the working week. They always consisted of a good speaker sharing some aspect of their practice that was currently intriguing and challenging to them and this was then followed by discussion and drinks! Now, on Friday afternoons we are placing up on our website a video featuring a narrative practitioner speaking about some interesting element of their work – often an innovative practice project. Of course, you can view this wherever you are in the world at a time that suits you, and then contribute to the discussion and debate. We are delighted that this new momentum of online discussion is continuing the 'Friday Afternoons at Dulwich' tradition. See: <https://dulwichcentre.com.au/category/friday-afternoons/>

Meet the author sessions: You're invited to these 'pop-up narrative community events'

These weekly Meet the Author zoom meetings with narrative practice authors brought people together during 2020 from different parts of the world. This meant a great deal to us during the pandemic. As the pandemic continues, so too do these Meet the Author events! We are thoroughly enjoying these 'pop-up community events' which are hosted by Dulwich Centre Foundation, the University of Melbourne and Evanston Family Therapy Center (USA). You're invited! <https://dulwichcentre.com.au/meet-the-author>

Free online courses

There are now three free online courses available via the Dulwich Centre website: *What is narrative practice? An introductory course*; *an Aboriginal narrative practice course*; and *Sexualities, Genders and Narrative Practice: A narrative therapy queer space*. These are rigorous courses that you can do in your own time wherever you are. You can also read reflections and comments from practitioners from diverse contexts as they engage with these materials.



My motherland, my heart:

A collection of thoughts, feelings and emotions about Afghanistan, gathered from conversations with children of the Afghan diaspora

by Fariba Ahmadi



Fariba Ahmadi (née Fariba Drokhshan) was born in Kabul, Afghanistan and migrated to Australia in 1995. Prior to studying narrative therapy, she worked as a medical practitioner in Afghanistan. Fariba can be contacted by email: riba.a67@hotmail.com

Abstract

This paper documents collective narrative practice with young Afghan people in Australia. The author met with a group of 12- to 14-year-olds and documented their responses to recent events in Afghanistan. The young people share how they have been affected, how they have been coping, where they are finding support and their advice for others. The author invited responses to the young people's testimonies, and these are also included.

Key words: *Afghanistan; young people; youth; Taliban; collective narrative practice*

In the days after the Taliban took control of Kabul, I met with about 20 Afghan boys and girls, aged 12 to 14 years old, at the Adelaide Secondary School of English in Australia. I explained to them that the reason I was there was to listen to them and for us to share our feelings together. I said:

We are in the same boat. Whatever happens to this boat, we are all together. We are having same experience, same feelings, same pain. If there is any help that you need, you can ask through your school leaders and they will contact me, or come and tell me today.

I then asked them a series of questions and said they could either speak or write down their responses in Dari or English. Many of them wrote beautiful written explanations that made me cry when I read them. I will share their responses with you here.

How has the arrival of this crisis changed your life?

I am sad.

I am worried about the future of Afghanistan, and what is going to happen. And I am also worried about my sister – but not just about my sister, about all the people in Afghanistan.

We feel worried, worried about everyone in Afghanistan.

I am very scared, and I am very worried and I think everyone is very scared of Taliban. My mother is every time just thinking about Afghanistan and she is very worried. When I see my mother is very upset, I feel very scared.

My heart is bleeding when I see the innocent people are suffering for so many years in my homeland Afghanistan.

Nowadays, there are some people who are ready to die; they prefer death rather than being alive, seeing these horrible scenes.

I am worried because our Muslim brothers are dying from Taliban.

I know that I'm here, but my soul and my heart are in Afghanistan.

My poor mom, my brother and sisters. When we go home after school every day, we all think about people living in Afghanistan.

We are thinking about their future. We're thinking about their present at the moment.

I'm really worried about Afghanistan and Afghan people's future. I'm worried about people living there at the moment. There are lots of young people who did work really hard, and now they are facing lots of difficulty and hardship. They have to be there. They tried hard, they studied hard. And now they just have to sit at home.

It is hard to see that no one has freedom in their own country.

All Afghans are like my brothers, my sisters, my family.

This is a very strong sentence which melted my heart. One of the students then drew a sad face with tears coming from its eyes.

If you could give this crisis a name or a nickname, what would it be?

The situation in Afghanistan. It's really bad. It's darkness. It's misery in this day.

Misery.

Killing, fighting.

This pain.

Misfortune.

Destruction: destruction of all the country.

Killing innocent people.

What and/or who has been helping you during this hard time?

At home, mostly my mother, my dad sometimes. My grandmother and my brother.

At the school, my teachers, BSSOs [bilingual school services officers], my friends and God.

My mother and father, friends and teacher.

Whenever I get upset and worried, I call my friend in Afghanistan. I tell my friend that I'm thinking about her, 'I'm here to help you'. She is listening to me, and I always tell my friend: 'don't lose hope – I'm here and I will help you all the time'.

Some of the students had poignant messages about unity:

We need to be strong together. Stop saying that we are Pashto, we are Hazara. If we stop that then we can do everything for Afghanistan.

When one of the children asked another student, 'Are you Sunni or Shia?' I responded by saying:

One day, one of you might be the Afghan president. You might be the leader of the country and guide others, other young people. Our country will need you to unite the people. Everyone has the right to choose their own religion. And we need leaders who will bring us all together. We can start right here today.

A 12-year-old then said the following words:

I try to stand up against Taliban, against oppression of Taliban. Our three-colour flag – red, green and black – is so beautiful. It was just waving in the beautiful environment of Afghanistan. I hope that the people, with their hard work and persistency, will be able to raise this flag again as a sign of peace in Afghanistan.

And one student wrote the following words:

Dear homeland.

Be patient.

Our pain will be cured one day.

The palace of our oppressors will be destroyed one day.

We will not all give up.

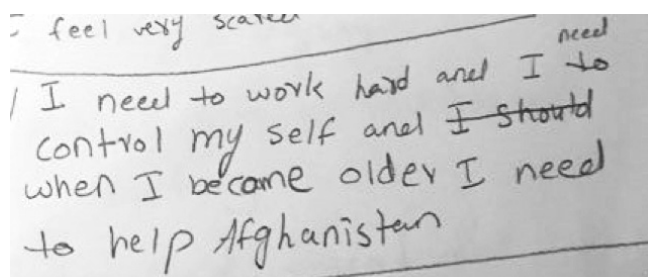
Solidarity will bring victory for our country.

God is great, and we hope that God will help us again.

Our only hope is God, as God is the friend of the helpless.

What have you learnt about yourself that makes you believe you're able to cope with this situation?

The students had many thoughts about this question.



I feel very scared. I need to work hard and I need to control my self and I should when I become older I need to help Afghanistan

I need to work hard and I need to control myself. When I become older, I need to help Afghanistan.

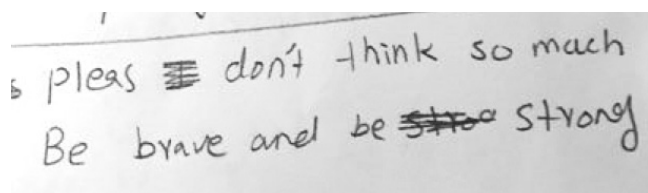
They said they were trying to be patient and hopeful, and that one day, everything will get better. They also spoke of the importance of being united with each other, supporting each other and being persistent.

What do you suggest to other Afghans who are dealing with this situation?

Never give up. Don't lose hope.

I know that no one is helping us at the moment, but remember God is with us all the time. Trust in God as what he knows we do not know. We pray from bottom of our heart. I trust God will help us and we will live in peace again one day.

Please do not think so much. Be brave and be strong.



Please don't think so much. Be brave and be strong



Creating a banner

The school counsellor, Paul Coates, had the idea to make a banner. We decided to make it in the three colours of the flag of Afghanistan. The black symbolises the troubled past of the nation. The red represents the blood shed by those who fought for the country's independence and the green represents the prosperity that arrives after overcoming darkness.

The students placed painted handprints on the canvas and wrote messages and poems.

Messages back to the students of Adelaide Secondary School of English

Having read the responses above, a number of people sent messages back to the students.

When I first arrived from Afghanistan, I went to your school. And when I graduated from university, I went back and worked at ASSOE as a student wellbeing officer. Similar to so many other Afghan Australians, I have family back in Afghanistan and we share your feelings of misery, hopelessness, sadness and unpredictability about the future of Afghan girls, women and children. But I loved that bravery and hopefulness were so present in your words. You children/young people are the future of Afghanistan, and I also loved your message of 'unity' – Suraya

Listening to your words moved me to many places. I heard of all those souls and hearts still in Afghanistan. I heard of the darkness, destruction and misery. Yet through all this I heard a message: 'Don't lose hope. I'm here'. Your message that unity will do everything

restored my hope. I had a beautiful teacher from Afghanistan. She said that her people were wildly proud of their bread, and she recalled the smell of it baking. The night before I saw the children's words, I was kneading dough and thinking of her, and thinking of the people of Afghanistan.

– Caroline

Hello Dear Students,

I hope you are doing well! I read the stories that you wrote about our sweet homeland, Afghanistan. I felt my homeland in your words. I felt Afghanistan mountain breezes in your words. Your words are soul touching.

I appreciate that you are still thinking about Afghanistan, although you are not living there. I feel happy that you want to help Afghans, and you study to serve your country. I would like you to keep this sense forever. Don't forget what your parents have suffered, and don't forget your people who are suffering right now in Afghanistan. There are thousands of children in Afghanistan who need good education, health, security, food and stability. Now they are helpless and hopeless. You are the only people who can help this poor generation and I am sure you can!

We as Afghans will try to help our sweet homeland and we will never forget our country. One thing to remember is that you should never get disappointed about Afghanistan. I strongly believe that one day our country will be born again, stand again, walk again, rise again and shine again. Just don't lose hope and be strong. We are with you.

Best regards,
Shamina

In my mind, I see the image of the three-coloured flag flapping in the breeze, on the beautiful landscape, as expressed by one of you. It is in the being together that makes the unbearable more bearable. Even when we can't change things in a big way, we can change things in a very small way. From this place, we do what can be done. Hearing the voices of you all has reminded me that I must do something. It is not enough to just notice and care or feel sad. There must be action. Today I will begin by reading more, listening more, finding out what my local services are doing to support Afghan refugees, and contacting my local member of parliament to lobby. We might not all live close to one another, but I see myself as being by your side. I am grateful for your words. – Sorcha

Dear young folks worried for your friends and family in your homeland of Afghanistan, I will share your words of 'pain that will be cured one day' and your conviction that 'solidarity will bring victory' for your country with young people who I know here in Canada. Your acts of solidarity will be significant to us. And together we are trying to send you invisible strength and comfort. – Rob

I saw a picture in my mind's eye when I heard you speak the words 'I know I'm here, but my soul is in Afghanistan'. This was a very sad and painful picture: I saw my husband walking with a lot of pain – not physical pain, but the pain you feel in your heart. I saw his bleeding soul. This was when our eldest daughter, Harveen, died suddenly in 2014. Yes, the soul is a very important part of a person's life and my wish for you is that you take care of it well. I see you reading your Afghan stories, singing your Afghan songs, enjoying eating your Afghan food – being proud that you are Afghan. Nobody can ever take that away. And when you remember your connections like this, like my husband and I remember our connections with our daughter, I hope your soul will feel that not all is lost – that some things precious never go away. By remembering, you will keep your Afghan spirit alive and well. Thank you for your voice at this sad time for all of us. May your stories keep you safe. – Karamjeet

With my kids, we reflect on each day and the way we have made others feel valued, and how others have been a positive influence. While this is important, the things said by these Afghan children have shown me we are neglecting to look outside our immediate lives. From now on, on each day, we will start to reflect on some of the things people around the world are facing. – Kieron

The image that came to mind as I heard your words was of a flickering light bulb: one that didn't have much energy left, but one that would not give up. Together with all the other flickering bulbs, a glow is present. This glow is warm and deeply touches all those who come across it. If I can contribute in some small way to this glow, created by the remarkable children of Adelaide Secondary School of English, then it will be my honour to do so. – Rachael

I have felt a deep shame of late because I feel like I have turned away from the people in Afghanistan, not because I don't care, but because I can't bear to look at the suffering. I can't bear to turn on the news and to witness what I know to be true. Why do I do this? Because I feel helpless and hopeless. But hearing the stories from Adelaide Secondary School of English made me think of just how helpless and hopeless it must feel being in this country and safe and to have people you know who are unsafe. Yet still you have hope and feel like these small contributions matter. I will use your words to spur me into action and out of my shame paralysis, to be able to see how these small actions ripple and make a difference. Maybe I will just start with the actions that you have shared. I can be brave and strong and look. I will not think so much. I'll work hard to muster the courage. I can control myself and my shame. I can be patient with myself and with the hurting world. I can take steps to promote unity. I can persist when I feel like my actions can't make a difference. Turning towards your stories is the first step to realising the small steps of agency that I can take. – Reece

Responses from primary school students in Sydney

Mimi, 12, said:

I can see in the messages that the children are scared and worried. They are scared for their friends and family and for all of Afghanistan. They are worried, and they can see that their families are worried too. It must be hard for them to relax and do ordinary things when they have so much sadness and worry for Afghanistan.

They are brave because they have all this sadness and fear, but they are still talking about being strong and brave to help Afghanistan in the future.

Hannah, 12, said:

When I hear their words, I can try and understand the pain and the suffering that the children's families and friends have been through. I empathise with the trauma that they have been through, many bad memories, but hopefully more good memories to come. Hopefully in Australia, with the support of those around them and others, they can build a happy life.

You have each other as a community with a shared history and understanding of each other's experiences. You have support and great trust between each other and hopefully the situation back in Afghanistan will settle and families there will be okay. Emotional wounds and trauma take time to heal. Be kind to yourself.

When I hear your words, it teaches me to be kinder and more compassionate about what people are going through. To value life and be grateful.

Taressa, 12, said:

When I read your words, 'Solidarity will bring victory to our country', it made me think that sometimes it can feel as though all is lost, but victory will come to those who stick together. I also thought about the nicknames you gave to this crisis and thought that no child should have to go through that.

I hear that freedom and learning are important to you. I hear that you want peace and the right to a life that is free from fear and uncertainty. For everyone to be happy and live peacefully together.

You are smart because you know something is happening and instead of keeping that pain inside, you are standing up and saying it out loud. You are leaders for all kids in Australia because otherwise they may not know what the kids think.

When I heard your words, I was motivated to take a stand against injustice. To educate others, as you are doing, about the crisis in Afghanistan. I want my friends to listen to your words because I think you can make a difference, even when you are a kid.

Tilly, 8, said:

When I heard your words, 'we will not all give up', I could hear that you want to get your country back because it is beautiful.

When you spoke about your flag, I can hear that you want the flag of your country to come up again, not the Taliban's. I can hear that you are thinking about the people of Afghanistan, and you want them to be safe. Being safe is important. I hope they are okay.

When I hear your stories, I want to offer my hand in friendship to you because I don't want you to be sad. I hope you are okay. I love you.

Milo, 11, said:

The kid who spoke about the colours of the flag and what it represented stuck out to me. They are thinking of everyone in Afghanistan. They want their family and friends to be safe.

I feel motivated to support the kids. I send them my love. If I had a private army I would send it to Afghanistan, but no, I would not want to hurt more people. I would want peace.

Ellana, 13 said:

When one student said that people would rather die than be alive and see those terrible scenes, it really showed the severity and impact it will leave on the families who lost loved ones and on Afghans in general.

The kids have a strong connection to Afghanistan through blood, but also respect. The Taliban taking control over their country is like losing a piece of themselves. A lot of them consider Afghanistan to be their home, even though they may be currently living somewhere else, which really shows their loyalty to the country.

Their words motivate me to educate others on how the Taliban is ruining their country's reputation and culture as well as taking the lives of innocent Afghans.

Together, these students said:

We all hope that you are able to stay strong and keep talking to each other and sharing your words.

We are here with you in friendship, from Sydney.

Love

Mimi, Hannah, Taressa, Tilly, Milo and Ellana.

A message to Fariba

There was also a response sent to me from Manja:

Dear Fariba,

These words, and the banner, are wonderful. They make me think of gathering and sharing a handful of flowers of sorrow and comfort.

I imagine the telling and re-telling of them between you all

Is like the wind scattering their seeds far and wide

So that more wildflowers might grow

Throughout Australia and across the world.

And to the hills and valleys and cities of Afghanistan

Where they might take root in even the hardest of ground

And grow into flowers of strength and hope.

And one day, a future of love and joy

Where children pick them

On their way to school.



Moral injury and moral repair:

The possibilities of narrative practice

Inspired by an Australian-Afghan friendship

by David Denborough



David Denborough works as a narrative practitioner with individuals, groups and communities who have experienced profound hardships. Through Dulwich Centre Foundation, his narrative therapy and community work has included long-term collaborations in Rwanda and Palestine and with First Nations colleagues in Australia. His previous publications include Collective narrative practice: Responding to individuals, groups and communities who have experienced trauma; Strengthening resistance: The use of narrative practices in working with genocide survivors (with Jill Freedman and Cheryl White); and Working with memory in the shadow of genocide. He can be contacted by email: daviddenborough@dulwichcentre.com.au

Abstract

With a focus on the aftermath of the war in Afghanistan, this paper grapples with the suffering induced by war, and particularly with moral anguish. Following a critical analysis of development of the concepts of PTSD and moral injury, and the material effects these have on the lives of veterans, David Denborough offers a series of additional responses drawn from narrative therapy. These include the key concepts of 're-authoring' stories of identity, externalising problems, honouring responses to trauma, considering distress as a marker of fidelity, re-membering those who have died, and moving beyond scripts about forgiveness. He also offers responses drawn from collective narrative practice that respond to veterans' stories in ways that avoid both admiration and judgement, instead seeking to communalise grief and enable contribution. These include the exchange of witnessing letters and the Team of Life narrative approach. Denborough argues for a response to moral injury that is both moral and social. He highlights possibilities for linking 'healing' with social action: collective projects of moral repair that seek to redress the harm done to others, including the civilians of Afghanistan.

Key words: *moral injury; military veterans; veteran suicide; PTSD; narrative therapy; veteran mental health*

Three profound events have recently occurred in relation to the Australian military. First, the Brereton Report was launched alerting all Australians to allegations of war crimes committed by our troops in Afghanistan (Brereton, 2020; Willacy, 2021). Second, Australian and US forces left Afghanistan and the world witnessed the Taliban reclaiming control of the country and desperate Afghans seeking safety. And third, a Royal Commission was announced in relation to defence and veteran suicide. Three events, each of which represent stories of suffering for so many families both Afghan and Australian.

In ways I couldn't have imagined, I now find myself immersed in these realms. Some years ago, at my local cricket club nets, I met Dr Abdul Ghaffar Stanikzai. Not only a handy leg spin bowler, Dr Stanikzai previously worked with the Afghanistan Independent Human Rights Commission in Uruzgan where he investigated human rights abuses by the Taliban, by Afghan forces and by Australian and American troops. Through my friendship with Dr Stanikzai, and through collaborations with veterans, I now feel compelled as an Australian to respond in some way to the hardship implicit in the recently announced Royal Commission, in the Brereton Report, and in Australia's longstanding military engagement in Afghanistan.

About this paper

This paper seeks to offer practical ways forward for responding to the anguish produced in contexts of war: the anguish of military veterans (and their families¹), interpreters, human rights workers and civilians. In particular, I will focus on how the practices of narrative therapy and community work can respond to 'moral injuries' – whether these are being carried by individuals, families or broader collectives.

I am not a military veteran, nor am I from a military family. I am not an interpreter, a human rights worker or a civilian who has lived through war. Any offerings I make here are modest. I have tried to draw on what I have learnt through friendships and collaborations with colleagues from Australia, Afghanistan, Rwanda, Palestine and Kurdistan (Iraq), and to privilege the ideas, stories and writings of those who do have insider knowledge about moral injury in contexts of war. Most of these writings are by male veterans, so the experiences foregrounded in the following pages are mostly of male veterans and interpreters.² I would highly recommend the papers in this special issue by Adelite Mukamana (2021) and Jaya Luintel (2021) that focus on women's experiences of sexual violence in contexts of war and genocide.

This paper is in three parts. Part 1 investigates the ways veterans' moral anguish has been conceptualised over time, and introduces the notion of moral injury, its history and why it is significant. Part 2 offers ways of responding to those suffering from moral turmoil in the aftermath of war. Narrative therapists and community workers have developed innovative ways of responding to war-related trauma. This section introduces narrative practices – including double listening, honouring responses, re-memembering those who have died, using sporting metaphors and responding to people who see images or hear voices – as they have been applied to work with people affected by war experiences. Part 3 extends the idea of moral injury as an individual experience to consider collective obligations and possibilities for responding to harms done in war. It draws on veterans' experiences and initiatives to suggest practical actions that link healing and action through enabling those who have experienced moral injury to contribute to the lives of others.

PART 1: The concept of moral injury, its history and why it is significant

The concept of 'moral injury' is intriguing and complex. The first time I heard the term was when the Brereton Inquiry team had come to Dulwich Centre, here in Adelaide, to hear Dr Stanikzai's testimony. After the formal proceedings, we all stepped outside into the fresh air, and I heard from a member of the Inquiry team about how some of the Australian Defence Force whistleblowers were really struggling – and also facing hostility from others within the military. It was in this context that the Inquiry team member mentioned the term 'moral injury'. Rather than describing the whistleblowers as struggling with post-traumatic stress disorder (PTSD), which has until recently been the predominant way in which military veterans' mental health struggles have been conceptualised, the concept of 'moral injury' offers something different. Anthropologist Tine Molendijk (2021a) has provided the following definition:

[Moral injury] refers to psychological, social, and spiritual suffering stemming from having one's moral expectations and beliefs violated by one's own or other people's actions. (p. 1)

In order to grasp the significance of the emergence of the concept of moral injury, I have found it helpful to understand a particular history and the contributions of Vietnam veterans.

In the late 1960s, as the toll of the war in Vietnam continued to mount for the people of Vietnam and for troops from America and Australia, an organisation called Vietnam Vets Against the War formed in New York. Among other political activities, they organised 'rap groups' in which members talked together about their experiences during the war:

We were trying to understand what we were feeling about the war ... it was a safe place to talk ... We weren't thinking of ourselves as victims, but rather thinking, 'How are we going to get our act together so we're not undone by our feelings about what's going on, and how are we going to convey what's going on to the general public?' (Shephard, 2002, p. 356)

there was no professional participation at first, they [the veterans] knew how to listen to each other with the understanding born of common experience. (Shatan, 1973, p. 642)

This group of veterans then went on to form collaborations with anti-war psychiatrists like Chaim F. Shatan, who first described 'post-Vietnam syndrome', and Robert Jay Lifton, who later argued for post-traumatic stress disorder to be included in the DSM.³

The veterans invited these psychiatrists to join their rap groups, but in a very particular way:

They said shrinks could join provided that we joined as peers. (Chaim Shatan, as quoted in Shephard, 2002, p. 356)

any tendencies to endow us with an authoritative mantle have been short-lived, in spite of – or, perhaps, because of – their previous military experience. They have had enough of chains of command. (Shatan, 1973, pp. 642–643)

In these rap groups, psychiatrists were not outside experts diagnosing veterans. They were instead 'participant-observers' (Shatan, 1973, p. 643) in a 'relationship of solidarity with veterans, a departure from the protective wall behind which most of us work'⁴ (Shatan, 1973, p. 652).

What is more, these rap groups did not focus on individual pathology, but instead provided a forum to 'refashion value and meaning in the veterans' lives' (Walker, 1983, p. 50).

Fifty years on, it seems that interactions between veterans and mental health professionals are now often profoundly different than those in the initial rap groups, as conveyed in the following three quotes from veterans:

With regard mental health diagnosis, if possible, this process is considerably worse than the physical diagnosis. Again, one appointment with a stranger who does not know you or your story makes a judgement as to how much your life is affected by your mental health illness. I know that I have and continue to struggle to talk to anyone about what I have been through, let alone a stranger. The questions that are asked are damaging, destructive and insensitive ... If anything else being forced to recall the trauma steps you back in your recovery ... Process is followed devoid of humanity and basic care and kindness. (Looker, n.d.)

As a veteran, I really can't imagine a more disheartening scenario than being stuck in a room with a person listening with stony

detachment as I grapple exasperatedly with the moral implications of my actions in war. I'd rather say nothing at all. (boudreau, 2011, p. 750)

a 'pin cushion' for scientists and psychologists to probe and study for their PhD and Master's research into PTSD. No thanks. (Moffitt, 2020a, p. 129)

Within the early rap groups, things were quite different:

'In the absence of patterns tailor-made for us,' explained one veteran ... 'we had to structure our own solutions.' (Shatan, 1973, p. 641)

In early rap groups, veterans

rejected the therapeutic hierarchy that assigns the task of interpretation to trained professionals. Veterans asked therapists to participate in the rap sessions as equals and insisted on their own involvement in the production of therapeutic knowledge. In the company of professionals, they reclaimed expertise for themselves. (Nudelman, 2015, pp. 215–216)

I mention all of this because the early collaborations within rap groups have a synergy with the philosophy of narrative practice, in which people are honoured as the experts on their own lives and a professional's role is not to diagnose or assess, but to facilitate the generation of insider knowledge.

I also mention this history because considerations of what might now be referred to as 'moral injury' were central to early rap groups.

Guilt feelings were among the first sentiments that some veterans expressed in the early sessions. One member asked, 'How do you turn off the guilt?' The question that followed is one we have repeated many times since: 'What's eating you; what do you feel guilty for?' It has served not only as the first step in elucidating specific guilts, but also as one of the ways in which we encourage each other to recount painful events. Veterans have described sins of commission (killing, burning villages, rape), omission (not objecting to illegal or immoral orders, not taking adequate precautions to protect lives), and several levels of what might be called 'guilt by association' (feeling to blame for a buddy's death whether or not one could realistically have prevented it, feeling tainted by having been part of the war effort at all). (Egendorf, 1975, pp. 120–121)

It was only when partnerships of interpretation dissolved that psychiatry went ahead to create a generalised, medicalised definition of post-traumatic stress disorder⁵ in which considerations of guilt, regret or moral confusion were no longer emphasised in the same way. Since its first appearance in 1980, PTSD became the prevailing way in which veterans' mental health has been understood.

Former marine tyler boudreau⁶ has eloquently conveyed what is fraught about this hegemony:

when veterans or soldiers feel something hurt inside themselves, there is still only one brand to choose – PTSD. That's not good. It's not always accurate. And it renders soldiers automatically into mental patients instead of wounded souls. Since post-traumatic stress has been, so to speak, the only game in town, it has served as something of a one-size-fits-all response to any mention of grief by a veteran. This default medicalization of a veteran's moral angst has created an ongoing dilemma for the mental health community. They are confronted all the time with veterans who are struggling, searching, digging, aching to know whether their personal actions and their wars were just or unjust. (boudreau, 2011, p. 749)

'... the early collaborations within rap groups have a synergy with the philosophy of narrative practice, in which people are honoured as the experts on their own lives ...'

Acknowledging what a diagnosis of PTSD means to some

I don't want to diminish the significance of what a diagnosis of PTSD can mean to someone, or the assistance that some people find through psychological or psychiatric treatment. The granting of a psychiatric diagnosis can help make sense of overwhelmingly confusing, frightening and isolating experiences that have a person barely recognising themselves or their reality. A diagnosis or medical understanding can also powerfully offer an immediate 'in the moment' sense of relief and the promise of a 'return to normal'.⁷ This combination can provide a recognition of suffering that is hard to find elsewhere in contemporary culture, as Michael White described:

I am mindful of the fact that some people do find such [psychiatric] labels enabling. This has been interpreted in a variety of ways. For example, it is said that illness labels undermine the various self-accusations and attributions of personal inadequacy that are experienced by people who are not able to live out their lives in the customary ways. Furthermore, it is said that these labels make it possible for persons to break from the stress of the expectations that they would be subject to if they were 'well'. And it is frequently argued that psychiatric diagnoses serve to dissolve the guilt that is so often experienced by relatives, and that this has the effect of undermining self-defeating behaviours and of promoting more constructive interactions in familial contexts.

And, while I can appreciate these arguments, and have no difficulty in honouring what people have to say about some of the positive effects of psychiatric diagnoses, I have no doubt that these outcomes provide for some interesting reflection on our culture – that, in order for people to break from these self-accusations and attributions of personal inadequacy, from the stress that is informed

by the expectations about what it means to be a real person in our culture, and from the experiences of guilt that we have discussed, they must step into the site of 'illness'. Illness is a site of culture, one that is structured, one that brings with it particular modes of life and of thought. It is a site of culture that shapes life. So, diagnosis provides for an exemption that is permissible through illness. But this is a sad reflection on our culture, and I do think that we can do a lot to assist people to find other alternative sites in this culture in which they can succeed in breaking from dominant ways of being and thinking, alternative sites that bring with them other options for how they might lead their lives, options that do not require exemption through illness.
(White, 1995, pp. 118–119)

One of my hopes for this article is to see if the concept of moral injury can be a pathway to alternative sites for those affected by war experiences, so that the effects of these extreme experiences can be acknowledged and responded to outside the frame of 'illness'.

It was in response to the limitations of medicalised and individualised approaches to PTSD that a psychiatrist (Shay, 1994, 2002) working with Vietnam veterans in the 1990s sought to re-introduce considerations of moral anguish through the concept of ‘moral injury’, which he defined in this way:

Moral injury is a betrayal of what’s right by someone who holds legitimate authority (e.g., in the military – a leader) in a high stakes situation. (Shay, 2014, p. 183)

He argued that the narratives of his Vietnam veteran patients demonstrated how moral injuries ‘impair the capacity for trust and elevate despair, suicidality, and interpersonal violence. They deteriorate character’ (Shay, 2014, p. 182).

Psychologist Brett Litz and colleagues refined Shay’s definition and proposed that moral injury is:

the lasting psychological, biological, spiritual, behavioral, and social impact of perpetrating, failing to prevent, or bearing witness to acts that transgress deeply held moral beliefs and expectations. (Litz et al., 2009, p. 697)

The concept of ‘moral injury’ now sits alongside PTSD as the two dominant understandings of ‘distressing deployment experiences’, as anthropologist Tine Molendijk (2020, p. 34) conveyed in the following table⁸:

	Current conceptualisation of PTSD	Current conceptualisation of moral injury
Event	(Life-)threat	Moral transgression
Significance	One’s sense of safety is violated	One’s sense of ‘what’s right’ is violated
(Perceived) role in event	Victim; witness	Victim; witness; responsible agent
Characteristic responses	Fear-related responses	Moral emotions
How to understand guilt, shame, anger	Exaggerated negative beliefs about the self and the world resulting from distorted cognitions	Guilt, shame and anger may be considered appropriate and accurate

Table 1: Dominant understandings of distressing deployment experiences

Many practitioners now contrast moral injury with PTSD as if they are two separate forms of psychological suffering:

Most of the symptoms of PTSD are fear related, such as flashbacks, hyperarousal, disturbed sleep, and eventually constriction. Hyperarousal is a state of constant vigilance, the feeling that danger may strike at any moment ... Moral injury is different, involving feelings of shame, guilt, and demoralization, the feeling that neither self, nor family, nor world possesses value, what is sometimes called anomie. Demoralization is associated with alienation from others. Demoralization devalues the values of life. (Alford, 2016, pp. 12–13)

While there are now many attempts by psychologists and psychiatrists to clinically ‘define’ and then ‘treat’ moral injury, I am interested in something different.⁹ Rather than psychological experts seeking to define moral disturbance as ‘illness’ and then prescribing individual ‘treatment’ to relatively passive ‘patients’, I view the concept of ‘moral injury’ as an opportunity to understand psychological ‘trauma’ through the lens of transgressed values and commitments because this then open possibilities for individual and collective action.

The concept of ‘moral injury’ can also, I believe, provide a link to the field of narrative therapy and community work which has always considered that what is conceptualised as ‘trauma’ relates to the violation of that which is precious in people’s lives:

When people experience trauma, and particularly when this is recurrent, there is a very significant shrinking of ... identity ... It becomes very difficult for people to know how to proceed in life, to know how to go forward with any personal project or with any plans for living ... When a person has been through recurrent trauma, their ‘sense of myself’ can be so diminished it can become very hard to discover what it is that they give value to. This is because recurrent trauma is corrosive of what people treasure in life. It’s a violation of their purposes in life and of their sentiments of living. Because of the effects of this corrosion and violation, when people have been through significant and recurrent trauma ... it’s vitally important that the therapist listen for signs of what the person has continued to give value to in life despite all that they have been through. (White, 2004, pp. 46–47)

In Part 2 of this paper, I describe a range of narrative practices that can contribute to re-valuing and re-storying identity, which can be understood as forms of narrative repair in relation to moral injury. Before I do so, however, I wish to return to one further theme from the early rap groups.

Social projects

Not only does the medicalisation of veteran distress have profound personal effects, it also has wider implications. Tyler boudreau explained:

As long as the invisible wounds of war are medical, there is no incentive in the community or in the household to engage them. After a while the veterans themselves become invisible. (boudreau, 2011, p. 750)

The concept of moral injury offers something different.¹⁰ It offers alternative ways to respond to those struggling with the 'invisible wounds of war':

PTSD as a diagnosis has a tendency to depoliticize a veteran's disquietude and turn it into a mental disorder. What's most useful about the term 'moral injury' is that it takes the problem out of the hands of the mental health profession and the military and attempts to place it where it belongs – in society, in the community, and in the family – precisely where moral questions should be posed and wrangled with. It transforms 'patients' back into citizens, and 'diagnoses' into dialogue. (boudreau, 2011, p. 750)

The early rap groups recognised this and did not separate 'healing' from public action:

All participants agreed ... that the healing function of the sessions was not their only or even their primary purpose. From the first, rap sessions were conceived as a forum for exploring veterans' memories of the war so that these memories might be shared with the American public: the veteran's damaged mind was a source of invaluable information about the actualities of the war. Lifton called this the 'investigative publicizing function' of the rap session. (Nudelman, 2015, p. 216)

The situation in Australia in 2021 is, of course, profoundly different from the situation facing Vietnam veterans in New York in 1970. And yet, I think there is much that can be learnt from not separating healing from public action.¹¹ In Part 3 of this paper I describe the possibilities of collective narrative practice projects (including Afghan–Australian friendship projects, cricket collaborations and collective documents/film projects) that can perhaps parallel the 'investigative publicizing function' of early rap groups.

But now, I want to offer ideas as to how narrative therapy and community work principles and practices can be used to respond to 'moral injuries' both individual and collective.

*' ... there is much that
can be learnt from not
separating healing from
public action ... '*

PART 2: The narrative metaphor and re-making identity

Narrative therapists and community workers avoid the authoritative expertise that shapes mainstream psychological approaches. We step away from 'diagnosis' (fitting people's experiences to generalised categories) and value solidarity:

And what of solidarity? I am thinking of a solidarity that is constructed by therapists who refuse to draw a sharp distinction between their lives and the lives of others, who refuse to marginalize those persons who seek help; by therapists who are prepared to constantly confront the fact that if faced with circumstances such that provide the context of the troubles of others, they just might not be doing nearly as well themselves. (White, 1993, p. 132)

The reason the field is referred to as *narrative* therapy is the emphasis placed on how identities are shaped by story.

Identities as story

Former marine tyler boudreau described how he once understood himself in the following terms:

it was certainly more appealing to be thought of as a protector, or a warrior, or a hero, or at the very least a man in service of his country. (boudreau, 2019, p. 50)

These descriptions – 'protector', 'warrior', 'hero' or 'man in service of his country' – could each be seen as 'headlines' for particular storylines of tyler's identity.

Tyler boudreau also described how we are 'historians of our own identities' (2019, p. 51). Which histories we attend to, which events we pull into our consciousness and what meaning we give them, are shaped by the dominant narrative of our identity.

For instance, if a veteran understands their life through the lens of 'in service of my country', all the events of their life that are in accord with the value of 'service' will light up in their memory. In turn, this will influence what future actions can be imagined and enacted.¹²

But for boudreau, after returning from service in Iraq, involved in a war that he came to believe was unjust, the 'headline' or dominant storyline of his identity changed:

Suddenly, in the act of undoing my world,
I perceived in the mirror the face of a *perpetrator*
rather than a protector, a man who'd been
feasting on violence and calling it sacrifice.
(boudreau, 2019, p. 50)

If we understand ourselves to be 'perpetrators', or 'failures', or as 'pathetic' or 'a coward' or 'a fuck-up', then really different memories are going to come to our consciousness. If the storyline of identity becomes focused around failure, then memories of times we have failed to live up to what we give value to come to dominate. As Jonathan Shay has described, when this happens, it's as if the veteran has 'lost *authority* over [their] own process of memory' (2002, p. 38).

It's not that one of these storylines is 'true' and the other 'false'. Our identities are multistoried. But when a storyline of 'failure' or 'fuck-up' becomes dominant, then it becomes very difficult to live.

Narrative practice involves 're-authoring' these storylines of identity. This is a collaborative process. The therapist/community worker acts as co-author. In the following section, I will describe some of the key principles and practices involved in re-authoring identities.

The person is not the problem: Externalising conversations

One of the key principles of narrative practice is 'the person is not the problem, the problem is the problem' (see White, 2007a). We negotiate an externalised name for the problem in the person's own words.¹³ This naming might be 'The Hopelessness' or 'The Despair' or 'The Suffering' or, following the lead of former Special Air Services (SAS) Team Commander Harry Moffitt¹⁴, 'The Commentator':

I felt shame. A mate was killed. Another mate lost his leg ... That was probably the biggest hurdle I've had. That whole time ... Shame ... Thinking I was almost like a traitor ... It's amazing what your mind does when you are in these ... vulnerable moments ... All that stuff I thought of was just The Commentator, who I have grown to know him as, this prick in your head who goes 'Oh you weak bastard, get up and keep going or keep drinking' – he tells you all the wrong stuff. I learnt a lot about fighting the commentator. (Moffitt, 2020b)

In his honest and compelling book *Eleven bats: A story of combat*, Moffitt evoked how The Commentator operated:

all I heard was the commentator in my head yelling, 'If you weren't such a fuck-up Harry, he would still be alive! You killed him!' ... My inner commentator told me ... 'What about his family and friends, what are you going to say to them ...' All the way to the rear of the aircraft all I could think of was how every soldier, sailor, and airman and woman was looking at me and thinking *You fucked up big time, Moffitt. You are a lemon. Hope you are happy with yourself.* (Moffitt, 2020a, p. 223)

Within narrative practice, through externalising conversations, we can ask questions to discover what influence The Problem (as defined by the person) is having on the person's life, identity and relationships. For instance:

- When did The Hopelessness or The Commentator first come into your life?
- How did it come into your life or into your family?
- What effect does The Hopelessness have on your daily life? On your relationships with family and friends? On your hopes and dreams?
- What are the times when The Hopelessness is strongest?
- What strategies does The Hopelessness use? What does it make you think?
- What increases the intensity of The Hopelessness?
- To what extent does The Hopelessness affect your relationships with others?
- To what extent does The Hopelessness affect your perceptions of yourself?
- To what extent has the problem affected your hopes?
- What do you think about the effects of this problem in your life – are they good or bad or a bit of both?

In this way, the effects of the externalised problem become richly acknowledged. This enables people to describe their experiences in a fresh way. They are no longer fused with the problem.

We can then start to look for ways in which the person is having an influence on the problem. This involves *double listening*: we listen not only for the problem story but also for openings to a preferred storyline:

- You have told me about the times when The Hopelessness is strongest. When are the times it is less strong?
- What are you/others doing at these times?
- How do you keep The Hopelessness at bay during these times?
- What skills are you or others using?

This preferred storyline (for instance, 'in service to others') will consist of what the person gives value to, their skills, abilities, hopes and dreams.

Over time, we start to build or reclaim a rich/vivid/strong preferred storyline of identity so that it becomes more influential in a person's life. There are many different ways of doing this in narrative practice. We discover people's skills in getting through hardship and we can trace the history of these skills:

- You say that it is 'determination' that has kept you alive. Can you tell me a story about this determination, about a time when you called on it?
- Can you speak about the history of this determination? When did you first become aware of determination? When did it come into your life?
- Is this determination linked in some way to your family, your community, your faith or your culture? Are their proverbs, sayings, stories, songs, images with which this determination is linked?

This is about assisting people to re-engage with particular aspects of their history. One way of building this preferred storyline involves linking it to the memories of treasured people who have passed away:

- When you say that you use determination to keep The Hopelessness at bay, who did you learn this determination from?
- Even though they are no longer alive, what do you think they would say to you if they could see how you are now using the determination they taught you? What would they think about you carrying on their legacy in this way?

The importance of double listening and honouring responses to trauma

Narrative practitioners believe that 'double listening' and generating a preferred storyline of identity is significant for all people, but there is a particular history that makes it all the more significant when working with people affected by war. Historian Ben Shephard

(2002) highlighted how initial efforts to acknowledge the long-lasting effects of trauma were linked to seeking justice and compensation for victims of the Holocaust. In the 1950s, when people first began to agitate for compensation from Germany, a number of German 'experts'

testified in the German courts that it was 'common knowledge that all psychic trauma, of whatever degree or duration, lose their effects when the psychologically traumatising event ceases to operate' ... The gauntlet was thus thrown down – to all psychiatrists outside Germany, but doubly to Jewish psychoanalysts – to prove that the effects of that experience *were* prolonged. (Shephard, 2002, pp. 259–360)

These efforts led to the naming of 'survivor syndrome' (Shephard, 2002, p. 360) and the first professional recognition of the long-lasting effects of traumatic experience. While this had real material consequences in terms of compensation and different forms of justice, Shephard (2002) explained that there were additional effects:

The point ... is not whether the concept of the survivor syndrome was right or wrong, helpful or unhelpful, in the lives of Holocaust survivors; rather that in the late 1960s the post-Holocaust literature had a considerable influence on psychiatrists working with Vietnam veterans. It created a new professional model: the psychiatrist as patients' advocate, helping a group of wronged victims to win reparation. It also popularised the idea of a general, loosely defined 'syndrome' among a group of patients, made the idea of *delayed* emotional after effects of trauma respectable and put guilt, especially *survivor guilt*, on the agenda. Thus the balance was shifted between trauma and victim, putting much greater emphasis on victimhood than on endurance. (Shephard, 2002, pp. 360–361)

This was a starting point for claims for justice being linked to proof of ongoing psychological harm. While this, on one hand, has provided a new realm of justice-seeking and reparation/compensation, the process can also inadvertently generate damage-centred narratives and storylines of identity than emphasise *only* harm done, not endurance, nor survivors' *responses* to hardship and trauma (see Denborough, 2005). This continues to this day, as veterans (and others) must prove persistent psychological damage in order to be eligible for certain forms of financial aid and other

support. This was evocatively described in the following submission to the Senate Inquiry into Suicides by Veterans and Ex-service Personnel (Commonwealth of Australia, 2017):

The narrative in my head, and the conversations outside of it, for the past two years have been all about how unwell I am. How can I work towards getting better when I am constantly having to reflect on the nature and degree of my illness? This is the main reason I consider withdrawing the compensation claim: it is keeping me in 'sick' mode. I don't think I'll ever have the kind of life I had before, but I'm determined to get past surviving and start living some kind of life. I need to start focussing on the parts of me that still work, and the ones that are bursting with potential, and build on those. But while all my attention is diverted to the narrative of illness and failure, it's not happening. The process is demeaning, arduous, and disempowering by design. (Name Withheld, 2017)

In this context, double listening and generating stories that support preferred identity conclusions becomes all the more significant. So too does honouring people's *responses* to trauma (Wade, 1997; White, 2004).

Responses to trauma

When working with people who've been through recurrent trauma ... it's vitally important that the therapist listen for signs of what the person has continued to give value to in life despite all that they have been through, and for any expressions that might provide some hint of the person's *response* to trauma. No-one is a passive recipient of trauma. People always take steps in endeavouring to prevent the trauma they are subject to, and, when preventing this trauma is clearly impossible, they take steps to try to modify it in some way or to modify its effects on their lives. These steps contribute to the preservation of, and are founded upon, what people hold precious. Even in the face of overwhelming trauma, people take steps to try to protect and to preserve what they give value to. (White, 2004, p. 28)

If people endure traumatic experiences, and there is a focus only on damage done (and no acknowledgment of people's responses, skills or knowledges), this can in turn lead to a sense of desolation, as Michael White described:

in the context of trauma, and in its aftermath, these responses to trauma are often rendered invisible through diminishment and disqualification – these responses and what they signify in terms of what people give value to are regularly demeaned and ridiculed ... This contributes to a sense of personal desolation, to the development of a sense of shame which is strongly experienced by so many people who have been subject to trauma, and to the erosion of a 'sense of myself' ... In some circumstances this can develop into feelings of wretchedness and self-loathing. (White, 2004, pp. 28–29)

In the next section, I want to focus on narrative responses to shame.

Shame

Some of the most evocative descriptions of 'moral injury' that I have read are from veterans speaking of shame. Iraq war veteran and minister in First Christian Church Michael Yandell described:

After my stay in the psychiatric ward at Walter Reed, I got the opportunity to spend a day visiting the National Mall with a close friend. I saw all the beautiful monuments that tell a certain story. I remember the pride I felt at being a part of that national story, and I remember the heartache I felt considering the profound sacrifice of all those memorialized there.

I stood there proud, and I stood there ashamed. Shame, because I knew the story told of victory through sacrifice leaves out many unattractive details. Shame, because at the time I was given the opportunity to remake for myself a good life, while others had none at all. Shame, because I knew there was a different story to tell, or at least a more complete story, and I was afraid to tell it. Shame, most of all, because I knew that what was expected of me in that place was to feel pride and gratitude. This is the worst shame – to feel ashamed for feeling shame. (Yandell, 2019, p. 12)

I want to mention two approaches to such shame – externalising shame and what is known as honouring 'the absent but implicit' (Freedman, 2012; White, 2000).

Creating a place for shame through externalisation

In some circumstances, shame can be externalised in significant ways. Kylie Dowse has described in her group work with men who have been violent to their women partners, that shame gets in the way of them speaking honestly about the abuse, violence and harm that they have caused. In turn, the ways in which they minimise, hide and/or mystify their violence can further undermine women and make them feel crazy. The ways in which Dowse respectfully enabled men to externalise shame (and even speak of Shame in personified ways) did not absolve men from responsibility for the violence they had engaged in; quite the opposite: it became more possible to speak openly about this violence and to take *action* to address it and prevent future harm. While Dowse's work was in a civilian context, I am including it here because I believe her approach to externalising shame can be relevant to many who have survived war and are living with moral anguish and guilt. Here Dowse describes how she facilitated group conversations with men about shame:

Men were invited at the outset, well before any stories were shared, to contribute to the creation of a list in response to the question: 'What might get in the way of sharing stories of harm?' Usually the list includes issues relating to confidentiality and judgement from other men in the group, and always includes men's own experience of Shame ... in recounting stories of harm, Shame often surfaces. We invite men to notice when Shame is present and, respectfully, when it appears present for others. Questions follow. We document what Shame looks like and we each get to know it better. Interestingly, Shame has always been male, and is highly critical ... During several subsequent sessions, men's stances toward Shame shifted, and I added a chair to our circle with the name 'Shame' written on paper and taped to it. We began to refer to Shame as a character sitting on his own seat in our circle. Sometimes, if facilitators noticed a man struggling with Shame, we might face Shame's seat and ask him to leave the man alone so he could tell his story. (Dowse, 2017, p. 5)

It was only when Shame was externalised and richly characterised that the men in the group became able to speak openly and honestly of the violence they had enacted. This, in turn, made a big difference in terms of women (ex-)partners' health and general wellbeing and also in preventing further violence.

*Honouring what is absent but implicit –
in response to moral distress*

Sometimes, when people are wracked by guilt and other forms of moral distress, externalising shame is not enough, and in addition, narrative practitioners seek to make visible what is 'absent but implicit' in such anguish.

Consider Harry Moffitt's description of redoubled shame – the shame of being ashamed:

feeling so guilty I didn't want to show my face ...
I wanted to crawl into a hole. By taking that
wrong turn on the top of that hill, I had killed a
mate, and was directly responsible for Sammi's
terrible injury – he later lost his leg. I wasn't
sleeping, I felt humiliated and pathetic and
cowardly; and then, realising that my inward-
spiralling thoughts were all about me and my
role, I felt a redoubled wave of shame.
(Moffitt, 2020a, p. 222)

In hearing people's expressions of moral anguish, disorientation or injury, narrative practitioners listen for what is implicit in this anguish – that which is valued and treasured:

People always accord value to something. Even the mere fact of a person's continued existence is evidence of this. Although what it is that people accord value to can be very difficult to identify, people's expressions of pain and distress usually provide some clue to this. For example, a person's expression of pain can be considered a testimony to what it is that the person gives value to that was violated or dishonoured in the context of trauma. According to this understanding, the intensity of the pain corresponds with the intensity to which the person held precious what was violated or dishonoured. And the experience of day-to-day distress as an outcome of trauma can be considered a reflection of the extent to which a person is committed to maintaining a relationship with what they give value to, of the extent to which a person has refused to become resigned to aspects of their experiences of life, of their situation, and of their circumstance (White, 2000, 2003). Ongoing day-to-day distress as an outcome of trauma can be understood to be a tribute to the maintenance of an ongoing relationship with what a person holds precious, and a refusal to surrender this. (White, 2004, p. 56)

For instance, implicit in Michael Yandell's descriptions of shame while visiting the National Mall, and in Harry Moffitt's description of guilt in relation to his friend's death, are values and ideals that have survived the wars they fought in. It would be up to Michael Yandell and Harry Moffitt to articulate what these values are. I could only speculate that they might include honesty, self-sacrifice, loyalty, protection of others. And of course, I have no idea about the social histories of these values in their lives and communities.

If a narrative practitioner were listening to their descriptions of the shame of being ashamed, they might ask the following sorts of questions¹⁵:

To be ashamed of being ashamed ... would speak to me about some values that you hold that are obviously important to you in some way, and you find yourself at odds with them – would that be true?

I'd like to ask you about what those values are, and about the genesis of those values in your life, if that would be okay?

I get the sense of what you're saying – that you've said and done things that would've gone against your better judgement or something, or that don't fit with how you would more ideally be in life. Would that be right?

Why are you at odds with yourself over this?

Does it do injustice to things that you would otherwise want to stand for?

These are questions that are seeking to acknowledge values or principles that are 'absent but implicit' in these experiences of shame or guilt. Listening for, and drawing out the ideals implicit within anguish, it then becomes possible for these to be named. It also becomes possible to hear stories about people who have shared these principles, and to consider how they were violated during the war, but perhaps can be resurrected and carried forth.

Distress as fidelity

A further way of conceptualising moral anguish (and the absent but implicit), is considering what moral distress represents in terms of what the person is staying true to, staying faithful to:

After his return from combat, Craig Mullaney made a ritual of reading the Washington Post's

list of American casualties. He explains of this practice, 'Scanning those pages was a form of penance, the only connection I had to the war. I was desperate not to forget them, and I was desperate not to forget my own experiences. I willed myself to record every shard of memory I could recall from the deployment. It helped me close the distance.' (Wilson, 2014, p. 67)

I have heard a number of such stories. Even though such engagement with memory may cause sorrow or anguish, veterans – and others who have lived through war – pursue these remembering. To understand such actions as pathology is to miss a great deal:

the hegemony of the therapeutic model threatens to obscure the ways in which moral grief reflects virtue. Where many therapies, especially pharmaceutical ones, seek to neutralize the experience of psycho-emotional suffering, the present account of moral grief contends that it would be the absence, not presence, of lamentation that should be our concern. ...

For those who suffer moral injury, fidelity suggests a willingness to revisit the hardships, the loss, the compromised agency, even though in recounting the past we may shudder to remember and recoil in grief ... War memoirs, war memorials, the allegiance to personal history and story: these are the hallmarks of fidelity ... Fidelity indicates a staying with the stories of our lives, despite the often powerful longing to dissociate if not forget painful memories. (Wilson, 2014, p. 68)

In these circumstances, the question becomes, 'what are we being faithful to through this grief/distress?'

To be sure, we should not dismiss the fact that the tragic memories to which we remain faithful are haunting, often agonizing. But it seems suspect, if not misguided, to suggest that we ought not attend to those events that are most formative in our lives, those events the absence of which would make our present selves unrecognizable. For those who suffer moral injury, the grief, though unwelcome, becomes ... a center of narrative gravity, an essential element in the sense and story of self. (Wilson, 2014, p. 71)

Once we discover what veterans are being faithful to, our work can be to communalise this, to create contexts where this can be performed with others. I learnt a

great deal about the significance of this when meeting with the Rwandan counsellors of Ibuka (Kinyarwanda for 'remember'). These counsellors were all survivors of the 1994 genocide themselves and in support of other survivors they would:

- listen for the shared values, the self-transcending ideals, that are implicit within survivors' expressions of anguish
- notice and acknowledge ways in which survivors have carried on these ideals
- make it possible for survivors to name these shared ideals
- ask survivors to tell *stories about the social histories* of these ideals, where they come from, and with whom they are shared
- create contexts in which survivors can contribute to the perpetuation of these shared ideals (Denborough, 2010, p. 30).

Out of anguish, the work of the Ibuka counsellors ensured that, despite the genocide, the ideals of those who had passed away would survive, and this inevitably involved those suffering with moral anguish or injury making contributions to the lives of others. This process can be considered a process of 're-valuation' or 're-moralization' (Denborough, 2010, p. 30).

Finding ways to honour values that have been violated and yet have survived, and making visible how distress can represent fidelity to these values, can provide ways of responding to shame and guilt that is beyond 'forgiveness'.

Beyond forgiveness

In much of the literature about moral injury, notions of healing are wrapped up in the concept of forgiveness. This is understandable as much of the literature has been generated within Christian contexts in which the notion of forgiveness is held in reverence.¹⁶

Holding up 'forgiveness' and/or 'self-forgiveness' as a requirement or goal of 'healing' is, however, sometimes fraught. What if there are events that you participated in, or things that you did, that you can't forgive yourself for? Does this mean you have somehow 'failed' at 'self-forgiveness'? Where does this leave you?

Sometimes, refusing to forgive oneself might in itself represent a profound commitment. What's more, there may still be action that one can take in relation to the events in question. For instance, Harry Moffit wrote:

Having crawled to where I thought my gun was, I was about 20 metres away from the vehicle when my teammate 'Seadog' Waterman got to me.

'My back's fucked,' I said.

'How's Sean?' Seadog replied.

'He's fucked. He's dead.'

In the twelve years since, I have been over and over the events of that morning and my part in them thousands of times. With a great deal of talking and therapy and reconciliation, and other stages in my healing process, I have managed to forgive myself for all of my actions except this one. I deeply regret saying what I did while, a few metres away, members of my team were working on him, wondering why, but also thinking, *What else can they do?* That's what they would be doing for me or anyone else. During the CPR, I watched as Sean regained a sort of consciousness for a few seconds. He sat up, grabbed the guy crouched over him, let out a semiconscious yell, and then passed out again. I will always be haunted by the possibility that Sean was awake enough to hear me saying that I'd given up on him. I don't think I can ever forgive myself. (Moffitt, 2020a, p. 220)

These are events for which Harry Moffitt could not forgive himself. What has he chosen to do with this? What actions has he taken in relation to this regret? I sense a great many actions. In later pages we read:

One thing I really needed to do was to get in touch with Sean's parents, David and Mary McCarthy. He had died a soldier's death, giving his life in defence of the country and values he loved, surrounded by his comrades in arms. (Moffitt, 2020a, p. 228)

So it seems Harry Moffitt took action in relation to the living – seemingly to convey stories to his comrade's parents that honoured their son.

What is more, Harry Moffitt chose to write about, to make public, that for which he could not forgive himself. This, to me, represents a particular sort of moral courage. If soldiers are placed in contexts in which it is almost inevitable that they will act or speak in ways in which they will later regret, how can contexts be created in which the 'unforgivable' can be shared, communalised, brought out into the light of day?

Harry Moffitt's willingness to share that for which he cannot forgive himself offers a pathway beyond forgiveness. This is a pathway on which people can share that for which they cannot forgive themselves and then join in making contributions to the living.

Saying hullo again to those who have passed away

Sadly, those who have lived through war – whether veteran, interpreter or civilian – have generally known and loved others who were killed during war. It seems relevant to discuss the ways in which narrative therapists and community workers respond to those who are grieving. Back in the 1980s, narrative therapist Michael White (1988) introduced the concept of 'saying hullo again' to a lost loved one in order to transform the experience of grief. It can also assist us to see how we are carrying on the legacies of those we have loved.

The idea of saying hullo again to someone who has passed away sounded strange when it was first proposed in the 1980s. At that time, within Western culture, the dominant metaphor of grieving involved only 'saying goodbye'. We were often invited to undertake a step-by-step process of saying goodbye, moving on, and accepting a reality that no longer includes the lost loved one. In his work as a therapist, however, Michael White discovered that some people struggle profoundly with trying to say goodbye to those who have died, and that, in these circumstances, saying hullo again can be highly significant. This idea is supported by the work of anthropologist Barbara Myerhoff:

Freud ... suggests that the completion of the mourning process requires that those left behind develop a new reality which no longer includes what has been lost. But ... it must be added that full recovery from mourning may restore what has been lost, maintaining it through incorporation into the present. Full recollection and retention may be as vital to recovery and wellbeing as forfeiting memories. (Myerhoff, 1982, p. 111)

Of course, when someone we love dies, there is much to say goodbye to, including a material reality, hopes and expectations. So what we are really discussing here is a process of 'saying goodbye and then saying hullo again'. To show the ways in which saying hello again questions are shaped, I'll include here a series of questions that Michael White (Archive tape #210) asked parents who had lost a daughter in an accident during her military service:

I've heard about a lot of steps that you've taken through this very difficult time in finding direction following this tragedy, and you've shared with me a number of those steps ... which of these developments do you think your daughter would have really appreciated? Or how do you think she would respond to these developments if she could be present?

So, if she was present listening to our conversation, if she could be here – in a way she is because you've really brought her alive to me – if she was here what would she say to you about this?

You experienced her pride in you. What does that bring to your life to experience her pride in you as parents, and her pride in you over taking the steps that you've taken and finding a direction following the tragedy? What does that do to you to experience her pride in you? How does that affect you?

So you have really found a way of opening a space for her voice to be with you in your life. You've found a way of making sure that she has a place, that she can be present to you now as you live her life.

Let me offer a further example of what have now become known as 're-membering conversations' (White, 2007b). Sahar Mohammed, a narrative therapist in Palestine, engaged in re-membering conversations with Ghadeer Nazaal (pseudonym) who was 23 years old and lived near Jenin. When Ghadeer was 17 she suffered from the shock of losing her mother who had struggled with liver cancer for many years. Two years later, her brother, Mahmud, who was 21 years old, was killed by the Israeli military. When Ghadeer first attended counselling with Sahar she was 21 and felt 'there is nothing in the world that is worth living for'.

Here I will include an extract from their conversations that relates to 'saying hullo again' or 're-membering conversations'. I have included all of Sahar Mohammed's questions in this extract so as to provide a sense of the care and persistence of a narrative therapist. I haven't, however, included all of Ghadeer's responses.¹⁷

Ghadeer, as you speak about these three themes – 'We live life with all what comes in it – the sweet and the bitter'; 'We must preserve our dreams and ambitions no matter what happens'; and 'This is about getting closer to God' – who in your life would be least surprised to hear you

speaking about these matters? This person could be alive or deceased. Who would most appreciate what you have been saying today?

My brother Mahmud.

How did Mahmud contribute to your life? ... Can you tell me something that Mahmud introduced to your life?... What was most significant about him to you?

Because he was the oldest among us, when my mother passed away we were very close together. He made up for my mother's tenderness. We made up for our mother's tenderness between each other. He also behaved well and I liked to imitate him.

How was your life affected by Mahmud?

When he was alive he trusted me with many things and made me feel confident and important and I was very happy. During his loss I was very annoyed and the situation changed: The Pain and The Separation took over my life.¹⁸ But I like the way Mahmud lived his life.

What do you think Mahmud valued about you as his sister?

After our mother died, I assumed responsibility and became like the mother in our house. I took care of him and provided him with security.

Was there anything that Mahmud found in you that others might not be able to see?

Mahmud knew I had courage. I had courage to deal with the difficult situations we've been through. I did prove I was able to endure especially when they detained two of my brothers and I was staying at home without being scared. Thanks to God I have overcome all of this.

So what is it that you think Mahmud valued about you ... what made you a valuable part of his life?

My ability to act in difficult situations.

Were there specific things, specific times when you and Mahmud were significant to each other?

During my mother's illness, we compensated for her tenderness. We took her together to the hospital. After her death we would also study together ...

If you could see yourself through Mahmud's eyes, what would he most appreciate about you?

That we took up our responsibilities in situations bigger than us. I remember he asked me to take care of my siblings.

So he would appreciate that you are taking care of your sisters now, that you are trying to change the mood around them, that you are trying to overcome the 'pain and separation'?

Yes, I think he would be proud of this.

In reviewing your thoughts, how was Mahmud's life different because you were in it? Were you responsive to him?

Yes I was responsive to him. I did do the things that he liked, for example I invited his friends for Ramadan. And together we overcame the loss of our mother. The mother is everything in this world. She was not an ordinary person. She was very dear inside the house and outside. And because I was Mahmud's older sister, I took mother's place when she died. I did everything I could to compensate for her financial, psychological and emotional support. I cared for and educated my younger siblings, make sure they do not need anything, I do the housework, take care of the garden, and I do private tutoring to save money.

What did all these actions make possible for Mahmud?

It made it possible for him to feel secure and to go ahead in his work and his life. When a human being finds who to trust, he becomes able to better assume his responsibilities.

And Mahmud could trust me. I can only say that we complemented each other. In bearing the responsibility of our female siblings, when he was there, he did what I could not do, and I did what he could not do.

Do you think Mahmud's personality was in any way different through his relationship with you?

Perhaps he became more patient and accepting.

Does it make a difference to think about Mahmud in these ways?

[Losing] my brother Mahmud is the most difficult experience I have ever gone through in my life.

At the beginning, I felt I had completely collapsed because I relied on him and he had gone forever. But after thinking about what Mahmud hoped for in his life, what he wished for, and what we became together, his memory is like a moving force for me. It is pushing me forward in life. It is making me stronger.

What do you think will become possible in the future if you remember your relationship with your brother?

In my view, I have been through the most difficult problem in my life ... [losing] Mahmud ... Now I am going to continue his dream by completing my studies at university and by taking care of my siblings.

Would you like to add anything before we finish?

What hits us and does not kill us makes us stronger and courageous.

Within this conversation, Ghadeer's commitments to study and to care for her siblings become intertwined with the storyline of her relationship with her brother, Mahmud. The two-way nature of this relationship became richly described and Ghadeer explains how, through these conversations, Mahmud's memory becomes 'like a moving force ... It is pushing me forward into life'. This is one of the aims of re-membering conversations: the preferred storyline of Ghadeer's life is now linked more strongly to the legacies of her brother.

These re-membering conversations do not invite people to 'forget', 'accept' or 'move on'. Instead, they seek to make it possible for the memory of a lost loved one to become, as Ghadeer describes, 'a moving force'.

Before I turn to collective responses to grief and moral injury, I wish to consider the experiences of those who see images and/or hear voices of those who have died.

Seeing images and hearing voices

Hearing the voices of those who have died, or seeing visions of them, is a relatively common experience across the world's cultures, and yet within Western psychology it is routinely pathologised and associated with mental health conditions (in particular diagnoses of schizophrenia). As such it can attract great confusion, stigma and silence.

When voices and visions appear that are linked to traumatic experiences (whether these are related

to interpersonal abuse or contexts like war), these experiences can be profoundly disturbing. It's not uncommon for those who have experienced war, whether as military veterans, interpreters or civilians, to experience hearing voices or seeing visions. Harry Moffitt has offered a vivid description:

The young boy I had been caring for after the suicide bomb attack visited me in my sleep. Even after I came home, when the rest of it had settled down, I still saw him while I was swimming laps at the pool, or while I was driving to the shops, playing with my kids, watching television, batting in the nets. *Bang*, there he was. I would feel sadness, guilt and occasionally depression and anxiety. (Moffitt, 2020a, p. 128)

For some decades now, the Hearing Voices Movement has demonstrated the importance of creating space within cultures for people to be able to speak about and make meaning of their experiences of visions and voices, without these being pathologised (see Bullimore, 2003; Downs, 2003; Romme & Escher, 1993, 2000). What's more, it has become clear that what matters in relation to people's wellbeing is their experience of the *quality* of the relationship with such voices and visions. If their relationship with voices and visions is peaceful and respectful, then the quality of life is enhanced. If the relationship with voices and visions is characterised by hostility, then quality of life is threatened. The work of the Hearing Voices Movement has also illustrated how relationships with voices and visions can change.

Michael White, from his experience in working with people experiencing voices and visions, implored health professionals to enable people to speak about 'psychotic phenomena' and even to find support within this experience:

I believe that people who are subject to psychotic phenomena that are traumatising can do with all the support they can get, even if some of this support is to be found within the psychotic experience itself. It is not unusual for people in these circumstances to report that some of the voices they experience seem genuinely

concerned for their wellbeing, even if they are at times somewhat misguided in their attempts to demonstrate this concern. Now, it is possible to assist people to more clearly distinguish these friendly or potentially friendly voices from the hostile voices, and to develop a stronger alliance with these more supportive voices, one in which they become better informed about what is in the person's best interest. Such alliances can play a significant role in that they provide people with support and with the experience of a solidarity of purpose. This renders them less vulnerable to the insecurity that the hostile or dominating voices provoke and rely upon to achieve a position of influence in the person's life. (White, 1995, pp. 135–136)

Former US Navy SEAL Robert Foley, someone who has experienced voices and visions himself, has trained in the Hearing Voices Movement approach (Romme & Escher, 1993, 2000) and is involved in assisting other veterans in their relationship with such voices/visions, without pathologising this experience. The meanings of what at first may be profoundly disturbing experiences can sometimes alter when voices/visions are respected and engaged with (R. Foley, personal communication, 2020).

This was the case for Harry Moffitt, who with the assistance of a psychologist, explored why the boy might have been visiting him, and over time engaged this boy in imaginary conversations:

he was visiting me to thank me, not to bring me sadness; and that he wouldn't want me to be depressed and that I should welcome him and indeed look forward to telling him how I was going now. These imaginary conversations would change a number of things for me, and eventually I would smile and feel glad when I saw him, to remember that in his last moments he received care and compassion. (Moffitt, 2020a, p. 128)

Far from pathologising experiences of voices and visions, accompanying people to revise their relationships with these experiences (and honouring supportive voices) can make a profound difference to people's suffering. So too can collective responses to suffering.

PART 3: Collective responses to moral injury

In the final part of this paper, I wish to explore collective responses to moral injury.

'What is yours is all of ours'

Conventional responses to PTSD (and some clinical responses to moral injury) locate both the 'injury' and the 'healing' with the individual. Sadly, the more difficult someone's struggles, the more likely the professional response will be individualised, but this is profoundly limiting and problematic – even more so for those whose 'injury' has been generated in the context of collective hardship.

The mantra of collective narrative practice is:

The person is not the problem, the problem is the problem and the solution is not only personal.
(Denborough, 2008, p. 192)

This echoes the sentiment of Jonathan Shay in his influential writings about moral injury:

The essential injuries in combat PTSD are moral and social, and so the central treatment must be moral and social. The best treatment restores control to the survivor and actively encourages communalization of the trauma. Healing is done *by* survivors, not *to* survivors. (Shay, 1994, p. 187)

Narrative practitioners rely on linking people with others and enabling contributions *between* those who are suffering.¹⁹ For military veterans, this seems all the more important.

I was powerfully moved when I read this account from Harry Moffitt describing the collective experience of receiving and reading mail when on deployment:

A crucial source of morale was old-fashioned mail ... most of our contact with loved ones was through snail mail ... To come home from the field to a bunk with letters and packages lying on it was one of the greatest gifts a soldier could receive from his family ... To not receive mail, on the other hand, was like a dagger to the heart. We would share if we had to, and sometimes we would readdress names if a person had not received any. Everyone took great joy in seeing what everyone else had, not least if there was (suspected) alcohol and treats. These all got stacked in one pile, on the principle of 'What is yours is all of ours'.

Then things would go quiet as we got to our letters. I remember looking around the team and seeing everyone reading at the same time. Letters from family – mums, dads, sisters, brothers, kids, cousins, aunties even ... I would steal a glimpse of welling eyes, a nostalgic paralysis, a sentimental yearning. These were some of the most powerful moments in my life.
(Moffitt, 2020a, pp. 47–48)

These were also moments where the men were connected together – in silence – in what I would refer to as 'communitas' – a shared sense of togetherness (Denborough, 2008, p. 41). Significantly, this was not a closed group identity of soldiers because these rituals also involved the men being joined with their family members, the letter writers. Knowing how significant such collective rituals were for veterans during deployment, I believe narrative practices can be used to generate this sort of 'communitas' in civilian life – where veterans have a sense of unity with each other and at the same time with loved ones and a broader civilian world. I want to offer two possibilities here.

Creating audiences for stories from war

When veterans return to civilian life, finding contexts of 'communitas' like those described above can be profoundly difficult:

The loss of my community meant the loss of an audience for my narrative. (boudreau, 2019, p. 53)

to find words for disorientating experiences and connect to people without similar experiences is often difficult in itself. If society then seems to offer only black-and-white narratives of heroes, victims and perpetrators, this exacerbates this difficulty. (Molendijk, 2021b, p. 164)

Some veterans do find responsive civilian audiences for their stories. Harry Moffitt, for example, described how his cricket team provided such an audience for him:

I still carried the guilt and shame, but my civilian [cricket team] mates had an endless appetite for hearing stories about what I had done in the services, and this alone helped me feel better.
(Moffitt, 2020a, p. 230)

Many veterans, however, do not find a place of recognition upon their return to civilian life. Tine Molendijk has described how veterans, when struggling with moral injury, are likely to experience misrecognition if their stories are responded to with either admiration or criticism:

not only public criticism but also admiration may be experienced as misrecognition, and that perceived societal misrecognition may directly and indirectly contribute to moral distress. (Molendijk, 2021b, p. 9)

So what are alternative responses to veterans' stories outside admiration or judgement?

Within the field of narrative therapy and community work, a great deal of thought has gone into the importance of witnessing practices (White, 1999, 2004, 2007b). These involve responding to the testimonies or stories of others in ways that are honouring and not pathologising, patronising or praising.

Acknowledging witnesses 'double listen' to the stories being told and then respond in particular ways. Let me offer an example of an acknowledging witness response to a testimony given to the 2017 Senate Inquiry into Suicides by Veterans and Ex-service Personnel. First, here is the testimony:

I served for ten years as a marine engineer in the Royal Australian Navy. I am unrepresented in the public narrative about veterans. I am not a Vietnam veteran. I was not in the army. I did not serve in Afghanistan, Iraq, or the Persian Gulf. I am not a man. I wasn't part of a warfare categorisation. I haven't seen combat, but I can provide a voice for some ex-serving women.

I was involved in numerous traumatic incidents during my service ... Abuse of power, sexual harassment, sexual assault, sexism, and the institutional failure to act if any of these things are reported.

The unwritten initiation for one department crew that I was posted to was to demonstrate raping a doll that was the mascot of the department. I was continually reminded that I hadn't taken part and wouldn't be a 'real' part of the team until I had. Seeing my colleagues enact that ritual and cheer each other on was terrifying, and just another way that sexual violence and misogyny was glorified and rewarded all around me during my career. Men that I served with would brag about the sex workers they'd assaulted in alleys in foreign ports, encouraging junior members of the crew to never pay the sex workers, and teaching them how to avoid being caught by pimps and police.

The whole culture was predatory, and each new intake was known as 'fresh meat'. I found

refuge from the aggressive, predatory men by being in a relationship with another trainee. This was against the rules, and it wasn't even safe because he knew he held that power, and he used it to abuse me psychologically, and to commit rape. But it was still better to be raped by my boyfriend than to be the target of a hundred others.

The government took me as an 18 year old and failed to keep me safe. I was injured at work, treated awfully, and forced to suppress it for a decade. It all came to the surface and I was labelled a malingerer and a traitor. And worst of all: now, and throughout, the intense *shame* of the whole process is mine to carry. Forever. I am forever medically discharged; unfit for duty, a sailor on a pension in her thirties. Even writing this submission I can hear an inner voice telling me that I was weak and I shouldn't be sharing this because I'll only be judged badly for it.

The only reason I have for continuing the compensation claim is principle. I want to ensure that the records reflect the true cost of operating a defence force.

I would also like to remind the people reading these reports that the effects of reading and hearing vast amounts of distressing material ('vicarious trauma') are well documented, so please look after your own mental health along the way. We need *you* fit and well, too. (Name Withheld, 2017)

I do not know this person's name, because her testimony was lodged anonymously, but for now I shall refer to her as Amy. If you were to become an 'acknowledging witness' to Amy's story, these are the sorts of questions you might consider:

- Which *particular* aspect of how Amy responded to her situation were you most drawn to?
- Which aspect most captured your imagination, fired your curiosity or provoked your fascination?
- Was there a particular skill or something Amy did that struck a chord for you?

Having thought about this, an acknowledging witness would then try to convey to Amy how hearing her story had somehow made a contribution to their own life.

- Has Amy's story moved you to think something, feel something, do something in your own life? I don't mean whether it simply moved you

emotionally, but how did it move your thinking?
How did it affect your understanding of your own
life and identity? What has Amy's story inspired or
encouraged or challenged you to do?

Here are four 'acknowledging witness' responses to
Amy's story. I have highlighted the words that convey
the difference Amy's words made in the lives of these
witnesses:

- Amy, I know you offered your testimony to the Senate Inquiry to try to prevent the loss of further veterans' lives. **Usually when I think of veteran suicide, I don't think of women raped by other defence personnel. But I always will now.** I won't forget your story.
- The ways in which you are trying to 'provide a voice' for other ex-serving women seems really significant to me. Despite the crazy-making shame you describe, you've somehow found ways to keep speaking out about the predatory culture you endured. **I'm going to share your testimony with other ex-serving women I know** and also with colleagues who work in civilian sexual assault services. I hope your voice might assist others to find theirs.
- The part of your story that moved me the most, Amy, was the care you showed to us, those who might be hearing or reading your testimony, those you don't even know. Despite all that you've endured, including the cruel responses, you are concerned for us – the receivers of your testimony. **There's something about your concern that is going to remain with me.**
- Let the records show 'the true cost of operating a defence force'. I'd never thought of the importance of this principle before, but somehow you've held on to it, even though talking about this has its own cost for you. **I'm going to think more about honestly accounting for the costs of operating our defence force – including on women's bodies and minds.**

As acknowledging witnesses, we cannot change the injustices to which Amy has been subjected. But we can let Amy know that as a result of her sharing her testimony we will now be taking different actions, that her words have made new things possible, that her act of sharing her story has made significant contributions to others. I hope one day we do get to let her know.²⁰

Within narrative practice, we try to convene 'definitional ceremonies' – ceremonies that redefine identity

(Myerhoff, 1982). These informal ceremonies can act a little like the original rap meetings mentioned early on in this paper, in which veterans spoke about what was important to them in front of acknowledging witnesses. These provide forms of acknowledgment and recognition that contribute to strengthening the preferred storylines of veterans' identities.²¹

Letter exchanges

Because of the ways Harry Moffitt has described the significance of receiving and sharing letters, it also seems relevant to make connections with the rich tradition of letter writing and message exchanges in narrative practice (Madigan, 2011). Documentation in many psychological models focuses mostly on psychiatric files that record only the problem story. However, within narrative practice, letters are used to honour people's skills and knowledges and also to enable individuals, families and groups to make contributions to each other.

Here is an example of a therapeutic document written by a narrative therapist to a veteran who was consulting her in relation to moral injury:

Dear Michael,

Some of our most significant conversations have included you speaking about what is important to you. You have spoken about how when you are aligned to particular values or principles you are no longer in distress. And you have spoken about the importance of a moral compass – both during war and afterwards.

I was very moved when you told me the story of the 'brave young soldier' in Iraq who shot dead an old man at the checkpoint, and how, despite being legal according to the terms of engagement he was operating under, it led this young man – who you cared deeply about – to later end his own life. Two tragic deaths. You told me this story to convey the importance of a moral compass. Of how 'we always need to question how this is going to sit long term with me'. This is a question that has remained with me. It is a question I am going to keep asking myself too.

You have also talked with me about some of your treasured values: 'What I value most is honesty and being loved. The principles I seek to live by are honesty, self-belief, selflessness – we are part of a network and an important part.'

You have also told me about the importance of 'viewing people as people'. You told me that: 'People here in

Australia sometimes judge and criticise or give their opinions that they have gained from the media. They are so black and white in their opinions. For example, that because someone is an Arab, they don't feel loss. But I've seen parents holding their children who have been blown up. I have seen so much grief. I view people as people.'

This seems really significant to me. In cultures of warfare there is a lot of work that goes into not 'viewing people as people' and as you say, talking about 'collateral damage'. But somehow you have held on to 'viewing people as people'. You refuse to minimise other people's suffering. In fact, you continue to honour other people's suffering.

You also don't forget those who have died.

You have spoken of certain rituals. At anniversaries for instance, you might re-watch the film *American Sniper* to remember and honour Doug and others. You told me this helps you to reconnect with what it felt like – the energy, the rush – and to reconnect with Doug. Even though this brings on sleeplessness and hardship in the days after, you are determined to remember.

You have shared with me that you sometimes have intense visions of people you have known who have died. At times they are as real as looking at anyone else in the room. These are people who have died. While many people may have forgotten them, you have not forgotten them. You still see them.

It sounds like sometimes your remembering those who have died has assisted others. I found the following story really moving: You told me that when you were visiting America, you decided to go and talk to Doug's parents. You told me how this was a very meaningful thing for you to do and that Doug's parents said to you that they felt a lot closer to their son because of your visit. You told them what their young son was like in Iraq and who he was to you, the kinds of things you talked about together.

Would you call this act of visiting Doug's parents an act of 'honesty and love'?

These are just some of the things we have spoken about, Michael.

I have really appreciated hearing about the steps you have been taking in 're-joining the human race'.

I hope it is helpful to have these written down.

With great respect,
Louise

In addition to letters written by counsellors to veterans, it would be quite possible to create letter exchanges *between* veterans, between veterans and their family members, even between those veteran families bereaved by suicide and those veterans who might currently be struggling to find a will to live. Letter writing rituals and, perhaps more significantly, letter opening and reading rituals, could also be created to echo the atmosphere Harry Moffitt described: 'I remember looking around the team and seeing everyone reading at the same time' (Moffitt, 2020a, p. 48).

Communalising grief and enabling contribution at the same time

Jonathan Shay, in his influential writings about moral injury, spoke of the significance of the 'communalization of grief' (Shay, 1994, p. 55) so that veterans are not left alone in sorrow. In this section I wish to describe how re-remembering or saying hullo practices can also occur collectively.

Perhaps the most important principle of collective narrative practice involves enabling people who are suffering to make contributions to others. In my experience, it can be profoundly significant to enable those who are dealing with complex and multiple losses to be able to make contributions to others who are similarly struggling. One way to facilitate this involves inviting people to contribute to the creation of a collective document with the expressed aim that this will be shared with others. Many of us may struggle to see the point of talking about our grief or losses with others. But if we are genuinely invited to *use* our own suffering to assist others, it can become easier and more worthwhile to speak.

In recent meetings, over dinner, with Afghan interpreters who worked for Australian and other foreign forces in Afghanistan, it became clear that many were struggling with certain memories from their war experience. Rather than inviting the men to speak for their own benefit, we instead asked if they would like to create some sort of resource for other interpreters who may also be struggling with problems of memory. There was enthusiastic agreement, and we are now in the process of generating a collective document entitled 'How do you deal with sad memories that cannot be erased? A message from Afghan interpreters who have worked in times of war'. This collective document includes descriptions of the unique ways in which interpreters 'carry each other' through memories, and also how they 'turn memories' away from sorrow:

Most of us are settled in Australia now, and
I have great friends here in Dandenong. Most

of the times we are coming together, eating together, and everyone is telling their stories and sharing memories. When we are all together, we are sharing those experiences in a very smiling atmosphere. Whenever we feel that one of us is sad about a memory we have reminded him of, we quickly change or turn that sad memory. We turn it in a very funny way and that makes us all smile again. Everyone is then encouraged to tell their funny stories of those times. We try to find ways to tell our stories in ways that make us smile.

Importantly, we don't let anyone in our gathering keep quiet. If someone is quiet, we insist they also share their funny experience, or even if it's sad, we are trying to make it in a funny way. For example, in my situation, my friends are not just trying to ask me about the body parts of Ahmad or the boy shot dead, they are just asking what I was doing at that time, how did you assess that situation, how long did it take to get to home, what were other soldiers doing, how strong were they, whether they were shouting, what was the soldiers' reaction, what did you interpret or translate at that time, etc.²² Their questions help carry me through the memory, and turn it away from sorrow.

The creation of such a document is a forum through which people can share their losses, *and* the ways they are responding to these losses, *and* the legacies they are carrying forward from the lives of those lost. For example, within the same document, an interpreter describes how he is continuing to remember and honour his friend Ahmad who was a member of Afghan National Forces and was killed by the Taliban:

How I remember and honour Ahmad

Ahmad loved his military uniform a lot, and whenever he was going on a mission or on a patrol, he would look at himself in a mirror we had in our room and was asking me, 'Hey, look at me – how am I looking?' After his death, whenever I faced a mirror, I felt sad and then smiled and then keep quiet. And whenever there was someone around, I was asking them, 'Hey, look at me – how am I looking?' I was trying to keep Ahmad's memory alive.

Even here in Australia, I have put a big mirror in my bedroom, and nearly every morning when I'm looking to the mirror, I'm asking my wife,

'Hey, look at me – how am I looking?' Most of the time my wife didn't understand what I mean and simply replies 'great'. Even when I am shopping and looking at myself in a mirror, I am asking people around, 'Hey, look at me – how am I looking?'

Sometimes when I go to Coles supermarket, I buy black chocolates to remember him.

These narrative practices of documentation elicit and richly describe exquisitely diverse responses to grief and do so with the explicit aim of assisting others. There are many good reasons why veterans, interpreters and civilians who have experienced multiple and complex losses may not wish to speak directly about these. They may, however, wish very much to assist others in similar situations. We have found this to be true time and time again.

Two of the most influential of collective documents in relation to grief are:

- *Responding to so many losses: The special skills of the Port Augusta Aboriginal community* (Denborough, Koolmatrice, Mununggirritj, Marika, Dhurrkay, & Yunupingu, 2006), which has been shared among many different First Nations communities
- and
- *Holding our heads up: Sharing stories not stigma after losing a loved one to suicide* (Sather & Newman, 2015) which we are now expanding to include contributions from military families.

These documents represent a particular multi-storied communalisation of grief. They transform individual grief into a different sort of 'moving force'. The stories of individuals become interwoven and then shared with others. Exchanges can then take place between different collectives (see Denborough, 2008; Denborough et.al., 2006). Again, it's not a matter of 'moving on' or 'forgetting'. Instead, it's about expanding the meaning and experience of loss and legacy.

Creating a team

I want to return now to Harry Moffitt's description of The Commentator:

all I heard was the commentator in my head yelling, 'If you weren't such a fuck-up Harry, he would still be alive! You killed him!' ... My inner commentator told me ... 'What about his family and friends, what are you going to say to them ... ?' (Moffitt, 2020a, p. 223)

In my experience, sometimes we need a team to diminish the authority of such a commentator. For Moffitt, it was literally his cricket team that was influential, and his cricket captain who offered an alternative commentary:

'Harry, you're fucking killing yourself, mate. This self-pity has got to end. You don't owe anyone anything, no one thinks you are to blame or that you are a fuck-up. You need to forget all of that SAS bullshit and war crap, and forget about anyone who thinks you are to blame, they can get fucked. As your standing Second XI Captain, I order you to be sitting beside me at M. Chinnaswamy Stadium in Bengaluru and that's it. I won't hear another word.'

For better or for worse, I agree to go to India. It turned out very much for the better. (Moffitt, 2020a, p. 230)

Most veterans do not have a literal cricket team to act as an alternative commentator, but I believe a team approach is often required to diminish the authority of critical commentators.

I learnt about the power of sporting and team metaphors from young military veterans – former child soldiers – in Uganda. We met these young men at a refugee camp close to the Sudanese border as we had been asked by colleagues about ways of assisting these former child soldiers to deal with their war experiences.²³ Upon arrival at the camp, I first witnessed these young people's skill and delight on the football (soccer) field. They then taught me an important lesson. While they were on the field it was clear they were creating a place free from problems of memory, but as soon as they were gathered into a group and invited to speak about their war experiences, their heads dropped, the energy was completely transformed, and it was as if shame had come rushing over all of us. These young people had experienced and participated in the collective trauma of a brutal war and the lesson they taught me that day was that many of them not only did not want to talk directly about their war experiences, they would do almost anything to avoid talking about them.

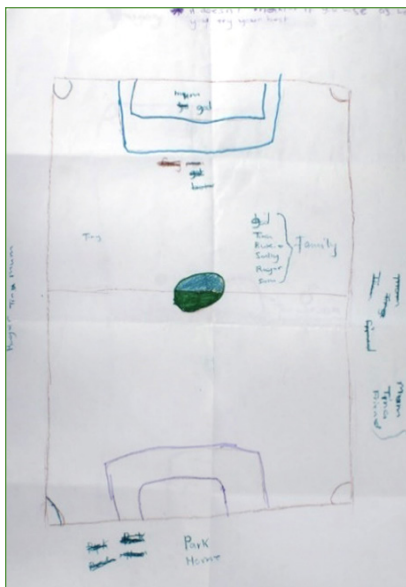
I think this is true for many older war veterans too. If talking directly about some experiences brings only shame, these young people taught me that we must find other ways. It was these young people's passion, skill and delight on the football field that led me to develop the team of life narrative approach (Denborough, 2008) as a way to address experiences

of war trauma, and indeed moral turmoil, but without having to speak directly about them, without having to speak in the first person, and without having to focus only on individual experience. I won't include all aspects of the team of life methodology here as these can be read elsewhere²⁴, but I will explain three parts of the methodology that were developed to be resonant and relevant for former child soldiers and which I think are equally relevant for adults.

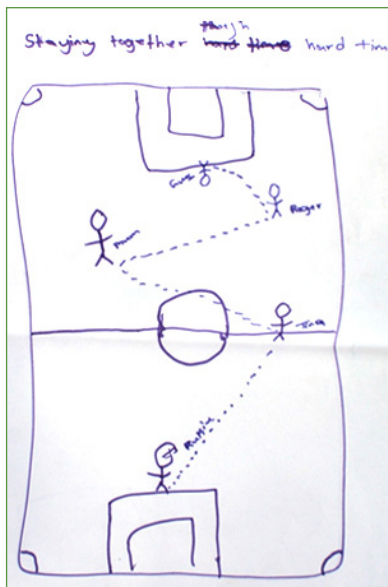
Part 1: Creating a 'team of life'

There are many different ways of thinking about our lives and our identities. One way is to think of our life as a club, an association or a team. The first part of this methodology involves each person creating their own 'team of life'. This can be physically mapped out on a team sheet as is commonly done in football and there are a range of questions that facilitators can ask in this process.

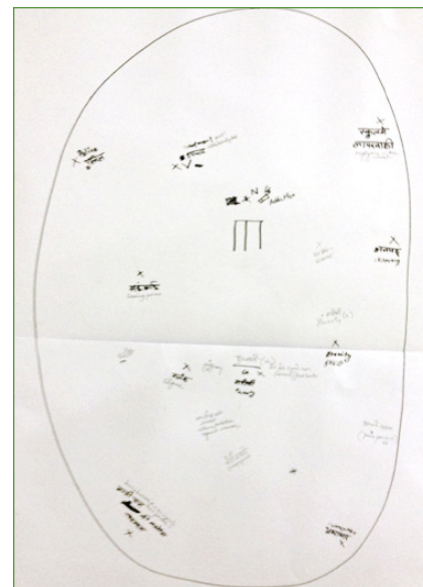
- **Who are some of the team members of your life?** These people can be alive or no longer living. They can be present in your life now or people who you have known in the past. Who are the people who have been most influential (in a positive way) in your life? These are the team members we wish to include in your 'team of life'. For example:
 - **Your goal keeper:** Who is your goal keeper? If you had to name one person who looks out for you, who guards your goals, who is most reliable, who would this be?
 - **Your defence:** Who else assists you in protecting your dreams, in protecting what is precious to you?
 - **Your 'attack':** Who assists you and encourages you in trying to score goals?
 - **Other teammates:** Who are some of the other teammates in your life, those you play with, those whose company you enjoy?
 - **Coach:** Who have you learnt the most from? It is possible to have more than one coach. And it's possible that they may or may not still be alive. What are some of the things that they have taught you?
 - **Supporters in the stands:** When you are at your home ground, who are the supporters you imagine in the stands? Who are the people (living or no longer living) who are hoping you will do well?



Part 1: Creating a 'team of life'



Part 2: Creating a goal map



Part 3: Talking about problems through metaphor

Above picture is an example of one young man's team sheet. You can see he listed 'Mum' and 'God' as his goalkeepers. The 'Park' and 'Home' were where he felt he had 'home ground advantage'. His mum, sister and God were mentioned in a number of other positions on his team too. When I asked him 'What is your team defending, what does your team believe in, what is most important to this team?', he at first shrugged and couldn't find words, but when I rephrased my questions, he quietly offered, 'It doesn't matter if you lose, as long as you try your best'.

Sometimes those who have experienced war may not wish to speak in the first person about their experiences. They may not have many spoken words to describe what they are going through. This was certainly true for the young former child soldiers who inspired the development of the team of life approach. But because they loved football, it was possible for them to speak about their lives through sporting metaphors.

Part 2: Creating a goal map

Once a collective sense of identity – a 'team of life' – has been created, it's then possible to have further indirect conversation. The next step involves identifying one goal that this *team* has already scored. Please note: I do not ask the person what goal they have individually achieved. That is quite a different question, and it is one that leaves much more room for failure. We are seeking to acknowledge a collective goal. Perhaps the person has only played

a very small role in the achievement of this goal. In no way does that diminish the significance of the team's achievement. And these do not have to be grand accomplishments. Instead, we are interested in collective achievements that often stand outside of mainstream acknowledgment. For instance, one young man who had come to Australia as a refugee and had very few words – but loved football – drew a 'goal map' honouring the achievement of 'staying together through hard times'. This goal map demonstrated how his sister, his mother, a friend and the young man himself, had acted together in order to stay together. Poignantly, it also honoured the continuing contributions of someone who was no longer alive. We then held a ritual re-enactment of this past goal, honouring not only the efforts of this young man, but also his precious loved ones – the living and the no longer alive.

Part 3: Talking about problems through metaphor

Once a sense of team identity has been created, and a heritage of achievement has been generated (through the goal map celebration), it then becomes possible to talk about what sort of 'opposition team' the person is up against. This opposition team could include shame, grief, addiction, hopelessness and so on. Here's an example of an 'opposition team' that young people in India created through the metaphor of cricket (although any team sport can be used for this purpose):

- *Wicketkeeper*: addiction and drug dependence
- *Deep fine leg*: extortion and exploitation by police and politicians

- *Third man*: societal stigma and tarnish
- *Cover*: unemployment and lack of (legal) work opportunities
- *Long off*: illiteracy and negligence at the school
- *Deep mid-wicket*: poverty
- *Deep square leg*: hunger
- *Short mid-wicket*: revenge and vengeance
- *Long on*: violence and gang wars.

It then becomes possible to have conversations about what sort of strategies the team of life can use in relation to the opposition team and every goal that the team achieves can be further celebrated – all through sporting metaphors.

I am sharing this team of life approach here because I believe we need to create and adapt our ways of working so that people who don't wish to speak directly about experiences of war can instead do so indirectly, through metaphor.

Harry Moffitt not only described the effects that the Commentator had over his life and sense of identity, he also described his travels to India with his cricket team. While grieving and nursing injuries both physical and moral, these travels had a really significant effect:

This surreal and beautiful experience took me right out of myself. I listened for the commentator in my head, the one who had been telling me what a fuck-up I was, who had told me I should probably kill myself. That voice seemed to be a little kinder and softer. (Moffitt, 2020a, p. 232)

Many others are also hearing similar commentators in their head, telling them they are a fuck-up and that they should kill themselves. Such commentators have a real power and to diminish their influence often requires a team.

What's more, redressing moral injury also requires action.

Acts of moral repair

The concept of 'moral injury' represents an avenue to escape from mental health discourse, which positions people as requiring 'treatment' and instead turns the focus towards the potential for joining with people in acts of moral repair.

There are many such examples to draw upon.

Tine Molendijk has documented some of the rituals invented by Dutch veterans who were present at the massacre at Srebrenica:

the stories of the interviewed veterans indicate that in the absence of existing meaningful rituals, they invented their own symbolic acts. Many Dutchbat veterans, for instance, have returned to Srebrenica to walk the locally organized annual March of Peace (*Marš Mira*). This march follows, in the opposite direction, the route taken by thousands of Muslim refugees after the fall of Srebrenica. Some veterans still go there every few years, by themselves or with their family and colleagues. Of the veterans speaking about this, some said they did the march to get a better picture of what they had experienced; others said they did it to 're-do' their tour but with a better ending this time; some said it was a kind of apology, a way to show accountability and remorse; others maintained it was to show solidarity to local survivors of the tragedy, to whom they felt connected. Many veterans mentioned several of these reasons. (Molendijk, 2021b, p. 163)

This is one example of veterans creating ritual and ongoing action that is linked to those harmed. Australian military veterans have also provided many examples of moral repair projects.

In the aftermath of the war in Vietnam, veterans initiated return tours and projects to make contributions to the Vietnamese people. One of these projects, the Australia Vietnam Volunteers Resource Group (<https://www.avvrg.org.au/>) currently comprises over 150 members and operates project teams in the areas of health and education.²⁵

The Timor Awakening project is a more recent example:

Out of the ashes of 1999 and the darkness of decades of unjust foreign policy, Australian and Timorese Veterans stand united, with hope and conviction, for a future that is bright, just, and peaceful for the next generation of both peoples. Together Australian and Timor-Leste Veterans are working on a very special project: building an English language, vocational education and training school on the south coast of Timor-Leste. (Timor Awakening, 2018)

Australian veterans are also initiating acts and projects of moral repair in relation to the war in Afghanistan. My thoughts turn first to the whistleblowers who have

brought to light the abuses and unlawful killings that took place in Afghanistan, and who testified to the Brereton Inquiry.²⁶ I think also of the petition started by Afghan–Australian lawyer Arezo Zoe Safi calling for all charges against whistleblower David McBride to be dropped:

As a member of the Afghan community in Australia, I am thankful to McBride for revealing the gross misconduct by the special forces soldiers. It's the first step to repairing our relationship with the Australian military. (Safi, 2020)

In addition to breaking the silence about particular incidences of abuse or unlawful killings, other Australian military veterans, including SAS personnel who served in Afghanistan, are involved in a different form of truth-telling and moral action. This involves highlighting broader systemic policy and leadership decisions that not only enable civilian deaths but place troops in contexts where 'moral injury' is perhaps inevitable.

Harry Moffitt, who recently retired from the Australian Defence Force after almost 30 years as a member of the SAS and former Team Commander described the routine use of collateral damage estimates (CDEs):

The waste of life was distressing. I learned later that the military would routinely employ CDEs, or collateral damage estimates, to put a number on how many civilian casualties (civcas) might be caused by an action. For example, if we had a high value target, like a Taliban commander, in a house in a village and wanted to kill him using an air strike, the powers that be might allocate a CDE of 5 (meaning they were willing to tolerate up to five civcas in neutralising the target). I found it hard to comprehend that anyone would think of war in this way. At the time I thought, surely if you put protecting civilians at the centre of your strategy, you would win the war faster and with less damage. I still believe this. (Moffitt, 2020a, pp. 14–15)

If we are serious about addressing and preventing 'moral injury' of Australian military veterans, then such truth-telling will surely be significant. This practice, done in the name of all Australians, represents a collective shame or 'injury' that surely only action to change it can prevent.

There are other acts and projects of moral repair underway. Some of these are powerfully personal, such as the regrading moral encounter that took place

between former SAS medic Dusty Miller and the sons of an Afghan civilian, Haji Sardar, who was allegedly executed by another Australian or Australians.

[Miller, who had] dressed the Afghan man's wounds before he was taken away ... tracked down the slain man's sons and apologised to them in a tearful Skype hook-up between Australia and Afghanistan. 'You could see the tears of the sons,' Stanikzai says. 'Those tears were not of anger ...' The sons cried for Miller and his angst as much as they did for their dead father. They knew one of the Australian soldiers had cared for their father, because they had found a bandage on his corpse. Now they had spoken to that man and had received his apology. Miller had solved that small part of the mystery of their father's death. And the sons were grateful.²⁷ (Faulkner, 2019, p. 8)

Other projects, such as Forsaken Fighters, founded by former Army Captain Jason Scanes, involve collective efforts of Australian Defence Force veterans to fulfil Australia's moral obligations to Afghan interpreters and other mission essential personnel by securing them visas and safety in Australia (Scanes, 2019; <http://www.forsakenfighters.org.au/about/>). For months and years before the Taliban gained control of Afghanistan, Jason Scanes implored the Australian government to do more to protect Afghan interpreters.²⁸ In the frantic days after the fall of Kabul, as the world watched scenes of desperation, Forsaken Fighters and many others did all they could to coordinate with forces on the ground to enable evacuations.

Veterans leading the way in moral repair projects

Most of the moral repair projects I have mentioned so far have been initiated by veterans and they focus on action: on trying to actively redress the harm done to others (including to the citizens of Vietnam, Iraq and Afghanistan). This is in contrast to how the concept of moral injury is often deployed in psychological circles, as former marine tyler boudreau (2019) has described:

there is significant risk that the term 'moral injury' will begin to sound and function very much like the public discourse on post-traumatic stress – a discourse of sympathy for veterans, but seldom if ever a sympathy for the people of Iraq or Afghanistan who were harmed by those veterans. (boudreau, 2019, p.56)

For boudreau, this is fraught:

Nobody wants to talk about the Iraqis. It's always about *the troops*. But 'moral injury' by definition

includes the memories of those who have been harmed. Without the Iraqi people, the troops can have no moral injuries to speak of. And the only way Americans can fathom the meaning of this term, 'moral injury,' is to acknowledge the humanity of the Iraqis. The two ideas are inseparable. (boudreau, 2011, p. 751)

Following boudreau's lead, projects of moral repair that can contribute to veterans' wellbeing can also contribute to others harmed by war. Boudreau (2019) described this as linking self-care and social responsibility:

The tension here is between *self-care* and *social responsibility*, a tension that is, in my view, the most crucial piece in any recovery project intended to address a moral disturbance. Genuine moral repair cannot be imagined and certainly not accomplished without an urgent commitment to *both*. (boudreau, 2019, p. 49)

Shared responsibility, shared repair

Speaking of social responsibility, the responsibility for moral violations in the wars recently fought by Australian (and American) troops does not lie only with those in the military. What about politicians and the wider citizenry?

There are many things desperately wrong with the fact that actually less than 1 percent of the population of the United States bear the full burden of learning to hate and kill their fellow human beings and not infrequently of actually doing so, while waging not only their lives but also their souls in the bargain. First, it is unfair. Second, it removes the rest of us, the 99 percent, from the reality of war and allows us to imagine that we have not, at one remove, also grown accustomed to suspicion and hatred and learned to nod our approval at the deaths of other human beings, well over 90 percent of them civilians like ourselves, who do not and never would threaten us. When we care less about the deaths of others' children than we do about our own ... war is near. In that case, we live out our days on the brink. Third, our remove from war permits our leaders, while we sleep, to wage war with greater and greater ferocity and abandon, so that when we awake we find ourselves in a war without end and without limits. This is where we find ourselves, in an age of endless war waged by our proxies, who in some

cases are also our brothers and sisters, sons and daughters, fathers and mothers, and they are coming home to us shredded, when they come home at all. (Meagher, Hauerwas, & Shay, 2014, pp. 146–147)

Although this paper is mostly a response to the circumstances of Australia's longest war, that in Afghanistan, it is also written in the shadow of an earlier war in Iraq that is now widely acknowledged to have been fought under false pretences. It is a war that has had devastating consequences.²⁹ If an Australian government sends troops into an unjust war, then what responsibilities are there for the deaths of hundreds of thousands of Iraqi civilians, and also the moral injuries of veterans? I find compelling the following writings about citizens' obligations in relation to the moral transgressions of war. They are by Eric Fair, who served in the US Army from 1995 to 2000 as an Arabic linguist and worked in Iraq as a contract interrogator in early 2004:

The lead interrogator at the DIF [division interrogation facility] had given me specific instructions: I was to deprive the detainee of sleep during my 12-hour shift by opening his cell every hour, forcing him to stand in a corner and stripping him of his clothes. Three years later the tables have turned. It is rare that I sleep through the night without a visit from this man. His memory harasses me as I once harassed him.

Despite my best efforts, I cannot ignore the mistakes I made at the interrogation facility in Fallujah. I failed to disobey a meritless order, I failed to protect a prisoner in my custody, and I failed to uphold the standards of human decency. Instead, I intimidated, degraded and humiliated a man who could not defend himself. I compromised my values ... I am desperate to get on with my life and erase my memories of my experiences in Iraq. But those memories and experiences do not belong to me. They belong to history. If we're doomed to repeat the history we forget, what will be the consequences of the history we never knew? The citizens and the leadership of this country have an obligation to revisit what took place in the interrogation booths of Iraq, unpleasant as it may be. The story of Abu Ghraib isn't over. In many ways, we have yet to open the book. (Fair, 2007)

In a second article, Eric Fair reiterated how it's not only the souls of soldiers that are stained by crimes committed within war:

those tactics stained my soul in an irrevocable way, maybe justifiably so. But as members of our government and its agencies continue to defend our use of torture, and as the American people continue to ignore their obligation to uncover this sordid chapter, the stain isn't mine alone. (Fair, 2014)

I respect how Eric Fair does not shirk his involvement and responsibility in torture, and at the same time invites and challenges the wider American public. Other veterans have echoed such a call:

Like other veterans, I wonder how my fellow Americans manage so well to pretend that their lives are not deeply intertwined with ongoing global warfare. (Yandell, 2016)

I don't think it's only American citizens whose lives are deeply intertwined in global warfare.

Where is the moral engagement of everyday Australians in relation to these matters?

Civilian responsibilities: More than recognising heroism and offering thanks

At present, some argue that civilians' responsibilities to support the troops³⁰ predominantly involve welcoming them back as heroes and thanking them for their service. Others, however, point to the ways in which such a reception is profoundly limited:

Our culture has been notably deficient in providing for reception of the Furies of war into community. For better or worse, the health care system has been given this role – along with the prisons, where a disproportionate number of men incarcerated since the Vietnam War have been veterans. (Shay, 1994, p. 194)

What seems significant is providing opportunities for veterans to join with others in actions that honour what they give value to – including values that may have been violated during their service (by themselves and/or by others). It's not enough to praise or thank the person; it is much more complex than that. If you have come to the conclusion that you are not worthy because of actions that have violated what is precious to you, attempts to 'thank you for your service' can create further dissonance. What more can be done by civilians? What collective responsibilities can be embraced? I have found the writings of Iraq war veteran and minister Michael Yandell very helpful in this regard:

To find hope in the midst of moral injury, veterans must seek out encounters with people who, like us, wish to hold on to what really happened: other soldiers, teachers, mentors, family. What really happened when our nation indulged in a fantasy of bouncing back, of getting even, of acting with force across the globe? What really happened to those we fought? What happened to the people who sent us into combat? ... Veterans must continue to try to articulate the void of moral injury. Their neighbors must continue to try to see it, to hear it, and to come to terms with it. There must be people and institutions capable of bearing that responsibility in order to open pathways of hope. (Yandell, 2016)

I appreciate his concept of 'pathways of hope'. I believe that there is the potential to create collective moral repair projects that can act as such pathways.

By casting all veterans as heroes, even as flawed or tragic heroes, our culture makes them easy to ignore. And so I offer this challenge: If a morally injured veteran walks into your house of faith and says, 'I am guilty!' don't let her continue to bear her guilt alone. Don't welcome the veteran only to wrap her with fantasy, and don't try to help her unhappen what has really happened. (Yandell, 2016)

Michael Yandell and other military chaplains such as Zachary Moon (2019a, 2019b) are calling on those in 'houses of faith' to take up their responsibilities. I think their challenge is just as relevant to those of us in secular communities. And for those of us whose moral repair projects won't be based on faith, I believe they can be based in friendship.³¹

Friendship projects

My way into these realms has been through my friendship with Dr Abdul Ghaffar Stanikzai, whom I met at practice at Kenilworth Cricket Club. Amidst my 'fast-as-I-can' bowling and his leg spin, we realised we had other commitments in common. We have both dedicated our working lives to responding to social suffering and injustice in different ways. Abdul Ghaffar, first as a medical doctor and then as an investigator and advocate in relation to human rights abuses in Afghanistan. My work has been different, trying to work with groups and communities to develop forms of practice that are culturally and socially relevant, and that can provide some relief from anguish.

At the beginning of this paper, I described the moment I first heard of the concept 'moral injury'. It was on the day that Dr Stanikzai gave testimony to the Brereton Inquiry, and I learnt from the Inquiry team that some of the ADF whistleblowers were really struggling. Knowing from Abdul Ghaffar what the Brereton Inquiry was meaning to those back in Afghanistan, I decided to write the following letter to the ADF whistleblowers and asked the Inquiry team to pass this on to them.

To the soldier who is speaking the truth,

I am writing from Adelaide to express my respect and gratitude to you. Although I do not know your name, your actions have already had profoundly positive effects for some of my dear Afghan friends here in Adelaide and in Afghanistan.

They speak to me about the Inquiry and what it means to them that some Australians are speaking honestly about abuses that occurred in Afghanistan. They are telling me that it means so much to them that this Inquiry is occurring. They say that it is reflecting so well on all of Australia that people are honestly trying to acknowledge what occurred.

They already knew about abuses and unlawful deaths. And they also know of abuses by military of other countries in Afghanistan. But what means so much to them is that these abuses are not being forgotten. That people – such as yourself – are doing what they can to bring justice.

My Afghan friends really treasure Australia ... as they are making a new life here and they have a chance for a peaceful life here. It means so much to them that you are speaking the truth. Word is getting around in Afghanistan about this. Because of you and the Inquiry, people in Afghanistan are thinking that Australia is not just forgetting the abuses that occurred. They are thinking that this is honourable action.

I heard today that someone has sent you a threatening letter. I just wanted you to know that others in Australia and in Afghanistan are cheering for you. We realise it cannot be easy to speak the truth when you have been involved in injustice. But what you are doing means a great deal to us.

Thank you.

With great respect,
David Denborough
Dulwich Centre Foundation

I wrote that letter three years ago and a lot has transpired since then. The Brereton Report is now public; all Australians know the stories of alleged abuses and unlawful killings involving Australian military personnel in Afghanistan. At the same time, a Royal Commission has been established in relation to veteran suicides.

Dr Stanikzai and Dulwich Centre Foundation are now initiating Afghan–Australia friendship projects as collective acts of moral repair in the hope that these may assist both Afghans and Australians.³² As Dr Stanikzai has explained:

We want to connect Afghan translators who worked with the ADF and are now living in Australia with veterans and the families of Australia's Afghanistan War dead. We want bereaved families to know that Afghans haven't forgotten the Australians who came from the other side of the world to fight the Taliban and terrorism. Their lives were damaged by the war. We have not forgotten you. We are committed to contributing something back to these families.

We hope these projects will make the pathway easier for ex- and current ADF and civilian servicemen and women who have been involved in Afghanistan through enabling contributions and humanitarian communications with Afghan people.

Importantly, we also hope to make positive small but significant contributions to Afghan people, whether in Afghanistan or trying to seek safety elsewhere. We hope these projects will also assist Afghan interpreters to make new lives in Australia through friendships. (A. G. Stanikzai, personal communication, June 5, 2021)

These are the three projects at this stage:

Sharing ways of dealing with sad memories that cannot be erased

When we have completed a collective document/film by Afghan interpreters in relation to 'ways of dealing with sad memories that cannot be erased', we will seek to share this with ADF veterans and civilians who have lived through war and exchange stories and ideas.

Supporting Afghans making new lives

Many Afghans in Australia are now desperately worried about their families, friends and colleagues back in

Afghanistan, and are also trying to make ends meet and create new lives. One of the few places where Australian and Afghan men regularly meet is on the cricket field. We plan to bring teams of Afghan interpreters and ADF veterans together to play with/against each other and at the same time use these matches to raise funds to support Afghan families trying to make lives in new lands.

Linking whistleblowers and human rights workers

Afghan human rights workers, including Dr Abdul Ghaffar Stanikzai and many others, have now had to leave Afghanistan and seek refuge in other lands. At the same time, ADF whistleblowers are struggling to come to terms with the human rights abuses they witnessed / participated in. We plan to bring these two groups together in some way as they both care deeply about violations of human rights.

These three small projects will seek to provide Australian veterans struggling with moral injury in relation to their deployment in Afghanistan with ways of making small but significant contributions back to the people of Afghanistan. The contributions of veterans' partners, children and friends will also be welcomed.

Not separating healing from public action

Earlier in this paper I mentioned how the original rap groups by Vietnam Vets Against the War (VVAW) didn't separate healing from public action:

VVAW founding member Jan Barry explained that the rap sessions were the group's response to military policies that resulted in both 'war crimes and veterans' nightmares.' ... Veterans wanted to unearth traumatic memories in order to develop a critique of US militarism. From the beginning, rap sessions were entangled in a broader effort to redistribute knowledge, and the power that goes along with it, about the effects of war. (Nudelman, 2020)

The rap session was a source of activist analysis, and, conversely, political action was part of a healing process. (Nudelman, 2015, p. 216)

Fifty years on from those early rap groups, I too believe in the significance of linking 'healing' with social action. The concept of moral injury can, I believe, provide a

way beyond medicalising the long-term effects of war. It is a concept that can assist in re-linking 'healing' and 'action'.

So too can the practices of narrative therapy and community work. In this paper I have outlined the following ideas and practices:

- the narrative metaphor
- externalising conversations
- double listening and honouring responses to trauma
- re-authoring conversations
- the concepts of 'the absent but implicit' and 'distress as fidelity'
- 'saying hullo again' conversations and re-membering practices
- acknowledging witness responses and definitional ceremonies
- the creation of letters and collective documents
- the team of life approach
- the notion of 'enabling contribution' – creating contexts in which those who have endured hardship and are struggling with the effects of this to make contributions to lives of others who are also suffering.

Finally, I have introduced the Afghan–Australia friendship projects that Dulwich Centre Foundation is facilitating as our response to the collective moral challenges posed by the Brereton Report and the aftermath of war in Afghanistan. We welcome your involvement. There is much to be done.

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Notes:

- ¹ While the experiences of veterans' family members and loved ones are not centred in this paper, I have referred to them at particular times.
- ² This paper does engage with one woman's testimony to the Australian Senate Inquiry into Suicides by Veterans and Ex-service Personnel, and in doing so illustrates how the experience of moral injury, like the experience of broader military service (and civilian life), is gendered (Eichler, 2017).
- ³ For a timeline of the different ways in which veterans' distress has been conceptualised, see Appendix 1: War Syndrome nomenclature history (from Strachya, 2011). The history of how veterans' distress has become medicalised is thoughtfully told by Ben Shephard (2002) in *A war of nerves: Soldiers and psychiatrists 1914–1994*.
- ⁴ Chaim Shatan described how the rap groups changed not only the veterans but also the psychiatrists: 'we professionals ... are changed in fundamental ways. It becomes utter pretence to turn to our protective device of psychotherapy only ... As we reactivate our imagination, the only genuine response is to share the ex-soldiers' anguish. This spells the end of our professional pseudo-neutrality' (Shatan, 1973, p. 651)
- ⁵ For a summary of the current DSM-5 definition of PTSD see: <https://www.brainline.org/article/dsm-5-criteria-ptsd>
- ⁶ tyler boudreau is now a professor at Smith College School of Social Work (see: <https://www.tylerboudreau.com/>). He has contributed a reflection for this special issue entitled 'Moral injury: What's the use?' (boudreau, 2021).
- ⁷ I am indebted to Kristina Lainson for these descriptions.
- ⁸ For an overview of current psychological literature on moral injury, see Griffin et al. (2019).
- ⁹ In contrast to efforts to 'define' and 'treat' moral injury in purely psychological/psychiatric terms, I'd recommend the work of military chaplain Zachary Moon (2019a, 2019b, 2021) and anthropologist Tine Molendijk (2021b).
- ¹⁰ While the concept of moral injury has the potential to provide an alternative to the medicalisation of distress, Tine Molendijk (2021b) has provided a salutary warning: 'the efforts of antiwar psychiatrists and veterans to have veterans' suffering recognized were intimately linked to their political criticism of the Vietnam War. Yet, paradoxically, while this politically informed struggle led to the introduction of a psychiatric concept that recognizes military suffering [PTSD], the medicalization of suffering immediately implied its depoliticization' (2021b, p. 18).

There are good reasons to be concerned that the concept of moral injury is already at risk of a similar fate: 'Considering that PTSD research originally contained political critique but soon became dominated by a non-moral, individualizing medical discourse, such a future for moral injury is particularly conceivable' (Molendijk, 2021b, p. 176).

- ¹¹ Chaim Shatan (1973) described this in some detail: 'To men who have been steeped in death and evil beyond imagination, a "talking cure" alone is worthless. And merely sharing their grief and outrage with comrades in the same dilemma is similarly unsatisfying. Active participation in the public arena, active opposition to the very war policies they helped carry out, was essential' (1973, pp. 648–649).

These actions included the convening of Winter Soldier (1972) in which veterans gave public testimony to atrocities in which they had been involved (See: <https://www.youtube.com/watch?v=cP7iwF9a5sA>). A more recent event, Winter Soldier: Iraq and Afghanistan, was held in 2008 (See: <https://vimeo.com/23421912>)

Another significant public action was a powerful protest involving veterans throwing their medals on the steps of Congress: 'By throwing onto the steps of Congress the medals with which they were rewarded for murder in a war they can come to abhor, the veterans symbolically shed some of their guilt. In addition to their dramatic political impact, these demonstrations have profound therapeutic meaning. Instead of acting under orders, the vets originated actions on their own behalf to regain the control over events – over their lives – that was wrested from them in Vietnam' (Shatan, 1973, p. 649).

More recently, here in Australia, prior to the release of the Brereton Report some Australian veterans voluntarily sought to renounce the meritorious unit citation they were awarded (see Willacy, 2021, p. 340–341).

- ¹² For a visual depiction of how storylines shape identities see this animation: <https://www.youtube.com/watch?v=CJ0WNIQonog>
- ¹³ When I described this concept to colleagues at the Jiyan Foundation in Kurdistan, Iraq, they made a connection to the work of Persian scientist Ibn Sina, who was one of the most significant physicians, astronomers and philosophers of the Islamic Golden Age, and is considered one of the founders of early modern medicine. Kurdish colleagues informed me that Ibn Sina spoke of how 'we must meet face-to-face with the client. There is me, there is you, and then there is the illness. If we can make an alliance between us, then we can weaken the illness' (Kirkuk Center for Torture Victims & Dulwich Centre Foundation International, 2012, p. 24).
- ¹⁴ Harry Moffitt is currently a psychologist and director of performance at Stotan Group (<https://stotangroup.com.au/>)
- ¹⁵ The following five questions are all extracted from the Michael White archive tape #17 from 2001.
- ¹⁶ For more about complexities of forgiveness in relation to responses to trauma and hardship, see 'The Question of Forgiveness' a special issue of *International Journal of Narrative Therapy and Community Work*, (1), 2002.
- ¹⁷ A full description of Sahar's work with Ghadeer is included in *Responding to trauma that is not past: Strengthening stories of survival and resistance – An Arabic narrative therapy handbook* (Treatment and Rehabilitation Center for Victims of Torture, 2014).
- ¹⁸ 'The Pain' and 'the Separation' had been externalised in earlier conversations.
- ¹⁹ This notion has been echoed by Rita Nakashima Brock who is the Director of the Shay Moral Injury Center

at Volunteers of America: 'I think the way a person is restored to a sense of their own goodness is that they participate in a life of the community where the things they do for other people are deeply appreciated' (Brock, 2013).

²⁰ I do not know Amy's real name, nor how to contact her. Usually, we ensure that witness responses are spoken or sent back to the persons whose story is being acknowledged. I have generated these responses in relation to Amy's story to illustrate the process.

²¹ Outsider-witness practices can be convened in contexts of therapy, groupwork, community work or even through art exhibitions. Psychologist Jack Saul has created a 'public art and conversation project' to give voice to veterans and war correspondents who often carry moral distress alone. Witnesses are invited to listen to oral testimonies and then offer their responses: 'As you pass through the listening space into a place for sharing, please take a moment to write or record your personal reaction or action you would like to take in response to hearing these testimonies. These will be shared with the project participants and become part of the ongoing installation' (<https://www.moralinjuriesofwar.org/about>). See also Riordan (2021).

²² In narrative practice terms, these enquiries by the other interpreters involve turning a 'half' memory of trauma into a 'full' memory that includes the agency of the person, how they *responded* during the times of trauma. Restoring half memories to full memories is one way of assisting people with problems of memory (including dissociated memories): 'In order to re-associate dissociated memories, it is necessary to restore these half memories to full memories. In other words, the task is to resurrect that which is erased in dissociated memory – that is, people's responses to what they were being put through, and the foundations of these responses. This resurrection is restorative of a sense of personal agency, one that is in harmony with the person's preferred "sense of myself"' (White, 2004, p. 71).

²³ A Dulwich Centre team consisting of Cheryl White, Michael White, Eileen Hurley and me had been invited to Uganda by REPSSI and were guided by colleagues Caleb Wakhungu and Ncazelo Ncube-Mlilo.

²⁴ See www.dulwichcentre.com.au/team-of-life

²⁵ American veterans from the war in Vietnam have created similar projects (<https://www.vietnamfriendship.org/wordpress/about/project-background>).

²⁶ To learn more about the efforts of whistleblowers and the effects on their lives, I recommend Mark Willacy's (2021) book which he dedicates to four whistleblowers, Braden, Christina, Dusty and Tom.

²⁷ This ritual was screened on 60 Minutes: <https://www.youtube.com/watch?v=ztsj5XjZD0Y>

²⁸ See for example: <https://www.smh.com.au/national/he-could-have-done-something-why-diggers-feel-let-down-by-scott-morrison-20210820-p58kks.html>

²⁹ The American-led coalition invasion of Iraq cost hundreds of thousands of lives (<https://www.iraqbodycount.org/>) and was based on false pretence that the Iraq regime of Saddam Hussein was in possession of weapons of mass destruction. The Australian Government, led by Prime

Minister John Howard, lent their moral support and troops to this immoral war. It was a war, like many in Australia's history, that was linked to Empire – in this case American empire and Australia's part within it. Unlike many wars, however, the citizenry of Australia and the world rose to try to prevent it. Over 12 million people in 700 cities protested this war before it began (Cortright, 2005). For instance, my father, Michael Denborough, maintained a lone vigil outside the Australian Parliament for 52 days. We were both removed from the Parliament gallery on the day John Howard declared Australian troops would be sent to Iraq. What sorts of 'moral injuries' are carried by the political leaders who sent US, Australian and other coalition forces into Iraq? Are they haunted by the hundreds of thousands of people killed in that unjust war? Sometimes, I think the task might be to re-distribute moral injuries so that those who send troops to unjust wars (but remain safely in their own homes) are the ones whose nights and days are tormented by moral anguish. There would be some justice in that.

³⁰ I found the following story illuminating in relation to civilian responses to moral injury:

Ken Davis, a guard caught in some of the infamous Abu Ghraib abuse photos, explains, 'A lot of soldiers, when we come back, are lost. It's especially true for a unit accused of abuse, when you hear lies about what happened, and people deny what you saw. And now we live with ghosts and demons that will haunt us for the rest of our lives.' ... There is a version of the yellow ribbon sticker that another Abu Ghraib guard has affixed to his car. Instead of 'Support the Troops' it reads, 'Support the Truth.' As he puts it, if you really want to support these men and women, acknowledge what they went through and what they did. Only then, can you fully acknowledge that it destroyed them, and help them heal. (Alternet.org, 2010)

³¹ While writing this paper, my thoughts have often turned to a dinner in my childhood home in the 1980s that featured one of the most decorated US military veterans of all time, Colonel David Hackworth. Also present that night was Oleg Gavrillov, a Russian Physician for the Prevention of a Nuclear War, and UK nuclear weapons scientist Frank Barnaby. My mother and father were hosting this dinner as they convened an international symposium in relation to Australia and nuclear war. The reason this dinner has kept drifting into my mind is that here was an example of military and civilian leaders coming together to address a great moral challenge of the time and forging friendships across differences.

³² Determining what sort of acts of moral repair are relevant (indeed 'moral') in response to harms that have been done is itself a complex realm that is not the focus of this paper. The involvement of those harmed in such determinations is, of course, critical. Here I am describing collective projects of moral repair proposed by Dr Abdul Ghaffar Stanikzai and embraced by Dulwich Centre Foundation.

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Appendix 1: War Syndrome nomenclature history

This table is from the PhD thesis of Anna M. Strachyra (2011, pp. 163–164).³³

WAR SYNDROME NOMENCLATURE HISTORY

War Era	Syndrome Referents	DSM Medical Diagnoses
Pre-Civil War/ Civil War (1861-1865)	Disordered action of the heart DaCosta's syndrome Irritable heart Nostalgia Nostalgia neuralgia Psychogenic rheumatism Railway spine Soldier's heart Wind contusion	
First World War (1914-1918)	Effort syndrome Gas hysteria Neurocirculatory asthenia Shell shock Shell shock neurasthenia	
Second World War (1939-1945)	Battle exhaustion Cardiac neurosis Combat stress reaction Effort syndrome Flying stress Non-ulcer dyspepsia Old sergeant syndrome Psychoneurosis War neurosis	
Korean War (1950-1953)	Anxiety neurosis Chronic fatigue Combat exhaustion Hyperventilation syndrome Non-ulcer dyspepsia Psychoneurosis Mitral valve prolapsed syndrome Myalgic encephalopathy (ME) War neurosis	Gross stress reaction (DSM-I, 1952) Transient situational disturbance (DSM-II, 1968)
Vietnam War (1959-1975)	Combat fatigue Delayed stress response syndrome Effects of Agent Orange exposure Operational fatigue Post-Vietnam syndrome	Post-traumatic stress disorder (DSM-III, 1987)
Persian Gulf War (1990-1991)	Battleshock Chronic fatigue syndrome (CFS) Combat stress reaction Desert Storm Syndrome Fatigue syndrome Gulf-related illness Gulf War Illness Gulf War Syndrome Medically unexplained symptoms Multiple chemical sensitivities Mycoplasma infection Military vaccination effects	Acute stress reaction Post-traumatic stress disorder
Iraq/ Afghanistan Wars (2001-present)	Afghan War syndrome Battle fatigue Battleshock Chronic fatigue syndrome Head injury/ trauma Medically unexplained symptoms Physical complaints associated with mental health disorder	Acute stress reaction (ASR) Adjustment disorder Complex post-traumatic stress disorder Combat Operational Stress Reaction (COSR) Disorder of extreme stress: Not otherwise specified (DES NOS) Fibromyalgia Major depressive disorder (MDD) Military sexual trauma (MST) Ongoing Military Operational Stress Reaction Post-traumatic stress disorder (PTSD) Somatoform disorders Traumatic brain injury (TBI)



The sky is falling:

History, war, violence and retrieving humanity

by Victoria Grieve-Williams



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Abstract

Warraimaay historian Victoria Grieve-Williams reflects on the necessity of attending to the history of war and violence, in order to understand what it is about human nature that creates such horror. We need to move beyond romanticism and silences to grapple with the true nature of war and also with the fact that conflicts and war are increasing. Those who have been into the abyss of war and survived are to be treasured for their understanding of ways to heal and ways to avoid repeating the same mistakes.

Key words: war; violence; colonisation; moral injury

There is no escaping that war has been a preoccupation of human beings: romanticised, relished, commemorated, anticipated, and also resisted, for centuries. While it is in fact a realm of profound suffering, this is obscured by glamour, celebration and the idea of 'the ultimate sacrifice'.

The necessity for war and for violence is couched in the need for survival, as a people, as a nation. People are more united in war than at any other time. The backstory of war is about power, often the control of essential resources – land, water, oil. Whatever the motivation behind war, the imperative becomes to prove courage, ascendancy, superiority and power over others.

Combat-ready troops are also highly sexualised, and military leaders have to factor in the need for outlets for this. Hence there is a tolerance of 'camp followers'. Troops have been motivated to fight with the idea of sexual reward at the end of the battle. One of the few books to document the impact of war on civilians is Mary Louise Roberts' *What soldiers do: Sex and the American GI in WW2 France* (2013). Roberts carefully documents the impact of the liberating troops on French society after D-Day, reminding us that history is most engaging and enlightening when it is honest.

The imperative of war is to win at any cost to 'protect' those left at 'home'. People are divided into clearly understood generalised and homogenous categories of friend and foe, ally or enemy. When wars are fought in theatres where civilians are located, the boundaries become blurred. War and violence lead people to behave in ways they may never have imagined themselves capable of. Leading to the secrets and silences of people whose very souls are seemingly shattered.

We need to go beyond the silences and grapple with the reality of lives lived during times of war if we are ever to find a way out of the maelstrom, out of the chaos of destruction.

Don't mention the war!

The Wiradjuri people of NSW, Australia, have a belief that each individual helps to hold up the sky by their careful personal attention to their Country. The watersheds and the pattern of creeks and rivers are reflected in the constellations of the night sky as it is held aloft.

The folk tale of Henny Penny (sometimes called Chicken Little or Chicken Licken) offers a warning about false alarms: an acorn falling on one's head is not a portent that the sky is falling! There is no need to go and tell the king.

But what if the sky really is falling, and the reasons for life as we know it and what it means to be human no longer have meaning?

Who is there for us to tell?

Violence is associated with war, but war is not a necessary prerequisite for the intentional use of physical force, threatened or actual – against oneself or others. Violence has a high likelihood of death, injury, deprivation or psychological harm.

Violence is found in many settings – wherever there are humans, in fact. Many accept high levels of violence as a part of life. Vigilante violence, summary violence, domestic violence, police violence – deaths in custody. Torture. Rape.

A visit to West Point Museum of warfare and weapons in upstate New York proved to be a stark reminder of the impact of war over time. I realised that during my career as a historian, my anti-war sentiments had thus far made me determined not to look at the history of war: not a realistic view. And in retrospect, foolish, when war has been ubiquitous and centre stage in human endeavour.

Exhibits in this museum detail the wars of the world from the earliest times of human history, often with dioramas. Included are details of the Indian Wars, the colonial conquest of the North American continent. While researching the history of the colonisation of Australia, I had not grasped the fact that the colonial wars against the Indigenous peoples of the Global South were the first of the Great Wars. But then, when I thought about it, this is obvious.

It is no coincidence that these wars of colonial conquest occurred at the time when the natural resources of Europe were being taxed to their limits by burgeoning populations. We are now living in the age of humans, when human populations dominate the Earth. We are now at more than 7.9 billion people and will be at 8.7 billion in 2050. Anthropocene watchers predict more social chaos and violence with increasing populations. And the reality of climate change refugees.

There will be more crime, conflicts and wars as we move further into the 21st century.

The criminal takeover of Indigenous lands around the world began with the Portuguese and Spanish empires in the 16th century. The English, French, Russian, German and Danish followed in seeking new lands to annex and resources to plunder in order to support the huge populations that had developed in Europe. This was no benign takeover of the Global South: it was not a *settlement*. There was no diplomatic exchange. The violence was extreme and genocidal.

The *modus operandi* for the spread of colonisation was to 'exterminate all the brutes', as Sven Lindqvist (1996) so eloquently explained. In a documentary series of the same name, the Haitian filmmaker Raoul Peck (2021) expanded on this theme to explain the conquest not only of Africa, but of the Global South. He drew on Michel-Rolph Trouillot's *Silencing the past: Power and the production of history* (1995) and Roxanne Dunbar-Ortiz's *An Indigenous peoples' history of the United States* (2014). Peck quotes Wahunsonacock, the leader of the Powhatan Confederacy that had to deal with the arrival of the English Jamestown settlers in the 17th century. Wahunsonacock posed a question that is still alive today:

Why should you take by force that which you can have from us by love? Why should you destroy us, who have provided you with food? **What can you get by war?** ...What is the cause of your jealousy? You see us unarmed, and willing to supply your wants, if you will come in a friendly manner, and not with swords and guns as to invade an enemy. (as quoted in Dunbar-Ortiz, 2014, p. 60, emphasis in source)

Nonetheless, John Smith and the settler colonials with him and after him continued on a murderous path, killing men, women and children, setting the pattern for the bloody genocidal conquest of the Native peoples across the whole continent.

The wars against the Indigenous peoples of the world resulted in death and destruction, rape, torture and impairment, displacement, refugees, concentration camps and enslavement. All wars fought since have had the same outcomes. The spoils of the victors were the lands and all of the resources contained in them.

The ensuing war in Europe, the First World War (1914–1918) – the 'Great War', the 'war to end all wars' – can be theorised as the colonisers' attempt to colonise each

other. The toll is estimated at 10 million military deaths, 7 million civilian deaths, 21 million wounded and 7.7 million missing or imprisoned.

We live in a globalised world in which people everywhere hope for peace and the absence of gratuitous violence. It seems they hold out this hope more than ever. A vain hope when the forces that bring about conflict and confusion are seemingly beyond the control of ordinary people – and beyond the control of our leaders.

Do we really understand the nature of violence, war and 'man's inhumanity to man'?

The philosopher Michel Serres (1995) reminds us that we are a part of nature, subject to forces that we may never understand. Human violence, he says, is part of this natural order whereby the Earth swallows up those who kill each other, fighting over the very ground that subsumes them. The reasons for a war are only too real for those who start it, fight it and wish to win, but these reasons exist only on one plane, that of human reason. Serres widens the frame such that humanity's last act of violence can be seen as a kind of suicide pact: nobody wins, and the ecology of the Earth continues. Moreover, he says it is a blind historical assumption that societies can ever divide themselves from the dynamics of nature *through* which they now have to fight.

I have now come to understand the history of war as a necessity. It cannot be ignored. A greater knowledge of the nature of war may assist in understanding how this phenomenon can be dealt with. We know so very little of the role of *nature* in our lives.

The sky has fallen over and over again.

At the moment there are at least 60 wars, major and minor conflicts, and skirmishes around the world. There have been approximately 120 000 deaths as a result of this in 2021. Included in this number is the unofficial war of the Mexican cartels that has seen 350 000 homicide victims since 1989.

The death toll for the Second World War was more than 60 million and as much as 80 million. Of these, as many as 55 million were civilians. Who knows how many people have died as a result of violence in modern history?

The Earth is awash with the blood of innocents.

The violence of war interrupts the lives of ordinary people in indelible and insurmountable ways. It can shock to the core. It can remove all certainty about who we are and what that means.

There is more than one way to die. The death of the spirit, of the soul, is as profound a death as that of the body.

My mother told me it had been impossible for her and my father to stay together because of what he had suffered during the war. He was TPI, totally and permanently incapacitated, by what he went through. He drank too much, he had a violent temper, he was jealous and controlling. He was violent.

When I met him in my adult life, he wanted to explain why he had not been able to be there for me, his only child. He wanted to relive experiences and tell me. Too much information. How do I deal with this when he was not able to?

He grew up in Petersham in Sydney and had a Lebanese mate. They signed up to go to the war together in the Australian Imperial Force. Deployed to the Middle East, fighting side-by-side, his friend was killed. Next to him. Just 10 miles from the village where his parents had migrated from.

My father told me this story many times. Each time it was fresh and new to him, like the first time he told me. He wanted me to understand something about what this experience did to him that he did not understand himself.

The sky has fallen.

There is nothing to prepare us for this. Not in the circumstances of our birth, the early childhood years. The rough and tumble of childhood and adolescence. The sporting field, the rivalry of peers the fights fought before and after school. Nowhere is there any indicator of what it means to have to kill others before they kill you.

Through all of the trials and tribulations of our lives we are encouraged to believe certain principles, ethics, morality and accountabilities exist. They tell us who we are.

We are fine when we keep on the path, the path of right action. Even when it comes to killing in a righteous war. But we are on the side of all that is right and good, are we not? We are those who are coming to set others free.

What happens when we are the supposed to be the 'goodies' and then behave like the 'baddies'? When the enemy is indistinguishable from civilians and we have to keep fighting this war.

Violence is not always legitimised by nation states in declared wars. It exists in undeclared wars. It can be authorised by crime bosses, by vigilantes. It can be mob rule. It is often gratuitous and performed for no apparent reason.

Violence necessitates the suspension of all morality and ethics. It cannot exist where people are trained to deal with it in prescribed, highly moral and ethical ways. To take responsibility for right action. This is what the Indigenous cultures had mastered. An understanding of violence as a possible and predictable part of human nature, such that they were able to avoid it – deflect it into other actions through personal trials associated with rites of passage, for example.

Those who have been into the abyss of war, violence and indescribable suffering – and come out alive – are injured by history, scorched to their core. Truly understanding the insanity of war and violence, they are stretched to their limits and beyond.

These people are to be treasured, to be offered love and support. We need to listen, observe and act to understand and prevent extreme human violence. It is only these people who can understand the ways in which to heal. These are the people who can help us to avoid repeating the same mistakes over and over.

They are the ones to hold up the sky.

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Moral injury: What's the use?

by tyler boudreau



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Abstract

The words 'moral' and 'injury' each hold complex and multiple meanings. This paper considers the politics of framing soldiers' distress as 'moral injury', and the utility of this term as a way to prompt moral questioning and transformation. Unlike PTSD, moral injury raises the need for individuals and society to grapple with the moral implications of war. For military and veterans' organisations in particular, the idea of moral injury has been recognised as a profound challenge. Counter conceptualisations such as 'inner conflict' have been mobilised to reframe soldiers' distress as a subjective misperception that requires a reassessment of a soldier's own values, not the values and actions of the military. In this paper, boudreau argues that the value of moral injury as a concept lies in the actions we take to address it, the clinical practices we use to treat it and the spaces we make for those affected to question, grow and change. Rather than representing an individual inner conflict, moral injury demands that we treat the violence and harm done with social permission under the auspices of the military as a collective disruption that requires collective moral reckoning if there is to be repair.

Key words: *moral injury; PTSD; military; veterans; Iraq; war; narrative practice*

Moral injury was coined in the 1990s in the context of mental health treatment for American veterans of the Vietnam War. It was later popularised in the mid-2000s when the suicide rate among veterans was skyrocketing in the latter years of the US occupations of Iraq and Afghanistan. I served in Iraq in 2004 with the US Marine Corps and afterwards made myself a vocal critic of that experience. In 2010, I was asked to offer my comments on this 'new' term. I'd never heard it before, but it seemed to make perfect sense without any explanation. This is a clue, I think, to its easy appeal and its ability to penetrate so many different social spheres. When one hears the words 'moral' and 'injury' linked together, one feels an almost instant sensation of comprehension. It makes sense, in part, because each of these words already bears established meanings. That is the power of the term moral injury: it resonates for individuals. And yet, on closer inspection it is a complex concept.

The words 'moral' and 'injury' hold complex and multiple meanings. We can grasp the general intention of such expressions, but the speaker's specific understandings may not be clear. As an analogy, if I were to suggest a process of repair for a person's 'soul', this suggestion would be understood by some people as literal and by others as metaphorical. Either way, any practice characterised as 'soul repair' would be simultaneously understood and misunderstood every time it was named. This potential for multiple interpretations is no less true for the words 'moral' and 'injury'. When such complex and contested terms are deployed in a discourse on mental health, we must expect a wide variance in interpretation and a disjointed collective response.

Nevertheless, I do not believe that a particular definition of moral injury needs to be universally approved before it can be operationalised. What is crucial, here, is the need to acknowledge these variances in understanding and to incorporate them rigorously into our clinical practices. The problem isn't the impossibility of a uniform definition for moral injury; the problem is the suppression of that impossibility. Moral injury is useful, but it is not particularly meaningful in any generalisable sense. We want to avoid falling into a chasm of endless, and inevitably fruitless, attempts to theorise these words when they're positioned together. And yet, these same words, so powerful and widely recognisable as they are, can rally a great many citizens into social actions that do not necessarily rely on a single definition.

The material value of the term moral injury, therefore, is not in the words themselves or how they're defined,

but in the actions they prompt: moral questioning and transformation.

Paradoxically, attempts to define and generalise the 'moral' in moral injury deny the most vital component of the recovery process – enabling genuine moral grappling to take place in the minds of individuals and in the discourses of society. To see firsthand what happens when the term moral injury is assigned a definition that precludes moral critique of itself or society, and further, how this interferes with recovery, we need look no further than the US military and US Department of Veterans Affairs (VA). Unsurprisingly, both institutions showed initial reluctance to accept the validity or worth of the concept of moral injury. No government is eager to put its military actions up for moral scrutiny lest the public's conclusion be that those actions are, in fact, immoral or unethical and, therefore, unsupportable. From the vantage point of government institutions and their officials, safe-guarding public support for military operations is *paramount* and so *must* override all concerns for the mental and spiritual wellbeing of individual soldiers and veterans. No public official is likely to concede this point, for obvious reasons, but a government's own policies and doctrines will offer a contrasting account of its priorities in relation to moral injury.

By 2010, when I was first introduced to the term, the US Department of Veterans Affairs had already taken preliminary steps towards accepting moral injury as a recognisable psychological phenomenon. Within a couple of years, various individual representatives of the US military (several high ranking) were also showing interest in moral injury as a potentially valid diagnosis. It would surely have been difficult for them to ignore the issue entirely during the veteran suicide crisis and amid the public demand for action. But it would prove more difficult, still, to adopt a term that invited moral critique of ongoing operations. Clearly this problem was recognised by the military, too, because a few years after that, moral injury was re-designated 'inner conflict' in all Department of Defense doctrinal publications. The term moral injury was, at that point, thoroughly expurgated from its language.

Even a cursory examination of the term inner conflict will demonstrate its counterproductive effects on treatment. The US Marine Corps manual *Combat and operational stress control* (NTTP 1-15M; 2016) offers this definition of inner conflict: 'When stress arises due to moral damage from carrying out or bearing witness to acts or failures to act that violate deeply held belief systems' (US Marine Corps, 2016, p. 1-11). To this it

adds that inner conflict can be 'caused by *perceived* failures of those in civil or military authority to uphold organisational or cultural values and ethics' (2016, p. 3-25, emphasis added). The US Army's manual *Holistic health and fitness* (FM 7-22; 2020) includes this discussion of inner conflict:

People enhance their spiritual readiness through reflection and practice of a lifestyle based on the personal qualities they need during times of stress, hardship, and tragedy. When their actions deviate from their stated values, then they may experience inner conflict. Those struggling for integrity and congruity often only find inner peace after overcoming the struggle. They develop spiritual readiness by studying, connecting with, and understanding the value systems that mold their personal qualities. As their spiritual readiness grows, they become a leader of character and build the resilience necessary to navigate crises. (2020, p. 10-1)

These passages convey the ideological constraints in defining and treating moral injury or inner conflict. The most damaging aspects of the passages above are not found in what is explicitly stated in the text, but what is implied or left out.

Suppression or avoidance of moral critique is achieved in these texts, in part, by reframing soldiers' moral distress as subjective misperceptions. When soldiers have 'carried out or borne witness to acts or failures to act that violate deeply held belief systems', it must be assumed that the remedy being suggested here is a reassessment of the soldiers' *own* values, not the values of the military. When the military characterises 'the struggle for inner peace' as the surest path to 'spiritual readiness' (for military operations), we can be sure it is not inviting individuals to question the military's morality. This leaves soldiers and veterans all alone with their moral distress, and with a silent but ponderous mandate hanging over their heads: When a conflict ensues between your personal sense of morality and the morality of the military, the only acceptable conclusion is that *you* are wrong.

There can be no doubt that the US military is fully aware of its vulnerability to moral critique. If it were not, it would not have changed moral injury to inner conflict. It would not have attached the word '*perceived*' to the failures of civil and military authorities. If the military were truly open to a moral dialogue or a critique of its conduct, it would not have reduced moral injuries to inner struggles for coherence. If the military were

truly interested in moral repair, it would acknowledge unreservedly that morality is a social construct that must be negotiated publicly and reciprocally between the constituents of society and its institutions. The military has, instead, created the impression that this 'conflict' (being inner) is not a negotiation between individual and collective morality, but a negotiation between an individual and *themselves*.

If one harbours doubt on this point, just imagine commanders concluding that their orders are unethical and refusing to issue them, or soldiers concluding the same and refusing to obey them. How long might such service members maintain their moral stands and refusals before the institution lowered its punitive boom on them all? We've already seen what happens to such people. We already know the answer to this question. During my time on active duty, several marines in my own company who claimed symptoms of post-traumatic stress after Iraq were denied their claims and discharged with 'personality disorders' and 'pre-existing conditions'. PTSD doesn't prod the moral underbelly of the military nearly so sharply as moral injury, so there should be no doubt what reactions soldiers can expect to face if they choose to announce their moral disquiet and refuse orders.

The military cannot yield its moral stance concerning its actions in conflict without exposing itself to the threats to internal discipline and public support that such an admission might create. As obvious as this point may be, we nevertheless need to place it alongside the doctrine of inner conflict to understand why the military can never adopt an official diagnosis of moral injury. To do so would be too great an ideological risk. Consequently, what I consider the most vital component in the moral injury recovery process – moral questioning and transformation – has indeed been denied.

Former US soldiers Camilo Mejia (see Al Jazeera, 2008) and Ehren Watada (see AP, 2009) are good examples of this kind of broken dialogue between individuals and the military. Both of these soldiers refused to participate in the occupation of Iraq on moral and legal grounds, and both were brought to court martial and issued unfavourable discharges. Watada's case illustrates the point particularly well in that he made very clear that he was not a conscientious objector or morally opposed to war in general. His objection was specifically to the operations in Iraq, which he argued were unlawful. Underlying his legal claim was a moral critique of the military, to which the military responded, quite naturally, with punitive legal action – an action that would not fundamentally disrupt its own constitution.

Now imagine Ehren Watada in a different scenario. Suppose he'd never made his moral apprehensions known about Iraq and he deployed with his unit despite his privately held concerns. Suppose he'd carried out his orders, found them to be just as morally problematic as he'd anticipated, and then returned home bearing all the symptoms of moral injury. What would the military have to say to him, then, when he spoke critically and expressed what was once moral apprehension but after deploying became shame or regret? Would it be sympathetic? Would it listen in the caring manner that they so adamantly prescribe? Or would it simply issue him the finer points on inner conflict and a list of strategies to build up his spiritual readiness? Would it ever acknowledge the value of his viewpoints and say that he was right and adjust its policies accordingly? What if it were not just one soldier making these claims? What if Ehren Watada were not alone? What if there were thousands upon thousands of soldiers, all expressing the same moral and legal misgivings? Would the military listen then? Well, as it turns out, there were thousands upon thousands of others. There still are. This is not a hypothetical. And the military did not listen. Instead, they coined inner conflict.

I've included this commentary on inner conflict to point out the problem of moral definitions that function foremost to uphold particular policies or ideologies. In the spectrum of work being done in relation to moral injury, the US military's use of 'inner conflict' may be an extreme example, but it is a valuable one nevertheless because it lies closest to US active-duty service members and affects them within the military long before they are discharged, before becoming veterans, and before ever engaging with VA. And while VA may still embrace the term moral injury, it has similar constraints to the military, which is why VA's definition of moral injury bears such a remarkable resemblance to the definitions created for inner conflict. VA is just as unlikely as the military to adopt treatment strategies that genuinely encourage moral critique and transformation.

These definitions are not problematic because they are rigid; they are rigid because they are problematic politically. If politics doesn't enter into a conversation about a phenomenon called moral injury, then there is most definitely a problem. A political narrative cannot exist without its legal and ethical underpinnings. And the personal narratives of soldiers and veterans who have returned from war with moral injuries cannot be fairly constructed, conveyed or comprehended without including their political contexts. Moral injury is political. What I want most from the term moral injury is a *response* to these personal and political narratives. The

value of moral injury must lie in the actions we take to address it, in the clinical practices we use to treat it and in the spaces we make for individuals dealing with it to question, to grow and, if need be, to change.

The literature on moral injury tends to emphasise definitions and treatments; however, I believe the term can be made more productive and accessible through concepts and principles. A definition of moral injury seeks to objectively describe the phenomenon; a concept, in the sense that I'm suggesting, seeks to describe its tensions and dynamics. Treatment strategies focus on the mechanics of one approach or another, whereas treatment principles remind the practitioner of these dynamics and tensions so that they may customise such strategies for specific populations while maintaining consonance with the general purpose of treatment.

A person who claims a moral injury is claiming, first, personal responsibility for perpetrating acts of violence within a society-level project (war); and claiming, second, that these acts of violence were morally problematic and, being directed and approved by society, should therefore be taken under review by society. The former draws our attention to the survivors and victims of violence; the latter draws our attention to the moral cracks in our social foundations. Moral injury 'treatment' should, in my view, include an invitation to conduct open-ended moral critiques of society and of oneself, and offer a sense of permission to assign moral responsibility wherever it is understood to belong, not strictly where it is publicly appealing. This responsibility is necessarily shared between the individual and society. Individuals need to have their moral concerns acknowledged and validated. Society needs to continue to review such cases openly and earnestly to minimise future moral injuries and, more importantly, to reduce or eliminate morally problematic acts of violence. The survivors and victims of such violence are the principal reason for having this discussion of moral injury. If there are no harmed groups, there can be no moral injuries.

When the struggle to repair a moral injury is taken up, there will always be varying degrees of constraint to contend with, no matter what starting point one assumes. As noted above, any program of recovery built by a government or a military for moral injuries that were produced through government or military activities in the first place will be the most heavily laden with political and ideological constraints. Private organisations doing the same work will be free from some of those constraints but certainly not all. Private individuals working independently enjoy the greatest ideological latitude but will still face substantial

cultural constraints, among other obstacles. The most difficult part about deconstructing and reconstructing a lifetime's worth of attitudes and world views is that relationships with all the people who once made up one's 'community' will be affected, too, and potentially lost forever. Suddenly one does not fit in or know how to relate. One may successfully customise an identity that is in close accord with one's morals, and simultaneously, in utter discord with one's original community. Identity reconstruction can sometimes be a lonely affair.

In the years immediately following my return from Iraq, I created a requirement for myself to publicly disclose whatever my most recent inquiries and conclusions happened to be. This was a strategy designed to prevent myself backsliding in the process of critique because the consequences can be difficult. They can be exhausting. And they can tempt a person to give up and return to the comfort of old worldviews that don't disturb community sensibilities or disrupt long-standing relationships. This doesn't mean one must publish or speak publicly. One's views can be made 'public' within one's own community. Announcing one's moral migration is not intended to fetter oneself to any particular idea or concept, however shiniest ethical it may appear in the moment; the intent is to prevent the sedimentation of any and all ideas and maintain a processual mindset. Marking these ideological shifts publicly creates an obligation for the individual to account for reversals should they occur. If I wake up tomorrow and tell the world that I no longer believe that moral injuries are real or important, then I know that people will look at what I said or wrote yesterday and expect me to explain myself. That is exactly what I require as a perpetrator of harm: to be ever compelled to explain myself, first to myself and then to others.

Just as the moral structures of society are in perpetual flux, our personal narratives are also in perpetual flux, continually emphasising new and different meanings and values as new eras emerge and fade away. I've often referred to my life as my 'story', but I've noticed problems arising from using the singular form of this word. Perhaps it would be more accurate and more effective to think of our lives in the plural, as having 'stories' that unfold geometrically rather than linearly and that are not segmented within firm beginnings and ends, but are held together only by gossamer segues. This is familiar language to anyone working with narrative theory, but reimagining the structural design of a personal narrative, or its focal points, arcs or details, is a formidable task whether one is versed in these theories or not. Most of us could use a little

help. And this is where narrative therapy enters the picture of moral injury.

This issue features an article by David Denborough (Moral injury, narrative repair and possibilities of Australian–Afghan friendship) that tackles this very challenge. Denborough is an Australian narrative practitioner who works with those confronted with moral injuries. In this article, Denborough delivers a robust discussion of a host of narrative strategies that clinicians can adopt when engaging the veteran population. In my view, these strategies emphasise the essential priorities of moral injury treatment: critique, transformation and engagement with harmed groups. As a preface to this work, Denborough makes a vital point to distinguish the individual from the narrative. As is noted in narrative therapy: 'The person is not the problem, the problem is the problem'. And the problem is made more manageable when it is not understood as an unchangeable essence of one's identity. By externalising the problem and separating it from an individual's character, a great deal of the shame and guilt being experienced by individuals may be relieved and cleared away so that they may gain less obstructed views of their narratives under construction. With the narrative objectified in this way, the processes of reimagining and re-authoring become much less emotionally fraught.

Moral injury strikes me as a unique conceptual framework in that its focal point for treatment, the morally injured, does not represent its moral *priority*. Even the morally injured, by their own accounts, would identify harmed groups as the single most important element in the moral injury dynamic. If these harmed groups are not maintained as the priority of this discourse, then moral injury as a concept has a far greater problem than the instability of its meaning. The moment harmed groups are allowed to slip out of sight, all moral claims being made by the perpetrators of institutional violence are instantly voided. Denborough stresses this point in the treatment of moral injuries, noting multiple projects in which veterans themselves have sought ways to connect with and acknowledge members of these harmed groups (for example in Vietnam, Iraq and Afghanistan).

For Denborough, this is not merely a pleasing adornment to an otherwise clinical practice. This is a mainstay of the program itself. Creating community in relation to moral injuries, among veterans and citizens and harmed groups around the world, is not only *how* we treat moral injuries; it is precisely *why* we treat moral injuries. We 'treat' the global community through individual actors and through ourselves. We treat the

violence and the harm done as collective disruptions to that global community. Moral injuries are not, ultimately, about the morally injured. In the years after leaving the military I, too, had the impulse to bring myself face to face with Iraqi people and speak to them, maybe apologise to them, and listen to whatever they might say in return. In 2008, during the Iraqi refugee crisis, I travelled to Amman, Jordan. There were nearly a million Iraqis living in Jordan and another million in Syria. I met many families including one from Basra whose town had been destroyed by American bombs during the invasion.

Many Americans might glance at images of such a town in ruin and regard it conclusively as the 'aftermath' of a past war. But for this Iraqi man and his family, the ruined town did not mark an end or an aftermath, but an inauspicious beginning. When they lived in Basra, the son, a boy of seven years, took an interest in the Iraqi tank hulks left behind from the battle and began to climb on top, inside and underneath them. What the father did not know when he lived in Iraq, but learnt later on, was that the ordnance used to pummel those tanks into smoking hulks was made with, among other materials, depleted uranium. Radioactive residues were left behind, undetectable, unannounced and unaccounted for, and the children came clambering, unaware of the radioactivity, week after week for months on end, until their bodies were contaminated too.

When I met this Iraqi father, his son was 12 years old. The boy had long since lost interest in the old hulks, and the family had been compelled by circumstances to move to Amman. But their situation was not good. I had very little in common with this family and very little to rally around with them culturally. I had left Iraq and gone home. They left Iraq and were indefinitely homeless. We had all witnessed the same smoking hulks in Iraq, but our stories resisted connection. When I made contact with this family, in flesh and blood, new judgement and increased culpability were suddenly impossible to avoid.

The Iraqi man's son was blind when I met them. His hearing was deteriorating, his flesh was decomposing on the bone and his organs were failing one by one. There was no cure. There was no money for care. The man rested his hand on his son's sloping shoulder and the boy's mother offered tea. She offered tea! What could I do? I accepted the tea and in return offered a gangling apology. Then I caught a glimpse of them wondering why. Why was I apologising? What were the dimensions of my contrition? What were my responsibilities? And, therefore, what made me feel sorry? If only I could find the boundary between the

actions I must own and those I cannot. After all, I didn't discover the element now known as uranium, I didn't assign it an atomic value, didn't invent the process for depletion, didn't engineer the ordnance that employed it, didn't drop it on any tanks or towns, didn't even know there was such a thing until after I came home. Nevertheless, I was there, there in the town we offhandedly called Aftermath.

The Iraqi man's mother, an elderly woman, was also in the room when we were having tea. She watched me with piercing eyes and eventually asked, 'Why were you there, in Iraq?' It was clear that she wasn't asking me why my country had invaded hers. It wasn't that kind of conversation. She wanted to know specifically what reason I had, personally, for having participated in events that would produce such things as smoking hulks with radioactive residues and the deteriorating bodies of children. How could I answer? Would it have been sufficient to say that I'd been toiling with that very question since I'd left the military? Not likely. So again, I said, 'I'm sorry'. My body felt crushed by a weight, part of whose mass was a guilt for feeling crushed at all. In a year, the boy would most likely be dead and I'd still be alive telling stories. The Iraqi man knew there was no alternative for me. I could tell. His face expressed sympathy, as if to say, 'yes, it is true, you have no right to feel crushed, and yet, you must feel crushed. That is the only legacy available to you now. So please, have more tea'. What choice did I have but accept his hospitality?

That is the legacy of the morally injured: to accept life with grace and responsibility in the name of those who've been harmed. Still, this mustn't be viewed as a curse or an albatross dangling indefinitely from one's neck. The harms perpetrated were indeed ugly and do demand justice. And the morally injured tend to crave justice. Being held accountable for one's actions feels right. It feels honourable. But suffering, solitude and self-abasement are too often the only forms of accountability that enter the popular imagination and so accountability is often avoided. The most powerful forms of accountability, however, are not suffering, solitude and self-abasement, all of which leave the world utterly intact and unchanged. Accountability in its best form lies in a lifelong commitment to reflect on and face oneself, one's society and those harmed by one's society, and act in a manner that repairs social fabrics, unites human beings and improves the moral constitutions of our world. The destination for the morally injured is not in passive or static shame; it is in the active pursuit of individual and collective transformation.

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Mapping moral emotions and sense of responsibility with those suffering with moral injury

by Zachary Moon



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Abstract

The few citizens who fight their nation's battles on its behalf are often burdened with the full moral weight of war-making. The moral emotions that combatants experience – guilt, shame, disgust, contempt – can be seen as expressions of the need for moral reckoning at a societal level. Rather than seeking the alleviation of suffering within an individual body, moral injury demands reparative and transformative action from the collective bodies of which we are a part. This paper offers therapeutic practices for responding to moral emotions in ways that take moral responsibility seriously, and that move towards recovery through connecting to purpose, preferred values and possibilities for making a contribution through reparations, restorative justice and truth telling.

Key words: *moral injury; military veterans; veteran suicide; veteran mental health; PTSD*

For the purposes of reflections here, I will use a functional description of trauma, including moral trauma, as experience that overwhelms normal patterns of life, coping strategies and meaning-making. If the experience is expected to be stressful, for example a job interview or school exams, it may be easier to assimilate or accommodate its effects into our baseline functioning. However, to the degree to which the experience defies normalisation, it can overwhelm us, leading to a range of symptoms including hypervigilance, hyperarousal, avoidance behaviours, and intrusive thoughts, memories and nightmares.

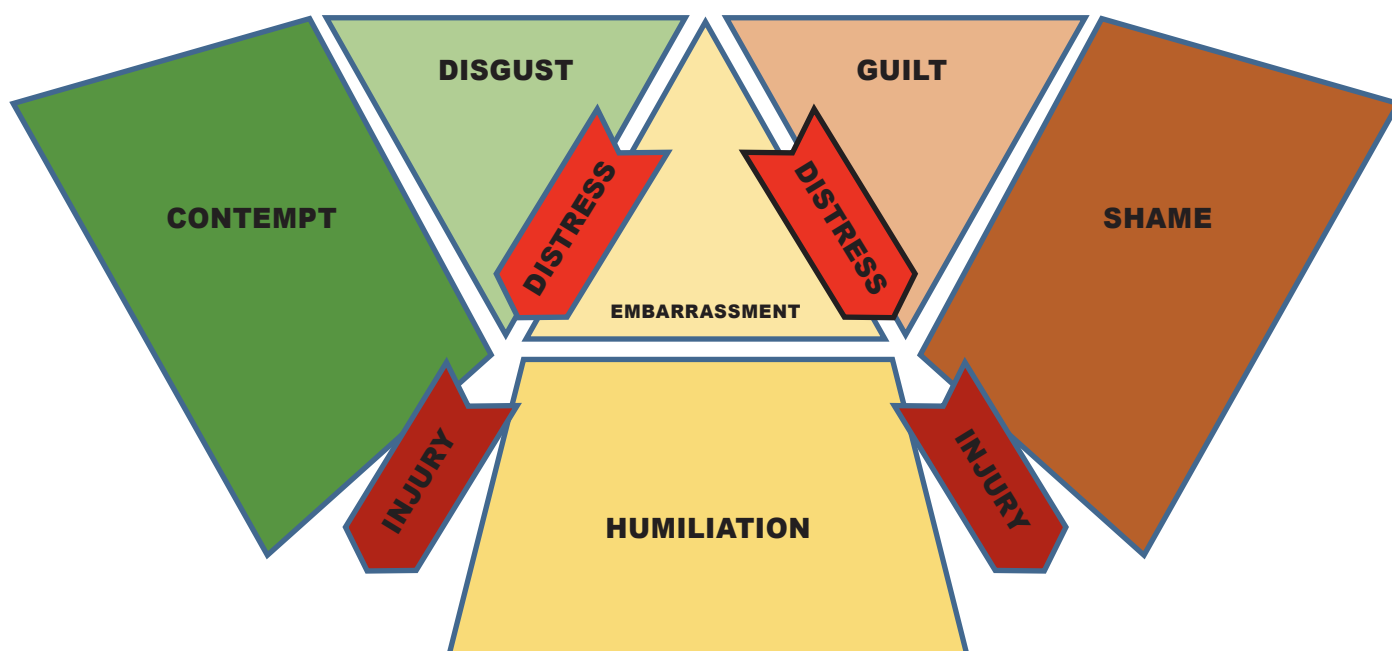
Trauma can be generated by a broad range of experiences, including acute events like an automobile accident, and by chronic, environmental, intergenerational and transgenerational conditions that occur with intimate partner violence, racism, impoverishment, xenophobia and police profiling, to name a few. Central emotions to these experiences can include fear, grief, exhaustion, anger and rage, and a range of moral emotions including guilt, shame, disgust, contempt, embarrassment and humiliation (Farnsworth, 2014). When the primary emotional experience centres on moral emotions, there are moral dimensions to the traumatic aftermath that need our attention.

Moral emotions are evolutionary, ingrained signals that some violation or trespass has occurred in the moral covenant of the community (Haidt, 2003). The pain that is experienced is generated by threat of exile from the meaningful group. Guilt and shame may indicate: 'I do not deserve to be a part of this relationship or this community. I am being rejected and alienated from

the safety and familiarity of my social-relational world.' Without reconnection, reconciliation or reparation of the moral transgression and harm, the prolonged stress of disconnection and loss of trustworthy relationality can result in substantial isolating patterns, self-harm and suicide.

As you work with those suffering with moral trauma, you will hear stories marked by evaluations or judgements concerning responsibility for events, circumstances and/or outcomes in traumatically stressful situations. Sometimes these judgements are directed inwardly: 'I should have...' 'Why did I go there?' 'If only I hadn't...' These inward-directed evaluations will generate guilt and shame. Expressions of anger directed at the self may also be present. Sometimes judgements are directed outwardly, towards another who is deemed responsible: 'They shouldn't have...' 'They said one thing, but did another.' These outwardly directed evaluations will generate disgust and contempt. Whether directed outwardly or inwardly, you are hearing evaluations that may be described by the harm caused, the pain endured, the betrayal of trust and the anger felt towards oneself or towards another for taking or failing to take the morally responsible action. These traumatic experiences have moral dimensions in as much as the sufferer senses responsibility and asserts a violation within their terms of moral agency.

Attributions of responsibility are neither right nor wrong; they are expressions of the person's moral world of values, beliefs and meaningful relationships, what I describe as one's moral orienting system (Moon, 2019).



Care providers may have a difference of perspective when hearing the person's story. This may lead to the impulse to communicate that 'This isn't your fault' 'There isn't anything you could have done'. While these statements might be true from your vantage point, these responses are attempts to alleviate moral suffering by reattributing moral responsibility. Such fix-its are common thinking in medical paradigms – find the problem and solve it – but too often, with those suffering with moral distress and moral injury (moral distress at its most severe and entrenched), these responses are counterproductive. This assertive re-attribution results in guilt and shaming shame; they communicate that the person is wrong for feeling this way.

I am not advocating for moral relativism, but rather inviting care provision to meet the sufferer within the terrain of their moral world, instead of being subjected to a different moral world projected on to them. Within this therapeutic encounter is the opportunity for co-creative and constructive accompaniment if care providers are willing to positively engage the values, beliefs, and meaningful relationships of the sufferer on their own terms. The commitment of the narrative approach to seek solidarity rather than conformity to generalised diagnostic categories is well positioned to work with moral injuries that often defy medicalised definitions.

In cultures that hyper-value individual rights and self-interest, most obviously mainstream American culture, individuals bear the weight of violations, deviations and other actions that are deemed criminal. Court systems prosecute individual wrongdoers, rather than engage in inclusive restorative processes that account for family, community and societal circumstances and factors. The person is framed either as hero or villain. When a moral trauma occurs, there appear to be only two options: either I am to blame; that is, I am the villain; or they are to blame; that is, they are the villain. This storyline has led to the death of many military service members who have experienced a loss of their hero-ness and find villainy to be unlivable.

Tragically, there is additional loss beyond the lives lost to suicide; there is also the loss of the necessary moral reckoning. In modern warfare, a tiny number of citizens fight their nation's battles, and too often, this small minority is burdened with the full moral weight of war-making. A morally injured military veteran is speaking the anguish that all citizens should hear and carry. Broadening our understanding to 'shared responsibility' shifts the scapegoating of a moral burden carried by a few to a societal or national burden that requires

truth telling and constructive change or transformation. Those with severe moral suffering are the canaries in the coalmine, calling for attention and immediate action. Moral injury is suffered chronically because it is not attended to sufficiently, and those suffering remain stuck in isolation. When voices of the morally injured are isolated, minimised, pathologised or in other ways silenced, the powerful interests that would continue to wage war are left unencumbered. We must understand that the healing journey is not the alleviation of suffering within an individual body, but the reparative and transformative action, demanded by inconvenient truths, taken by the collective bodies of which we are all a part.

In my work as a chaplain with combat veterans diagnosed with PTSD, I started using the following house metaphor to visualise and explore moral identity, moral injury and the process of recovery. The metaphor envisions one's moral identity as a house, built over many years and established before one can even remember, constructed by and with members of one's family, close friends, mentors, teachers and other moral leaders (ministers, coaches, etc.). These relationships define this house, which is imbued with one's values and beliefs. This house is built to protect from all kinds of existential catastrophes. Occasional inflictions of doubt, stress and crisis may befall a person, but the house weathers these temporary storms.

However, some situations, circumstances and events cannot be repelled by our houses. In clinical terms, we call these traumas, and they may include traumatic moral injuries. Our normal, baseline system of accommodations and assimilations, of responding and coping, is overwhelmed beyond resilience. Our house's foundations crumble, the walls topple, the roof caves in and we are left with something uninhabitable.

It is instructive to imagine the emotions that such a collapse would generate if you were standing outside, looking over the rubble of what once was your home, your sanctuary, your safety, your sense of meaning. I ask care seekers what emotions they would feel looking at this aftermath of destruction: grief, loss, anger, guilt, fear, shame, betrayal, alienation, isolation, helplessness, despair. What if you looked around and everyone else's house looked just fine? What if you saw your neighbours shutter their windows when they saw you and your calamity, muttering under their breaths, 'But for the grace of God ...'? What would you do next? Expecting another storm to befall you at any moment, would you try hastily to rebuild some shelter? Would you walk away believing this is punishment, having

been marked like the biblical character Cain to wander without a home (see Genesis 4:15)?

This visualisation has been helpful not only in naming and acknowledging the devastation of moral injury, but also in considering the process of recovery. If and when a person who has suffered this extremity of ruin is ready, a rebuilding process is possible. While it may look as though the house has been torn asunder, there are materials present in the midst of the rubble that are worth retaining, that can be part of constructing a new house. We should ask: What here is worth keeping, and what can still provide something necessary to my moral identity? Likewise, some materials present in the midst of the rubble should be cast aside and left behind. We should ask: What here must be lost in order for a new, stronger house to be built? Discerning what needs to be retained and what needs to be relinquished is a necessary part of the recovery (rebuilding) process. Without this discernment, we are likely to reconstruct a house no better than the one that has recently collapsed. Overall, this house metaphor acknowledges our moral identity – the materials noted here are values and beliefs. As with good materials and weak materials, values and beliefs can provide structural integrity or compromise it.

The recovery process also has a social-relation dimension. Moral identity is socially and relationally constructed; many hands build our house. Hence, moral injury devastates our social-relational web of support. Therefore, the rebuilding process needs support from trustworthy others. The trap here for both care seeker and care provider is to oversubscribe the architectural prowess of the care provider. The care seeker comes in crisis, their house destroyed, while the care provider is presumed to have a better house and to be better at making houses overall. Whether a projection of the care seeker or an overindulgence in a saviour complex on the part of the care provider, this is a recipe for disaster. Even the most capable moral leader cannot adequately build another person's house. We must be our own architects, and one's recovery process must be empowered as such. And yet, we do not need to labour alone. Someone reeling from the desolation of their home should seek (to the best of their ability) help, and helpers must come ready to work. Care providers would do well to remember that they are helpers, not master builders, and their care practice should resemble this condition. Sometimes the greatest gift a care provider can offer is a good referral. The only lasting solution in

the aftermath of moral injury is a community of engaged mutual thriving (Farnsworth, 2014).

While the moral emotions present in moral anguish – guilt, shame, disgust, contempt, embarrassment and humiliation – may have life-limiting expressions, they are not negative. At the core, all moral emotions communicate necessary messages about the conditions of the moral covenants in which we thrive. If there is a problem, a violation or a breach within that covenant, these moral emotions are meant to get our attention. They have a pro-social function in as much as they are calling us to awareness, acknowledgment and reparative action.

I offer two additional encouragements in working with moral distress and moral injury. First, we cannot talk ourselves all the way through moral distress. Connection, processing and learning are all important elements of the recovery journey, but we cannot grow without action. Sometimes this action looks like activism; the proliferation of veteran-led activism is evidence of this type of action-taking. Pilgrimages, particularly to the sites of past military activity, are another form of embodied action that demonstrate a seeking of reconnection and reparation. Restorative justice processes, including truth and reconciliation commissions, represent another form of collective action towards moral repair. Without action-based work like these examples, moral injury will continue to fester.

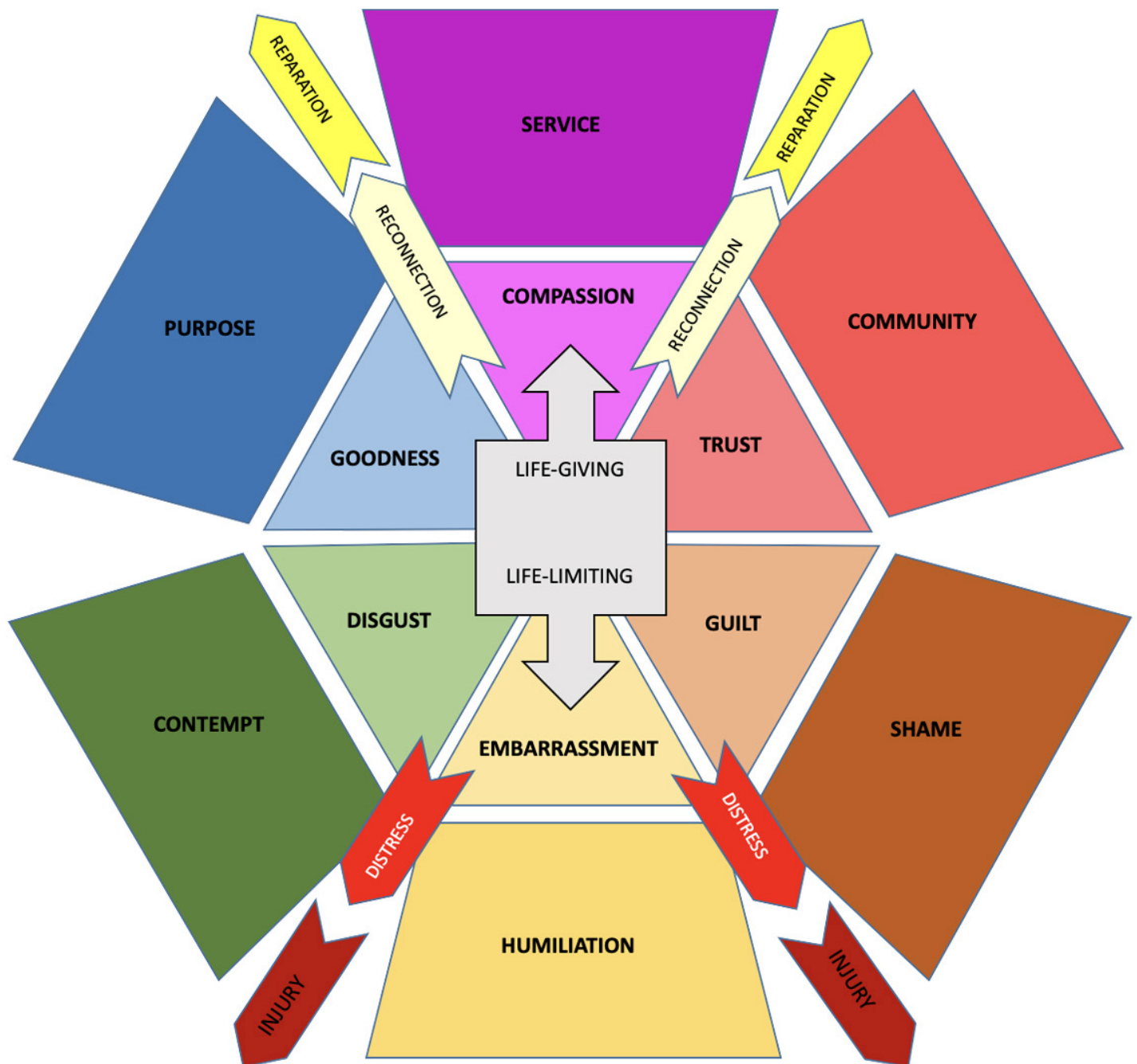
Second, reparative action can begin in the smallest of practices. As you will see below in the further-developed diagram, guilt, shame, disgust, contempt, embarrassment and humiliation are not the only moral emotions we experience. When we experience trust, compassion and goodness, we strengthen our sense of moral rightness at personal, interpersonal, societal and global levels. When we connect to our purpose, our community and our service to others, we feel emboldened in our connections in a morally ordered existence. How do your therapeutic practices engage senses of trust, compassion and goodness? How do your therapeutic practices enliven the feelings of purposefulness, community-building and service in the world? Your presence, both verbal and non-verbal, in the therapeutic encounter intersubjectively offers multiple access points to these deeply life-giving moral emotions, which become signposts on the pathway to recovery and reparation for those suffering with moral anguish.

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I am more than the violence I survive': Reflections from the Policing Family Violence Storytelling Project

by Lauren Caulfield

*(For J, C and S, who continue to pare their experiences open and keep taking that fight up,
and who lead this work from everything they've lived and survived)*



Lauren (known as Loz) is a family violence worker, narrative therapist and recently admitted community lawyer who coordinates the Policing Family Violence: Changing The Story Project on unceded Wurundjeri Country in Naarm. She has a background in abolitionist and anti-violence work and community organising and works at the intersection of interpersonal and state-sanctioned gender violence. Loz can be contacted by email: laurenvcaulfield@gmail.com

Abstract

Family violence responses that centre policing often replicate and reinforce the power and control dynamics of gender-based violence. The Policing Family Violence Storytelling Project works at the intersection of gender-based violence and state-sanctioned violence, where the harms of family and domestic violence interact with and are compounded by the harms of policing. The storytelling project integrates individual narrative therapy, collective narrative practice and community organising to centre the insider knowledges of survivors of violence. It views the communities in which violence occurs as uniquely equipped for and invested in creative responses to harm. People who have lived with violence have significant expertise in the dynamics of violence, responding to risk and harm, and surviving systems that may reinforce or amplify the violence, punishing the very tactics people use to survive. This paper describes practices used to elicit survivors' stories beyond the limited imperative of evidence gathering for legal processes. It also shows how these stories are used to guide and inform social action, including intervening in popular narratives that seek to make state responses synonymous with 'safety', and fail to recognise both the harms of these and the myriad strategies people experiencing violence use to survive.

Key words: *narrative practice; phenomenology; double-storied accounts; scaffolding conversations; personal dialectics; re-authoring conversations map; statement of position maps; skills and knowledges*

The Policing Family Violence Storytelling Project is a narrative practice innovation at the nexus of intimate partner violence and state-sanctioned violence – where the harms of family violence intersect with, and are amplified by, the harms of policing. The project is a response to recent and ongoing expansions to the role of police in the family violence system, and to the clarity and leadership of people, predominantly women, targeted by violence.

This work is part of the integrated sociolegal and organising work of 'Policing Family Violence: Changing the Story', which seeks:

- to respond to accountability issues and harms enacted in police responses to family violence
- to prevent the criminalisation of survivors of violence
- to make overt the lived impacts of carceral responses and to challenge the idea of their inevitability.

The broader Policing Family Violence project is focused on providing legal, advocacy and social work support to people harmed in the course of family violence policing, and is directed by and accountable to a network of survivor-advisers and a working group including Flat Out, the Police Accountability Project, the Law and Advocacy Centre for Women, St Kilda Legal Service and Inner Melbourne Community Legal. The storytelling project is made up of individual narrative conversations with people who have experienced this intersecting and interlocking violence. Individual storytelling sessions can be one-off or in series. They are often woven between other legal and support work and traverse the timelines, experiences and impacts of these. With permission, sessions may be recorded and transcribed. These sessions ask people how they responded, not what was done to them (Wade, 2007). They draw particularly on questions about the landscapes of action and identity to re-author stories of violence and document the rich insider knowledges of people who have navigated, survived and resisted violence.

This work is grounded in, and a response to, participants' motivation to tell their own stories as a way of making change: 'to make sure what happened to me doesn't keep happening' or 'for other women to see me as courageous, and to know that they could take that action for themselves'. Based on these intentions and on ethics reaching for justice-doing (Reynolds, 2019), this work integrates individual narrative therapy, collective narrative practice and community organising.

It interfaces with the legal, advocacy and support work facets of the broader Policing Family Violence project, including chain-of-command advocacy with police, formal complaints, criminal defence and other legal assistance aimed at individual remedies, and when possible, strategic litigation and civil claims against the police as an institution¹ – with all of the challenges and dilemmas these tactics entail.

Although the storytelling sessions themselves are one-to-one conversations, the documentation of stories, and the ongoing work and collaboration with people contributing to the storytelling, flows back into the broader project, and into co-advocacy and collective action. This has included organising and campaign work, input to direct the project and its work, and producing content for training support workers and community lawyers. Answers to questions like 'what do lawyers and support workers need to know to be able to respond usefully to family violence police accountability issues?' were used to build practice forums on family violence policing that started with listening to survivors. Answers were also used to guide media advocacy, lobbying and submissions. The collective documentation aspect of the project is still underway, and will include a document that will be available for, and exchanged with, people experiencing and navigating similarly interconnected violence, and will in turn be incorporated into community-based campaign work.

The work of the storytelling project, including its practice influences, current approaches, the intersections between individual and collective narrative practice and possible future directions for this work, are explored in more detail below and throughout this paper.

Background: Carceral creep

This project occurs in the context of increasing carceral creep – the proliferation of family violence responses and sector reforms that assume that police are uncomplicated sites of safety for people experiencing violence. To understand the political and policy context of the storytelling practice and the implications of state-based approaches to family violence on individuals, families and communities, it is important to contextualise and locate this work in relation to the trajectory and effects of an increasingly carceral family violence service system.

When I arrived to the police station, I didn't have any shoes on because he had locked me out. But when I got there, he had called ahead and told them I attacked him. So when I arrived I was arrested and interviewed. I tried to show them the bruises on my arms, but they didn't want to see them. He speaks English well – I am slower. I did not have an interpreter. (Tina)²

When I went to touch the door handle [to walk into the other room], he [the police officer] yelled at me. There was no comfort, nothing but disrespect. When they were leaving, they wanted to get evidence from where I had injuries or marks from where he had stood over me and stamped on me, and they said, 'we want you to front up tomorrow to forensics and a detective will be here to pick you up tomorrow morning. Will you be ready?' There was no ambulance or support. They didn't have that sort of support or duty of care to the victim. (Elka)

Like the Policing Family Violence project more generally, the storytelling work emerged in response to the Royal Commission into Family Violence (State of Victoria, 2016) and its reforms. After decades of feminist campaigning in relation to gender-based violence, the Commission undertook a sweeping review of the Victorian family violence service system which would dictate the approaches, funding and direction of family violence interventions across the state. Despite hearing numerous 'stories of inconsistent and harmful police responses to family violence' (State of Victoria, 2019, p. 93) and observing harmful gender stereotypes and [hyper]masculine cultures of victim-blaming among police, the Commission nonetheless received numerous submissions, including from family violence agencies, that accepted and endorsed the role of police as first responders to family violence.

Where critique of the harms of policing was made, the calls accompanying this were focused on reforms, including measures like police training and procedural review, rather than critique of the systemic violence involved with policing, and the compounding harms and consequences of this for the people, families and communities being policed. These reforms continued to authorise and extend the role of police as first responders, and to structure the family violence service system to more closely fuse relationships between agencies and police. This occurred without corresponding accountability measures enacted to monitor the lived impacts of this policing on people experiencing violence, or to resource and support

people seeking accountability after being harmed in the course of this policing.

These family violence policy and structural reforms are largely grounded in reformist white liberal feminist discourse that perpetuates the assumption that police responses to family violence bring safety, and that they do this equally across communities. This approach has thus sought to enshrine an understanding of family violence as a gendered issue that is underpinned by the structural inequality of (white, capitalist, hetero) patriarchy. It has also sought to divorce the violence of policing from this analysis. This largely ignores the links between interpersonal, structural and state-sanctioned gender violence, exacerbating and enabling state-sanctioned gender-based violence through which people targeted at this intersection are at best rendered invisible and excluded from agency responses, and at worst harmed by a service system that is increasingly shackled to the police.

This sweeping authorisation for policing as a central response to family violence in turn justifies and drives police expansion more generally. This recent wave of expanded policing has been both gendered and racially targeted. It has propelled the criminalisation of survivors of violence, including a massive increase in the number of family violence survivors, especially women of colour, being listed by police as 'primary aggressors' on police-initiated intervention orders and being criminally charged. Aboriginal women continue to be criminalised at staggeringly high rates. They are the fastest growing population of people in prison in Victoria, and are again bearing the brunt of intersecting state and interpersonal gendered violence (see Allas et al., 2018) while continuing to lead work to resist it.

This racialised and gendered trajectory of family violence policing criminalises survivors, and makes necessary the work of reckoning with its impacts, interrupting the whiteness of carceral feminism, disputing the idea that police responses equate to safety for everyone, and regaining terrain against co-option.

How the storytelling work originated and evolves

The storytelling practice was developed in response to what people contacting the Policing Family Violence project for assistance were telling us about their priorities, and the deep limitations of conventional legal remedies or self-investigative police complaints

pathways to deliver any semblance of justice (Hopkins & McDonald, 2016; also see Goodrick & Sampson, 2020). Often when people pursued these avenues – especially police complaints, which was something we focused on in the first year of the project – they described the experience as replicating and reinforcing many of the same power and control dynamics of the family violence itself. We echo that view. For instance, formal avenues and mechanisms for accountability by state-responders (police and courts), such as complaints via Police Standards Command or the Independent Broad-Based Anti-Corruption Commission (IBAC), were themselves lengthy, exhausting, controlling and opaque. They were so limited that they did not engage meaningfully with lived experiences of violence or the effects of harmful policing. With the vast majority of these complaints referred back to police for self-investigation, they were rarely if ever substantiated, and if they were, the investigations were so lacking in tangible outcomes for women as to be, at best, a waste of time and energy, and at worst, a further reinforcement and replication of the same gaslighting and victim-blaming narratives used in the course of the violence that was the subject of the complaint. The challenge, then, for the project was and is to shape narrative responses that do the opposite.

Re-authorship and reclaiming stories: Telling the truth in our own words

When discussing objectives and options for seeking accountability for police harm in family violence contexts, the people we work with spoke about wanting to tell their stories in their own words in ways that held the complexities of violence, responses and survival. People spoke of feeling like the avenues for genuine accountability or repair from the state were limited or unlikely, but that they felt compelled to find other ways to speak to try to prevent what happened to them from ever happening to anyone else.

I am speaking because I am terrified, because I want a record in case anything happens to me, because I want to take my own power back, and because I want to make sure this doesn't happen to anyone else. (Hazel, as quoted in McKenzie, 2020a)

These desires and goals formed the simple co-designed foundations of the storytelling work:

- How can we tell our stories in our own words?
- How can we do this in ways that do not treat us as deficient or passive recipients of violence, but that make us stronger?

- How can these stories be shared with other people in similar situations, to puncture the illusion of isolation?
- How can the stories and the people telling them reach wider audiences in order to speak back to individuals and systems that have caused and keep causing harm?

Relevant, too, for the work has been creating different forums for the substantiation of experiences: the joining of stories and alternative forums, rituals or steps to justice.

The dignity of time: A note on adapting practice in the COVID-19 context

This storytelling work coincided with the COVID-19 pandemic, and two phases of lockdown regulations that limited movement, travel and access across the state. In prisons and sites of detention, movement was confined (extending to cell lockdowns) and communication with people outside was drastically reduced, with in-person visits suspended and access to phone communication greatly decreased.

In addition to the escalation in gendered and family violence that occurs during natural disasters, state of emergency legislation enacted by the Victorian parliament brought further extensions to police powers. New COVID-related offences and increased police presence further compounded targeting and criminalisation of people experiencing violence (Covid Policing Coalition, 2020). At the same time, there were massive changes to services, which changed their opening hours, implemented work-from-home models, and often reduced or delayed access. There were also sweeping adjournments of all court matters deemed 'non-urgent'. The backlog of legal proceedings and practitioner confusion in an ever-changing transition to online hearings created a significant spike in crisis situations for people we support.

In response to this changing terrain, we prioritised urgent and crisis-support work to direct our limited capacity to meeting demand. We used a triage approach with a focus on people we were already working with. We also sought to track and respond to carceral health responses at the systemic level.

The storytelling work fits within this integrated practice model. As people contributing to the storytelling were often navigating and responding to ongoing violence and criminalisation, this work in turn entailed a greater support work component. Storytelling sessions

continued for those who wished to speak online and via phone, and transcription, co-advocacy and other campaign work also continued (and indeed at times escalated). We sought to keep our practice ethics grounded in what project mentor Charandev Singh has referred to as 'the dignity of time'. Experiences of violence and resistance are not linear or succinct. Location and format matter, and enabling adequate time is one way of demonstrating respect for the experience of hearing someone's story. We extended project timelines to accommodate further in-person sessions when things reopened. We also sought to work with incarcerated people who were subject to discriminatory restrictions, to resist rather than reinforce the privilege of the un-incarcerated, and to enable the storytelling work to accompany people through deferred legal processes. This ever-changing political and pandemic landscape shaped the storytelling project as it is described here.

Narrative practice influences

The storytelling project draws on the rich genealogies and traditions of abolition feminism (INCITE!, 2001), community-based anti-violence and anti-racist organising (Smith, 2010) and transformative justice work (Kim, 2007) both here and across colonial borders, including work from Turtle Island, where our links and exchanges with organisers in these movements are strong.³ We also seek to honour and follow the lead of Aboriginal-led narrative gatherings responding to these issues (Drahm-Butler, 2020). As such, this work is grounded in theoretical and political traditions that understand the inextricable links between interpersonal and state-sanctioned gender violence (see INCITE!, 2001); the ways that these forms of violence intersect with, capitalise on and mutually reinforce existing systems of oppression; and the parallels in their tactics and impacts. The work centres the lived expertise of survivors of violence, and views the relationships and communities in which violence occurs as uniquely equipped for and invested in envisaging and building creative solutions to harm.

We have drawn on storytelling projects that have documented individual and community-based experiences, interventions and responses to violence, including the Storytelling and Organizing Project (STOP; see Creative Interventions, 2012), the stories gathered as part of the *Creative Interventions Toolkit* (Creative Interventions, 2012), and the conversational innovations of the 'Friends are reaching out' (FAR Out) work of the Northwest Network (Burk, 2011).

The Policing Family Violence Storytelling Project has also been in dialogue with the Centre for Nonviolence and the work of Dang (2018) with a view to sharing approaches to storytelling and training in responding to violence and harm in a way that decentres police.

The project is influenced at a foundational level by Vikki Reynolds' (2009) work on collective ethics and justice-doing (2008) and draws from and adapts narrative approaches including Michael White's (2005) statement of position map and migration of identity map, White's (2005) landscapes of action and identity, response-based practice and the particular 'honouring resistance' work of the Calgary Women's Emergency Shelter (2007) and Alan Wade (2007).

These practice influences have been tremendously useful; however, central to making this work genuinely collaborative and responsive has been adapting our influences to the specifics of where we are at this moment. This has been a process of weaving together histories, theories and narrative practice approaches, and applying and adapting these in a way that is fit for purpose and also capable of flexibility and change.

Refusing deficit discourse: Response-based practice

Ask me how I responded, how I resisted and survived. Don't ask me just what was done to me. Ask me how I lived and how I still do. (Anya)

Experiences of violence and its impacts have drawn people to this project. Acknowledging hardships and multiple injustices is where the storytelling begins. To move to double-storied testimonies and avoid extractive or problem-saturated stories of violence in which the actions and expertise of the person experiencing and surviving the violence are rendered invisible, the sessions draw heavily on response-based practice, which holds the central understanding that where violence is occurring, it is always being responded to.

Whenever people are badly treated, they always resist ... People tend not to notice that victims resist abuse. Abuse can be very dangerous, so usually victims resist it in ways that are not obvious. Others probably will not even notice the resistance, so they assume that victims are 'passive' ... In real life, the so-called 'passive' victim does not exist. (Jay)

This discourse of the passive victim can be pervasive in relation to both family violence and state violence. Many of the people who have contacted the project have had a catch-22 experience of being perceived as either the passive victim, in which case responses to violence are made invisible, or as resisting to a level that is criminalised and has sometimes included systemic punishment, including the removal of children.⁴ This punishment for acts of resistance is something that regularly falls along racial and other discriminatory lines. It reinforces a good victim/bad victim dichotomy in which the 'good victim' is passive and subject to paternalistic responses from outside agencies or 'experts', and the 'bad victim' is deemed to be aggressive and ungrateful, and in turn either criminalised or subject to gatekeeping responses from services that consider her to be 'risky'.

Exploring and re-authoring acts of resistance is central to this work, and to the reclamation of preferred and self-authored stories of experience from agency- and state-reinforced narratives, including the stories often told by others about people experiencing violence. This includes reclaiming stories told from the perpetrator/ person using violence themselves to the police (including in statements), held and reinterpreted/ reinforced by police (including in Law Enforcement Assistance Program records and applications for orders), to the courts that in turn translate these narratives into judgements and orders.

In practice, applying response-based approaches in individual sessions means matching any questions about violence, what happened and how it changed over time, with questions about response: how the person being subjected to the violence acted to respond to what was occurring, and adapted when the violence changed, how they knew to do this, when else the person might have used those actions, how this is linked to others and the meaning the person themselves makes of these responses (see White, 1994, pp. 11–40).

Jackie had experienced violence by an ex-partner from when she was a teenager to until the time of our conversations when she was in her late 40s. After she sought to end contact with her ex-partner, his violence had targeted her workplace and colleagues, and he had also weaponised both police family violence responses and the mental health system against her. Despite having been the target of his high-risk violence over time, and police having had involvement in and records of this after he seriously assaulted her, when he falsely reported her to police, she had been listed

as the respondent (or perpetrator) on a police-initiated family violence intervention order, and had also been criminally charged.

We discussed Jackie's recent experience of having the police come to serve a summons on her. Previous re-authoring conversations had addressed what Jackie called her 'I'm an anxious person and I can't cope' story, which was actively reinforced during the relationship, and had been 'very loud' during the overwhelming experience of criminalisation. More recently, this had been accompanied by 'I deserve to be punished' – a story that had been reinforced by her experiences of being criminally charged for resisting the violence.

Lauren: So you didn't respond when the police knocked. There's a card in the door. Can you tell me a bit about what happened over those few days? How did you respond?

Jackie: So I immediately called my support worker who hooked me up with a lawyer. The lawyer communicated with the police. I just wanted to be charged. I didn't want to do an interview. My lawyer was of the opinion that I had the right to not do an interview, to just go straight to charge and summons. The police wouldn't have it. Then about a week later, they just hounded me. At about seven o'clock in the morning I had six phone calls in the space of about three or four minutes, one call after another.

Lauren: The police were calling repeatedly?

Jackie: Yeah. Between 7:02 and 7:06, six calls. Then there was the text message about half an hour later telling me to ring them, and then later in the day there was banging on the door and another card in the door. By time this time I'm holed up.

Lauren: What did being 'holed up' look like?

Jackie: I've got every blind and curtain closed. Every window shut. Every door locked. Me and my dogs holed up in the room that's furthest from the front door. Only one small lamp on. No noise, no television, nothing for two days. Because I was frightened that they would drag me out of my home in

handcuffs, throw me in the cells overnight and there would be no-one to look after my animals. That's all I really cared about, because they'd already been left when I got dragged off in the ambulance after having a loaded syringe right in my face.

Lauren: How did that come about, the earlier experience of being dragged off in the ambulance?

Jackie: He's done this three times now. The first time he'd ring up the police and say that 'she needs a welfare check'. So the first time that the police came around – knock, knock, knock at the door – I realised it was the police. I opened the door. Two cops standing there. They'd been sent by him for a welfare check. 'I'm fine. You can see I'm fine. I'm just watching TV.' They go away.

Lauren: Did you know that he'd called them?

Jackie: No. I didn't that time. But the second time he was taunting me with it. He was sending me text messages that just said 'knock, knock'. Twenty minutes later, knock, knock. And this time I knew. I called out 'who is it?' 'Victoria police. It's a welfare check'. And I just called out 'go away this is family violence'.

Lauren: So you knew, and responded and said to them 'this is family violence'?

Jackie: Yeah.

Lauren: And how did they respond?

Jackie: They just walked away.

Lauren: And what did it mean for you, to have spoken and told them that through the door?

Jackie: At this point there'd been an intervention order in place against him. They had access to that on the police database after he assaulted me. It's about the family violence context. But they've come out again with these charges.

Lauren: And you said earlier that that family violence context is really important.

Jackie: Absolutely.

Lauren: And you got it in.

Jackie: As well as I could, yep.

Lauren: Then what happened?

Jackie: Then the third time it was the [mental health crisis] team. So that was two big male police officers and three paramedics – they came in later. So first the police come in. I'm back on the couch saying 'oh, I'm alright'. Three paramedics come in in full PPE. One of them, I'm like in the corner of the couch like this, one of them is waving a loaded syringe in front of my eyes saying 'if you don't come into the ambulance of your own accord, we're going to pin you down and forcibly inject you with chemical restraint and take you anyway'.

Lauren: What was that like for you?

Jackie: Threatening. Punishing. The same thing as the violence but in another form. And this happened because he's called for this so-called welfare check. Because he cares so much about my welfare. It's like the police and the psych team just take his word for it [when he uses] the Mental Health Act. No-one tried to talk to me about my state of mind. I just had a syringe waved in front of my face. That was it. It was just come with us, or we are going to jab you.

Lauren: And what was it like, having them arrive and then waving a syringe in your face?

Jackie: It was just frightening. Because earlier this year when he called them, I was chemically restrained. I was carted off to hospital. I was shackled to a hospital bed and just left there for hours, shackled by my wrists and ankles. And then I was just discharged at four o'clock in the morning, so I knew what it was like.

Lauren: So you'd had a prior experience and knew what it was like.

Jackie: Yeah, so I was terrified.

Lauren: It sounds terrifying.

Jackie: It was. It was absolutely terrifying. But then once I got to the hospital, so it's like midnight by this time, I was made to sit in a wheelchair in the foyer. I'm guarded by the same two police officers plus a security guard. Three people to guard me who weighs 50 kilos. After about an hour and a half, I got in to see the GP. As soon as I explained to her the context around this, she just discharged me.

Lauren: So after all of that, you went into the doc and explained the family violence to put the context around what's been happening and to give her that description? And then you were discharged?

Jackie: Yeah, and then I just walked home by myself at two o'clock in the morning. And then I was supposed to turn up at the [family violence] hearing at 9.30 the next morning.

Lauren: Because it was the next day, wasn't it?

Jackie: Yeah. And of course I was so traumatised I couldn't get off the couch.

Lauren: So he's made that call the night before you're meant to appear in court?

Jackie: Yup. So he didn't bother appearing either, which I knew he wouldn't. So he's just used the entire policing, emergency, ambulance and justice system to perpetuate even more violence when he couldn't get to me directly.

Lauren: You describe that so clearly, what you said earlier about the 'layering' of the different types of punishment. I think you said before 'punishment by proxy, punishment through agencies or through services'.

Jackie: Yes, it's punishment by proxy.

Lauren: When the team came out and they were threatening you with the syringe, you said you were terrified, and you also mentioned that you were not on your own this time. What did you put in place there?

Jackie: I had my support worker on the phone listening to everything that was happening because last time they did this to me they didn't tell anyone.

Lauren: So this time you contacted someone yourself.

Jackie: I wanted a witness.

Lauren: What did it mean for you to have a witness? What effect would that have?

Jackie: I wanted someone to know where I was being taken and under what circumstances or on what grounds, because last time when they took me back in January, no-one even called my family to tell them.

Lauren: So last time your next of kin weren't notified when you were discharged?

Jackie: No.

Lauren: Okay, and then this time you'd put in place a support worker, so you said you wanted a witness, you wanted somebody to know where you'd gone and on what grounds they'd taken you. Did you achieve that?

Jackie: Yeah. Yeah.

Lauren: What difference did that action you took make?

Jackie: Well this time I wasn't restrained. We advocated together and I walked out to the ambulance 'voluntarily'.

Lauren: What did that look like?

Jackie: I was walking, upright, still with my support person on the phone.

Lauren: And what did it mean to you to do that?

Jackie: It made it less harmful, to go on my own terms without restraint. It interrupted the full scale of the punishment.

Lauren: Did it matter to you, to interrupt the full scale of the punishment, or to 'go on your own terms' if you had to go?

Jackie: It was essential.

The answers to these questions offer important glimpses into preferred stories, and in turn into the insider knowledges and the wealth of expertise that people who have lived with violence have regarding the dynamics of the violence itself, as well as strategies for survival, tactics to keep themselves and their children safe, and ways of surviving systems that often reinforce or amplify the violence, punishing the very tactics people use to survive. Re-authoring these stories via response-based questions is a way to unlock preferred stories in a way that is owned by the person, is capable of holding complexity and not limited by either a good victim/bad victim binary, or a thin and romanticised story of survival.

Re-authoring when people's survival and acts of resistance have been used against them

Ways of defining and naming 'the problem' have been central to this work. This is particularly relevant when the person themselves or the tactics they have used to survive have been positioned as the problem. The discussion with Neta recounted below provides an example of the creation of contexts for storylines that honour what people give value to, and how they seek to hold on to and act in accordance with these values, even through complex situations and sometimes punishment.

Lauren: So we've talked about that 'belligerence', or what you earlier said others have characterised as not being able to 'let it go' and how that has 'caused all this trouble' and even led to charges. But here you've been talking about it differently: that maybe it is also you being, as you describe, a 'dog with a bone'. Do you know what the bone is?

Neta: It's me, I guess. Some part of me or my experience that I won't let go of, even when people try to take it.

Lauren: Some part of you, of your experience. And what does it mean to you to hold on to that bone?

Neta: It means getting through. Not letting go. It means survival and continuing to fight. Not letting go of my self or my own experience, even when people or systems want me to.

Lauren: Is that not letting go of your self and of your own experience important?

Neta: Yes. It's been so important, so crucial to being able to survive and keep fighting, even when people think it's a problem or when the police think I am just a belligerent bitch who won't let it go.

Lauren: Getting through, survival, continuing to fight: When you talk about continuing to fight, do you know what you're fighting for? Is it something you value?

Neta: I think it's those parts of my self and my experience. But also something else. I'm so sick of the unfairness of it who gets away with what, and who doesn't. So the fighting is against that.

Lauren: If the fighting is standing against that, do you know what it's standing for?

Neta: Just telling the truth, I think. And not letting someone else tell you something else.

Through these micropractices of welcoming and exploring all responses to violence and the meaning behind them, not just those that fit dominant discourse about the 'good', 'innocent' or 'deserving' victim, and exploring the meaning people themselves make of these using the absent but implicit, and questions based on the landscape of identity, people have been able to identify and strengthen those preferred stories about the meanings these survival practices hold for them, rather than having this described for them through the deficit, criminalising, rescuing or punitive discourses of the prison industrial complex. In a context that increasingly pathologises survival while seeing safety as the business of state enforcement, this reclamation of story is no small feat.

What activates us into states of safety: Working with glimmers

Drawing on and adapting the work of Andrea Glik (2019) on 'triggers' and 'glimmers', an element of the storytelling practice has been to identify and thicken stories of response and resistance, or times when agency was felt and activated, by lingering around 'glimmers' of response, and asking sensory and descriptive questions to gather rich descriptions of how this was felt in the body, and what might have been seen, heard or observed. Revisiting the conversation with Jackie at a later date enabled further enquiry about her earlier descriptions.

Lauren: When we spoke last, you described for me what it meant to go 'on your own terms', and also it struck me that when you described this, you spoke about walking upright. Can I ask you about this?

Jackie: Sure.

Lauren: I wondered what it felt like, walking upright after what had gone before? How did it feel in your body?

Jackie: Well, before that I had been in panic and overload, so I was still shaky, but I could speak and I could walk at my own pace.

Lauren: Is there anything else you noticed?

Jackie: I guess my breathing slowed too.

Lauren: And what was that like for you?

Jackie: Well, for me that's about calming my mind, or that's what happens. I do it to calm myself, but also it naturally happens when I'm calmer and I can't really breathe when I'm in deep anxiety.

Lauren: It's striking that even amidst the chaos of what was happening, and as you said, the violence of it, you were somehow able to access that: walking on your own terms, at your pace, able to speak and with breathing slowed.

Jackie: Yeah, it is, isn't it?

Lauren: And is that something you've been able to do before or that's familiar to you from other times?

Jackie: It's also something I think I do when I come home and I am sort of trying to create a space of sanctuary or reprieve.

Lauren: So when you come home and create that, what does it look and feel like?

Jackie: I am often just with the dogs. They curl into me in different spots, and we sort of kick back together. They curl in and I stroke them and things slow down.

Lauren: So things slow down when you're there with them. Have you always done that?

Jackie: I think when I was younger and things were really full on, we had a dog then, and often I would find a spot with him and we would just curl up.

In contrast to deficit discourse and to the popular language of triggers, adapting this work about 'glimmers' was an important technique to elicit glimpses of life that are not entirely defined by violence, and to draw in embodied experiences. I have spoken with women about these cues of safety, not just in terms of reflecting retrospectively, but as a set of noticings that are relevant to the work of building safety, including if and when confronting harm or engaging in accountability work.

Working with landscape of action and identity questions, the absent but implicit and the statement of position map

People often describe a compulsion that propels them to keep fighting. Yet so often the limited options offered as recourse to harm leave little, if any, space for the idea of justice-doing, especially when it comes to pushing back against state-sanctioned harm. Here, too, maps of narrative practice and statements of position (White, 2005) have been relevant to developing questions that help to map the preferred story through domains of living, including hopes, dreams and values.

Interweaving landscape of action and landscape of identity questions, and drawing from and working with the 'absent but implicit' (Freedman, 2012), have been central to re-authoring and thickening stories of the ethics underpinning people's responses, and to discovering what is treasured by people in the face of abuse. We have used landscape of action and

landscape of identity questions to link descriptions of actions taken with other similar or resonant experiences across the person's life, and with what is absent but implicit in these stories, moving towards collective action as a way of eliciting and mapping shared ethics.

For instance, Riya linked the actions she had taken in response to recent violence by her ex-partner and then police with speaking out as a 14-year-old about the sexual abuse perpetrated by her uncle. This went against what was expected by both family and community, but doing so offered a glimmer of a type of courage that became a significant value and source of action across Riya's life, and which she continued to draw on in responding to the more recent violence. The excerpt below shows the use of landscape of action and identity questions, enquiry about the absent but implicit, and the statement of position map.

Lauren: These actions led by the value of courage and the position that 'it gets worse before it gets better' – can you think of other times in your life you've taken actions of that kind? Are there actions you can think of elsewhere in your life that are guided by this understanding?

Riya: Yeah. I don't know if I can share this in detail, but I was sexually assaulted by my own uncle, my mum's brother, from when I was three years old – a baby, Lauren. It continued until I was 14. I definitely knew it was not going to be forever. On one occasion I literally slapped him, when I was like 14. I said, 'if you don't stop it now, the entire community and your wife and your children and my mum, everybody is going to know what you've been doing'. It literally took my entire courage, my maximum courage, to put up with that and to call it off and that was the best thing I ever did. He never approached me again.

Lauren: So he never approached you again after that?

Riya: He didn't.

Lauren: And you used that, your 'maximum courage' to do that?

Riya: Yes. He did other stuff, emotional violence and stuff, manipulation, from then on, but sexually he didn't even dare to put a finger on me.

Lauren: So he didn't dare to put a finger on you again. And what's it like for you to think about the way courage guided you in this situation with your uncle when you were younger? What's it like for you to make the connection and to know that maximum courage has been present with you and something that you've used, not just now but actually over a lifetime from when you were very young?

Riya: In a way, hopeful. Like I can act for myself and sometimes I am stronger than even I know. But also for my children. For me, one hope which I definitely kept on my mind was my children. They're my biggest strength. And for me, every child deserves to be treated as a child without any fears and without any of this violence. Because I haven't got any of that stuff taught from my mum, I thought I should be the other way around. And my kids are going to pick up things from me, so I should be the example.

Lauren: You can act for yourself, and also for your children. To be the example. What does it mean for you to do that? What would it mean for your children?

Riya: It would mean they know what happened isn't their fault, isn't mine. That it wasn't right and it's okay to say so.

Lauren: Is that important?

Riya: So important.

Lauren: And if that maximum courage that you are sometimes stronger than even you know was with you over the coming days and weeks, what would this mean for you or your actions?

Riya: It would mean I would speak. I would keep my dignity and tell of what happened, and remember what is mine to hold, and what is not.

Lauren: And what might it mean for your hopes for this work, this fight?

Riya: Remembering that it takes a lifetime of courage. That we say everything and don't hold back, and then when they come for me, we fight! [laughs].

Reflecting on this conversation leaves me thinking about the practice emphasis on enquiring not just about the present, but about values and actions across a lifetime, and asking questions to draw out the richness of what is absent but implicit as a way of thickening Riya's stories of 'maximum courage' and 'refusing to ever, ever roll over until the truth is told' and their role in times where despair and exhaustion feel like they 'might swallow me whole'.

*We are stronger together:
Webs of survival, webs of support,
webs of resistance*

They think that I am a crazy banshee who refuses to just drop it. But even if I am a crazy banshee, who cares? That doesn't mean I'm not a smart one. They never expected me to survive and to keep fighting, and what they don't realise is it's not just me, alone. Every time I speak, I hear from other women. (Jay)

While the outsider-witnessing process was slowed in the COVID-19 context, working with and adapting from the individual work with the absent but implicit enabled the project to keep drawing together threads from individual conversations into collective work, directing advocacy and planning for future directions.

A vital aspect of this work is its use for broader change. Like STOP and the Creative Interventions (2012) stories, and drawing from the approaches in these, this work has sought to bridge the individual and the collective as a resource for action (Kaeseke, 2010; Reynolds & Hammoud-Beckett, 2012). We have adapted these approaches to this location, which bridges agency and movement settings, and used them to identify and strengthen collective ethics for the clarity and direction of the work, and to translate and use the work as a collectively based intervention at sites of state messaging, including media and public commentary by police. Themes and shared ethics have emerged very clearly from enquiries about the absent but implicit in individual sessions. These have included courage, the drive for justice, desire for advocacy, impetus to build support from others in the same situation, and a desire to tackle structures of impunity that prevent accountability for harm. These provide a foundation for collective work.

Channelling these shared ethics and values towards systemic advocacy and collective work for change has led to conversations about a survivor-led support group and network. This will begin with a co-written fundraising proposal for people experiencing family violence by police. These values also inform our practice ethics: there is an imperative for personal and community ethics to operate as a grounding force to meet the challenge of ensuring that this work does not simply reproduce the power relations of local culture, media representations, agency perspectives and responses to state-sanctioned violence (Reynolds & Hammoud-Beckett, 2012).

Media and public discourse as sites of collective re-authoring

I don't want another family to go through the hell, the years of hell, that I and my family had to go through at the hands of Victoria Police. (Michelle, as quoted in Trioli, 2020)

They are the police. Who is going to believe you? (Hazel, as quoted in McKenzie, 2020b)

We use re-authoring and response-based practice in individual sessions, in the documentation from the sessions, and also to move into the social action and co-advocacy component of the work. One way we have sought to carry through our commitment to social action is through using descriptions of active responses to re-author stories about women who experience violence as told at the collective or public level, including via media.

For instance, where popular liberal and carceral discourse positions women as victims of family violence and police as benevolent state-responders, it is part of our collective narrative practice to intervene by re-centring insider knowledges and lived experience. For example, when it comes to managing risk in family violence, a wealth of evidence and information confirms that the people who live with violence are themselves experts on risk (Backhouse & Toivonen, 2018, p. 22). However, responses from a family violence system with increasingly strong carceral ties and philosophy often see women pressured into responses like intervention orders and repeated reporting to police, regardless of their own insights as to whether this will in fact escalate risk. Part of the collective work of the project, then, is to intervene in popular narratives of police as the ultimate risk managers, which omit the myriad strategies people experiencing violence use to survive.

If anything, we hold our officers more accountable than other members of the community. (Former Family Violence Assistant Commissioner Dean McWhirter, as quoted in Marozzi, 2020)

When Michelle spoke about the violence that she and her son experienced at the hands of her ex-partner, a Victoria Police officer, and the levels of collusion between him and the force more generally, she was met first with responses from police that maligned her mental health and compromised her safety. Later, when she went public, she was met with limited apologies that described her experience as a 'one-off' and reiterated the message that the police hold officers to a higher standard of account than the general public (Trioli, 2020), and that her experience was an error in a force that otherwise manages risk effectively.⁵ What was missing in this story was Michelle's voice, and particularly her agency, resourcefulness and expertise in managing ongoing risk of that magnitude and escaping to safety with her children. Michelle later sought out ABC journalists and presented some of her own account through them. This in turn led to more coverage, and to a national story in which Hazel also spoke about her own experience and its parallels – countering the police narrative that what happened to Michelle was an anomaly, and centring the expertise and knowledge of the women who have navigated and survived that intersecting violence.

The collective narrative work in the storytelling project, and the themes and synchronicities across people's experiences of family violence policing, offer an opportunity to link and move between individual and collective practice and to contribute to or intervene in media commentary. This provides an opportunity for public coverage that acknowledges that it was because of Michelle's resourcefulness, tenacity and expertise – not police responses – that she and the children are now safer; that her experience is not a one-off; and that many other women are experiencing and responding to violence by intimate partners or family members who are themselves police (see Gleeson, 2020a, 2020b). This draws tangible links between these types of violence as they operate in practice, and demonstrates what it looks like when the people who weaponise their authority and impunity in the violence they use against family members are protected and enabled by the institution that survivors are told they must report to and call on for help.

A few lines in media is not, in and of itself, a revolution of collective re-authoring, but it is a glimmer, which with collective work may become an opening and a

driver for change. It is both individually and collectively impactful to speak back to a narrative that is so often unchallenged, and to find and build lines of solidarity between people who have been targeted (Handsaker, 2012). In turn, each time there is public coverage in which survivors speak, they and we hear from other people, predominantly women in similar situations. The stories presented in the media are often a starting point for discussion and play a role in scaffolding further conversations with new and ongoing project contributors, thus linking back with the other narrative practices in the project. This, together with gathering outsider-witness responses to media stories, is crucial to building a new narrative grounded in lived truth, not institutional spin.

Race, whiteness and self-authoring story: Politicising the concept of voice

Central to this work are individual and collective narrative approaches to 'politicising the concept of "voice"' (C. White, 2016, p. 49). In this storytelling project, this has entailed mechanisms to push back in relation to who is centred in dominant discourses of state violence and its intersection with gender violence, and considering whose voices are listened to and how.

Politicising voice challenges the racism and classism inherent in state-sanctioned descriptions of harm, guilt and innocence. It also challenges ideas about what constitutes a 'reliable story' and what this means for collective narrative practice and for the people I am working with – mostly Indigenous people, Black people and People of Colour who have experienced state violence and family violence – and the complex interface between stories of lived experience and the limited imperative of evidence-gathering. It challenges the alienating experience of the legal complaints process, with its exclusionary design and intensive focus on evidence and provability. It challenges the way this process positions lived experience against the often united, self-reinforcing and institutionally sanctioned testimony of state agencies. It raises many questions, including what this means for practice and research that seek to create opportunities for the witnessing of stories (see Wingard, Johnson, & Drahm-Butler, 2015, pp. 9–14). It also raises practice dilemmas in relation to whether it is possible to meet the dual goals of developing co-authored community stories of lived experience, and also generating a substantive evidence base that speaks to, or stands in contrast with, the data provided by the state-sanctioned evaluation of agencies like Victoria Police.

Ethics, practice dilemmas and operations of power and privilege in storytelling practice

The operations of power and privilege in this project are multifaceted, not least because this work continues to operate across agency settings, as a collaboration between four legal centres and one abolitionist community organisation. This engagement with the colonial legal system, which together with the legal profession operates as a self-reinforcing bastion of white supremacy and privilege in this colony, throws up deep challenges in relation to the operations of power and privilege in this work. The location of this project also presents ethical challenges related to operating in the context of the nonprofit industrial complex (Dupuis-Rossi, Hellson, & Reynolds, 2020) and its dynamics of whiteness and control.

The work necessarily grapples with differences in the politics and capacity of organisations; the challenges of white leadership in nonprofits that respond to racialised and gendered policing; the equity challenges of working 'inside' and 'outside'; and the pragmatics of incarceration, access and privilege, as well as managing both risk and the criminalising consequences of speaking out, given the vast disparities in who is insulated and who is targeted, and subsequently who is more able to speak without harmful consequences. The practicalities and processes of the work and co-advocacy involve power and ethics including consideration of how to genuinely centre lived experience and insider knowledges, how to avoid gathering or replicating thin and romanticised stories of resistance, how to resist co-option and the pressure to make recommendations for reform, and the challenges of individually and collectively re-authoring stories when state stories have been thickened over so many years and have so much support from dominant discourse. Present, too, is the challenge of resisting a false worker/survivor dichotomy, while acknowledging worker privilege, and the associated permutations of who leads this work, who sits in paid roles and who are we managed by.

In the collective aspects of the work, the questions of equity, responsibility and risk have come to the fore at the interface of collective storytelling work and the media, including in a recent incident in which, despite detailed safety planning and rigorous rounds of review with a media outlet, an error in the lead-up to publication saw identifying details published about the

person speaking. Rapid response risk management and physical relocation were required. This brought to the fore the vast disparities in who bears the risk and consequences of public dialogue and how we as a project must hold and respond to this.

Practices of accountability

Over the course of this storytelling project, we have been building an advisory network that is dubbed the 'accountability panel'. This is an attempt to honour insider expertise and directly consult with participants when planning the other arms of the work. Each person who participates in storytelling work is asked if they would like to be part of directing and advising on project work more generally, and from this has grown a small network of people with lived experience who give guidance to direct project work, from media releases, to trainings to any policy work or public calls.

This is also used to interrupt the worker–client divide and some of its power differentials (Reynolds & Hammoud-Beckett, 2012). This is doubly important in the context of responding to intersecting violence that is grounded in dynamics of power and control. It also means we work in a model that would be considered unusual in a lot of legal settings where, as well as being led by client instructions, we increasingly have shared strategy meetings and provide many of our documents, resources and plans to those we assist to gain their input and to ensure that our work is guided by lived expertise. If asked for public comment, we seek to pass this request on to survivors who wish to speak, and then provide comment alongside for systemic support.

Collective ethics

Love is about service and transformation of our communities and institutions. It is about transforming ourselves so that in the new places we are creating, we will be able to be in them in such a way that we don't end up reproducing what we just finished changing. (Margo Okazawa-Rey, as quoted in Swift, 2020)

Collective ethics and the idea of justice-doing are vital to this work as ways of resisting burnout (Reynolds, 2009) and as an accountability practice that enables us to name the principles that guide our work and to use these as a point of reference, including in individual and group supervision and in day-to-day collaborative work (Richardson & Reynolds, 2012). In addition to political influences and principles drawn from abolition feminism, we have a series of additional positions such as:

- 'Surviving' violence isn't linear (it's a process not an event).
- Survivors of violence are not 'vulnerable', but targeted.
- Whereas state processes or 'remedies' are exhausting, opaque, controlling and disempowering, our responses need to be the opposite of that, and we should be measured against this.
- It's not our job to sanitise stories or speak on behalf of people, but to support people in speaking directly.
- People experiencing violence are the ones who know the risks.
- We will mess up as allies, and when we do, we will try to learn and move towards accountability (Reynolds, 2010).
- We understand that the project is capable of punitivity and replicating power dynamics, and we need to be attuned to and responsible for this.

Practices of co-authorship and co-advocacy ensure the project and storytelling sessions evolve in a way that's reciprocally directed (Richardson & Reynolds, 2012). Co-authorship includes not having established 'advocacy goals' or ideas for project reporting from the outset, but assuming that this planning will occur in collaboration with participants, and that any narrative documentation will go through several feedback loops with participants to maximise co-authorship.

Other mechanisms to interrupt power dynamics and ensure co-authorship of sessions include the 'inversion of concern' (McAdams, Josselson, & Lieblich, 2001) and not occupying a space that assumes that the narrative work in this research practice is a one-directional therapeutic process. Rather than having static questions, the storytelling work uses evolving questions and discussions with each participant about which questions may be useful, and others they would add or remove. It also includes a 'from the margins in' focus, actively asking about violence that targets intersections of oppression.

The 'in action' test: How will our work enact change?

One of our accountability benchmarks is whether the work done will be materially useful to people in challenging oppression, seeking justice or affecting conditions related to the harm. This is central to avoid practices that treat people as passive objects or gather

trauma-laden stories that do not necessarily embolden or assist movement for justice. The challenge for my practice and the project is making sure that each element of the storytelling and related 'research' work links to or adds weight to casework, advocacy or movement work.

Conclusion

When discussing what stood out in the individual narrative aspects of this work, several contributors emphasised the significance of re-authoring or 'reclaiming' experiences from the stories told about them, whether by the person using violence or by the state in its responses and the documentation of these in police notes, court documents and other things gathered as so-called evidence.

In relation to collective practice, what stands out is the evolution of narrative work that is led and directed by those with lived experience at the under-served intersection of interpersonal and state-sanctioned gender violence, and the implications of this for interdisciplinary practice: not just as narrative practitioners but as family violence workers and lawyers too. One example of this is our evolving integrated practice in relation to risk: the way that work focused on police-perpetrated violence has stretched and evolved our practice, and the way that being directed by the women experiencing this violence has enabled them to lead this work with their expertise, and us to adapt, follow and support them. This has been a mechanism for accountability to the people we work and heal with, and an interruption to the funding-led or management-led model traditionally followed in community legal centre contexts.

The chance to gather 'themes' and observe trends was possible through conversations that went beyond a strictly legal approach. This in turn has ongoing implications for interdisciplinary or integrated legal practice, including the role of double-listening and alternatives to problem-saturated statements in community legal practice, and influencing language and discourse in legal practice, such as refusing narratives of 'vulnerability'. This is something that we hold close in our work to truly move towards movement lawyering and accountability to communities.

The collective narrative and storytelling practices of this project have already made inroads to challenging the idea of police as uncomplicated sites of safety

and support for survivors, disputing the 'bad apple' and 'one-off' discourses that serve to support police impunity at the community level. This project has been a cohesive step in the evolution of a collective voice or story that interrupts such discourses. The broader and political impacts of this work are ongoing, and have included steps or flash points along the collective journey such as: a wave of national media coverage on police perpetration and institutional impunity; direct public challenges to and change in family violence command; the public admission by police that they police their own differently (or what communities and we would describe as facilitated impunity); the growth of a contact list and evolving support network of people with lived experience; contribution to a survivor-led research project that maps victims' expertise and patterns in police-perpetrated violence; and ongoing momentum for a narrative support group and survivor-led advocacy network.

Within the sector, these impacts can be witnessed in the way family violence services have picked up on or joined these moments of interruption to the endorsement of police as uncomplicated sites of safety. These indicators of impact, and how they correlate with what matters to our contributors on an individual and a collective level, are critical to our accountability to the direction provided by contributors. They also inform the direction and ongoing adaptation of our narrative practice to respond to intersectional violence.

The evolution of the Policing Family Violence: Changing the Story project has been instructive for our thinking and approaches in relation to narrative responses at the intersection of interpersonal and state-sanctioned family violence, and for work to extend and adapt narrative responses in this political and sociolegal context. The storytelling work has so far been emotional, varied and rich in discovery and communication. The project is very much ongoing, as is the learning, revision and adapting together as we go along. In closing, in the words of project contributor, Zenab:

There's so many layers to what has been built to harm and control us that it will take longer than my and our lifetimes to dismantle. But every time we speak, we become stronger, and we are stronger together.

Notes

¹ This includes building on from the police duty of care test case, *Tara Smith v State of Victoria* [2018] VSC 475 in which Tara Smith (a pseudonym) brought action against the state for alleged failures in family violence policing over a nine-year period. The State of Victoria had asked the Supreme Court for either a summary or for the Court to strike out the claims alleging that they owed a common law duty of care. This strike out application was rejected by SC Justice Dixon, who said:

the issue of whether a police officer does owe a duty of care, at least in the terms as described in this case, must be determined on close analysis of the facts underpinning the relationship between the plaintiff and the defendants. He noted that while many cases have held that police and the police force do not owe a duty of care to a plaintiff (at least not in the circumstances of those particular cases), no court in Australia had yet considered the facts and circumstances ... including the legislative and policy frameworks relating to domestic violence at the time.

² Participants are referred to by pseudonyms throughout.

³ These links include numerous organisers' exchanges, collaborative writings, workshops and study tours. In 2014 I travelled to the USA to do internships with Critical Resistance, Creative Interventions and STOP, and to look at the models and approaches in US-based community accountability and transformative justice projects, and the synergies, shared challenges and adaptations relevant to work here. See Caulfield, 2014.

⁴ This interface between harmful responses by police and punitive responses by child protection falls outside the scope of the support work in the project, but is an experience shared by a number of the people we work with. It remains a significant gap in family violence responses by support services, a deep challenge in work seeking accountability or remedies, and a focus of project discussions.

⁵ Shortly after this reporting, AC McWhirter was rotated out of the family violence command role. Following the release of documents obtained under freedom of information provisions by the ABC and additional survivors speaking out about their experiences, his successor, AC Callaway, has gone on to make admissions about Victoria Police's failure to adequately deal with police who perpetrate family violence.

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We will never walk alone in hardship: Responding to collective trauma in Hong Kong

by Kwong Ka Fai



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Abstract

Through accounts of one-to-one and community work with people affected by the recent violence and political unrest in Hong Kong, this paper highlights a way of working with people who have experienced collective trauma. Narrative concepts such as enabling contribution, externalising the problem and collective documentation are demonstrated, and the paper focuses in particular on the use of music as a way of exploring preferred storylines and songwriting as a form of therapeutic documentation.

Key words: *music; co-research; supporting team; enabling contribution; documentation; narrative practice*

Introduction

In recent times, Hong Kong has seen extended periods of protest, political violence and police brutality.

Few people have been unaffected, and many have experienced significant suffering. I am a social worker and a citizen of Hong Kong. I believe that there should be some connection between these roles. As a social worker, I supported a number of people who were involved with the 2019–2020 Hong Kong protests, and who had suffered from the effects of police brutality.

The first part of this paper focuses on my work with Cheung, a teenager who had been involved with the pro-democratic protest movement. I employed narrative approaches including externalising conversations, enabling contribution and therapeutic documentation. After discovering Cheung's affinity with music, I focused on using songwriting as a means of recording and strengthening preferred stories and knowledge. The second part of the paper shows how the use of songwriting was extended to work collectively with people who had been affected by the political unrest.

Working one-to-one with Cheung

Cheung had been involved with the social movement for around eight months. After being arrested by the police during a protest, Cheung had been having the same nightmare every night. He was depressed and had attempted suicide several times. He told me that he had attempted suicide because he thought that he was 'useless' because he could not protect his companions in the social movement. His school social worker had referred him to a psychiatrist who diagnosed him with post-traumatic stress disorder (PTSD). Cheung told me that he did not like the labels PTSD and 'mental illness', and he did not want to meet the psychiatrist again because he felt that the PTSD diagnosis brought shame and reinforced the idea that he was useless.

Avoiding retraumatisation

I was concerned that encouraging Cheung to talk directly about the arrest could contribute to renewed trauma and incite renewed self-harm (White, 1995). There is no excuse for causing people to experience retraumatisation within the context of therapy. However, it is possible for people to express their experiences in ways that don't bring negative consequences (White, 1995). One way this can be achieved is by engaging people in externalising conversations (White, 1995).

Assisting people to establish an account of the politics of their experience can also help to undermine the self-blame and shame that is so often experienced in relation to the trauma or abuse itself (White, 1995).

I engaged Cheung in a series of externalising conversations about 'Useless'. I asked Cheung what Useless might look like. When no particular image came to mind, I suggested that we look for a picture on the internet. Cheung identified an image of a dark, menacing figure on a red background which captured his experience of Useless. He said that Useless was black because it always appeared at midnight when he was experiencing insomnia.

I asked about what Useless told Cheung and how it had been affecting him. Cheung realised that Useless always told him that he was lonely. Useless said that Cheung was betraying his allies because he had not rejoined the social movement on the streets after his arrest.

Cheung and I also explored Useless's partners and allies. Cheung realised that Loneliness was a close associate of Useless. Cheung identified an image that captured Loneliness: he felt that Loneliness was so closely associated with Useless that they would look alike.

Our exploration of Useless helped to develop a stronger understanding of the strategies and tactics it used and its effects on Cheung's life. I invited Cheung to take a position on the presence of Useless and Loneliness in his life. Cheung said that he did not like their presence and wanted to change it.

Cheung shared that he felt frustrated because he wanted to support others in the protest movement, but he could not because he had been arrested. Useless was strongly present in relation to this frustration. Cheung said that he greatly valued social justice and wanted to fight for it.

No-one is a passive recipient of hardship; people are always responding to minimise its effects (White, 2007). One of our primary tasks is to assist people in deriving alternative meanings from their abuse experiences and establishing conditions that make it possible for them to reinterpret the abuse (White, 1995). I asked Cheung directly about how he was responding to this situation. Through our conversations, Cheung was able to reinterpret the abuse he had experienced as a source of experience and knowledge that he could contribute to the movement he sought to support. He concluded that even though he could not physically join the social

movement on the streets, he was still contributing by using the internet to share what he had learnt through dealing with the police after he was arrested. He hoped that his experiences could help others in the movement.

We co-researched additional skills and knowledge that Cheung had been using to respond to Useless. For example, we explored occasions when Useless had remained at a distance. Cheung identified that whenever he chatted with his friends or listened to music, Useless would disappear. At these times, Cheung felt he could control Useless. Getting enough sleep also made Cheung feel more able to handle Useless.

Tracing stories through music

When we discovered that Cheung was interested in music and that listening to music was a skill he used to deal with Useless, I brought music into our work to help to thicken Cheung's alternative storyline and bring forward his local skills and knowledge. Denborough (2008) stated that it is possible to trace a history of our life according to song and melody. I began to explore this idea with Cheung.

Cheung shared that he loved to listen to 'Que sera, sera (Whatever will be, will be)' when dealing with Useless. I asked him about the meaning of this song for him. Cheung said that this was his mother's favourite song, and she had sung it to him at bedtime when he was in kindergarten. When he was a child, the lyrics had reminded Cheung that there is always hope in the darkness. He shared that his mother had raised him as a single parent. She had faced many challenges, including financial difficulties and discrimination, and had recently been facing cancer. Cheung's mother used this song to support herself when she faced difficulties. More recently, the song had come to represent being 'brave'. When I asked Cheung about what being brave meant, he said that it meant pushing anxiety to the side and being settled with the unknown. The song had helped him face hardships in the past, and he decided that he could use it to help manage Useless.

This conversation led to a more detailed exploration of this alternative storyline. Cheung recognised that he could negotiate with Useless and muster 'brave'. He also became reconnected with the value his mother had imparted about remembering hope in the darkness.

Music as a form of therapeutic documentation

Denborough (2008) stated that something else goes on when people listen to their own words in melody

and harmony. I rewrote the lyrics of a Cantonese song to document the story of a unique outcome Cheung had described, and to capture some of his hopes and dreams. When I shared the song with him, Cheung listened with tears in his eyes. I asked what message his tears might contain. Cheung said that the tears were telling him that his hopes and dreams were being witnessed and that the song gave him energy for overcoming the challenges he faced.

To engage Cheung in co-researching what is helpful and unhelpful in the therapeutic process (Hilker, 2005), I invited Cheung to reflect on the process of using song to document his stories and knowledge: 'Do you think the song is helpful?' 'Which part of the song most resonates with you?' Cheung said that he loved the song very much, and that the lyric 'I hold my love as my faith' resonated strongly with him. I asked Cheung about this, and he described how the lyric connected him with his love for his companions in the social movement and reminded him that he should keep his faith even when experiencing hardship. He was also struck by the lyric 'Come and discuss with me'. This evoked the skills, knowledge and strategies he used to negotiate with Useless. It also reminded him that even though he could not physically join the protests at this time, he could still use the internet to share what he had learnt through his arrest and experience with the police. This reminded him that he was not a passive recipient of hardship.

I asked Cheung whether he would change any of the words I had 'rescued' from our conversations and used in the song lyrics. He said that he would like to change 'We are stars in this era' to 'We are stars on the stage'. We explored the reasons behind this change. Cheung told me that he loved the word 'star' because he thought that all protesters were as brave as stars: all of them keep shining in the darkness and loneliness. Cheung felt that all stars should receive appreciation from others like a different kind of star receives appreciation from their fans after a performance on stage. He thought that the current 'drama show' in Hong Kong would, like a stage show, reach an end, and that we should appreciate each other's efforts.

By putting Cheung's words to music, his alternative story was made more tangible. Our discussion about the song further thickened this preferred narrative and prompted the identification of changes that Cheung wanted to make in his life.

Enabling contribution

Research and therapy might be seen to share a common goal: a more just and peaceful world, brought about by persons in the community striving to work ethically (Crocket et al., 2004). I invited Cheung into a conversation about making our world a better place and how we could support others seeking to do so. We decided to write a song together to share with Cheung's allies in the social movement (Kwong, 2020a).

Caged bird

這個 ▪ 上 天空暗淡無光

Under the gloomy sky tonight

笑聲哭聲不再聽到

There is no laughter or cries

臉上的笑容已經消失

All gone, vanished are our smiles

汗與 ▪ 混成一沌紛紛走上街道

People flow down the streets,
tears mix with sweat

吶喊 呼叫衝破束縛枷鎖

Yell! Shout! Break the shackles!

不再做籠中鳥

Not a single bird to remain in any cage!

信念從未熄滅

Faith that never dies

懷着理想展翅高飛

Spread my wings and fly high

夢想不止於此 理想慢慢再度浮現

Keep dreaming until the ideal
once again emerges

捱下去 攜你手夢裏堅持

A dream we hold together.

成長 為著彼此掛牽

We grow and watch out for each other

奇蹟 站着與你並肩

Miracles are by your side

但願 相約在那天生於這世代

We wish someday in this generation

遍佈色彩 在茫茫人海內

People can live their true colour

我怕不再 天空掛上雲彩

I fear no more as the rainbow appears

血淚灑落 誰人共你守於街角

Bleeding and weeping, who stands with us
while we are in the corner?

雲煙飄進夢裏 信念從未熄滅

Gas and smog will be left behind,
faith never dies.

After we had written our new song, I asked Cheung some questions to develop a more detailed description of the alternative storyline we sought to capture. 'When you listen to this song, how does it make you feel?' Cheung shared that listening to the song made him feel supported. The lyrics 'Faith that never dies/ Spread my wings and fly high' resonated with his desire to fight for social justice even after he had been arrested. He hoped that the song would remind him that he should not give up despite the complicated social situation. Cheung also shared that he loved the lyric 'a dream we hold together'. He said that this was what he wanted to share with others in the movement. He wanted to encourage them and tell them that he would always support them, and that they would succeed.

Bringing in a supporting team

A supporting team focuses on listening to and retelling the stories of people's skills and knowledge and shares what it meant for them to hear those stories (Wingard, 2001). I recruited my teammates to work as a supporting team to become outsider witnesses to Cheung's songs and his story of survival.

The teammates would not meet Cheung in person, but they would listen to the audio recordings of his story and songs. After that, they were asked to respond by making an ability card and writing a letter.

Ability cards

The conversation is, by its very nature, ephemeral but 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. (Freeman, Epston, & Lobovits, 1997, p. 112)

Documents of knowledge can be beneficial for people who are in danger of losing sight of their preferred identities. When people's skills and knowledge are documented by others, they can become more visible to the person (Newman, 2008). Such documents are especially useful in times of stress when people may forget knowledge and skills precisely when they are most needed (Fox, 2003). I invited the members of the supporting team to make an ability card for Cheung as

a way of further documenting his knowledge and skills in a permanent form (Fox, 2003).

An ability card can be personalised to suit the individual. The template for Cheung's ability cards included space to respond to the following prompts:

- an ability or 'power' the witness heard in Cheung's story
- a description of that ability
- a photograph or drawing representing this ability
- words that Cheung used in relation to this ability
- when the ability was found or when it became visible
- characteristics of the ability
- how Cheung utilises the ability.

There was also space for the witness to sign and certify the card. Below is one example of the ability cards that the supporting team made.

主角能力: 透視眼 X-ray eyes
Power of the character



能力描述: Description of the power	欣賞到每個人不被重視的能力, 會放大及在其他場合提到, 令到其他人都可以了解到一個人的長處。 Appreciate everyone's abilities are undervalued, he would magnify their abilities and mention it on other occasion, so that others can realise someone's strength
發現能力的時間: Discovery time of the power	2019年7月 July 2019
能力運用力: Use of the power	對身邊所有人發動 People around him
-能力運用範圍 -何時運用 the range of the power	Everytime
能力特性: 如:好處/壞處/限制 Characteristic of the power	令到身邊聚集到有不同能力的朋友及同事, 令到各方面工作有不同人手幫手。 Can gather people with different abilities, so that can gain help in different situation

Figure 1. Extract of the ability card for 'X-Ray eyes'

Supporting letters

Through letter writing ... dominant problem stories missing relational context and contradictions are exposed, which allows for the elaboration of alternative and competing perspectives as the person's story unravels. (Bjorøy, Madigan, & Nylund, 2015, p. 347)

Members of the supporting team were given the following prompts for the letter they were asked to write:

- What stood out to you in Cheung's story?
- What image did this evoke?
- What is it about your life that has drawn you to these expressions?
- Where has Cheung's story taken you?

The following example of an image evoked by Cheung's story shows Cheung holding on to his dreams for friendship, freedom and life, and his family and friends supporting him.

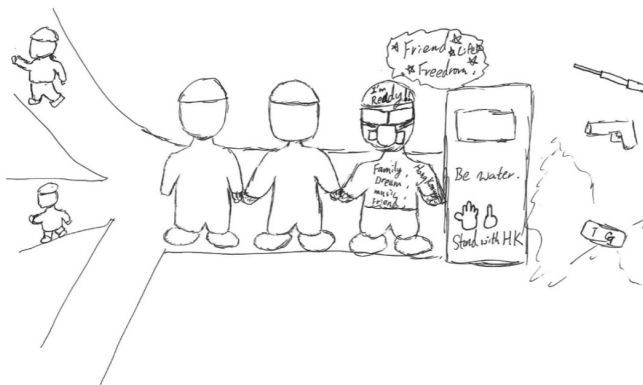


Figure 2. 'Support each other': an image evoked by Cheung's story

Co-research and enriching

Cheung was invited to respond to these cards and letters. This provided a further opportunity to explore his preferred story and his skills and knowledge. I asked Cheung how he felt when he saw the ability cards and letters. Cheung said that he cried tears of joy when he read the letters. I asked him what message his tears contained. Cheung told me that the tears were suggesting that the supporting team acknowledged his strengths and values, and he thought that the supporting team were his partners when he was dealing with Useless. He shared that he had never received a gift that described his skills and knowledge in detail. It reminded him that he was not Useless. He said that he wanted to put all the cards in his wallet so that

he could bring them with him every day to help him remember that he was not Useless.

I asked Cheung whether he agreed or disagreed with the letters and ability cards. He told me that he loved all of them very much and he agreed with what they said. I asked whether there was one that resonated in particular and why. Cheung shared that he particularly loved a picture representing his 'guardian angel'.



Figure 3. 'Guardian angel': an image evoked by Cheung's story

He thought that this guardian angel represented his mother, and it resonated with his experience of moving forward with his mother's spirit, skills and knowledge. His mother would protect him in the future, just like a guardian angel watching him.

Attending to power and privilege

In the process of making the ability cards, some supporting team members started to offer suggestions for Cheung. Some suggested that Cheung 'let go' and others recommended that he withdraw from the social movement. With an awareness that advice giving can become complicit in reproducing the very same cultural knowledge that generates or supports the problems our clients are struggling against (Lobovits, Maisel, & Freeman, 1995), I decided that I could be assertive in influencing the team's responses to ensure that we did not reproduce the toxic effects of social and cultural hierarchies (Lobovits et al., 1995). Instead, I invited the witnesses to reflect on the effects of these tactics and the ethical questions they raise (Maisel, 1994).

Without examining the operations of privilege, we cannot understand the circumstances that create constraints on other people's lives (Raheim et al., 2004). I invited the supporting team members to reflect on their advice and how it might be shaped by our

privilege: How might our experiences differ from those of a teenager? How might our experiences of family life differ from Cheung's? The team members said that our discussions about privilege helped them to understand that constraints are not due to individual deficit, and that their responses could have unintended effects on Cheung's life and stories.

Working with community

As we listen to the stories that individuals and groups share with us, we can conceive of these stories as representing not only personal experience, but also the effects of broader social issues (Denborough, 2008). This led me to reflect on the connections between my roles as social worker, team leader and Hong Kong citizen. It made me wonder how the unrest had been affecting others in Hong Kong, and how they had been responding to the hardships it had caused. Might there be ways to capture and share the local knowledge and skills that people had been using to respond?

Enabling contribution

Denborough (2008) stated that it is our objective to enable people to speak through us, not just to us, and that experiences of making a contribution to others can lead to an increased sense of personal and collective agency. To explore this idea, I invited the supporting team into the conversations Cheung and I had been having about making our world a better place and enabling contribution. Some questions that assisted in prompting this conversation included:

- How can our experiences contribute to others in the community, and how can we make our world a better place?
- How could we support others to make our world a better place?

The discussion flowing from these questions led the team members to realise that they could contribute to others, and they decided to use this sense of personal and collective agency to embark on a community project with people who had been affected by the political unrest in Hong Kong.

We circulated the following written questions in person and online, hoping to collect as many stories, skills and experiences as possible:

- How did the protest events influence you?
Was this positive, negative or something else?

- What did you do to support yourself in the face of this hardship? What strategies did you use?
- Who did you find support from? How did they help? What would you like to say to the people who supported you?
- What would you like to share with others who also experienced this hardship?
- As you have gone through this hardship, what have you learnt?
- As Hong Kong has gone through this hardship, do you think that Hong Kong has changed? What are the differences?

Sharing a collective document

After collecting a range of different responses to these questions, we drafted a collective document and circulated it in the community. The circulation of documents can contribute to the development of communities of acknowledgment that can become actively engaged in thickening a preferred story (Fox, 2003). It can also help to connect people around shared values (Fox, 2003).

Readers were invited to respond to and add to the document. This enriched the readers' own alternative storylines and elicited additional local skills and knowledge that could then be circulated. Readers were invited to respond to the same prompts the supporting team responded to in their letters. They were also asked about what they would like to add to the document and who they would like to share it with.

Many readers shared that the collective document was useful. They were touched by it as it resonated with their experience, and they felt they could learn a lot from others. Moreover, many readers shared that the document helped them to reclaim their lives from the effects of trauma as they realised that they could contribute to others by co-creating and enriching the collective document.

Some community members suggested that we could create songs that captured elements of the collective document to further the circulation of these ideas and offer support and encouragement for the community.

Using music

I worked with readers and community members to compose three new songs. The first was a response to the participants' desire to thank those who had supported them (Kwong, 2020d).

Song of thank you: Good to have you with me

有你伴我多好

I'm grateful to have you

伴我後退的路途

To have you on my homecoming road

情況就算多麼糟

No matter how terrible,

仍緊握我的雙手 當我寶

You always hold my hand tight as your most precious gold.

亂世圍牆多高

So high are the walls in this chaotic world

數百萬手足被稱暴徒

Millions of brothers and sisters are accused of being 'rioters'.

城市內不只哭訴 共同答謝的聲音 我聽得到

As I listen to the sounds of the city, I hear weeping but also thanksgiving

未怕逆境多恐怖

No matter how terrifying this time

謝謝你令我敢宣告

Because of you, I am not scared

別怕跌倒

And I dare to declare, I won't fall down again.

The second song extended a message of support and solidarity to people involved in the social movement (Kwong, 2020b).

Song of support: If you were innocent

如果天真的你漸覺被活埋

If your innocence is being buried

被綑綁的你 不敢走上街 情緒在放縱 靈魂吶喊

If your emotions are entangled and yet your soul dare not show it

伴你圍爐取暖 有我別怕

If you are seeking company, I'm here.

很想拯救過活的家

You've tried to protect the heartbeat of our home

不想軟弱繼續無薪假

Tried not to knuckle under the strain

離開散心 聽歌的你 無力地喊

Take leave and play your favourite songs

Till your tears run dry

記得 無論多苦 有我兜撐

Remember, I am by your side no matter what

記低 相約當天 不見不散

Remember, on the promised date, we will meet again, rain or shine.

The third song was about hope and support. They wanted to tell their companions that there is always hope in the darkness, and remind them that they can support each other (Kwong, 2020c).

Song of support: Hope

回憶上街的那天 燈海的照片 高舉信念直至破曉

Remember the day on the street, waves of light held high with our faith until dawn

烽煙四起哪裏有真理

Uprisings everywhere, but where is the truth?

濃霧罩着哭聲與痛悲

Tears and grief shrouded in thick fog

毋忘日子 夢中與你相見

Please never forget those days, we will meet again in our dreams

連繫眾人 為明日而戰

Unite everyone for the fight of tomorrow.

願榮光（願這光）歸於這遍地方

May the glory (May the light) be shed on this land

為自由解開枷鎖 遍地奏着我歌

Break the chains for freedom, for the song of our dreams is playing everywhere

願榮光（願這光）歸於這遍地方

May the glory (May the light) be shed on this land

佈置傘陣來抵擋

And while the struggle never stops, we protect
ourselves – umbrellas as our shields

晝夜有你伴我在旁

I have you by my side, day and night

尋覓自由 往上逆流

Always searching for freedom,
we swim upstream.

連儂人民的心

We are those hearts who sing 'Imagine'

靠你捍衛這份 無窮的真

We defend our absolute soul

感激 ▪ 一位 勇悍身軀

Honour the fearless bodies, those who lost
their lives

渡進浴火裏 涅槃重生

Stepped into the burning fire but will be reborn

圍城人民反抗

People under siege must resist

信內寫上自由希望

Writing letters of freedom and hope

致自由 到那方

Dearest Freedom, we see you down the
future road

願眾人 和理闖 踏着這遍領土

With best wishes that all people will cherish
peace and reason.

We circulated these songs in the community together with the collective document and continued to invite conversations to add to them. Most of those who heard the songs felt very touched and took from them some additional power to face the challenges they were confronted with.

In this paper, I have shared my experience of working with people in Hong Kong who were facing significant hardships. I hope that this paper might offer some insight into how music, co-research, enabling contribution and outsider witnessing, can be used to respond to collective trauma.

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Thinking critically about attention deficit disorder: An Interview with Joshua Hanan

by Rory Randall



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Abstract

Rory Randall interviewed rhetoric professor Joshua Hanan about his paper 'Subjects of technology: An auto-archaeology of attention deficit disorder in neoliberal time(s)'. They discuss the effects of an attention deficit disorder diagnosis, the performance of disability, activism as a way out, and the use of theory in making sense of lived experience.

Key words: ADD; diagnosis; Foucault; critical theory; lived experience; mad studies; auto-archaeology; research methodology

One morning, an article with a snappy title arrived in my inbox: 'Subjects of technology: An auto-archeology of attention deficit disorder in neoliberal time(s)' by Joshua Hanan (2019). As a fledgling 'mad academic' (someone who uses reflection on embodied experiences and draws from lived experience in their research work), I had been thinking about how university spaces, which I was just beginning to enter professionally, seemed to hold ethics of competition, rigid performance expectations and other barriers for soft-hearted folks like me. I had also been grappling with the role neoliberalism plays in my experiences of ebbing and flowing energy. I was drawn to Hanan's use of auto-archaeology, which draws on Foucault's (1971) theories of discourse and neoliberalism, to address these issues.

There are many people in my life who have received an ADD diagnosis. I have heard from folks who are dear to me and noticed in mental health consumer literature and peer support spaces that there isn't much advocacy around this diagnosis beyond 'children are overmedicated for this disorder' or 'this is underdiagnosed in adults'.

Joshua Hanan's article is a rare gem in this respect, exploring the realms of institutional power, the utility of categorical thinking and identity, and the influence of concepts from psychiatry on childhood development. It led me to reflect on the multifaceted experience of performing and maintaining disability identities. It is also a delightful introduction to some innovative methodology.

I loved the article so much that I shared it with many of my friends. Unfortunately, too many of them were under siege from capitalist demands on their time or weren't familiar with reading dense academic literature so didn't quite get through it. I understood this as it took me some time to fully digest its sophisticated writing and theoretical grounding. It was suggested that I get in touch with the author of the article to have a chat about the themes in a form that might be accessible to broader audiences. The following conversation is what came of it!

Rory: Thank you for talking with me. I absolutely loved your article, but it took me a little while to get into it and I was a little intimidated about talking to you.

Josh: I'm really excited to hear that someone has read it. This is probably the most personal essay I've ever written.

Rory: It's being shared around for sure. I wanted to ask some questions that might make some of those amazing ideas more accessible to people who might find them useful. You explore the term auto-archaeological in your work. I googled it and all I found was a guy who maintains old cars and calls himself the Auto Archaeologist. Did you know that that was a thing?

Josh: [Laughing] No, no I didn't know about that!

Rory: How would you describe auto-archaeology to someone who may be less familiar with the critical social sciences?

Josh: I didn't actually know much about it until I came across it in the work of Ragan Fox (2010). I've actually been working on this project for 14 years, so it's been a long project. I had been trying to find the right framework because ethnography and auto-ethnography in particular aren't really my home methods; I typically use rhetorical methods such as textual analysis and analysing public discourses. I'd been looking for a method that would put together the narrative and research I had been generating around my experience with ADD since my master's program. I came across Fox's work and it just resonated with me as this really effective method because he combines auto-ethnography and institutional analysis. Fox analysed a variety of documents that he had assembled as a gay high school student, and he put this material together to create a narrative of his experiences. And it wasn't just speculating on his own experiences but using the data he had collected from that time period. I had the same thing: when I went back to live at home for grad school, my mom gave me this binder of material, and I sort of used that as my data to make sense of my experience. So I was trying to model Fox's method while, at the same time, develop my own take on the methodology, and also to make an argument about temporality. He focuses a lot on space and institutional enclosure, because he talks a lot about the institutional spaces that he was moved through in high school, and how that facilitated and normalised certain kinds of bullying and homophobia. I wanted to talk about how a

lot of my experiences with ADD had to do with time and temporality, and this feeling of having to regulate my time in a more productive way.

Rory: I was really moved by your statement at the beginning of the piece that 'no one knows all of this but it's really important that they do'. Why is it important that they do?

Josh: My experience with ADD was what led me to becoming a rhetoric professor. Ever since I was a kid, I have felt like I was non-normative: I didn't fit into a box. And I feel like a lot of people who gravitate to rhetoric or cultural studies have had such experiences in their life, whether they have felt non-normative themselves or they have had experiences with loved ones who are non-normative and wanted to advocate for them. For me, the work of Foucault and ADD came together to make me want to be a rhetoric professor. I'd also been studying neoliberalism, so this paper was a natural emergence or development, because neoliberalism, ADD and Foucault all fit together really well. I talk in the piece about how the ADD diagnosis led me to want to start studying rhetoric – my subjectivity aligned with the subjectivity of rhetoric. Like I said, I didn't have the vocabulary to articulate my experiences very well, so it really took sitting down and making it all the way through grad school for close to a decade to be able to write about it in the way that I wanted to.

Rory: That's so interesting because I had made an assumption that this paper was something that you'd held back from publishing from fear of 'academy' consequences, but it's sounding more like it was about not having the right way of expressing the ideas.

Josh: Yeah, I would say it's a combination. It's true that after getting tenure, I did feel more comfortable putting some of that material out there, and there were aspects of it that I had written 14 years ago. The interviews with my family began about 14 years ago. I think a big part of it was getting to a place with the theory where I could find an overarching framework to explain the data in a way that I felt good about.

Rory: I got a real sense of that bell hooks quote:

I came to theory because I was hurting – the pain within me was so intense that I could not go on living. I came to theory desperate, wanting to comprehend – to grasp what was happening around and within me. Most importantly, I wanted to make the hurt go away. I saw in theory then a location for healing (hooks, 1991, p. 59).

A place that had harmed you in terms of institutional structures ended up providing a bit of a salve for those same experiences.

Josh: Exactly.

Rory: I am interested that you were drawn to rhetoric. Was there a point before that more formal theory that had you thinking differently about the diagnosis? Or questioning what was going on?

Josh: I think that some part of me always felt that it was a load of bullshit. I always had a suspicion that there was something different about ADD. It felt like this ploy to make me fit into society. I always just felt like I was who I was. Growing up, I thought that ADD was a way of putting me in this box. I still remember when I was a kid really reacting negatively and suspiciously toward it.

I think that getting into Foucault and neoliberalism helped me to understand myself and I think with theory. You study what you are and what you're interested in. Even though I hate neoliberalism and I am opposed to it, I have felt that, especially throughout grad school and as a professor, I've had to buy into the neoliberal game to a degree to survive. The theory helped me explain these experiences in a way that made sense.

I've previously had a negative view of ADD. I've never been one of those rosy, positive people about ADD and learning differences in general. I've always been suspicious of learning differences. Not to devalue people who get a lot of benefit from their diagnoses, and I've struggled with that too. To use Derrida's (1981, pp. 63–171) terminology,

ADD is kind of like a pharmakon: it's a cure and a curse at the same time. ADD is something that I use to navigate life. I tell people, 'oh I have ADD' to explain why I have taken a long time to respond to an email or something. But in other cases, it's felt like this hindrance, like something I don't want to identify with because I just want to embrace myself as who I am.

Rory: That sense of who you are is interesting too. You touch on the impact of receiving that diagnosis as a child, and the 'psychic and social ramifications affecting the very capacities for individual expression and identity formation'. I was thinking of the lack of consent you had in that process. You also ask what people's lives might have been like had they never been diagnosed. Is it possible to even think about what a Josh self might have been like without these experiences?

Josh: You're right, it's hard to think about because from a Foucauldian perspective you're always going to be placed into some kind of box or discursive category by virtue of the fact that you're born into a social world that precedes your own experiences. You can't ever escape that process, but your ability to express yourself is then further limited by the particular institutionalized discursive spaces that you have access to as a subject – so are there other possible subject positions that I could have taken on in another moment of history and what would that be like?

Rory: If you had to guess, do you have an idea or a sense of what that could have been, what you might be mourning or missing?

Josh: I'm definitely a workaholic, which is kind of ironic because it started off as me being labelled as ADD and being seen as a lazy kid who didn't want to do his work and now I pretty much do nothing but work. My little sister has been diagnosed with ADD too, and she's gone on a very different path. She travels around the world all the time. She got a master's degree but doesn't have a teaching job – now she's a waitress. So maybe I'd be like her: a free spirit, living life more and not trying to manage or control my environment as much.

Rory: I really loved the term 'bodily rhythmicities'. Could you explain that?

Josh: I think everything in the universe has this rhythmicity. Everything cycles and relates to each other. That's how galaxies are formed; that's how solar systems are formed; that's how ecologies on the Earth are formed. But I think there is always a degree of spontaneity and unpredictability. For me, there is something about allowing a space for that. I think ADD is about creating this rhythm that is manageable and predictable, as opposed to ending up in spaces and places that can't be controlled in advance.

Rory: When you were talking about your sister's lifestyle, I thought about how academic life can be spontaneous, with bursts of ideas, writing and projects.

Josh: It's got a degree of that. But I wake up every day and I check my email, I check my calendar and that's not my natural disposition. My natural disposition is to forget things all the time and just start laughing and do weird random stuff. I use a lot of technologies. For a while it was drugs like Adderall, and now it's computer technologies like the calendar and the smartphone to keep things regulated.

Rory: I'm curious, because you connected the innate bodily rhythmicities of children. Do you think there is a way we could bolster children to gain some distance from technologies of the self and develop their preferred narratives more independently?

Josh: I'm actually kind of inspired. I'm about to have a daughter myself, so for the first time I'm on the other side. I do think these days there's more sensitivity to ADD. There's less of a one-size-fits-all model. There are a lot of schools where I live in Colorado where they are trying to change the classroom model. As a very small example, there are magnet schools that accommodate students with learning differences, that have exercise bikes in the classroom so that you can be moving while learning. I think there are some other schools that are moving into that responsive direction. It's a movement into

cultivating the singular capabilities of every student. It allows them to be creative and to be competent in their unique abilities – to not feel like there is a deficit. In the piece, I was arguing that this idea of deficit is something that is socially and culturally and materially constituted through power. I think that these schools are attempting to treat learning differences as a norm rather than a departure from some constructed ideal. Of course, this also raises the important issue of who has privileged access to these types of schools and who does not, which is an example of how issues of ability, race, and class are intersecting and can never be easily decoupled.

I always knew ADD was this bullshit box that society was forcing people into, but I certainly didn't have the theory to talk about it in that way. Theory evolves and becomes clearer as I read more of it, and that's why I like theory. The more theory I read, the more it helps me to explain the world that I'm part of in ways I have always thought but haven't had the exact words for.

Rory: It's interesting to me that you've said you always had a sense of the diagnosis being bullshit. You talk about an experience that is familiar to a lot of people I know, that you have got to buy into a diagnosis and submit to it to make life comfortable, only to then experience the iatrogenic harms of the system. What was it about you as a child that kind of knew it was bullshit?

Josh: I grew up with a sister who was 15 years older than me. I had written about her more in previous versions of the paper. She was what got me into being an activist. She was a vegetarian, and she was one of the first Green Party city council members where she used to live. She would always tell me that the label was bullshit, and she would argue with my parents a lot, saying 'This is super messed up. Josh is a great kid and you need to let him be him'. My dad was sort of in the middle and my mom was the most gung-ho about putting me on meds – not to make her out as the bad guy though. She tended to value expert opinion and psychiatric evaluation.

ADD comes more from my dad. He is a pretty goofy guy. He blurts out random stuff all the time, he is constantly laughing for no reason, he is out there – in a good way! Between him and my sister, I had a lot to question. There was a very discordant dynamic in the family in terms of what to do with my ADD and how to medicate me.

A lot of it came from outside of me but there was this intuition. Like I write about, at one point I would take Dexedrine and I would be up all night, my heart would be racing, and I would have this dry feeling in my throat. It's crazy, I'm 38 now and I can still remember that feeling in my throat when I was 10! How uncomfortable it felt and just being up all night. I always felt like I was the abnormal kid. Kids would pick on me because I would leave class to take medication. It was just so obvious that it was becoming this self-fulfilling prophecy, but I didn't have any way to challenge it. I started hanging out with hoodlum kids when I was a teenager and just kind of disidentifying with education in general because I felt like being a student that cares about learning didn't fit in with the narrative I was born into. I disengaged and it meant I was in a really bad spot when I was 14 or 15, but then I kind of shifted later on. Doing more activism and eventually studying rhetoric in college was really what saved me.

Rory: Thanks for sharing that extra bit of context. I did love reading about how rhetoric kind of found you. I was also curious about your ideas about disability and performance.

Josh: The performative perspective on ADD that I develop in my essay evolved after I taught a grad seminar at DU in 2016 that explored disability from the vantage of performance studies. We read a couple of Judith Butler books and then we read everything written on disability and performance studies. I found that it was a common perspective to view disability as a socially, culturally and historically constructed process that individuals perform. However, I also felt the performance studies work needed to engage more deeply with the theories of Judith Butler and Karen Barad. This led to my own unique take on the performativity

of ADD, which tries to conceptualize ADD as a technology of the self that individuals perform on themselves. I like performative work on disability in general because it helps us challenge the idea that disability has some innate genetic basis. Performance scholarship shows that disability is much more something performed through our culture.

Rory: And socially maintained. I think about that a lot with the people in mad studies. But also no one is creating this knowledge so in a way we need to be doing it. It's very complex.

Josh: I feel like there is more interest in this kind of work then ever before. I think it's important and more justified than ever as more and more people wake up and realise just how racist, sexist, ableist all of academia is, and they want to be more inclusive but it's hard to navigate because there's still that general system of

academia in play that perpetuates the inequality that we are trying to reveal and expose.

Rory: I've just started in academia. I've been put down a bit in my tertiary education, struggled to feel okay in academic spaces, so it was really cathartic to read about how 'your cards were stacked really low' and to know that you are still there working to make more room for other rhythmicities.

Josh: I really am thrilled that you had a chance to connect to the piece and that some of your peers and colleagues out there are reading it. It means a lot to me. I really just want to get that story out there and hope that there are some people who connect with it and maybe find that it resonates with their experiences and gives them a place where they can say things that they are feeling that have typically been excluded from academia.

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