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Editor-in-chief:Shelja Sen
Senior editor:David Denborough
Editorial consultant:Cheryl White
Managing editor:Claire Nettle
Designer:Elite Design Studio
Contact:ijntcw@dulwichcentre.com.au

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Dulwich Centre Foundation

PO Box 7192
Halifax Street Post Office
Adelaide/Tarntanya
Kurna Country
South Australia, 5000

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Editorial

Dear Reader

In the last six months, I have at times felt crushing despair at the human rights violations across the world. As narrative practitioners, how can we respond to the injustice we see in the world? How might we bear witness to people's acts of resistance, no matter how small, and how might we highlight and nurture the diverse and skilful ways in which people and communities enact their knowledges of survival and healing? How can we be allies as people do whatever they can to hold on to their dignity, kinships and lives?

The articles, videos and audio notes in this issue of *International Journal of Narrative Therapy and Community Work* are a testimony to ways we can stand alongside each other as some of us endure immense adversity.

Beth and Ben Shannahan offer an example of resilience in the face of the unspeakable pain of a family member ending their own life. Marnie Sather reflects on ways of speaking about bereavement by suicide in ways that foster accountability and honour people's experience.

Included in this issue are also rich stories of lived experience from sex workers. They model ways of upholding dignity and fostering mutual support in the face of marginalisation, stigma and isolation (Kaur Serendipity; Julia Sharp).

The creative "Rainbow of Life" methodology developed by James McParland and Jaymie Huckridge is used with young LGBTQIA+ folks with and a health condition, who are invited to share their wisdom for responding to oppressive storm clouds while witnessing and honouring each other's lives. The Episode of Your Life practice (Julie Stewart et al.) provides a playful example of scaffolding safety while having painful conversations. KJ Wiseheart has adapted practices of collective documentation to elicit and share the hard-won knowledges of people dealing with Autistic burnout in an unaccommodating neurotypical world. Also described is innovative use of poetic mirroring (John Stuble) and of AI technology (Lucy Van Sambeek). Through these diverse contributions we are reminded that sharing stories of injustice in particular ways can contribute to both healing and justice.

On February 6 2023, two major earthquakes occurred in Türkiye causing great destruction and leading to a significant humanitarian crisis impacting millions of lives. An article by Mehmet Dinç and Canahmet Boz highlights responses to this crisis. These embraced folk wisdom and collective action, transforming a “container city” into a space of healing and creativity and enabling people to make contributions to one another.

As Muhammed Furkan Cinisli writes, when there is a disaster, natural or human-made, there are dominant discourses about trauma that can rob people of their agency and sense of community. It therefore becomes vital to find ways to resist these discourses, reflect and take action that is in keeping with what we treasure most. In “My Album”, Chaste Uwihoreye et al. document the transformative journeys of young children engaged in healing clubs across multiple schools in Rwanda. Each artwork is a visual narrative of the painful landscape of hardships and aspirations for the future through vibrant colours, symbols and metaphors. Noor Kulow’s presentation about combining narrative ideas with games in work with children in Somalia who have lost their parents is another poignant reminder that we heal in kinships through culturally resonant practices of solidarity.

Tileah Drahm-Bulter shares ways Indigenous stories of wisdom, skill and meaning-making can be received and acted on, even in a medicalised space like emergency care.

All these themes are exquisitely present in Tiffany Sostar’s audio practice note about caring for the trans community, which asks “How can we stand against harm without standing against people?” David Newman reminds us of the importance of attending to the politics of language: which words get used by whom; which words are available to whom; and what sorts of language use muddies meaning-making?

This issue also includes a thoughtful review by Tom Strong that considers how we can join people as agents in their own innovative recovery, and two audio recordings of previously published papers. The first is a Mandarin version of Li Ming’s explorations of Buddhism, Taoism and Chinese medicine as they relate to narrative practice. The second is a recording of Mary Heath’s classic paper on examining silences, which could not have come at a better time: “Who is silent? Why are they silent? Who is silenced – not allowed to speak, not reported as speaking, not listened to if they do speak?”

An image that will stay with me is Beth’s mother holding the umbrella tight for her daughter in the face of strong wind. What a tender metaphor for collective care and everyday acts of resistance.

In solidarity
Shelja Sen
New Delhi, India



ABOUT THE EDITOR

Shelja Sen is narrative therapist, writer and co-founder of Children First, New Delhi. Her latest book is Reclaim Your Life and she is also a columnist with a national newspaper, Indian Express. Shelja has worked as a narrative practitioner and teacher for over 20 years in various contexts in the UK and India. She is an international faculty member at Dulwich Centre Foundation, Adelaide, and a clinical tutor at The University of Melbourne, Australia. Shelja is a curator of the unique skills, expertise and know-how of the children, young people and families she has the honour of working with, and is committed to building innovative, culturally aligned, ethical practices using a feminist intersectional lens.

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The background of the image is a dense, textured pattern of green leaves, likely from a plant like a willow or birch, with long, narrow, lanceolate leaves. The leaves are arranged in a chaotic, overlapping manner, creating a rich, naturalistic texture. The colors range from a deep forest green to a lighter, more vibrant green, with some leaves showing signs of wear or discoloration.

Peer-reviewed
papers



Departing from stigma and secrecy and elevating stories of agency: Narrative practice in the voices of sex workers

by Kaur Serendipity¹



Kaur Serendipity is a pseudonym for a therapist and social justice activist who works in education, in prisons and in private practice. Messages can be sent to her via Dulwich Centre.

Abstract

This paper explores the use of narrative therapy and community work to respond to the complexities surrounding women's experiences in the sex industry. It offers practices for therapists and community workers seeking to engage with sex workers in ways that are respectful of their hard-won knowledge and seek to elicit double-storied accounts in relation to hardship, thicken stories of preferred identities, and explore absent-but-implicit values, hopes and commitments. These practices include an innovative use of re-membering questions and a collective Tree of Life process adapted to the specific experiences of women in the sex industry. The paper elevates the insider knowledge of sex workers, particularly the lived experience of women engaged in sex work in which they have a high degree of choice and autonomy. It includes a collective document of sex workers' insider knowledge about confronting stigma and isolation, addressed to people whose work intertwines with sex workers in some way: therapists, support workers, lawyers, police, activists.

Key words: *sex work; Tree of Life; re-membering; collective document; narrative practice*

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Much has been written about women who have been trafficked, coerced or otherwise unwillingly arrived at sex work (Agustin, 2002). And while the challenges for counselling and psychotherapy with sex workers have been described, little has been published about narrative therapy with sex workers. This paper offers a perspective that has been missing from the literature. It privileges the voices and insider knowledge of women who choose sex work of their own volition, and conveys how narrative practices such as re-membering, externalising, deconstructing dominant discourses, the use of therapeutic collective documents and the Tree of Life can highlight agency and elicit preferred identities when working individually and collectively with people engaged in sex work.

I have intimate knowledge of sex work, and this paper is shaped by my insider status as someone with lived experience in the industry. I hope this paper will encourage people whose lives connect with sex workers – professionally or otherwise – to depart from the dangers and limitations of single-storied understandings that can bring additional hardship to people in the industry. I share stories of sustenance from people fighting marginalisation, stigma and isolation, and hope to illuminate sex workers' resistances in ways that restore dignity (Reynolds, 2019). The stories and perspectives in this paper are from the experiences of cisgender women who do sex work. I hope in future projects to honour the experiences of trans and nonbinary folks and cisgender men who engage in sex work.

This paper describes narrative therapy conversations I shared with seven women who described themselves as “high-end” sex workers. They had a high degree of freedom and autonomy in their work, setting their own terms in relation to location, services and remuneration, rather than having terms imposed by clients or managers. Each of the seven women participated in three sessions. The first two were one-to-one conversations with me, and the last was a group session that involved the women working together to write a collective document (Denborough, 2008) and create an adapted collective version of a Tree of Life (Ncube, 2006). The group was culturally diverse in that it consisted of four women from the dominant Anglo cultural background and three women from Black, Asian and minority cultures.

I hope this paper assists readers to question dominant discourses and makes visible insider knowledge that is distanced from the prejudiced, moralistic frameworks

that commonly exist about sex work. I hope the stories included here bring out aspects of women's lives that are not usually revealed: their leading role in their own life stories and the avenues they pursue in expressing personal agency, making decisions about what is important to them.

Descriptions of sex workers' lives that honour their own agency, skills and knowledge are rarely found in published literature, but there are some exceptions. I'd recommend:

- Kate Toone's (2018) insider paper “Come back for us: A critical reflection on the shared history of queers and sex workers and our need for solidarity”
- Michael G. Curtis Jr's (2017) master's thesis *Sex worker and proud: A phenomenological study of consensual sex workers' lives*
- Yu Ding's (2020) article “Beyond sex work: Understanding work and identity of female sex workers in South China”.

The context

Dominant social discourses position women in the sex industry as victims: oppressed, there by force, unable to exit the industry, in competition with one another, emotionally distant, unqualified for other work, and/or addicted to substances. These discourses are often accompanied by reports about trafficked migrants, underage girls and dominating pimps. The sex industry can indeed be a site of abuse, coercion and exploitation. I acknowledge the diversity and variety of forms of sex work, the diversity of experiences people have in the industry, and the different conditions of work that exist, some of which are conducive to abuse, trafficking and violence. Harcourt and Donovan (2005) reviewed 681 publications to produce a global typography commercial sex work. They identified at least 25 types of “direct” and “indirect” sex work, including street prostitution, escort work and brothel-based work, as well as lap dancing, telephone work, and massage with sexual services. I am well aware that there are many whose experience in this industry is negative and who experience harm. The participants in this project each described taking actions in solidarity with people who work in less privileged ways

(for example, donating to relevant local charities that support women to leave the industry, such as ONE25² and SWARM³).

This paper, however, elevates the voices of female sex workers whose experience in the industry has been generally positive, and who have privilege within the hierarchy of sex work: a high degree of control over their working hours, location, pay and conditions. This includes sex workers employed by escort agencies who are able to refuse bookings. Because the pay rate is high, the longer they are in the industry, the more selective they can be, as they are able to free themselves from financial constraints (such as debt or unpredicted expenses), which are often the impetus for entering the industry. This paper is about women who have a sense of agency in relation to their sex work, whose presence in the industry is of their own volition, and who don't want to be pitied or labelled "victims".

The participants used the term "companion" when talking about their role. This involved daytime, evening or overnight bookings offering "the girlfriend experience": time spent enjoying dinner or other activities as creative and varied as clients are willing to spend, from visiting exhibitions or the theatre to attending a spa, in addition to sexual services carried out at a hotel or home. The activities were chosen by or negotiated by the companions, and were used to create conversation or a sense of familiarity. Some bookings would have a minimum duration of two hours, while some participants only accepted dates of a minimum of 24 hours and only worked during weekends.

Four of the seven women had other jobs and considered sex work to be "moonlighting", despite it providing a much larger income than their "civilian" job. Three worked exclusively in the sex industry. Five participants worked for an agency and two worked independently.

I'll now describe the narrative practices that I used in the one-to-one conversations with the women and some of what emerged in these conversations.

Re-memembering conversations

The participants were interested in re-memembering conversations (White, 2007) in relation to their "dates" – the men and couples to whom they offered their

services. I will include here some of the questions I asked in the individual meetings and the directions these conversations took.

What did this person appreciate about you?

Betty highlighted that her listening skills were appreciated the most. "I don't think people realise how much listening we do. Clients like to be heard, and sometimes they come to us because at home, they're not listened to or asked about their day. They don't feel seen."

"Affection", "warmth" and "validation" were named by most participants. Others described being appreciated for offering "respect", having the "discretion of a confidante", "reliability", "zest for life" and "joviality".

What skills and initiatives did this person value in you or your time together?

Penelope emphasised being valued for her excellent conversational skills and that a large part of a date involved talking over dinner, sharing a bottle of wine. Tracing the history of this skill, Penelope attributed it to her work and her studies, and also to observing how her grandparents spoke in a calm and kind way to other members of the community.

Other skills that were valued included an ability for intimacy, ability to "connect in meaningful ways", empathy and "adopting a nonjudgemental position".

What might this person say about how you have contributed their life? How do you think this contribution might have made a difference to how this person saw their life?

This question elicited stories and knowledge that were out of phase with dominant views about sex work. The participants highlighted often-neglected aspects of their clients' lives, known by very few. By sharing their stories, they illuminated a different narrative. I heard stories of clients being given the opportunity to become a better version of themselves, becoming happier, more alive, triggering a chain of life-affirming, courageous decisions such as taking up paragliding, becoming bolder in business, inviting more generosity.

Anna read a card from a client: "I appreciate your independent mind, your enthusiastic, nonjudgemental joy for life and all its pleasures, your willingness to develop a beautiful blend of intimacy, hope, desire, laughter and love."

Freya brought in a book with a hand-written dedication from a client: "You have enabled me to fulfil dreams that in my civilian life I would have never been able to. Meeting you has been life changing."

Penelope read a message from a client: "You offered me the opportunity for escapism and the realisation of certain dreams and fantasies, and with you I found a desire to explore my sexuality. With the ever-increasing pressures of the modern world, time spent with you really gives me something incredible to look forward to, and it is worth saving for."

These acknowledgments of the effects that the women's work had on their dates contradict the dominant discourse that all forms of sex working are objectifying and demoralising. Sophia said, "I had to unlearn many things I was taught when I was younger, when I too was under the weight of terrible misconceptions about sex workers. I now see value in what my connection with the clients brings to both them and me". According to Morgan (2000, p. 14), "thin description leads to thin conclusions about people's identities, and thin conclusions often lead to more thin conclusions as people's skills, knowledges, abilities and competencies become hidden by the problem story". Thin descriptions about sex work were challenged in this exercise.

Externalising secrecy

Externalising creates distance between a person and a problem and opens space to find preferred ways of relating to the problem (White & Epston, 1990). Externalising secrecy and shame supported the creation of alternative stories. It also made it possible to richly acknowledge the real effects of the hardships experienced by sex workers. These included economic hardships that precipitated taking up sex work and hardships exacerbated by shame and secrecy. The externalising questions I asked included:

- What kind of step was it when you stood against poverty?
- What was this debt separating you from that you wanted to hold on to?
- What has secrecy taken away from you that you valued?
- If shame tries to make a comeback, how will you handle this?

Externalising conversations about secrecy revealed that secrecy offered protection to important values held by the participants, such as relationships and dignity. Anna said:

My father would think I'm better than that, that's why I am trying to protect his ingrained notions about how a daughter should behave, how a woman should behave. I don't want to shatter his view of me. He would feel I am denigrating myself; he wouldn't understand it's something I embrace and want. He would hate that his daughter is a sexual being who ventures into things like sex working. Coming from a religious East African background, he wants to know his daughter is loved and cherished by one person, in a marriage, because that feels safe and better for him. I keep everything a secret from him to preserve this relationship.

Other participants said that secrecy protected their other jobs, which they loved and valued and would lose if their sex work were exposed. Secrecy gave the participants control over their lives because they gained a sense of agency over who was allowed to step into knowledge about their sex work. Safety was another important factor that secrecy protected, particularly for participants who lived alone. Penelope explained that while secrecy protected her preferred way of being seen in society, she felt she had grown apart from people who wouldn't understand:

It took a long time before I told my best friend. The reason why I felt I had to let her in was my fear of dying, and I wanted someone to tell my family, to be able to speak to them and dismiss that stigma. I wondered who would represent me? Who would explain? Who would know the reasons why I've done this?

In describing what secrecy took from the lives of participants, a common phrase was "sharing stories": communicating and sharing anecdotes was hindered by secrecy. In Freya's words:

I am a communicator, and secrecy has taken away my chance to communicate with my friends and family freely about these experiences. It's quite lonely for me. Experiences are better for being shared. My clients are the only ones who know me in this capacity. That's why I write them letters.

When asked about the influence of societal views on sex work in maintaining secrecy's position, the participants confessed that they entered the industry

with prejudices that matched dominant discourses. They harboured misconceptions about those in the industry, but agreed to join with the intention of remaining only until alternative solutions could be found for the financial issues that prompted them to join the industry. With time, they departed from stigmatising ideas and opted to remain in the industry for multiple reasons, including having control over their time, meeting new people, becoming activists for sex workers' rights, feeling stimulated by their relationships with clients and other women in the industry, and for some, the ability to explore bisexual fantasies that couldn't be explored in their civilian life.

Betty said,

I know there's stigma and shame. But there's so much more, too. My relationships with clients have allowed me to fight for and access things that made it possible for me to enjoy life, not just survive. I joined [the sex industry] because I wanted more money. I am really proud that I can say that I am part of this, part of this movement. I understand I have privileges, but I have earned my place here. I have learnt so much as a person. I have developed more kindness and compassion because of the people I have met – little moments with different people. Some people want intimacy, some want to be cared for, some want the centre stage. But it gave me the chance to put on a pair of glasses and I saw what people can do and be in their vulnerability. Many other sex workers I have collaborated with have shown great empathy and connection with their clients. You look at the clients' lives and somehow examine yours and how you live it. Stigma and misconceptions almost robbed me of these lessons.

Betty had departed from known and familiar discourses to new journeys that opened space for a fuller participation and a stronger voice in the story of her life.

Acknowledging struggle through the absent but implicit

There were moments in our conversations when the concept of the "absent but implicit" (White, 2000) was significant. When the women were speaking of the struggle and pain they had been experiencing prior to starting sex work, I used the following questions to illuminate neglected aspects of their stories:

- When you said life before sex work was a struggle and a fight, what kind of life were you struggling and fighting for?
- You described the pain of your son being put on an eight-month-long waiting list for health care. What is this pain testimony to? What is it you hold precious that has been violated?
- What do you give value to, that you're refusing to abandon, that sustains you in this work? What matters to you?

Responding to risks with collective action

The risks for workers in the sex industry vary, depending on the form of work undertaken, with street sex work, for example, exposing workers to greater risks than high-end escort work. The participants in this project spoke of three types of risk: health risks linked with lack of condom use, physical violence and emotional risks. Participants wanted to talk more about emotional risks, as they stated that these were the most significant risks encountered by sex workers, irrespective of what form of sex work they are taking part in. The marginalised position of sex workers means that while not all workers in the industry encounter aggression and sexual health issues, all of them encounter discrimination, stigma and exclusion, and many experience the stress of leading a double life.

The women's initiatives in response to emotional risks involved connecting and engaging with other sex workers, including organising get-togethers, spa retreats and days out. This was easier, however, when working for an agency, and social connections were not readily available to the independent workers. To reduce the risk of exclusion, an "indie collective" had been created as a space for independent workers to meet and support each other through advice, mentoring and protection. This generated connection and a sense of affiliation with others working in settings that can be isolating. These initiatives unfolded through time, becoming more than just "wellbeing rituals". The get-togethers became regular, and with the help of social media they were usually funded by donations from clients. These events played an important role in privileging the insider knowledge and voices of workers. They offered a chance to share information about sexually transmitted infection screening, sex education

and sexual health, as well as blacklists of clients with a negative reputation and security tips such as identity screening. Some independent workers had initiated small female-run partnerships that involved renting an outcall location and sharing costs with others. This discreet endeavour offered a solution to those who refused to work in hotels. It created a safe place to negotiate their work and see clients, and allowed them to access safety and protection when required. These responses provided a platform that helped address the workers' predicaments and dilemmas, reduced loneliness and elevated hard-earned knowledge and experience. All the participants had a strong appreciation of these initiatives, which can be seen as unique outcomes. They were clearly filled with meaning and symbolised what was important to these women. I asked Penelope a number of questions about these initiatives.

Serendipity: Can you explain to me what is it that you want for your life, and how that fits with your initiative to organise this?

Penelope: Well, I want to make it easier for others. I hope "passing the baton" [the name Penelope gave to this initiative] can help us not only feel safer but continue to enjoy this work, and have our heads screwed on. That's when we're at the highest risk, when we're not sticking together. I just hope to make this field better than when I started, for the other girls. One of the new indies now has at least three mentors that will know her bookings and can check in with her after her bookings are completed to see if she is safe. In an agency you have the manager who checks on you. If you're an indie and nobody knows you're doing this, who's going to check you've left the client safely?'

Serendipity: Would you say "passing the baton" and getting the women connected has improved life for you and others?

Penelope: It will improve their experiences in this work. It was vital for so many of the young and unexperienced ones. They had a space to ask questions in a relaxed location. I remember how hard it was for me when I started, with no-one to ask questions, no-one to take me under their wing.

I went on to ask about what Penelope's initiatives said about what she held precious in the world and in her life, and about the history of these values. Penelope said she found this exploration a novel experience: "I never took the time to think about why I did that and why it mattered to me. It's good to know my values can have consequences on women's lives".

Some of the other questions I asked the participants about their collective initiatives included:

- What ideas or forces supported these ways of connecting with other sex workers?
- What are your intentions in using these knowledges and skills to help other sex workers?
- What do these intentions reflect about what is important to you, or about precious beliefs about life and the world?
- Do you do other things that reflect this principle?
- Are there any proverbs or sayings from your culture that are linked to these values? Or are there any songs, stories or images from your community that are linked with this knowledge or skill?
- Where else in life have you come across initiatives like the ones you have described?
- Has this become important to you recently or has it been important for a long time?
- What might someone have seen you doing back then that would be an expression of these values?
- How did you learn this? Who did you learn this from?
- Did the women in the collective become allies in this act of resistance? What differences did it make to have an ally?
- What would you call this initiative?

Exposing patriarchal discourses

The women spoke about the toxic competition in the sex industry, and how it is conducive to envy, jealousy and hostility among sex workers. Patriarchy manifests as a divisive force of competition and comparison. It creates the illusion that there is only one appropriate appearance for sex workers, leading workers to fear that they don't measure up. Discourses around appearance, age and attractiveness lead women to compete with each other for clients, supporting a

Roots and soil

The roots were used to represent significant people, areas and origins that had contributed to the women's identities. The soil represented the day jobs and other roles the women had, the places they got their energy from, their sanctuaries, and the songs that they played while they got ready for dates.

Prompts for the roots included:

- Where do you come from?
- What aspects of your country or community are you proud of?
- If I could interview your country or your community, what would it say about you being an expression of it? What values would it see in you that it would link with itself?
- What are you affiliated with, in being part of this city?
- Can you tell me a story that shows something special about your relationship with this place?
- What is it that you appreciate in what East Africa (or other place) gave to you?
- Prompts for the soil included:
 - What influences you on a daily basis?
 - Have you always enjoyed this?
 - Can you tell me a story about how this became important in your life?
 - How would you describe living on a narrow boat?
 - What does this say about you and what you stand for in life?

The trunk

The trunk was used to represent the skills and abilities that enable the women to do this job, or that this job had given them. One participant indicated she had become a chameleon, assessing each booking before opting for the colour/attitude/mood/persona she would put on. "Energy management", "fast learning" and "experiencing pleasure" were other important aspects.

Prompts for the trunk (skills):

- Can you tell me a story about something you've learnt about yourself since entering this industry?
- What would other people tell me about your skills?
- What's it like hearing the other participants say this about you?

- How does your ability to turn into a chameleon contribute to your wellbeing?
- What's the history of this skill in your life?
- Can you share the first time you remember using energy management?
- What ancestors share this skill with you?
- Who gave you this skill?
- How have you demonstrated it in the past?

The leaves

The leaves were used to represent the hopes and dreams that motivated the women to work in this field, for example owning a home, investing, security and independence.

Prompts for the leaves (hopes and dreams):

- What is the history of this hope of owning your own home?
- What is privacy trying to protect that is meaningful to you?
- Is dreaming of security linked with somebody significant in your life?
- Can you tell me a little about your relationship with this person?
- How come you haven't given up on this dream of having independence?
- How long has independence been important to you?
- Can you share a story of the first time you realised this was important to you?
- Who else would agree that this is important to you?
- What has sustained your hope for a better world for your son?

Flower petals

On the flower petals, the participants added significant people who had supported them in balancing the work and other commitments, or whose views the participants valued. These included other sex workers, children, sisters and partners.

Prompts for the petals (significant people):

- What was special to you about your nan?
- What do your parents know about you that you sometimes don't know about yourself?

- If I could look at you through your child's eyes, what would I see?
- Did you have good times with your partner?
- What would your sister say are your moments of greatness in life?

The fruit

The fruits were used to represent gifts from clients, other sex workers, and significant people outside the industry. Gifts from clients included experiences, new abilities such as acquiring sommelier skills, travel, advice and mentorship. Gifts shared among sex workers included collaboration, friendship and a sense of community.

Prompts for the fruits included:

- How did your clients contribute to your life?
- What did that make possible for you?
- What did you discover about yourself as a result of that contribution?
- How might have you contributed to your parents' lives?
- How did other sex workers contribute to your wellbeing?
- Why do you think they gave you this?
- What made her act in this way towards you?
- What did she see in you that you can now see in yourself?
- What did your grandmother appreciate about you that would have led her to give you the skill of knowing how to wait?
- From what ancestors can you trace the gift of generosity?

Still standing – enduring 'the Inevitables'

I also used the Tree of Life metaphor to help us speak about the ways participants had endured hardships. Through exploring what enables a tree to remain standing even after being shaken by storms and harsh conditions, the participants named the more challenging aspects of sex work and how they weathered these.

They named the difficult times the "inevitables". They shared how, if they had a negative experience with a client, they would circulate a warning to others in a social media group to prevent further bookings with that person. As we discussed dealing with the inevitables, I shared a story about coastal redwood trees, which despite their great height, have only shallow roots. The secret of their survival in strong winds, floods and other challenges is connection – their roots spread outwards and connect with other coastal redwood roots. Their roots intertwine and this togetherness adds to their stability. The participants loved this analogy, and acknowledged that their connectedness with each other provided them with a similar strength in responding to the stress of leading a double life, providing shelter from isolation and enabling them to stand together against exclusion and discrimination.

A collective letter

Newman (2008) emphasised how narrative practitioners can use documentation to enable people's stories to continue to live in the lives of others. The following letter was written collectively during the session the group of women had together. Its purpose was to highlight stories about how the women had addressed the effects of isolation and other challenges in their work. I sought to make links between the women's personal experiences and the broader social issues they represented, to move from an individual to a collective approach, and to enable the women to contribute to other groups and communities through documenting their knowledge and making it available to others experiencing similar hardships (Denborough, 2008). Through this process of drafting the letter, further stories of resistance against hardship emerged. As Denborough (2008) described, collective narrative documents "convey a range of hard-won skills and knowledges, in parallel with a rich acknowledgment of the circumstances in which these have been hard won" (2008, p. 36).

What keeps us going: A collective letter from the words of sex workers

Living in the shadow of stigma, discrimination, secrecy, pain, judgement, misconceptions, labels and exclusion is challenging. With this document travels a hope that it will support people who are joining the industry, people who are curious about us, and people whose work and worlds intertwine with sex workers in different ways: therapists, support workers, lawyers, police, activists.

We are seven women working as high-end sex workers. Here are some stories of what keeps us going during challenging times.

People think we are our work, but really, we are human beings like you: women trying to make a living in a patriarchal society. We juggle many roles and wear various hats. You see, people who sell sex are everywhere. We are your neighbour, your colleague at work, the person in the queue at the post office or in the waiting room of the health clinic. Our kids probably play in the same parks or go to the same schools as yours. We probably go to the same place of worship.

Supporting each other

Being there for each other is a form of sustenance: a way to remove isolation, a way out of despair. Sometimes, being able to talk to someone who understands and doesn't judge – and can listen without gasping – makes a difference in how we walk this journey. Connecting with people in the industry provides protection, mentoring, sharing of knowledge and ideas, and it ultimately reduces loneliness.

The skill of supporting each other stems from a desire to be safe in our work – protected, understood. Here are some examples of the expression of this skill:

- offering to pay for a sexual health screening test for a sex worker who can't afford it
- offering to call each other after a booking is over to check we're safe after the client has left
- organising get-togethers and extending the invitation to people who work in different forms of the industry.

One sex worker created a platform for “naming and shaming” clients whose behaviour is risky, so women in the industry are able to warn and safeguard each other. The sex worker who started this traced the history of this initiative to her childhood, when, as the eldest of her siblings, she was in charge of keeping the younger ones safe when their parents weren't around. Initiatives like this make a real difference to our lives because they remove some of the effects that secrecy has on some of us.

Supporting families – our own and each other's

The sex workers involved in this project prioritised providing for their families with food, better opportunities and a better education. This was a way of responding to many difficulties linked with the nature of our work and a strong motivation to keep choosing what works instead of folding under the pressure of the hardship. One of the participants said: “Being a sex worker means that I can spend more time with my son, who is disabled. It also means I can pay for private health care for him. I have waited for so long for funding to be made available for his care, and I was done with waiting. I now can offer him the best treatments and I am available for him in more ways than I could be if I had to work all day to be paid just enough to be able to put food on the table.”

Another participant supports her family who live in a war-torn country. “I can resist the challenges brought by this work when I know that the money really makes a difference to my family back home. When I know that my father can have the dentures he needs, when I know that my brother can access education because of my work, I feel the grip of shame loosen. Where I come from, we are proud that we don't treat other people's material needs as trivial. I am so glad I actively do something to contribute. It isn't just material though. Some of my clients have improved the quality of my life by advising me, counselling me, guiding me, mentoring me and offering perspectives I would have never been exposed to if our worlds had not met.”

Freya mentioned the solidarity among women in the industry who have difficulties finding

childcare that is discreet and reliable. Some sex workers who have children develop friendships and babysit for one another. This is an expression of solidarity and a recognition of the challenges that secrecy creates for some sex workers. In tracing the history of “looking after each other”, Freya remembered how when she was a child, the community was the family. All the doors were open, and dinner was rarely at home. Most of the children came home already fed by other mothers and spent hours playing together in the neighbourhood. She remembered how her mother cooked large quantities, expecting to have at least five of the neighbours’ children attending dinner, and how welcoming every family was.

Investing in ourselves, in our health and wellbeing

We understand the importance of looking after ourselves. We invest part of our earnings in our health, paying for treatments and memberships in health and wellness centres. We make better choices when it comes to nutrition and self-care now, and this affects how we feel, sleep and live. The way some of us resist discourses about the “dirty” bodies of sex workers is by really looking after our bodies, eating healthily, ensuring balance between rest and work, and keeping up with all the testing. These are all acts of rebellion against people who use graphic and misogynist language in debates about sex workers and their bodies. This skill is rooted in the knowledge that there is hate towards us as a group, that stems from misogynist and old ideas about sex. We are on the receiving end of responses of disgust. There are discourses of bodily degradation, discourses of us being disease-spreaders. To stand against all of that, we are vigilant in how we treat our bodies.

Empowering our children

Some of us are motivated by wanting to empower our children by ensuring they have better opportunities than we did. “My children are in debate clubs. They take martial arts classes. They learn a different language. We didn’t have these chances and privileges growing up. At least they do, and it gives them a head start.

They will not be as advanced as other children, but my work is moving them forward.”

Making something meaningful for the future by funding skills and education

We know that some of the people involved in sex work are at the bottom of the social pile in terms of qualifications for well-paid jobs. We are not bankers, scientists or politicians. Some of us have been able to fund our own education from our earnings, an action that supported us in seeing ourselves in preferred ways, rather than in ways stigma tries to convince us to see ourselves. This is an expression of wanting to be financially independent, beyond the sex working years of our lives. One of the participants shared how she had always wanted to be a qualified hairdresser, but for economic reasons her parents weren’t able to support her to pursue that path. Knowing that, with time, she would be able to save and pay for the course with her own finances enabled her to forge her own relationship with her work, based on what it made possible for her, and not based on how others might think of it.

Anna, who is of African origin and very close to her roots, shared how she had been donating and campaigning for girls’ education in her home country. She encourages her clients to donate too, and influences them by subtly reminding them that “the cost of a bottle of perfume could make more of an impact – here, let me show you how to donate to CAMFED”.⁴

Refusing to take on patriarchal values

It takes care not to take on patriarchal values. We have to learn and notice the signs that indicate that we’re susceptible to these values, and choose to work in collaboration instead of in competition with each other. This involves the skill of working in solidarity with each other first and foremost: refusing comparison with each other in negative ways, refusing invitations to see ourselves as being in competition with one another, and instead, recognising the uniqueness of what each of us can offer to the industry. This is really sustaining of us as sisters. We are aware of the ways in which patriarchy sets women to compete with one another. Some of

us are watchful for the times when patriarchy wraps its tentacles around us, putting us down, diminishing us, making us feel inferior when we don't have the "right body shape", the "right height" or the "right skin colour" to be able to generate income in the industry. There are some rules that are known to most of us: we never badmouth other sex workers in front of clients. We don't gossip about other workers (although some clients, believe it or not, sometimes pry). We resist invitations to join in when clients throw mud at other sex workers, and we very quickly make it clear we're not interested in participating in gossip.

People think we are our work, but really we are human beings just like you, trying to make a living in a patriarchal society.

We hope this letter is helpful to you.

Acknowledgments

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Notes

- ¹ Kaur Serendipity is a pseudonym.
- ² One25 is a Bristol-based charity supporting women who do street sex work.
- ³ SWARM stands for Sex Worker Advocacy and Resistance Movement, a collective of sex workers that campaigns for the rights and safety of people engaged in sex work.
- ⁴ CAMFED (Campaign for Female Education) is a grassroots pan-African organisation promoting education for girls.

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Safety and solidarity:

Using collective documents to share sex workers' insider knowledges

by Julia Sharp



Julia Sharp is a social worker and counsellor based on Gadigal Land in Sydney, Australia. She currently works as a counsellor for people engaging with the Royal Commission into Defence and Veteran Suicide, and for cast and crew in the film and television industry. Julia is interested in ways narrative practice can counterbalance problem-saturated stories and in exploring creative ways of deconstructing the social norms and expectations that can often leave people feeling shame and isolation. Julia.ac.sharp@outlook.com

Abstract

Western culture and Western health care systems have created places of sexual health care that are highly individualised, privatised and professionalised. For people engaged in sex work, this reduces the possibilities for sharing skills and knowledges and instead leaves people with internalised feelings of shame, guilt and isolation. This paper describes collective therapeutic work that elicited insider knowledges, skills and sparkling moments from sex workers. These accounts sidestepped negative identity conclusions and fostered mutual support among the workers, even though the participants never met each other. The work was guided by narrative practice concepts including externalising, double listening, re-authoring, privileging insider knowledges and developing collective documents.

Key words: *sex work; collective document; insider knowledge; narrative practice*

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Author pronouns: she/her

At the time of writing, I was a sexual health social worker in a multicultural low-socioeconomic-status area of Sydney, Australia. In this paper, I discuss ways I sought to create relationships of respect (Reynolds, 2019) with the persons I met, through using externalising, re-authoring, the privileging of insider knowledge, collaboration and the written word. I attempted to use and adapt these concepts to expand people's understandings of the problems in their lives and as a way to address the presence of isolation and stigma, which many people experienced.

It is important to me to highlight that this paper is written from a subjective position, influenced by my specific cultural, racial and gendered position. I am writing on the beautiful unceded land of the Gadigal people of the Eora Nation. I am from settler coloniser heritage. I am a cisgender woman from a middle-class family and was raised in a single-parent LGBTQIA+ household. My upbringing was strongly shaped by the feminist movement, including strong values of activism, solidarity and social work. When I began practising social work six years ago, I realised the influence my upbringing had on my practice; for example, I was always curious about the discourses behind decisions and judgements, and I saw privilege and power as present in people's daily experiences. However, it was not until I began studying narrative therapy that my work expanded to become more creative, collaborative and collective.

A sexual health context

This paper describes work in a free sexual health service that aimed to educate and serve "priority populations" including people living with HIV/AIDS, people who sex work, trans and gender diverse people, gay men and other men who have sex with men, and people who inject drugs.

During my conversations with our clients, I began to notice common themes including isolation, stigma, shame and guilt. It was a busy service, and I was rarely able to make prompt follow-up meetings – sometimes it would be four or five weeks until another appointment was available. The long periods of time between conversations left people without support, and also limited the opportunities to make connections among people experiencing similar problems. Opportunities for connection were further inhibited by the individual, confidential and privatised approach (Reynolds,

2019) to health care taken by the service. I began to feel discomfort about these limitations on my work, particularly in relation to people who sex work.

People who sex work

Anyone working as a sex worker could attend the service for free sexually transmitted infection (STI) testing, and sex workers were encouraged to see a social worker if they were new to the sex industry. This was offered because working in the sex industry can come with social stigma, which in turn can isolate workers from talking to others about their work. People could decline the referral to a social worker and also had the option to attend the clinic and provide a name that differed from the name on their identification documents. The referral to speak to a social worker was also encouraged to provide a safe space to talk about the legalities of sex work in the jurisdiction and about sex workers' rights. If the person wished, we could also talk about sexually transmitted infections and how to practice safer sex. I always intended these conversations to be empowering and sought to create safe and comfortable conversations about all things sex work. This was often not something a sex worker had experienced before, especially in the health care arena.

During conversations with people new to sex work, I was frequently asked similar questions: about difficult clients, drug use in the workplace and safety. For people for whom English was not their most fluent language, we had conversations about how to speak with clients about condom use and practiced phrases to use.

I would often refer people to sex-work organisations for peer support; however, I noticed these referrals were rarely taken up. I began to wonder about why this was and how I could better support and work alongside people who sex work if it was their choice or preference to continue to attend our clinic. I also wondered how I could build my skills to support people therapeutically within the short time frames that were available.

The written word

The first time I heard about using the written word as a political act was in a paper by Nylund and Thomas (1994). They spoke about their hope to use the written

word as a way to “strengthen the development of a new story” or for “thickening the counterplot” (1994, p. 38). These ideas resonated with me because of the ethics I hold close about not being neutral in moments of oppression or injustice, and at the same time, practising in a decentred yet influential way. I began a personal and professional connection with using the written word in my practice.

I was also inspired by Mann (2002), who invited therapists to reflect on practices of respect. I hoped that including written documents in my work could be a part of this, opening up space for continuing exploration of unique moments, and mapping out an “alternative territory of identity” in which people might stand to “give voice to their experiences of trauma” (White, 2005, pp. 20). I found that having this dual focus helped elicit “accounts which richly describe the effects of the hardship that is being endured and also richly describe the ways in which the community has been responding to this hardship” (Denborough et al., 2006, p. 21). I held on to the idea that this process might anchor people’s sparkling moments and moments in which they had sidestepped the problem’s influence.

Insider knowledge and collective documents

I noticed that many of the female-identifying sex workers asked me for advice about the issues they faced. Having never done sex work, I knew I was not the right person to answer their questions.

I found myself reflecting on ways I might invite and share insider knowledge about issues faced by sex workers. Narrative therapy acknowledges, privileges and seeks to share local knowledge and the skills that people in a community use and practice (Denborough, 2008; Denborough et al., 2008; Epston, 1999). I started to see the ways narrative practice could be useful, offering ways to bring people together without forming a face-to-face group. Groupwork was unfortunately not viable in this organisational context, despite people voicing a need for connection and peer support. I was drawn to the idea that collective documents could be used to start a process of mutual contribution between people and communities without them coming together in face-to-face meetings (Denborough, 2008).

A conversation with a young woman, Barbara¹, who was new to sex work, supported me to try out archiving insider knowledges in collective documents. Barbara was referred to see a social worker because she had disclosed to a nurse that she was new to sex work. Barbara agreed to this referral, and we met in my office. As we started to discuss her work, Barbara spoke about choosing sex work to help build up her savings after COVID-19. She said that she mostly enjoyed sex work and liked how it made her feel overall, describing fun, empowerment and the sexy things she felt when the work was going well for her. She noted the stigma around the sex industry and how this meant she couldn’t tell her friends or family about her work. Often people who sex work are judged as “dirty” or promiscuous, and their work is seen as defining of their identity. There is a belief that they are selling their bodies in a way that differs to a factory worker or tradesperson. Despite sex work being legal in the state where Barbara worked, social discourses kept Barbara from speaking openly to friends and family about her work.

Barbara said that she didn’t know many of the other women at her parlour and didn’t really want to ask them for advice, so she asked me. I recognised the issues she raised as being common workplace experiences for people (mainly women) who sex work. Specifically, she asked:

- what to say to men who don’t want to use condoms
- how to respond to men who get violent and refuse to pay
- how to say no to men who want me to use drugs with them, and how to avoid ruining the flirty mood while doing so.

Barbara spoke about values of safety, respect and fun, and these questions were a way of staying close to these values and her intentions for engaging in sex work. I asked Barbara if it would be okay if I didn’t respond to these questions straight away, but instead contacted other women who sex work and asked them for their answers to her questions. Barbara agreed, and I went off to start my first collective document of local insider knowledge.

I approached six women who did sex work, all of whom had been meeting with me over a period of time. Some I had only chatted with over the phone, others I had met face to face over the years I had been at the clinic. I called each woman and explained Barbara’s

situation and the questions she had asked me. I asked if they would be open to responding to her questions, and I offered to call them back if they wanted time to think, to send questions in a text or email, or to meet face to face. I really wanted to offer choice and invite collaboration in relation to the ways they might participate. Each person was happy to answer the questions then and there on the phone.

Barbara and I had come up with a set of questions to ask:

- How do you manage clients who don't want to use condoms?
- What do you say when clients don't want to have a shower or an STI check?
- How do you manage clients who say other girls at the parlour don't make them use condoms?
- What do you do when clients try to force you to do "extras" without paying?
- What do you say when a client wants you to use drugs?

- Do you have any other skills or knowledge that you would like to share with people new to sex work?

I hoped these questions might elicit specific stories and skills each of them used to manage and respond to the safety issues they experienced. I wanted the document to be able to sustain collective resistance and to travel in all the different contexts of sex work – private work, parlour work and so on. In addition, Barbara agreed to including some questions about the person's experience answering the questions above:

- Would you like a copy of this list?
- What was it like taking part in this?
- What motivated you to participate?

Each woman had a string of answers, like they were on the tip of her tongue, which highlighted to me the commonality of these issues in their work places. The document (below) is comprised of their words.

SKILLS AND KNOWLEDGES FOR NEW SEX WORKERS IN THE INDUSTRY

When clients try to not use a condom or don't want to have a shower/ STI check

- You can say, "I like a clean boy but with a dirty mind".
- Try dropping your tone of voice when setting your boundaries/rules. You can try to be playful at first, but if the client still tries to push you to do something you're not meant to or not comfortable with, drop your tone of voice to a more serious and direct tone.
- You can say, "I don't think you have anything, but I don't want to get HIV".
- You can say, "Hey, well, STI checks are mandatory and so is having a shower. If you're not willing to do this then I'm happy to give you a refund".
- If they disagree, you can walk out of the room and wait for them outside of the room.

If the client keeps saying that "other girls at the parlour don't use condoms"

- You can say, "Other girls can do what they want, but I always use condoms".
- You can say, "I haven't met anyone here who doesn't use condoms".
- You can say, "No-one I know does that. If you want to book in with someone else then you can do that because I always use condoms".
- If you don't use condoms, get PrEP² and go for regular STI/HIV screens.
- If they say they didn't have to do it last time, you can say, "Well, you booked me, and this is part of my service".

When a client tries to get “extras” without paying

- Figure out what extras you do, and if you're not comfortable with other extras then explain what you will do. If they try to get you to do other stuff you are not comfortable with, then explain what you are comfortable doing and reframe it in a positive way.
- Try “playing dumb” saying “Oh, you did not know? Well, I will get a receptionist and you can pay them for the extras you want”.
- Try saying, “I love your energy; can we slow down and talk about what you want? This is my service, if you want extras you can go to another girl or pay extra at reception”.
- It's best to ask for the payment up front before you start.
- Get out of the room and find someone you trust to help you get the client out of the room.
- Try to remember their faces so that you can let the other girls know so that everyone is safe.

When a client tries to pressure you to use drugs

- You can say, “I want to have fun with you but I'm not a party girl”.
- “I just had some, so I am happy to watch you party.”
- Tell them you don't do that or don't use drugs, and tell them to leave if they try to insist.

General advice

- Do not be afraid to figure out your boundaries.
- One unhappy client does not mean all clients will be unhappy with your service.
- If you feel scared of the manager or receptionist, then you could be working in an environment that is toxic and does not look after the girls. Find somewhere that does put the girls first.
- Don't fight or argue with clients if you don't have someone to support you or help you stay safe. Just let them take your things because you may get hurt and it's not worth it. (girls who work privately).
- It's important that you find balance and look after your body. If you overwork, you may get sick.
- If the work is impacting your mental health, leave the job. It's not worth it.
- Don't feel guilty when you look at the piece of paper at the end of the night (how many people you have slept with).
- Don't suppress your feelings with drugs and alcohol. Instead, get a social worker or talk to someone. Talking helps you get the support you need.

Each woman told me she was really interested in sharing her knowledge and the things she does in these situations. When I asked the women the final questions, each stated that she had been in the same or similar situations and would have loved this advice when starting out in the sex industry:

It is important we look after each other and don't always see each other as competition.

It's hard to have confidence when you start out, and I hope that this helps other girls new to sex work feel comfortable and stick to their boundaries.

When I asked each woman if she would like a copy of the collective document, three women said yes and two asked if they could share it with other women at their parlours. When I showed Barbara the responses to her questions, she said: “I love these ideas. I would never have thought about some of them, and it's nice to know that other girls are supporting me through this list”.

I asked Barbara if she wanted to add anything, as by this time she had been sex working for almost two months. Barbara stated she felt she didn't want to add anything at this stage but may do so in the future.

I hope this document lives on and is shared with other people who sex work. Before I left the service,

I presented the document to the clinic and sent all the staff a copy to share with people who are new to sex work. My hope is that the document will be provided to people who are engaged in sex work when they meet with a social worker at this service, and that it will contribute to bridging the gap that remains between “expert” knowledge and insider knowledge. Through working alongside the women who contributed to this document, I have been able to see how these insider knowledges are very different from the advice given by “experts”. The advice given in this document is specific, tried, tested and contextual. I have never heard other staff at the clinic share such relevant, contextually specific suggestions, and I could not have made them myself. The advice was shared from a place of understanding and experience, with the purpose of supporting other women’s safety. The words connected through a sense of solidarity and collectivity – something no advice from a doctor, nurse or social worker carries.

I hope that this document can be a step towards the privileging of insider knowledge within this sexual health centre. I hope the document will continue to be used and offered by social workers, doctors and nurses to help reduce stigma and increase sex workers’ voices, skills and knowledges where they are so greatly needed.

Conclusion

In this paper I have presented my use of a collective document to elicit and share the insider knowledge of sex workers attending a sexual health centre. I found the collaborative use of the written word to be creative and fun, often resulting in laughter even when talking about serious and tender issues. My intention was to provide space for people to continue to address the issues they are facing in their lives, to highlight their insider skills and knowledges, and to connect people in a situation in which face-to-face group work was not an option. I hope I have been able to provide space for precious themes (White, 2007) to become more richly known. I also hope that this example of a collective document presents a small challenge to some powerfully isolating understandings of sex workers’ identities.

Notes

- ¹ Barbara is a pseudonym.
- ² PrEP stands for pre-exposure prophylaxis: antiretroviral medication taken by HIV-negative persons to protect them against HIV infection.

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Psychosocial support initiatives in the aftermath of the 2023 earthquakes: A university-led community approach

by Mehmet Dinç and Canahmet Boz



Mehmet Dinç is a narrative therapist living in Türkiye. He is an associate professor and head of the psychology department at Hasan Kalyoncu University. He works on psychological resilience, with a focus on conducting extensive research, and has authored several books on the subject.
mehmetdinc@gmail.com

Canahmet Boz works as a research assistant in the psychology department of Hasan Kalyoncu University and as a clinical psychologist/narrative therapist in Türkiye. He conducts narrative therapy-based practice and research with people with chronic disease.
canahmet.boz@hku.edu.tr



Authors' note: On 6 February, 2023, two major earthquakes occurred in Gaziantep and Kahramanmaraş. These earthquakes caused great destruction in 11 provinces of Türkiye. More than 50000 lives were lost, and many thousands of people lost their homes. We would like to take this opportunity to express our condolences to the relatives of those who lost their lives in the earthquake.

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Author pronouns: Mehmet Dinç he/him; Canahmet Boz he/him

Abstract

This article discusses the response of a university psychology department to the devastating earthquakes that struck Türkiye on 6 February 2023, resulting in significant loss of life and widespread destruction. This paper focuses on the narrative practices undertaken by a university psychology department in the affected region, particularly the establishment of a psychological support telephone line staffed by volunteer psychologists. Beyond the initial establishment of the support line, the university extended its outreach to address the immediate needs of affected individuals in five cities, and subsequently, within the university premises. A “Tent of Hope” was established within a “container city” of displaced families to continue psychosocial support. This involved the volunteer efforts of psychology students to offer assistance to both children and adults. Initiatives also included the dissemination of a culturally sensitive booklet for the public and the development of a comprehensive booklet for therapists, aiming to empower individuals and communities in the aftermath of trauma. This paper includes reflections from people who contributed to these initiatives, sharing learning and insights relevant to others responding to natural disasters.

Key words: *natural disaster; earthquake; trauma; emergency response; Türkiye; university; children; collective narrative practice*

The earthquakes of 2023 in Türkiye marked a significant humanitarian crisis, affecting millions of lives and necessitating multifaceted responses. This article explores the unique contribution of a university psychology department to the relief efforts, emphasising the importance of addressing psychological experiences alongside traditional relief measures. The seismic events of 6 February 2023 were unprecedented in scale, constituting the most substantial earthquake globally for the year. The affected area encompassed 350000 km², affecting 14 million people and resulting in over 35000 building collapses. Our university is situated in one of the most severely impacted cities, and students, graduates and faculty were directly affected.

Immediate action was initiated by the psychology department of our university (Hasan Kalyoncu University) to address the psychological aftermath of the earthquakes. Recognising the distinct role of mental health professionals, the department established a psychological telephone support line staffed by volunteers. This initiative aimed to provide round-the-clock assistance to individuals grappling with the psychological toll of the disaster.

The support line was launched 20 hours after the first earthquake by 30 psychologists, five supervisors and five coordinators. The initiative evolved to engage 377 volunteer psychologists, 12 coordinators and seven supervisors. The service operated 24 hours a day and received its first call within 15 minutes of its announcement. To ensure the effectiveness of the support line, nine training sessions were conducted, enhancing the skills and capabilities of the volunteer psychologists. Additionally, a comprehensive pool of materials was curated to assist the psychologists in providing targeted support.

Over a span of 20 days, the support line assisted 1867 individuals, with each person offered at least three to five interviews. Interviews were conducted face-to-face, online and in hybrid modes. Specific age groups were catered for in different ways: children (aged 2–6 and 7–12), adolescents (aged 13–18), young adults (aged 19–24), adults (aged 25–50) and seniors (aged 50–65 and 65–80). The average age of recipients was 28 years. Collaborations were established with 10 nongovernmental organisations, facilitating joint efforts and outreach. Face-to-face interviews were conducted with 27 amputees, and 17 hospitals were visited to extend support to people with physical injuries.

Immediately after instituting the support line, relief work was also conducted in five affected cities. In our university city (Gaziantep), which witnessed significant building collapses, 3000 displaced individuals sought refuge in our facilities. For a fortnight, our university provided essential needs such as food, clothing and shelter, addressing the immediate concerns of those affected. Recognising the psychological toll on children, our psychology students engaged in daily activities with them. Through games, storytelling, drawing sessions and relaxation exercises, the students aimed to help children cope with anxiety, fear and uncertainty. This voluntary initiative played a crucial role in fostering a positive atmosphere and alleviating the emotional distress of children and their families.

As relief efforts progressed, a container city for displaced families was established, and our university played a pivotal role by initiating psychosocial support within a dedicated container. Termed the “Tent of Hope”, this facility initially focused on children and subsequently extended its services to adults. Ten psychology students initially volunteered to staff the Tent of Hope. After a thorough training session, they conducted activities for children, transforming the container into a space of healing and creativity. Feedback from families highlighted the positive effects of this initiative on children’s wellbeing and family relationships. Recognising the need for psychosocial support among adults, a second container was secured. Weekly programs, including walks, book readings, seminars, crafts, discussions and prayer sessions, were organised. The program’s success led to participants forming independent community groups, further strengthening social bonds.

Despite the demanding nature of the work, 30 student volunteers dedicated three months to the initiative. Their efforts directly affected 250 children, 52 adolescents and 101 adults. During the initiative, volunteer students reached 2000 people in total. The enduring positive effects on individuals and the community underscore the value of sustained psychosocial support in the aftermath of natural disasters.

Because of limited culturally oriented resources about how to respond after a disaster, we sought innovative ways to reach a wider audience with relevant information and ideas. This involved translating academic research into accessible booklets and developing practical guides for therapists engaged in psychological support services. First, drawing from

a recently completed dissertation on psychological resilience in Türkiye (Topçu, 2023), we distilled actionable coping strategies appropriate to the cultural context. The research findings were presented in a reader-friendly booklet available in both Turkish and Arabic. Leveraging social media and mobile communication groups, our community distributed the booklet widely, reaching thousands of individuals affected by the earthquake. Second, recognising the need for resources for professionals in the field, our narrative therapy community conducted a book study resulting in a guide tailored for therapists. The guide included outlines for five distinct group sessions designed for different demographics affected by the earthquake. Dissemination occurred through social media channels and mobile communication groups, aiding therapists on the ground and facilitating their efforts in providing psychological support services.

Narrative approach

In all our work, narrative therapy approaches (Denborough, 2008; Dinç, 2020; Mt Elgon Self-Help Community Project, 2023; White, 2000, 2004) were adopted. These prioritised double listening, empathetic engagement, fostering personal agency and enabling people to make contributions to one another. Everything served as a platform for individuals to share their unique experiences and ways of coping with the emotional aftermath of the earthquakes. The importance of demonstrating solidarity and offering a listening ear was underscored, acknowledging the diverse emotional challenges faced by those in the earthquake-stricken region.

Lessons learnt and practical insights

In the remainder of this article, we have included a series of reflections from those who were involved in these psychosocial support initiatives. They share lessons learnt and offer suggestions to others who may one day find themselves responding to a natural disaster.

Acknowledging the magnitude of the disaster

When there is a major disaster, there is great anxiety – feelings of uncertainty, insecurity and hopelessness. As volunteers trying to respond,

these feelings influenced us also. We tried to *recognise* this anxiety, not to ignore it, not to trivialise it, and yet try to find calm. While trying to remain calm ourselves and to calm people about their concerns, it was very important not to underestimate the disaster. Being aware of the magnitude of the disaster and giving accurate information to the community that we were facing a catastrophe helped us for three reasons. First, if people realised the magnitude of the disaster it summoned up an increased sense of power of endurance and resistance. Second, they prepared themselves with a more realistic perspective, thinking that if there is such a big disaster, the impact will be severe, and it will take us time to recover. And third, if everything was too hard and too much for them and they could not bear it, then in their minds and hearts, they accepted that this was due to the magnitude of the disaster. They did not blame themselves for it; did not see themselves as weak or inadequate.

Being in contact with local organisations

When I went to the region on the second day of the earthquake, I was saddened to see many clothes thrown on the side of the road. While one city received more clothes than it needed, people in other cities were freezing in the cold. For coordination to work properly, for resources not to be wasted and for no-one affected by the disaster to be victimised, it is absolutely necessary to act in contact and coordination with the relevant local organisations and institutions. For all these reasons, when you go to a disaster area, it would be useful to contact the organisations already working there and have a meeting about what is being done, what needs to be done and how you can support them with whatever means, knowledge and expertise you can bring.

Not taking photographs

People are always taking pictures of everything to post on social media. In the earthquake zone, I saw a lot of people taking pictures, especially of their work. But taking pictures can disturb people. This is their current living space. We don't walk into another person's home and start taking photographs, so I refrained from taking any photographs. If we have to take pictures for

some reason, then let's take pictures without disturbing anyone as much as possible. Insincere behaviour from those who are there to help can make the people affected by the disaster very unhappy.

Listening

When we meet people affected by disasters, let's talk less and listen more. In some cases, if possible, let's just listen. In the first days, people mostly want to tell. They want to convey what they have experienced, what they feel, what they think to someone who has not experienced the disaster. Let's let them tell. The more they tell, the easier it will be for them to make sense of what they have experienced and the easier it will be for them to process their thoughts and feelings. I have seen that with some mental health workers, when they go to the region, they think that what is expected of them is to apply some sort of intervention, to start talking and share their expertise without listening or not listening enough. Our priority should be to listen well and carefully. I would like to share with you a passage I read in a book about listening (King, 2011). One of two new acquaintances asks the other: "Are you a talkative person?" The answer is: "It depends on who is listening".

Double listening can lead to contributions

We found that double listening led us to conversations about people's absent but implicit values, hopes skills and dreams (White, 2000).

In the container city, a couple came to meet us. While the male partner was very communicative and talkative, the female partner answered my questions without making eye contact, with her head down and not wanting to talk. The husband explained that his wife locked herself in the house after the earthquake, did not go out, did not want to talk, and sometimes even had difficulty cooking. So I started talking to the wife. I asked where she was from and what she did during the day. We talked about what she did before the earthquake and what was good for her. She talked about what changed in her life after the earthquake. While she was talking, she said that sometimes she didn't even want to cook. Since both of them emphasised cooking, I asked her what kind of food she usually made. The topic of food seemed to

attract her attention quite a bit. We then talked about who she learnt to cook from. She was very excited while speaking about this and turned her attention completely to the conversation. We started talking to her about the local dish, sarma, because she mentioned that this was the dish she makes best. I asked her to give me the recipe for sarma and I carefully wrote it down in step-by-step detail. Afterwards, I hung this recipe on the wall of the container and asked if she would come once or twice a week and give us further recipes. She said she would gladly do this. At this point, I observed that revealing her absent-but-implicit cooking talent or skill was quite good for her.

Residents assisting us and each other

On entering the container city, we'd find ourselves in the living space of others. Support teams often require assistance out in the field, which can be provided by the residents themselves. This includes help with water, food, cleaning, tidying up, announcing events or facilitating them. This not only benefits the support teams but also has a positive impact on the residents.

Action – to do something

One of the proverbs we use in Türkiye is that a little pain is overcome by love and a lot of pain is overcome by work. And yet, in the container city where we provided psychosocial support, people were initially idle all day. It may not be good for people to be idle in the days following a disaster. For this reason, if they had an idea to do something, we'd encourage this and try to make it possible. One of the activities we did was to organise a walk for adults in the morning.

The end of the container city opened up to a forested area. A member of our team was walking there, and there were usually young people who wanted to join them. We soon created a hiking team who would arrive in the morning and together go for a one-hour walk through the forest. We also opened a WhatsApp walking group. People would talk to each other while walking. It would help in building relationships, and more than that, walking would keep them busy and prevent their sadness and pain from constantly weighing them down.

Routines and revealing people's alternative stories

The most effective remedy for major disasters is to try to get back to previous routines as soon as possible. This is undoubtedly very difficult, even impossible. However, the faster we can bring elements of a previous routine into people's lives, piece by piece, the better. Resuming previous routines can range from schools resuming, to people going to work, to shops opening. More than 10000 Bosniaks were killed in Bosnia. 1300 of them were children. Meanwhile, while people feared for their lives, universities did not stop teaching for a single day. During the war, 1500 students received their diplomas and graduated. Fifty-five doctoral studies were completed. During the same period, 250 concerts were given, and 1000 theatre plays were performed. Sometimes the television would announce a concert on the same evening as the news of the victims who had died that day. This was a Bosnian response to death. A response to life.

In the container city we were trying to help people adapt to their new life by reconnecting and performing the kind of life they lived before the earthquake. This included making new routines, and I think this was useful. It was good for families to take care of their children and to see their children's faces smiling. It was good for them that we went to the containers and chatted with them. We kept the culture alive for them there. In our conversations we tried to reveal everything that was going on in their lives *before* the earthquake and then bring this into the present. For example, some of them had previously loved their garden and growing flowers. They placed their flowers in front of the container. Some of them used to make braids and started doing them again. And there was an uncle who was making dolma (a local dish) and cooking them. It was good to start making new routines and keeping personal cultures alive. This was a process of revealing people's alternative stories.

Responding to grief

There were many different ways we tried to respond to devastating grief.

Listening and sometimes crying together

We would talk about whatever the person wanted to talk about at that moment. This varied from person to person. For example, if a person is reading a book, you can go up to him and ask him about the book he was reading, what caught his attention in the book, and what his favourite quote was. Or sometimes people would come to the container and talk about their experiences; about what happened in the earthquake, how they got out from under the rubble, and their losses. One day, a mother who lost her husband and children in the earthquake came. She talked about how they had lost their lives. This was quite difficult for me. Afterwards, she showed me their photos on her phone. I asked her about the stories of those moments when the photographs were taken. In this way we were able to talk together about the loved ones who were lost. She told me all this while crying. I cried too. I think it is very important to be there, to listen, to hear the stories of their losses and the stories of their loved ones. Because what can you say to a person who lost their family? You can just listen to those people's stories and sometimes cry together.

Performing religious and cultural rituals together

We went to a village after the earthquake. A woman in the village had lost her husband and children. She was the only one left alive and she was in great pain. When we visited her in her tent, we asked her if she needed anything; she said she had everything and that state institutions were bringing aid. When we asked her if she wanted to talk, she said she did not want to talk. When we asked her if she would like to read the Qur'an and pray for those she lost, she was very happy and called her friends from the village to the tent. When we read the Qur'an and prayed together, she was very grateful and thanked us.

Making halva

In Türkiye, halva is made in memory of people who have lost their lives. On the first, seventh, fortieth and fifty-second days after a person dies, halva is made and offered to neighbours,

relatives and friends. In this way, people commemorate those who have lost their lives. The support team in the container city made halva for the earthquake survivors and their relatives who lost their lives and honoured them. Hospitality in Turkish culture is very important. For this reason, psychosocial support teams visited the containers during these days and hosted the earthquake survivors.

Recalling good memories

Where appropriate, we would encourage people to talk about those loved ones they had lost by asking them questions to recall good memories they had with them. We'd ask questions that allowed them to describe these times in detail. Often, it was good for them to talk in detail about good memories of the people they had lost.

Emphasising physical care – food and sleep

In Türkiye, there is a saying that pity is one thing and hunger is another. It is spoken often at funerals to encourage people who are grieving to eat because people in great pain may need this kind of support and encouragement. Disaster survivors may sometimes be reluctant to meet their needs for food or sleep due to the fear or pain of the disaster. In some cases, they may not know how and where to meet these needs due to the confusion they are experiencing. If there is such a situation, it is one of our important duties to emphasise physical care. Let people eat and sleep as much as possible.

A food and prayer program

In the container city we organised a food and prayer program in dedication to those we lost. At first the idea was to supply food made by a company, but I objected and said, "let's let those who have lost loved ones do the cooking". We bought the ingredients, and they cooked the food. At the very beginning, there was a woman who had lost many of her relatives, who did not speak to anyone and did not participate in any of our other activities. She took primary responsibility for this food and prayer program. After the program, she came out of her tent and started participating in our activities and talking to people.

Anger

In addition to responding to grief, we also needed to find ways to respond to anger.

Being prepared for, and understanding, anger

There may be people who are rude to us, who talk accusingly, or who think that we cannot understand them in any way. In such situations, it can be helpful to keep calm and try not to respond to every word. It's important for us not to personalise what is being said in anger. At this point, another issue to be considered is how we use our language. Our words can trigger many positive or negative things in people. For this reason, it is necessary to be careful in our use of language. Speaking of "we", not "me" and "you", can sometimes make a difference. As can refraining from giving advice.

There is one family I find it helpful to remember when I think about facing anger. I met a family who came to the container city later. He had been abroad when the earthquake occurred. His wife and their eldest daughter died in the earthquake. He came with his younger daughter, and he was quite tense and angry with me. I found this difficult but then I observed that the little girl who survived often wet her fingers with her tongue and put them on her lips. I asked her aunt about this, and she told me: "During the earthquake, this girl and her grandmother were left under the rubble for a day. Air was coming from a gap created while under the rubble. Since the weather was cold, when this breeze hit the child's face, she felt cold, and her lips became dry. Her grandmother, from under the rubble, told her to wet her fingers and apply them to her lips so that they would not dry out. She continued this behaviour after she was rescued from the wreckage." I remember being frozen while listening to these words. Her aunt was crying heartily while telling the story. I couldn't help but cry too. The father's anger and this little girl wetting her lips. Everyone who experiences a disaster is affected in different ways and responds in different ways.

Reducing the power of "unreasonable anger"

While visiting the container city, I interviewed a man who said he had anger problems towards his family. His house was severely damaged, and his workplace had been destroyed in the

earthquake. He was living in the container city with his wife and three children. He explained to me that his behaviour changed after the earthquake. He stated that he was more angry, tense and now had low tolerance towards his wife and children. So we started having conversations about this anger. We externalised “unreasonable anger” and investigated when it came and when its influence increased and decreased. We talked about how this anger affected both himself and others, and he realised that it was somehow linked to the responsibility he felt for his family’s future. His business was in ruins, life in the city had stopped and there was no place for him to work. He felt cornered and a failure and therefore angry. At the end of these externalising conversations, he realised he was speaking of his deep love for his family and how they should come first. He described ways he was not going to allow “unreasonable anger” to destroy them “being a family”. Having these conversations reduced the power of the problem of unreasonable anger.

Stories from our history

Sometimes stories from our recent and distant history offer company in times of disaster. There is a historical figure in Türkiye called Nasreddin Hodja, famous for his jokes. One day he asked his neighbour to lend him a cauldron. The neighbour gave it to him. Two days later, Nasreddin brought the cauldron back along with another smaller cauldron. When his neighbour asked what this was, the hodja said, “Your cauldron gave birth”. The man was very happy that he now had two cauldrons when he previously had only one and said, “How nice, how good”. Another day, the hodja asked for a cauldron again. His neighbour gave it to him with joy, remembering the previous time. However, the hodja did not give back the cauldron even after time passed. The man was curious and asked the hodja, “What happened to the cauldron?” The hodja said, “Your cauldron died”. The man was very surprised that the hodja said the cauldron had died. The hodja said, “You believed that it was born, why don’t you believe that it died?” An earthquake victim I talked to had lost his wife and children. After telling me this story, he said, “We believe in God when he gives, why not when he takes?”

Children and young people

We needed to think of different approaches for children, young people and adults.

Making children happy

When you make children happy, you also bring their parents relief. Children digest their experiences through play. That’s why play heals them. So, even in the disaster area, we created contexts for children to play; we created contexts for children’s happiness. We took candies, small toys, crayons and other things in our pockets. And we created a place, a container, for children’s play. It was also very useful to let children draw. In the earthquake zone, we had the children play games and draw every day. I was amazed to see how the children’s drawings changed from day to day. The drawings, which were dark and fearful in the first days, gradually became more colourful and included more cheerful subjects as the days went on.

Comforting mothers

An important way to comfort children is to comfort their mothers. Children in Türkiye often make sense of what an experience means by looking at their mothers’ eyes and reactions. If mothers are scared and terrified, children experience more fear and terror. Therefore, comforting the mothers and fathers and ensuring that they receive psychological support if they need it will also be very beneficial for the children.

Young people

In times of crisis, young people sometimes withdraw themselves and remain alone with their fears and anxieties. For this reason, we thought it was very important to recognise them, to find them, and to create contexts in which they could share experiences. We created activities with young people such as volleyball, basketball, ball, chess and Jenga. We also tried to enable young people to have as much responsibility as possible over making plans and projects and ensuring that their contributions were recognised so that they felt valuable.

Our experience as volunteers

There were many elements that assisted us as volunteers.

Helping others was good for us too.

We tried to be there for the people and focus on their stories. Some of the stories we heard were challenging because we too had lost friends and family members. Nonetheless, helping others was good for us too, and hearing about their experiences beyond the earthquake also strengthened us.

It was very good for me to go there right after the earthquake, because the fear was as great for me as for the people there. I was experiencing restless leg syndrome. I couldn't sleep at night. I was incredibly depressed. I didn't want to talk to anyone when I was at home and just wanted to cry all the time. But the first day I went to the container city, the opposite happened. First of all, it was very good to socialise there. I felt incredibly social. I was cheerful. And second, because I was so tired at the end of that day, I went straight to sleep after playing with the children without restless leg syndrome.

They hosted us very well

There were many different ways that the residents of the container city gave back to us. For example, an aunt we visited at the containers gave me violet flowers. This was very precious. When we went to visit the containers, they would not send us away without giving us something to eat or drink. The last period of our visits coincided with the month of Ramadan. They were offering us something even though we were fasting. When we said we were fasting, they put it in a bag and gave it to us to take away for later. They hosted us very well. They treated us like family.

Being a team in harmony

What was it that protected us psychologically? I think the main thing, rather than any method, was that working as a team was important. I achieved harmony with my teammates. I think that instead of being on the field alone, it was necessary to be with a team in harmony.

With nearly 3000 earthquake victims in the container city, it was essential to have a team to plan and execute events and also to share experiences. We developed a regular routine that at the end of each day, while returning from the container city, we would share with

each other three events from that day that had made us happy and feel good. We also shared our observations about the day and areas that needed improvement. This process of reflection helped us a great deal as team members.

Working out how to respond to people's questions

People living through a disaster can have many questions. They may ask you many questions that you cannot possibly know the answers to. Sometimes these questions were about things that were the responsibility of the state; sometimes it may be a religious question or a question about education. I realised that I didn't have to know the answers to these questions – and it was better not to feel bad that I didn't know. If I didn't know the answers to these questions, I knew I shouldn't give the wrong answer! So instead, I could keep in touch with places from which I could learn the answers to these questions. Whenever I was asked a question that I didn't know how to respond to, I would seek out those who knew and then return with an answer.

A small notepad

Before every event and before every holiday, we printed small notepads and gave one to people in the container city. Spoken words fly, but written words remain. On these notepads we wrote our good wishes so that they would have a piece of paper that they could open and look at when they had trouble. They could carry these good words in their pockets. We would also write on these small notepads what time we would roast halva, where and when we would read the Qur'an, and then we could go around the containers and distribute them one by one.

Know yourself well

Before going to assist others in a disaster zone, it is also worth thinking about how manageable it will be for you. Being in a disaster area or with people in difficult times may not be manageable for everyone. If you think that you will find it too difficult, that you will not be able to cope, that you will be harmful rather than helpful, then please consider remote support. There is a lot of important work that can be done remotely.

Taking a long-term view

Major disasters take a long time to recover from. Usually, people volunteer and act quickly in the first days and weeks and try to make great sacrifices. However, after a short time, they often forget or become unable to continue their efforts to help. For this reason, rather than only taking big steps immediately after a major disaster, some of us are trying to think about and plan longer-term sustainable steps. We must spread our plan over a long period of time and know that it is not possible to reach our destination in a short time.

A pocket guidebook

From our experiences as volunteers, we also created a pocket guidebook for psychosocial supporters in earthquake zones. Instead of using any particular technique, we tried to be there for the people and focused on their stories. Some of the stories we heard were challenging because we had lost friends and family members too. Nonetheless, helping others was good for us too, and hearing about others' experiences beyond the earthquake also strengthened us.

As psychosocial support workers, we developed narrative methods to assist people. Narrative therapy-based guidebooks have been produced before (Dinç, 2020; Fareez, 2015; Dulwich Centre Foundation, 2020; Mt Elgon Self-Help Community Project, 2023). However, it is noteworthy that there was no guide for psychosocial support teams working with survivors after an earthquake. We prepared an informative pocket guidebook for psychosocial support workers working with earthquake survivors.

It includes pages at the end where people can write daily notes in response to questions like these:

- What are three things that brought happiness today?
- What were the things you noticed today that kept people strong and/or made them feel good?
- What is a word, song, proverb, prayer, story or attitude you heard and liked today?
- What stories other than the earthquake caught your attention today?
- What are the questions you are asking, or approaches you can develop in your work, from today's experiences?

Conclusion

Our university-led psychosocial support initiative exemplifies the importance of proactive and sustained community action to address the psychological and emotional needs of individuals affected by natural disasters. The voluntary efforts of psychology students played a pivotal role in creating spaces of hope and healing, showcasing the resilience and compassion within the community during challenging times. The success of this endeavour lay in its adaptability, collaborative efforts and a narrative therapy approach that prioritised the psychological agency and local skills and knowledges of those affected. Moreover, these initiatives showcased the transformative potential of academic research when translated into accessible formats (Buldur et al., 2023). By disseminating practical resources, the community not only reached a significant number of individuals affected by the earthquake but also empowered therapists on the ground. This proactive approach, grounded in the principles of narrative therapy, highlights the resilience of individuals and communities in the face of trauma, fostering a sense of agency and support during challenging times.

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Standing upright against trauma and hardship: Checklists of innovative moments of social and psychological resistance

by Muhammed Furkan Cinisli



Muhammed Furkan is a Turkish narrative therapist who works with adolescents and adults. He has a master's degree in narrative therapy and community work from The University of Melbourne. He is particularly interested in learning from people who are resisting the effects of trauma. ffcinisli@gmail.com

Abstract

Trauma represents a profound and emotionally intense experience within the human condition. Beyond its evident impacts on both the physiological and psychological dimensions of an individual, this complex phenomenon encapsulates moments of resistance and strength in the face of adversity. From a narrative standpoint, individuals invariably manifest unique responses to trauma, which necessitate a close and nuanced examination for recognition and comprehension. This article proposes a framework for the systematic collection and organisation of diverse responses to trauma through a checklist of innovative moments of social and psychological resistance, contributing to a greater comprehension of this intricate phenomenon.

Key words: *trauma; checklist; documentation; double listening; narrative practice*

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This article presents an adaptation of the “checklist of social and psychological resistance” developed by David Denborough (2008) to create, develop and disseminate unique outcomes in the face of trauma and hardship. The adapted checklist applies the typology of unique outcomes developed by Marlene Matos and colleagues (2009) to elicit a wide range of responses that may have been previously unrecognised.

Using narrative therapy to address trauma

People’s lives can’t be fully described by a single story, even when one has become dominant. Narrative therapists listen for and gently elicit alternative storylines that might “thicken” a “multi-storied” account of a person’s experience (White, 2004). Through this process, a preferred sense of identity can be developed that offers a wider range of possibilities for living.

When persons have been subject to significant hardships or trauma, particularly if recurrent or ongoing, they can lose touch with a strong “sense of myself” (White, 2004, p. 27). People find it difficult to know how to go in life, how to move forward with any plans (White, 2006). It can be particularly hard for them to articulate what they value (White, 2004; Yuen, 2009). To help reconnect people with a preferred identity and their own knowledge and skills for living, narrative therapists focus on identifying steps people have taken in response to the 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)

Narrative practice suggests two steps to follow. The first is restoring a preferred sense of identity through finding out what a person has given value to through their responses to the trauma, what they have tried to preserve or continued to “hold precious” (White, 2004, p. 28). Once this has been established, the second step is to uncover further responses that are highly affirming of the person’s value system.

These responses to trauma ... are shaped by certain knowledges about life and skills of living. The steps that people take in the midst of trauma, and in its aftermath, that are invariably disqualified or diminished within the trauma context, are founded on knowledges of life and on skills of living that have been developed in the history of their lives, in the history of their relationships with others. Therapy can become a context in which these steps, and the knowledges and skill that they represent, can become known and profoundly acknowledged. (White, 2004, p. 29)

In this way, narrative therapy approaches to trauma diverge from normative mental health responses. Rather than seeking to diagnose disorders or focusing on addressing symptoms, narrative therapists emphasise understanding people’s unique responses. These responses are informed by their personal values, beliefs and cultural context. Exploring these responses can empower clients to navigate their healing journey. This avoids imposing a predetermined framework about what constitutes a “healthy” response. Instead, the therapist listens carefully to each person’s story and acknowledges their agency.

Many specific narrative methodologies have been developed on the basis of this understanding. These methodologies aim to discover and to develop rich stories about people’s lives and identities. Alternative “checklists” are one such methodology.

A checklist of social and psychological resistance

In mainstream psychology, checklists are widely used to determine whether individuals are suffering from a “mental illness”. These instruments are used to identify the presence of specific “symptoms” indicating, for example, anxiety, depression or post-traumatic stress disorder, and to quantify their frequency and extent. Such psychological assessments can reinforce a problem-saturated description of identity, positioning people as damaged or dysfunctional. Even worse, in the process of administering these checklists, people may be invited to revisit painful experiences without proper support and guidance, thereby intensifying their distress and undermining their sense of control over their own story.

In response to the dissemination of checklists like these to people working with communities affected by violent military conflict in Lebanon, David Denborough (2008) developed an alternative checklist, in consultation with Mohammad Safa, to identify “signs of social and psychological resistance” (2008, p. 131). This checklist was designed to be used alongside the diagnostic

checklists or in place of them. Rather than seeking to identify symptoms of illness or signs of distress, Denborough’s checklist was populated by examples of responses to trauma, based on those Safa had identified in local communities. It also contained space for new categories of resistance to be added (see Figure 1).

Many times	More than once	Once	PART 1: DURING ATTACK	
			Tried to protect themselves during attack: physically and/or emotionally	1
			Displayed acts of caring, concern, comfort for others during attack (may include caring for children or other adults)	2
			Received comfort from others during the attack (was able to take this in)	3
			Displayed acts of caring for oneself during attack	4
			Displayed acts of dignity or pride during attack	5
			Found ways to hold onto hope during attack: may include spiritual, religious practices	6
			Displayed acts of bravery during attack	7
			Found ways to encourage others during the attack	8
			Tried to stay connected to others during the attack (either in person or via radio)	9
			Found ways to stay in touch with what is precious to them about life during the attack	10

Many times	More than once	Once	PART 2: AFTER ATTACK	
			Displaying acts of caring, concern, comfort for others after attack (may include children or other adults)	11
			Receiving comfort from others (is able to take this in)	12
			Taking steps to try to reclaim items of significance from the destruction	13
			Making plans to rebuild what has been destroyed, or to build new lives	14
			Speaking with others, or listening to others, about experiences during the attack in ways that contribute to feeling joined and stronger	15
			Displaying acts of dignity or pride despite living amidst destruction	16

Many times	More than once	Once	PART 2: AFTER ATTACK	
			Able to find joy in small moments within life	17
			Able to connect with humour, irony in life	18
			Linking with others through song, music, prayer, art, & so on, to share experiences, sorrows, hopes & dreams	19
			Finding ways to take action either individually or with others that are in accord with what he/she hopes or dreams for their life	20

Many times	More than once	Once	PART 3: HONOURING AND REMEMBERING THOSE WHO HAVE BEEN LOST	
			Remembering those who have died	21
			Joining with others in this remembrance	22
			Honouring the lives of those who have been lost: through sharing stories about them	23
			Honouring the lives of those who have been lost: through religious practice	24
			Honouring the lives of those who have been lost: through tears and sorrow	25
			Honouring the lives of those who have been lost: through rituals, ceremonies, memorials, songs, art	26
			Finding ways to speak about what the person who has died contributed to others and how this legacy of their life is continuing	27
			Honouring the lives of those who have been lost by taking actions that are in accordance with the values and wishes of the person(s) who have died	28

Figure 1. Checklist of social and psychological resistance. Reproduced with permission from *Collective Narrative Practice* (Denborough, 2008). Note that this checklist was designed to be read from right to left because Arabic reads in this direction.

This checklist was designed to assist practitioners by providing a structure for eliciting and honouring acts of social and psychological resistance, and for exploring the values, knowledges and abilities exhibited by local communities in their responses. By emphasising the strengths and coping mechanisms already present within a community, a checklist of resistance can foster new narratives and help sidestep the potentially harmful effects of external psychological influence, challenging psychological colonisation. This approach not only empowers individuals and communities to reclaim their narratives and preferred identities but also fosters a more equitable and culturally responsive approach to mental health and wellbeing.

Denborough’s checklist was designed within a specific cultural context in response to a specific moment of armed conflict and is based on local knowledge and experience. It was not intended to become a standardised checklist that could be applied in other contexts. Instead, Denborough (2008, p. 135) hoped that it might inspire others to create diverse “conversational guides” to elicit local responses to significant shared hardships.

I was inspired to use the idea of a checklist of resistance as a basis for second-story development in my work. Whereas Denborough’s checklist was designed to support collective narrative practice, I was interested in whether a similar checklist might be useful in individual counselling.

Adapting the checklist

I wanted to create a checklist process that could be used to help identify moments in which a person had demonstrated resistance, defiance or adherence to core values in the face of trauma or adversity. Rather than constructing a collective checklist based on a community's experience, I was interested in the potential for individuals to create a personalised checklist documenting their own responses. To help elicit responses, I drew on the research of Marlene Matos and colleagues (2009), who developed a typology of unique outcomes. They distinguished five different types of "innovative moments" (IMs): action, reflection, protest, reconceptualisation, and new experiences:

- Action** IMs refer to specific actions that are not predicted by the problem-saturated story.
- Reflection** IMs are all the moments in which the person thinks differently than what one could expect from the problematic story or when the person understands something new that contradicts the problematic story.
- Protest** IMs can be an action (like action IMs) or a thought (like reflection IMs), but they are more than mere actions or thoughts, reflecting a protest

against the problem-saturated story and its specifications. **Re-conceptualization** IMs are more complex than the previous ones. They involve a metacognitive level, meaning that the person not only understands what is different about him- or herself but is also able to describe the processes involved in this transformation ... **New experiences** are IMs in which new projects, activities, or experiences that were impossible before, given the constraints of the problem-saturated narrative, start taking place. (Matos et al., 2009, p. 69, emphasis added)

Although these categories were created to enable coding and analysis of interview transcripts, I was interested in using them to help uncover the range of initiatives that a person might have taken in response to a problem story.

As an additional opening to alternative stories, I wanted to invite people to associate items identified in relation to these categories of "innovative moments" with domains of life, such as family, friends, sport, art, literature, music, religion and so on. Combining these ideas, a checklist template was created using the five categories with the additional dimensions of related area and frequency (see Figure 2).

Category	Item	Related area or people (family, sport etc.)	Once	More than once	Many times
Action					
Reflection					
Protest					
Reconcept- ualisation					
New experiences					

Figure 2. Template for checklist of social and psychological resistance

Developing the checklist process

To make it easier for people to produce their own checklists, I prepared an example with the help of 12 clients and therapists. I asked each of them: "In what ways have you confronted a problem you are currently experiencing? In which areas is this opposition more evident?" I provided each of these people with the five categories of unique outcome or "innovative moments" to prompt their thinking. Here is an example of one person's personal checklist:

With permission, I circulated people's answers and invited the 12 clients and therapists to offer responses to each other's answers and add to their own lists.

I collated their responses into a sample checklist, leaving space for new ideas. It would also be possible to create a sample checklist that is relevant to a specific type of situation.

Interestingly, across my experience in working with this checklist template, I have so far found that people have been more readily able to identify items in the

Category	Item	Related area or people (Family, relatives, friends, sport, literature etc.)	Once	More than once	Many times
Action	I meet my friends	Friends			
	I take a walk by the seaside	Activity			
	I review old photos	Family			
	I call a friend I haven't seen in a long time	Friends			
	I pray more than usual	Religion			
Reflection	Everything will be fine				
	I have been through something like this before				
	I better stand strong for my children				
	God is always with me				
	This too shall pass				
Protest	This situation cannot continue like this				
	Now, I have to find a solution to this				
	I can't take any more of this				
	It's time to do things differently				
	I can't accept this anymore				
Reconcept- ualisation					
New experiences	We started having family meetings once a week in the evenings				

Figure 3. Sample checklist of social and psychological resistance

“action” and “reflection” categories than in “protest”, “reconceptualisation” and “new experiences”. This might be something that varies between cultures and individuals, and may reflect my cultural context in Türkiye. It may also suggest the need for different questions to elicit items in these categories.

The process of developing this sample checklist was a unique experience for the clients and me, and it was encouraging to find that the idea resonated with people. I have now worked with 20 participants using the checklist-writing process to identify and record their responses to hardship and trauma.

Betül's story

One of the people with whom I have created a checklist is Betül, a 37-year-old woman with three children. She had been diagnosed with cancer three months before we met and had to move suddenly to Istanbul to commence chemotherapy, leaving behind her hometown. Betül found herself separated from many of her loved ones and from all of the things she had done in her previous place of residence. She was a teacher and she loved to teach. The three months in Istanbul had been very difficult for her because the chemotherapy was exhausting, and she worried about becoming separated from her children.

As soon as she sat down at our first meeting, Betül said, “When I found out I had a cancer, I was shocked and didn’t know what to do. Now I feel so alone and powerless. My husband and children are with me, but I think I am a burden to them. I can’t stop thinking about what will happen if I die and what will happen to my children”.

As I listed to Betül describe the hardships she had been facing, I tried to also listen for traces of her responses to the problem story, and also for broader cultural and societal discourses that may have been influencing how she perceived her experiences (White, 2004).

Furkan: Betül, I understand that finding out you have cancer has made you very tired and worried. I can see how much this has affected you – the sudden change of your whole routine and the fear of leaving your family have affected you greatly.

Betül: Yes, this situation is pushing and tiring me a lot. I can’t get it out of my mind. Normally, I am an active person. I come from a family that is

interested in education. I started my religious education at an early age and became a teacher. Now, I have many students. It is difficult for me to leave education and leave my students. Sometimes they call and ask how I am, but it’s hard for me to tell them that I’m having a hard time.

Furkan: Yes, I understand that you had a very active life before the illness. Actually, I am interested in the time before the illness entered your life. Would it be appropriate to talk about that?

At this point, I wanted to focus on parts of Betül’s life that were separate from the problem story. I wondered if this might help us to identify values or skills that had been important to Betül, or perhaps provide openings for the use of externalisation techniques, inviting Betül to separate her struggles from her identity and allowing her to see the problem as external and open to exploration. We began to construct a narrative landscape that honoured Betül’s experiences while also opening up space for new possibilities and preferred outcomes.

Betül: Everything seemed fine before the illness. I’m a bit of a regular person. I try to restrict my actions. When I sleep, when I eat, when I entertain: everything had its time. That is also how I raise my children. It is decided clearly when they will eat, when they will go to bed and when they will get up.

Furkan: You had an orderly and organised life, right?

Betül: Yes, it was exactly like that. Maybe it is very much restricted, my husband would say I shouldn’t be so strict ... We don’t get along very well on these matters. Since he is a more relaxed person, he can act more flexibly.

At this point, I began to think that writing a checklist might be a useful process for Betül to begin identifying and documenting some of the ways she had been resisting the dominance of the problems in her life. I thought this format might help her to connect with the ways she had arranged and organised things in her life as a teacher. When I presented the idea of listing her abilities, values and hopes, and the ways in which she had been enacting them even during the illness, this seemed like a strange idea to Betül. It was hard for her to imagine that she had been doing anything to resist the impact of the illness on her life.

Furkan: I understand that order and organisation are important to you. I see that you have used them to educate your students and teach them new information. How about the idea of ordering and organising the things you are doing while you are struggling with the difficulties of this period of illness?

Betül: What do you mean by that? How can I do that?

Furkan: We could make a checklist together to help us see what you've been doing during your illness. This is something I have done with other people. If you want to see how a checklist like this is used, I can share with you one I have prepared earlier with other people to help get us started.

Betül: I don't understand. I haven't done anything during the illness. I've abandoned the things I used to do. How can I organise what I've done when I'm being completely useless? That doesn't make much sense to me. I don't know what I'd write. There is no action or reflection in my life to write in a checklist. I've given up on

everything I used to do. I'm just getting chemo and spending time at home tired. I'm not sure I can do this.

Furkan: I understand the feeling that you haven't done anything. You said that you are doing less now compared to your previous active life. However, I am a little sceptical that you have been doing nothing. How about making a decision after looking at the prepared checklist? If none of the previously written items suggest anything to you, then we can stop doing this. But if you don't want to do that either, we won't.

Betül agreed to take a look at the sample checklist. As she read through, some of the things she was already doing began to become clearer, as did some possibilities for things she could do. Betül decided that she would create her own list. Each item was like an area she was discovering for the first time: a door to a new landscape of action or identity. This list was a treasured unique outcome for me. Here is Betül's checklist:

Category	Item	Related area or people (Family, sport etc.)	Once	More than once	Many times
Action	Eating ice-cream with my children	Family			X
	Making an illustration for a children's book	Art - Painting	X		
	Playing violin	Art – Music		X	
Reflection	Focus on what you are doing			X	
	Enjoy the moment			X	
	Have good thoughts about people				X
Protest	I can protest my impulses about people's behaviour			X	
	I can protest the disease preoccupying my mind		X		
Reconcept- ualisation	The meaning of recitation of Qur'an		X		
New experiences	Visiting Istanbul –old buildings, mosques, Bosporus				X

Figure 4. Betül's checklist of social and psychological resistance

Betül was surprised and intrigued at having found so many items to list, and she recalled a number of occasions on which she had enacted each item.

One item on the list appeared to have particular significance. Betül said that a Qur'an recitation she had listened to with her grandfather during her childhood and youth always affected her very much.¹ Listening to it gave her peace, she explained with tears in her eyes. We listened to the recitation together. Afterwards, I asked her:

Furkan: Betül, I see that this recitation has affected you quite a lot. Do you want to talk about it?

Betül: Yes, it reminded me of a lot.

Furkan: Do you mind if I ask what it reminds you of?

Betül: My grandfather was a very religious person, and he wanted to pass on what he knew to us. What he taught us was very important to me. I loved listening to him. After our conversations, he would usually read the Qur'an, but since his eyes could not see well, I would help him to listen to recitations. I was happy to help him, and I was happy to listen to this recitation. At that time, I felt very comfortable and peaceful. Now, when I listen to it again, all those memories come back to my mind.

Furkan: If you could carry this recitation into a different situation in your life, what could be different?

Betül: It could have helped me get over the bad thoughts that came to my mind about death and separation from my family. I think it would have supported me like my grandfather did. Listening to this gives me peace and reminds me of my grandfather's support for me. It really brought me back to the old days. At that time, when I had other problems, it was good for me to talk to my grandfather. This recitation reminded me of the peace of that time.

Furkan: I can see the effect these memories have on you. This recitation seems to have affected you quite a lot. What do you think about carrying this around more, especially when the problem starts to walk around?

Betül: It definitely makes me feel good. It can help me throw thoughts out of my mind faster. It may make it easier for me to focus on other things. It's always good for me to remember my grandfather. Carrying this recitation and the memory of my grandfather with me is totally good for me as well.

Furkan: So, what are the different ways you can carry it with you? How can we make it easy for you to carry it?

Betül: The first thing that came to my mind was to keep it on my phone. I can add it to the top of my playlist so I can listen to it whenever I want.

Furkan: Great! I think this idea will help us a lot. Do you think we need a backup plan for when you don't have your phone with you?

Betül: Yes, I guess my phone may not always be with me, especially when I go to the hospital for chemo, I do not take it with me then. It would be good to have something to remember this recitation in those times. Oh! Maybe I can memorise this part of the Qur'an so I can recite it myself.

Furkan: It seems to me that you are also very good at problem-solving, Betül. This is such a great idea. Maybe you can write it down and carry it with you until you memorise it. This way, you will have the opportunity to read it more often.

Betül: Yes, that is how I will do it. I'm already getting excited.

Furkan: I wonder, what would your grandfather think if he knew that he had contributed to your life in this way?

Betül: [With tears] My grandfather was a humble person. He would have been very happy if he knew that.

Our conversation continued through several sessions during which Betül related ways she used this recitation in other areas of her life. Although Betül was still receiving cancer treatment, it had become easier for her to identify narratives other than the problem story. To support her in doing this, she paid attention to the items she had recorded on the checklist and she kept

adding others. Betül used her checklist to open new possibilities for her life. Each item on the checklist provided points of entry into multiple alternative stories, making it a useful support for me as a therapist as well as for Betül herself.

Note

This recitation is available at <https://youtube.com/watch?v=pMWRPOGiUB0>

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Conclusion

When Denborough created his “checklist of social and psychological resistance”, he invited other practitioners to consider adapting it to structure conversations in their own contexts. I took up this invitation, adapting this methodology to use in individual therapy and integrating Marlene Matos and colleagues; (2008) typology of “innovative moments” to help generate alternative storylines about people’s responses to hardship and trauma. In addition to providing openings for identifying unique outcomes, the process of creating a personal checklist prompted by the sample checklist has been a way to centre clients’ agency and knowledge. This has been helpful in addressing the power dynamics inherent in the therapeutic relationship, facilitating a more equitable co-research partnership (Epston, 1999) in which clients can be recognised as the experts on their own lives. I hope that this adaptation of Denborough’s checklist might provide a resource for other therapists seeking new ways to structure co-research with their clients. I would love to hear from anyone who develops their own checklist.

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An Episode of Your Life:

Rich narrative engagement with episodic stories

by Julie Stewart, Tiffany Sostar, Ian Myhra,
Sonia Hoffmann and Jyotsna Uppal



Julie Stewart is a narrative therapist and social worker at the University of Calgary in Alberta, Canada.

Tiffany Sostar (they/them) is a white, queer, disabled narrative practitioner on Treaty 7 land (Blackfoot Confederacy, including the Siksika, Kainai and Piikani First Nations; the Tsuut'ina; and the Stoney Nakoda, including the Chiniki, Bearspaw and Goodstoney First Nations. This is also the home of the Métis Nation of Alberta, District 5 and 6) in Calgary, Alberta, Canada.

Ian Myhra (he/him) is a narrative therapist and social worker in Calgary, Alberta, Canada.

Sonia Hoffmann (she/they) is a narrative practitioner, social worker and clinical supervisor who lives and works on unceded Darkinjung Country in Australia.

Jyotsna Uppal is a narrative therapist and coach in Brooklyn, NY, USA.

The authors can be contacted via stewajl@ucalgary.ca

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Abstract

This article describes a new practice map, an “Episode of Your Life”, which adapts existing narrative “... of life” practices to an episodic story from a person’s life using metaphors from film and television production. This practice map draws significantly on ideas of “peopling the room” and the Team of Life in order to scaffold safety in imagining the process of telling painful stories through the collectivising of the storytelling process. This practice map specifically does not require that the storyteller tell the story, but rather invites them to imagine how they might tell a story from their life in a way that aligns with their values, hopes and preferred storylines. Some of the significant effects that we discovered were related to the richness of the visual metaphor for adding another layer of possible meaning-making in the storytelling process, and allowing for a “proliferation of what’s possible” in the imagining of the storytelling, such as through the use of time jumps; computer-generated imagery; inviting rich descriptions of preferred relationships, histories and values; and dignifying of stories that otherwise might be left unspoken. Participants were left with a feeling of solidarity and a “safe riverbank” from which to imagine telling their stories.

Key words: *metaphor; visual media; television; re-authoring; non-individualising practice; narrative practice*

Originating context

The Episode of Your Life (EYL) practice map emerged within an existing narrative peer consultation group that met from early 2020 to mid-2023. This group first came together to create a collective document in response to the COVID-19 pandemic, and it continued to meet because we appreciated each other's companionship and solidarity. We met virtually and included participants from Canada, Australia and the United States of America. In February 2021, we hosted a series of conversations about media and narrative therapy. These conversations explored how we could join community members in conversations about cherished media when we lacked the same awareness of the show or character, as well as what becomes possible when we have shared awareness. Later in the month, we conducted two live interviews with outsider witnessing on the topic of cherished TV shows. These interviews highlighted how powerful it could be to articulate the role of TV in our lives and in our own understanding of ourselves. Shows can serve as important companions in difficult times (Tilsen & Nylund, 2009), examples that make us feel possible (Salja, 2022), and as conversational scaffolds to explore the meaning of our own lives (Tilsen, 2016).

This new map is indebted to the many "... of life" conversation maps in the history of narrative practice. Beginning with the Tree of Life (Ncube, 2006), which explores histories, supportive relationships, hopes and values, the many "... of life" practices have been developed using distinct metaphors and perspectives to work with painful problems and to help us "[tell] stories in ways that make us stronger" (Wingard & Lester, 2001). These include Seasons of Life, which supports people in telling stories of surviving experiences of incarceration (Abu-Rayyan, 2009); Voyage of Life, which supports developing preferred relationships with substance use (Coleman, 2015); and Soundtrack of Your Life, which uses imagined playlists to engage young people in narrative conversations (Maund, 2021). Because its focus on inviting in other voices to assist in telling the story, the EYL practice map is particularly aligned with the Team of Life (Denborough, 2010). In each instance, these metaphoric practices have responded to the specific contexts and resonant metaphors of the communities in which they were created. We believe that the EYL map will resonate for community members who have an existing relationship with visual pop-culture media.

Much of collective narrative practice has been in response to invitations from communities experiencing trauma and hardship (Denborough, 2008, 2018). In contrast, the EYL practice map emerged from a different community context: not a context of hardship or trauma that required response, but out of a shared interest in media and curiosity about what media metaphors might make possible. This distinct originating context positions EYL differently in the lineage of collective narrative practice than many other "... of life" narrative projects. The stakes appeared lower in the initial creation of this metaphoric practice; we were not, in that moment, experiencing or responding to a specific context of exceptional hardship or trauma. We found that the practice allowed us to engage with a metaphor that richly resonated for our group of media-loving people, and that this resonance and the careful construction of the practice map to align with narrative values of resisting individualism (Freedman & Combs, 1996), seeking the "riverbank" (Kaseke, 2010), attending to issues of gender, culture and justice (Dulwich Centre, 2020), storytelling rights (Denborough, 2014), and re-authoring (M. White, 2007), offered significant and sometimes unexpected effects.

Method

The EYL map of practice invites the storyteller to think about how they would want to film a story from their life as though it were a TV episode or film, with a focus on the making of the episode and imagining who they would choose to involve in the process and how they would choose to distribute it in the world. Vermeire (2017, p. 51) wrote that "opportunities to step into unfamiliar positions, such as that of researcher, can ... provide fresh vantage points and insights". We wondered what it would be like to approach a story, whether a difficult or traumatic memory or a precious or preferred memory, in the subjunctive realm, from a novel position of agency (Vermeire, 2017), while surrounded by a chosen support team engaged in a collective effort (Reynolds, 2011). We were curious about the effects of bringing a carefully chosen team into the room before approaching the events of a story as a form of scaffolding safety (M. White, 2007) and enhancing the "reflexive consciousness" of their community (Myerhoff, 1992, p. 232). We were also interested in the effects of focusing more on imagining story craft itself in the subjunctive/imaginal realm and less on retelling the details of a story. Hedtke and Winslade (2017) described the subjunctive as:

the voice of the “as if”. It enables a speaker to make speculative references without committing to the actuality of a situation. It is thus the grammatical mood of the virtual and it opens up a space between the past and the present. (Hedtke & Winslade, 2017, p. 80)

Imagining film techniques such as computer-generated imagery, special effects and film editing opens up even more virtual territory in the possible retelling of a story.

The subjunctive posture of EYL aligns it with response-based practice (Squire, 2016; Wade, 1997); it connects the storyteller to a skilful or preferred (re)imagining of an experience. The storyteller experiences the process of connecting with their own skilfulness, knowledges and preferences around the story, which allows them to experience themselves acting on the story rather than feeling like the story is exerting its will over their memory or experience. We found this particularly effective when telling stories that included the intrusion of shame.

The map invites storytellers to imagine being on the set of this production and asks them to consider how they might create a preferred experience for themselves and others involved. The set is a creative space where anything can happen. The map also invites storytellers to exercise agency and boundaries around the telling of their episode by deciding who does and does not get to be involved with this production, an invitation that aligns with Lorraine Hedtke’s “membership mapping” processes (2020). Additionally, the map invites participants to imagine how the episode, once produced, might circulate in the world, its intended audience, hoped-for audience response and hoped-for effects, providing additional opportunities for storytellers to reflect on and speak about who and what matters to them.

An Episode of Your Life narrative practice map

Choose an episode

- What’s the story you want to work with? Feel free to be vague here – just the overall event.
- Would this story follow the plot points of the memory or diverge in some way?
- What themes would you want to emphasise in this telling of the story?
- What would you hope this story would stand for?

Gathering your artistic collaborators

- Who would you want in the writers’ room?
 - What about their perspective, lived experience, values and/or understanding of you might help you tell the story?
- Who would be behind the camera?
 - What would you want them to focus on or not focus on?
 - Is a particular genre or style suited to the story (comedy, soap opera, sitcom, cartoon, sci-fi, etc.)?
- Who would design sets and costumes?
 - Are there specific costuming decisions – wardrobe/hair/makeup – that would help convey what you want this story to stand for?
 - What would the costuming decisions make more possible in the story or for the characters?
- Anything is possible in the telling of this episode. Would special effects or time travel play any role in the story?
 - Would there be any supernatural or metaphysical elements in the way the story was told? If so, why?
 - Would there be flashbacks/flashforwards to other moments layered into the story that might be important?
 - Would there be any easter eggs in this episode? (An “easter egg” is a subtle piece of content that viewers might notice if they are familiar with the material, but that other viewers might miss.)
- How would you cast the episode?
 - If you are in the scene, who would play you? If not yourself, why this person?
 - Are there new characters who would need to be introduced to tell this story right?
 - Who would you cast in this episode? The people who lived it? Other trusted friends or loved ones? Especially skilled actors? What would these people get right about portraying the story?
 - Would your set include any of the following: an intimacy coordinator, therapists for the cast and crew to consult with, therapy animals, a ball pit, massage therapists, Elders, tarot readers, nap pods, particular snacks, a rehearsal period, team building, child care or something else?

- How might these contribute to the story telling environment?
- Is there anyone you would want on set or available to consult who has not been assigned a role yet (script supervisor, props manager, producer, etc.)? What effect would their involvement have?
- Is there anyone who would not get to be on set or have a consulting role in this production even if they wanted to?

Post-production

- Who would you choose to edit the episode?
- Would voiceover or narration add something important? Whose voice(s) would you choose?
- Who would you choose to score the film or create the soundtrack?
 - Why this/these particular artist/s?
 - Why these particular songs or pieces?
- Would this episode work best as a stand-alone film or part of a series? Why?
 - Are there questions or cliffhangers the audience would be left pondering?

Imagining your audience

- What platform(s) would this episode come out on (theatres, cable, streaming, public library, YouTube)? Why?
- Who would you hope would see this episode?
 - What would matter about these folks seeing the episode?
 - How do you hope they might be affected by seeing it?
 - Is there anyone you would rather wasn't allowed to view this episode, even if they wanted to watch?
- Is there anyone you would want to watch this episode with?
 - What would they notice and appreciate about this story?
 - Are there particular snacks that are right for this screening?
- Whose recap/think piece/podcast about the episode would you be excited to read or be interviewed for?

- What would they notice and appreciate about this story and how it is told?
- Is there anything else you would want known about this production?
- If you included anyone you know personally in the crew, what might it mean to them to know that you wanted them involved?

Episode reflection

- Do you see the story in any way differently than you did before this exercise?
- What specifically would you want to remember about this telling of the story?

The interview process

This map offers a set of possibilities, not a manualised treatment. The role of the interviewer is to follow where the storyteller wants the story to go. As interviewers, we also relied on many narrative questions we were already familiar with to draw out the values, relationships and meanings reflected in the crafting of the episode. Rather than following the practice map as a strict script, we became curious about the specific words, phrases, metaphors and images that we heard, and we used these to elicit further rich description.

The practice map deliberately does not include direct questions about the story being described. This gives the storyteller the opportunity to be as indirect as they prefer, while still making choices about how the story would be told and who would be part of the telling.

Hayward (2006) described scaffolded narrative questions as ones that “can provide a handhold or purchase on unfamiliar knowledges and a resting place from which, with other questions, further ascent is both possible and exciting” (2006, p. 41–42). He further suggested that “It’s hard to even get a good view of problems until you have some other place to stand” and that a scaffolded map can offer “multiple vistas and vantage points for people to survey the territory and adjust their heading so it better fits a preferred track” (2006, p. 40–41). The filmmaking frame offers a move beyond the known and familiar (Vygotsky, 1986) by scaffolding questions that invite a different vantage point, and then opportunities to speak to what the person gives value to. White (2004) described the critical importance of double listening “for signs of what

the person has continued to give value to in life despite all that they have been through” and believed that “people take steps to try to protect and to preserve what they give value to” (p. 47).

We see this practice as a form of double listening in which the storyteller is invited to consider why they would make the artistic and collaborative choices they do in the retelling of the episode. This line of inquiry allows them to speak about values and preferred identities. We noticed that when the interviewer scaffolded examples of what was possible by referencing specific shows or films as examples or by scaffolding concepts from film production, storytellers were able to generate additional creative possibilities in their approach to their own episodes. There is risk in such scaffolding that the interviewer could become too centred, taking up an expert position by offering examples or references. We found it important to take the storyteller’s lead, and if they were not resonating with the metaphor, to stop. One participant found that although the episode metaphor didn’t resonate, it led them to thinking about telling their story in the form of a children’s book. The same sorts of questions – about who would write it, what the aesthetics of the book would be and the audience for the book – still elicited a rich telling of a preferred story. During the group conversation, we identified a few specific examples of visual elements in television shows that offer narrative possibilities, including the camera snap and photograph imagery in *Scandal* (Rhimes, 2012–2018) offering a way to highlight an important moment, and the record scratch freeze in *Saved by the bell* (Engel, 1989–1993) as an invitation to look at the discourses that are operating in the scene.

In our own experience as storytellers, we each took up different questions in the map and discarded others depending on what fit with our interests and stories. We took varied approaches to filling the roles in the episode team; some of us filled the team with close loved ones; some with famous artists; others with concepts, values and skills. We worked with positive stories, painful stories and traumatic stories. We found the practice impactful with more distant stories of at least a year in the past. We also worked meaningfully with stories as far back as 30 or more years.

Effects

Peopling the room

For some storytellers, the creation of the “creative team” meant that they were invited to richly “people the room” (Reynolds, 2011). As one storyteller said, “It just felt like there was so much agency in talking about it this way. Instead of [feeling] powerless, it feels like standing in collective power”.

By imagining their story told by a group of largely queer and trans collaborators, one storyteller experienced themselves as more connected to that community:

I think it’s made me feel like part of a community in a more real way, which is really interesting, because sometimes I feel a little bit weird about the way that I relate to the construct of gender and what that means for other people who are not cisgender but who relate to it wildly differently than me.

Another storyteller populated not just the crew, but the scene itself, which took place in a swimming pool, with supporters:

I’m picturing ... having previous selves and people show up beside the pool while I was doing this. So, you know, my 18-year-old self learning how to be around dogs. I think that would be kind of cool to see that self show up ... And then also, for a while ... I would take my niece once a week for an adventure, and we went swimming one time, and usually when we would go swimming, we would just stay in the shallow end. [My niece] was only like, four or five at this time ... So we went to go and get [my niece] a lifejacket so she could do the slide. And I was like, I was crying, I could barely breathe, I was so afraid. And [my niece], who was just so little, took my hand and she was like, “It’s okay, auntie, I’ll be here with you”. So I would have her also show up beside the pool ... I think it would highlight that I had friends with me in the pool.

Effects of visual metaphor

By asking about what the storyteller would want the camera to focus on or not focus on, we were able to speak about “the gaze” in terms of power relations and social dynamics (Foucault, 1977). This allowed for rich inquiry into people’s experiences of looking and being looked at, and their preferred experiences

of visibility. This connects the practice map to existing narrative practices of “turning the spotlight back on the normalising gaze” (Hutton, 2008), and also to ideas of feminism and visual culture (Jones, 2010b). A feminist and anti-oppressive lens is not only useful but necessary here, since in asking the storyteller to imagine the preferred visual framing of the story, we are inevitably asking about the cultural experience of visibility. Amelia Jones (2010a) noted that:

Feminism, in most of its forms, proposes or demands a political and/or ethical stance towards cultural experience ... Both modes of thinking – feminism and visual culture – are ... driven by political concern and focus primarily on cultural forms as informing subjective experience. (Jones, 2010a, pp. 1–2)

There are many ways to use visual culture and the visual metaphor to make space for previously unseen stories (Mulraney, 2024; Oliver-Powell, 2023), ways in which “visual documents break down oppressive tropes” (Hillman, 2023). In imagining how a story can be told, the storyteller is invited to engage, to the extent that they choose, with these questions of power and visibility. We found that some storytellers did want to engage in this way, making choices that directly addressed power relations and the gaze. For example, one storyteller commented, “What I would not want is any kind of sexualising gaze”.

In addition to the invitation to explore power relations in the gaze of the camera and audience, the visual metaphor invites rich description of preferred aesthetics. In these conversations about aesthetics, we saw an opening to conversations about, as one group participant put it, “What invites us into the outside ... What makes us see that the neutral is not neutral? What are the moments where it’s revealed that Oz¹ is not as magical as he thought he was?” The opportunity to make the operations of power and discourse visible was a significant effect of this way of speaking.

The invitation to think about aesthetics elicited many forms of meaning-making and allowed storytellers to move beyond verbal expression as the primary storytelling method. One storyteller shared:

There’s a filmmaking technique that comes to my mind, which is sort of like ... slide down columns of seeing many faces. And I think what I would want to capture is the emotional resonance of people’s experience. So I would want there to be a lot of looking at faces. Not a lot of talking, but

a lot of acting through, like, micro expression. And then maybe intercut with flashbacks about different people that help you understand maybe why a moment is so resonant for them.

Aesthetics also allow storytellers to make visible the specific timeframe of their stories. This honouring and dignifying of specific moments in time is linked to narrative practices of honouring history, such as in Cheryl White’s (2016) *Memory book for the field of narrative practice*. The imagined films have the potential to define and tell the story of highly visual memories of episodes in time. One storyteller shared:

Production design would just be the people from [the TV show] *PEN15* [Erskine, 2019–2021], because ... the ways that high-school kids try to experiment with expression would be treated with appreciation. I think at this point, one of the three friends was wearing like, utilikilts and punk t-shirts, and I would want that to be rendered so lovingly. And, oh God, I was going through some fashion choices at that point. But just the awkwardness of what we wore, or things that maybe were important to people that you wouldn’t know.

Another storyteller spoke to the importance of colour, which helped them articulate the feeling and complexity they wanted the episode to hold:

I think I’d want colours. Like a vibrancy of colours ... blue feels like a colour that’s connected for me not only to sadness, but also to fear and a feeling of constriction, but it’s also tied to, like, calm and expansiveness. So it feels like blue, a lot of blue tones would hold all of that complexity.

When one storyteller was invited to reflect on how or whether they would want their fear represented in the episode, they commented:

I think I would want the visuals to be focused on the actions and the effects of the fear rather than making the fear manifest ... I wouldn’t want the me in this episode to be, you know, surrounded by a cloud. Maybe it would be there in an audible, like, a racing heartbeat or a sound of breathing, so that at moments where the fear is most intense it’s somehow present but not visual.

This line of inquiry facilitated not only the externalisation of the problem, but also significant agency in how the externalised problem would be represented. The problem story still exists in the episode, but the actions of the storyteller are brought forward in the visuals.

Relationship-focused responses

We noticed that questions that centred who the storytellers gathered around them to tell the story mattered in a number of ways. One storyteller noted that the effect of the group of collaborators they gathered to tell the story would mean that the plot of the story would have to change:

I think that the “right” way, that this version of the writers room [is] a kind of collaborative process of writing that scene with a lot of viewpoints and just a really rad group of people together writing that scene. I think it would have gone very differently.

They further realised that they wanted the group they were gathering to make decisions not only about who would be added to the team, but how the story would be told:

Perhaps that group of people would use their collective knowledge to identify the right [camera] person who was interested in telling that story. And sort of in some ways actually kind of giving [the writers’ room collective] the creative freedom to be the ones to determine what comes from it.

By centring their value of collective action, the storyteller noticed that the answers to many of the interviewer’s questions would be best determined by the collaborators. Few details of what the story would look like in the episode were decided in the interview, but the values and knowledge of the collective were thickened over many questions and responses. The storyteller described the effect of this way of conceptualising the story as strengthening their confidence in their values and ability to handle similar difficult situations in a congruent way in the future.

Allowing others to take a more central role was an outcome for multiple participants. One shared:

I think the challenge that I’m having is because of the wrestling that I’m doing with the effects of shame, some of which is quite old and it’s historical ... there’s an awful lot of “I don’t wanna take up space”. But I’m persisting ... I can see that the experience that I’m having now is a helpful thing ... This has me thinking to make an episode about being tucked under the path and shining the light up on other characters. A character whose job is to be supporting other characters and helping (more marginalised) stories to be given light.

Another storyteller said:

I think my mom would be really excited to see the costuming story, since the story we most often tell of us at that time is of the struggle between us. Telling this counter-story would be a big deal, I think. Maybe I will tell her after this.

Multiple participants noted a desire to share their experience of the story with those they identified as potential collaborators. Others reported a sense of healing in the relationship at the awareness they would want someone involved in telling the story, even if they might not choose to share that with the person presently.

Proliferation of what’s possible

One participant in the group conversation commented on working with a memory of experiencing violence:

I actually found myself not at all beholden to one choice in the way I was thinking about it. I actually felt so many choices available and to sit with like, I could do this, I could do this, I could have everyone else who is standing in this crowd of people where this happened, like, turn around and respond. I could choose that that entire crowd of people is people who love me. I could choose that that entire crowd of people is people who have been through this thing and understand it, and I kinda could just choose all of them or I could choose to say something. I could choose to elbow this person in the face. I could choose to, you know, go into a loving flashback about this person’s humanity. And just the proliferation of what’s possible on its own meant a lot to me.

The participant also shared:

This is a moment of feeling trapped and disempowered and like the only way through it is to subjugate yourself or to freeze ... I want a chance to say everything that I wanted to say, to have every different fantasy response to this, to have a collective of people respond to this.

Another storyteller shared:

[The questions] moved me from a position of [being] an object to which this all was happening and into a position of subject ... I could see what was possible, so it became about seeing other pathways, possibilities, things that were present in the scene and other pieces of context that had

impacted things. So the feeling of shittiness was dissolved and maybe replaced by a desire to feel accountable, which feels much more useful.

In one instance, a storyteller used multiple shots of the same moment to express multiple preferred responses to a situation when one was not enough. They used montage for multiple purposes such as showing “everything this agency could have done and never did”, and “the closing credits would have a montage of everything we did on purpose in how we told the story differently”. They also employed a Greek chorus:

It's gonna be, like, a two minute scene in five hours. But, like, a group of people who live outside of the gender binary who ... stop and have a conversation among themselves ... I think there is some sort of narrator or narrative function that comments on what's happening in the story ... I like the idea of having a chorus to comment and help the people who need to learn from this do the learning ... like, visibilise and render legible the power that is operating.

This process of speaking about the making of the story (rather than just a telling of events) allows the storyteller to *advance* the story or *change* the story in ways that they may have not previously imagined possible. The subjunctive framing of the exercise not only opens spaces around the memory where there may not have been any before, but it also creates a degree of emotional and reflective safety to explore the events within that increased space and gives voice to the preferred (safer/calmer/ bolder/more just/less secret/less isolating/more colourful/more dignified, etc.) version.

Another way to understand the “proliferation of what's possible” is to extend Freedman and Combs's (2008) “dot map” metaphor of narrative practice to include other dots on the map; experiences that may not have happened in real life but that have an effect on the experience of the story by offering new metaphors and visual images.

Safe riverbank position

Some storytellers shared stories of significant hardship or trauma; this metaphoric practice map allowed them to speak about hard stories without the requirement to speak directly and in the first person about their experiences. We discovered that thinking of our stories in this way shifted the angles from which

we saw them in our memories. For some of us, traumatic experiences became more distant, and we felt less powerless when the memory was held from the vantage point of a camera crane. From this “riverbank” position (Kaseke, 2010), cherished and present values became more visible.

One member of the group conversation commented:

I say this with the caveat [that] the memory I was approaching didn't feel dangerous to approach; it felt like one that I could think about safely. But it felt even safer approaching it in this way, because I felt so in control of what was going on, that there was no suffering in the way that I thought about it; it just was like, who would be with me? I think to me, the idea of approaching a painful story, once you have gathered in this community of co-conspirators, before you necessarily spend a lot of time thinking about the story, feels like scaffolding a lot of safety.

Time effects: Reconnecting with agency/ skills/solidarities

In my work with people who have been subject to multiple and recurrent trauma, one of the primary considerations is to restore that valued sense of who they are, that preferred sense of identity or personhood that in this presentation I will refer to as the “sense of myself”. There are a number of key aspects to this work. One key aspect involves discovering what it is that a person gives value to in life. (M. White, 2004, p. 46)

We noticed that revisiting past stories and strengthening a connection to a sense of agency helped storytellers to connect with feelings of possibility and solidarity in the present.

One participant noted that the interview:

invites so many opportunities to think about people and the roles that they can play. And actually, every person who is part of the story, there's resonance across [time] ... It's been almost 10 years since [this story]. I'm not close with many of these people anymore. I haven't talked about this in ages ... But still, telling this story gave me some hope and some feeling of connection to a sense of agency and community ... It was nice to remember that I actually do have a history of doing hard things ... It was nice to remember that this is not the first time I have felt crushed by my life, and I have often responded to that feeling by doing something.

Another participant shared:

One of the things I realised was these two stories of being assaulted and being harassed actually felt like they had to be one episode for me. And I genuinely don't know if they happened the same year of my life. Like, it's been too many years. But they just felt so entwined and the people who responded to them felt so entwined. So I actually wound up putting two stories together that didn't actually happen together, in a way that allowed me to make meaning and feel agency and see my own responding through a story that had no limits, which was really cool.

We discovered that this effect – reconnecting to experiences of agency and a sense of connection to values and long-held precious hopes – was present even when the storyteller was telling a precious or preferred story. One participant, reflecting on the experience, shared:

It was really emotional in a way that I didn't quite anticipate, because I intentionally did not think about any of the hard stories in my life. So many of these questions brought me to very tender memories of that experience with my mom, of watching *Doctor Who* [BBC, 1963–1989] with my dad, of playing dress-up with my sister in the basement. I found that this brought me to early memories in a way that I didn't quite anticipate, and in a really emotional way, and it felt like it made those stories feel accessible and worth telling, like that there would be some value in sitting with some of those stories that feel very small and that are not— like there are trauma stories that often feel like they're the more relevant story. And I guess what came for me was all of these other stories, that are not trauma stories, felt like there'd be some value in [asking], how would I light and score and direct hundreds of sessions of dress-up with my sister? What would that look like, to tell that story in a way that is honouring and then that connects to my values? That was— yeah, it felt emotional in an unexpected way.

Choosing the right audience

Sometimes, keeping people away is an act of agency or an expression of values; other times, letting them participate or see in controlled ways is. Choosing not to allow people to collaborate but still wanting them to witness the final film was another choice. These are all practices that enable a “shifting

in proximity” (Hedtke, 2020) or a “revision of membership” in the club of life (M. White, 1997), and allow different identities to develop, as this transcript section demonstrates.

Q: Is there anyone who would not get to be on set, or to have a consulting role in this story, even if they wanted to?

A: Most people? Definitely the people from my old job. [Laughs] Although again, if people were, like, coming in good faith and wanting to learn from this thing that is happening, there would be a group of cisgender people who would take responsibility for anybody who wanted to come and watch the way this was being filmed, and deal with any bullshit or nonsense, and ask questions, and hold people to a standard of accountability about their questions and their interests and their feelings. And they would be able to watch, like, from you know, like, the mezzanine maybe.

Q: Who would you hope would see it?

A: Everybody. Um, a lot of cisgender people [Laughs], and a lot of not cisgender people. Like, trans and nonbinary, agender people, but for different purposes ... I would want the people that it is *to* to see it, and I want the people that it is *for* to see it.

Q: Is there anyone that you'd rather skip this thing?

A: No.

The storyteller later shared:

In terms of audience, I think if anything it may be an expression of faith in my audience ... I think it's an expression of faith in cis people to learn. Like there's a hopefulness, [but] there's an assuming the best of them, that like, if they had access to something that could help them, you know, do better, they might try to? ... Like, I think this telling of the story sees the best in people and their ability to change.

Experiencing our stories as worthy of telling

This approach to storytelling had dignifying effects on many storytellers. One storyteller commented that the interview enabled them to engage with their story “as a story to tell, or a story worth telling and worth rewriting”. They further reflected:

There was a part of me towards the end of the interview that was like, oh, maybe [interviewer] should just share this video with people. Like, that would be cool, this conversation is really cool and really interesting, and I'm really interested in this conversation, maybe it'll be important for them to just be able to share it and this process and maybe this process can be meaningful.

Another storyteller experienced a dignifying effect on many of their stories:

I think it'd be kind of cool to have a series ... It'd be cool to have the story of my fear of animals, and this one, and like, leaving my marriage and ... there actually have been quite a few of these that I think it'd be fun to tell.

One of us has also since imagined turning their story into a zine in hope that this telling of their story might help others face challenging problems.

Rich engagement with privilege and representation: Practices that can sustain solidarity

The flexibility of the practice map in inviting many different collaborative roles in the team made space for storytellers to richly engage with ideas of privilege and representation. Many of the practice map categories ask some variation on the question, "Who would you want to be alongside you in telling this story, if anyone?" This is asked about the writing, the set design and visual effects, the costuming and the direction – there are many opportunities to bring in other voices.

We found that values and awareness of social location and privilege informed how some storytellers situated themselves in the storytelling collective. Particularly because this practice map emerged from a context of curiosity rather than responding to trauma, some storytellers had questions about whether their stories were needed in the world, especially when they occupied an identity group whose stories are often privileged. These moments of hesitation opened up rich possibilities for using the storytelling process as a practice of decentring themselves in the telling of their own stories.

Some storytellers found that occupying a supporting role in the crew or entrusting decision-making to imagined collaborators whose perspectives they valued felt like an important expression of accountability and made it more possible for the storytellers to engage

with the map of practice and to experience their storytelling process as being aligned with their values.

One storyteller took up the metaphor of "lighting" in a significant way, identifying their own preferred role as "shining a light" on the stories of other, more marginalised, community members. Telling the story in this way, with this focus on supporting other stories to be told, to locate themselves in this supportive role, sustained their connection to practices of allyship. The storyteller reflected:

For a light to do its job, of, well, lighting, it needs to show up: to turn on and to shine. [This shining allows the light-holder to attend] to the justice-doing of space making and holding, stepping out to lean in – ears first, eyes fully open, mouth closed. Centring the important job of decentredness. Maybe that's the thing about allyship, all the fumbling and worrying of "getting it wrong" wastes valuable energy that could just be turned to the cause at hand ... I think of light like a face turned towards, creating not only visibility, but a witnessing gaze.

Another storyteller wanted many voices in the writers' room:

... people who have a really positive lens for both feminist work and intersectional feminist work and anti-racism, and probably some community members, whether that's locally or nationally, to be able to be part of that conversation and to be part of writing that scene.

This allowed them to imagine how the story might have gone differently if there had been more collaboration from a wider range of justice-informed voices. They said that, "The wrong director would be focusing on me" and that they would rather the director "be paying attention to how power was experienced in the room". They reflected:

I think a lot of people, me included, spend a lot of time (often more than desired) thinking about the ways we wish something could have gone differently, or what we wish we could have done, or what we would do now (with hindsight) in a given situation. Having the opportunity to utilise a conversation like this to not only make space for these considerations, but to also bring in the imaginal aspects of recruiting additional voices, connecting with others whose opinions and perspectives really matter, and to utilise new knowledge and subsequent learnings

to participate in changing the outcome also allowed me to feel less powerless around the situation that happened. It also allowed me to feel more competent and skilful (and trusting of that skill set) as a result. For example, it was very comforting and edifying for me to recognise through the process of this conversation that even though I still might not have a great deal of trust in my own skills around how best to have navigated the difficult situation I was in, or how I could have most meaningfully participated in changing the outcome exactly, I did feel that I could trust my ability to identify the right people to entrust this story with.

Conclusion

The Episode of Your Life map of practice grew out of a context of practitioner peer conversations and curiosity about the effects of media in narrative conversations. We found the EYL conversations richly supportive of double-story development, and in the years between those first conversations and the writing of this paper, we have found that the effects of these conversations have lingered with us. We would love to hear from other practitioners who take this practice map out into the world to learn more about the effects of this way of speaking about episodic stories.

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Note

¹ This is a reference to how the wizard from *The Wizard of Oz* (LeRoy, 1939) presents himself as magical and powerful ruler of the land of Oz, but turns out to be another non-magical person from Kansas, USA, who found his way to the magical realm, just like the protagonist Dorothy. This has become a metaphor for when something is believed to have more power or magic than it really has.

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The Rainbow of Life:

*A collective narrative practice with young LGBTQIA+ people
with a health condition*

by James McParland and Jaymie Huckridge



James McParland is a clinical psychologist at University College London Hospital, working with people living with chronic health conditions and in a paediatric palliative care team. His family roots are Irish, which brings with it a rich appreciation of stories, music and community. He is interested in ways anti-oppressive practices and social justice can be foregrounded in professional healthcare contexts. James's solidarity team includes: the narrative practitioners who have inspired him, including colleagues past and present; his family of origin, chosen family and wider LGBTQIA+ community; and the young people involved with the Rainbow Project.
drjamesmcparland@gmail.com

 ORCID ID: <https://orcid.org/00000-0003-1318-0461>

Jaymie Huckridge is a clinical psychologist working with young people with chronic health conditions at University College London Hospital. He also works at a service called TransPlus at 56 Dean Street with trans and gender-expansive people. Before qualifying as a psychologist, Jaymie's work was in amplifying the voices of people using mental health services, supporting them to influence and shape services. Since qualifying, he has continued to be passionate about centring the voices of people in their own health care and empowering them to influence change. Important commitments to Jaymie are being creative and connecting with stories of hope, joy and community.
jaymie.huckridge4@nhs.net



 ORCID ID: <https://orcid.org/0000-0003-2480-4647>

The authors can be contacted via james.mcparland@nhs.net

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Author pronouns: James McParland he/him; Jaymie Huckridge he/him

Abstract

This article describes the use of narrative practices for LGBTQIA+ young people with a health condition. It presents a collective narrative practice: the Rainbow of Life. This adapts the Tree of Life metaphor to invite rich story development opportunities when working with LGBTQIA+ people. It involves exploring their commitments, special moments and those who stand alongside them in solidarity, and creatively mapping these on to a rainbow image. The authors outline Rainbow of Life events they have organised, including collective practices in which young people shared their wisdom for responding to oppressive storm clouds that darken the sky and dim their rainbow's shine, as well as witnessing and honouring each other's rainbows.

Key words: *LGBTQIA+; queer; health; identity; youth; young people; community development; collective narrative practice*

Introductions

When we bring together a group of lesbian, gay, bisexual, transgender, queer, intersex and asexual (LGBTQIA+)¹ young people, we seek to create a space that is safe and celebratory, particularly if we have invited non-queer allies into the space. One way we have found to do this is to ask young people and professionals alike to introduce themselves by sharing their *queer icon*. The queer icon could be any LGBTQIA+ person or character who inspires them or whom they appreciate. Over the course of many groups and teaching sessions, we have been moved as people have shared their admiration for queer celebrities, artists, activists, historical figures, colleagues and family members. This small act centres queer people who have impacted the world, honours the rich queer history that has shaped our lives, and lets young people know that this is a place where queerness is celebrated. For non-queer allies, we've also found that this invites them in to queer movements, histories and acts of resistance (Hammoud-Beckett, 2007). In this spirit, we would like to begin this article by introducing ourselves and sharing our own queer icons.

James (he/him)

I am a clinical psychologist working at University College London Hospital with young people and adults living with health conditions. Skin, the lead singer of the band Skunk Anansie, is my queer icon. An incredible singer, writer and performer, Skin is also a pioneering activist, courageously making space for herself and breaking new ground as a queer Black British artist in a space dominated by white male heterosexuality (Skin & O'Brien, 2020). She rocks!

Jaymie (he/him)

I am a clinical psychologist working with young people living with health conditions at University College London Hospital, and at a service called TransPlus at 56 Dean Street, a sexual health service in Soho, London. My queer icon is television writer Russell T Davies, a fellow Welsh queer. I admire his centring of LGBTQIA+ stories that are unapologetic and honest, and his ability to speak to power.

Before you read on, to approach this paper with a spirit of appreciation for the queer community, we invite you to bring to mind a queer icon – an LGBTQIA+ person whom you admire.

Context

In October 2019 we launched a project (Huckridge et al., 2021) to improve how inclusive and welcoming the paediatric division of our inner-city hospital was for LGBTQIA+ young people and their family members, and also for LGBTQIA+ staff. This was in response to an increasingly bleak picture of how health services have failed to adequately meet the needs of such individuals: “with almost every measure we look at, LGBTQIA+ communities fare worse than others ... we need to increase our efforts to address these health inequalities” (NHS England, 2023).

When setting up this “rainbow project”, we connected with the position that young people have the right to be involved in service development; that improvement of services requires their involvement; and that there are benefits arising from participation, for both the young people themselves and for society (Head, 2011). As such, we recruited a youth adviser, Asher, to help us shape, deliver and evaluate all aspects of the work (described in Huckridge et al., 2021). As we developed the program with our youth adviser, we reflected on the challenges of navigating life at the intersection of gender identity, sexuality and a long-term health condition.

Building peer connection

A wish for peer connection has been frequently described by LGBTQIA+ young people (Eisenberg et al., 2018; Wells et al., 2013), and interventions such as gender and sexuality alliances, which are safe spaces for LGBTQIA+ youth to connect, have been shown to be promising (Madireddy & Madireddy, 2022). However, finding and accessing peer support may be more complex for LGBTQIA+ young people with long-term health conditions who can experience stigma in relation to their health condition (Brazeau et al., 2018; Gamwell et al., 2018); be disproportionately affected in terms of prevention, treatment and survivorship of illness (Quinn et al., 2015); or feel the need to “prove” themselves as a “competent and sexual individual who identifies as [LGBTQIA+]” (Toft et al., 2019). Many of the young people who have joined our groups have spoken of this ableism, and disability issues are well evidenced to disproportionately affect queer people, with calls for holding this intersection of identities and needs closely when working within LGBTQIA+ communities and movements (Rodríguez-

Roldán, 2020). This is in addition to navigating other diverse and intersecting aspects of identity that lead to structural barriers, such as experiences of racism and transphobia (including within the LGBTQIA+ community).

Knowing there may be an appetite for a space that welcomed LGBTQIA+ youth managing this intersection of multiple identities, we launched our quarterly online rainbow group in April 2021. The group has grown into a community of around 12 young people who meet to connect, share their experiences and help shape the program further.

We heard that attendees were keen to meet for longer than these groups enabled (2.5 hours every three months). We also saw the potential for building peer connection and community through a more substantial event where young people would have space to exchange wisdom and skills for surviving in a world that is heteronormative, cisnormative, ableist, and at times openly dangerous and hostile to their identities. These aspirations sparked an idea for the next component of our rainbow program. Our service has used collective narrative practices with young people with a range of health conditions to help them tell their stories in ways that make them stronger, including using the Tree of Life with young people with type 1 diabetes (Casdagli et al., 2017) and using Beads of Life with young people with cancer (Portnoy et al., 2016). This paper describes a new collective narrative practice called the Rainbow of Life.

What is collective narrative practice?

Jordan (2020) suggested that with its focus on deconstructing and restorying oppressive social narratives, narrative therapy may be a promising intervention for queer youth and their families. Additionally, having a health condition during youth, when the individual is defining and making sense of identity stories, can disconnect young people from important parts of their lives (Casdagli et al., 2017). A narrative approach recognises this disconnection, suggesting that individual's stories become "thinly" described (White, 1997) when they are constructed and maintained by narrow historical and cultural understandings and descriptions of situations (Harper & Spellman, 2006). The lives of young people with long-term health conditions can become dominated by medical discourse (Edwards, 2010),

and young people themselves have expressed to us a wish to be recognised as "not their illnesses". Alternatively, more optimistic and sustaining stories of accomplishment, ambition and resilience can be privileged (Ferguson & Walker, 2014). Kaseke (2010) has suggested that in therapy we often meet people when they are stuck in a "dangerous river full of hazards", and that therapy should support them to reach the riverbank. Reconnecting people with more hopeful and helpful stories (White & Epston, 1990) might help them to reach a safer riverbank position from which to turn towards the challenges. Narrative practice has also been used to offer rich descriptions of preferred storylines for queer people at the intersection of multiple identities (Crenshaw, 2017), for example in response to racism, sexism, heterosexual dominance and Islamophobia (Hammoud-Beckett, 2022), and queer people with a learning disability (Elderton et al., 2014).

Collective narrative practice builds on the narrative therapy approach to respond to groups and communities who have experienced significant social suffering (Denborough, 2012). Perhaps the most well-known collective narrative practice is the Tree of Life (Ncube, 2006), which uses the metaphor of a tree to connect people with different parts of their lives, represented by parts of a tree, and to have these witnessed and "thickened" by others in the collective. The approach has inspired practices such as Team of Life (Denborough, 2012), Kite of Life (Denborough, 2010), Recipes of Life (Wood, 2012) and the aforementioned Beads of Life (Portnoy et al., 2016). Denborough (2018, p. 58) described the Tree of Life as a "departure point" for practitioners "to create their own distinct methodologies", and encouraged practitioners to "notice some aspect of treasured local folk culture in your own context, craft this into metaphor, infuse it with narrative practice principles, and in so doing create your own form of practice" (Denborough, 2018, p. 69).

The Rainbow of Life

Encouraged by Denborough's words, our "metaphoric methodology" was built around the concept of a rainbow, another natural symbol that could be divided into different parts (stripes), and which is also colourful and hopeful. For many queer people, the pride rainbow is a recognised symbol of inclusion and acceptance; visible pride flags operate as an important safety signal that LGBTQIA+ identities are welcome in that particular

context (McParland & Camic, 2016). The rainbow flag was created in the 1970s and originally comprised eight stripes (Baker, 2019). The six-stripe version has become an international symbol for the LGBTQIA+ community, and inspired the creation of further flags for more specific identities (such as the transgender flag). It evolved through the efforts of designers and activists to increase the visibility of the most marginalised minority identities within the community (Victoria and Albert Museum, 2020). (See for example the updated progress pride flag: Quasar, 2018 and the intersex-inclusive flag: Vecchietti, 2021.)

The idea for a Rainbow of Life also came from our young people's rainbow group, in which we had constructed a group "pride flag" by inviting young people to choose preferred colours and create a flag screenshot. We wanted to reclaim the idea of a pride rainbow. In the United Kingdom, rainbow images were co-opted during the COVID-19 pandemic as a way of thanking key workers, and they became a symbol of the National Health Service (Conway, 2020). Additionally, in a context where oppressive societal discourse around trans lives includes organisations and individuals who purport to represent the views of lesbian, gay and bisexual people (McLean, 2021), we were keen to create an inclusive space, responding to young people's requests to build connections with and show solidarity to the most marginalised young people across the LGBTQIA+ spectrum. While just 3% of LGBTQIA+ people surveyed by YouGov excluded the "T" from their definition of the community (YouGov, 2023), biphobia and transphobia have been reported as occurring within the LGBTQIA+ community itself (Marine & Nicolazzo, 2014; Weiss, 2011); there was something significant about inviting a collective of gender and sexuality diverse young people together, to create a "solidarity team" (Reynolds, 2011).

The Rainbow of Life is not the first collective narrative practice developed for the LGBTQIA+ community. The Passport of Life is a collective narrative participatory project with gay and lesbian forced migrants of Black African and Asian backgrounds (Papadopoulos et al., 2023). The Theatre of Life uses the metaphor of different parts of a theatre (e.g. backstage, wings, music pit) to narrate life stories of transgender young people (Duncan Mills et al., 2018). We took inspiration from this work, including ideas about challenges that young people might experience when talking about their lives (discussed later in the paper), while using a metaphor that felt recognisable to all and honoured LGBTQIA+ history. We proposed

sharing an outline of a rainbow, printed on an A3 sheet of paper, with each stripe representing a different area of a young person's life story (Figure 1).

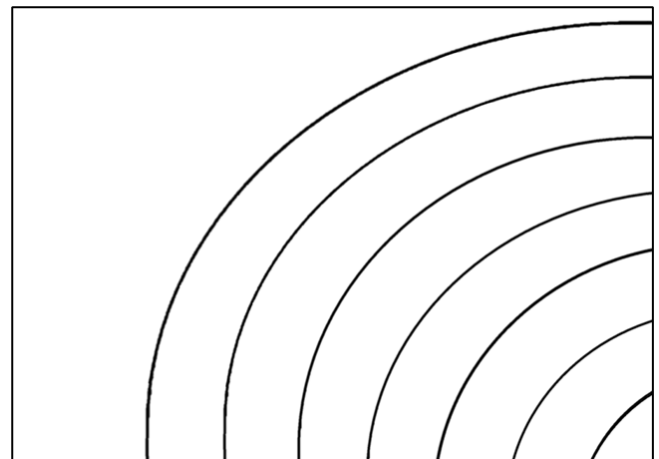


Figure 1. The blank Rainbow of Life template that was provided to participants

Each blank stripe could be decorated or filled with colour, allowing for creative customisation. This would enable our participants to represent multiple identity stories and embrace the spirit and tradition of taking inspiration from the various community flags that have been created, while defining and taking ownership of their own rainbow. The rainbow shape meant each stripe was a different size, which would allow the young people to choose how they structured their rainbow, allocating more space to the areas that were most important. They could also draw their own rainbow outline if preferred.

When creating the Rainbow of Life, we carefully reviewed the sections included in the Tree of Life practice – the roots, the ground, the trunk, the branches, the leaves, the fruits and the flowers – and considered how we might adapt them to be more accessible and relevant to queer young people. We shared the rainbow template and suggestions for areas of life that each stripe might represent with young people who came to one of our quarterly groups. The young people loved the idea, sharing thoughts on the different sections and immediately generating ideas for what they might like to include on their own Rainbow of Life. We share our meaning and rationale for each of the six stripes of the rainbow below.

Special moments

The Tree of Life includes "roots", inviting young people to include "where they come from", which could include their heritage, ancestry, cultural background

and traditions, or geographical roots (Ncube, 2006). Some LGBTQIA+ young people may have challenging histories with family-of-origin and community reactions to disclosure of their gender or sexuality, informed by oppressive sociocultural and/or religious views that might limit someone's ability to disclose this aspect of identity at all. However, we appreciate this might not be the only story of their experience, so wanted to invite stories of sustenance, acceptance and moments of appreciation connected to sociocultural, religious and/or spiritual aspects of identity. Additionally, Duncan Mills (2017) noted that reflecting on the past is potentially very complex for young transgender people (in a past, present, future linear way) and more creative invitations are needed, including the option to stay in the "here and now". As such, we broadened the invitation to young people to include any special moments on their rainbows, with "special" denoting experiences that are enjoyable, connected and cherished. We created a broad range of prompts for this, asking young people:

- What have been enjoyable times or moments that stay with you from either the close past or distant past? They could be memories of big events – what holidays have you been on? What special occasions have you marked? What gigs have you been to? Or they could be everyday moments – what TV shows do you enjoy? What video games do you play? How do you connect with the important people in your life?

Our group attendees reminded us that when working with young people who have chronic health conditions, it is important to acknowledge that even "small wins" can be special moments. Special moments may also be connected to cultural identity:

- Do you have any traditions that are important to you? Are there any special places you like to visit?

Solidarity team

For this stripe, we drew upon Reynolds's (2011) idea of a solidarity team, which is informed by social justice activism and connects with the Papadopoulos et al. (2023) Passport of Life, in which "allies" are those standing by you and "role models" are those who have influenced you. The prompts we used for this were:

- Who are the significant people who stand alongside you?
- Who is in your family of origin and family of choice?
- Who are your friends (physically in life or online)?

- What celebrities, creators/musicians/artists, book/TV/film/video game characters, or people from the LGBTQIA+ community or allies do you admire?
- Do you have any pets? Are there any other animals you have a connection with?

Our intention for this section was to decrease the sense of isolation experienced by young queer people through visually peopling their rainbow and honouring their network and community of support (Reynolds, 2011). We also encouraged young people to think beyond their immediate network towards social movements rather than individuals for solidarity; queer youth connect with and value queer history and the wider accomplishments of queer people being acknowledged and centred (Davis et al., 2009; 2010).

Commitments

Health challenges may have constrained opportunities to develop traditional, educational and/or achievement-based "abilities" or skills, and so we made our next stripe commitments. Rather than fixed, stable and internal parts of self-identity, commitments are intentional states of identity (White, 2004). Through discussion of commitments, young people can adopt dynamic and agentic positions in relation to preferred directions in life. We describe these as the things people give value to, such as their principles, aspirations, beliefs and qualities, as well as actions they take in relation to them. For example:

- Do you practice any skills (e.g. drawing, playing an instrument)?
- Do you show any acts of care and kindness (e.g. being a reliable friend, responsibility for a pet)?
- What do you prioritise in life?
- What would you like to give more priority to?

Images

As symbols such as community flags, organisational logos and visual signifiers hold identity stories and meaning to LGBTQIA+ people (Wolowic et al., 2017), we provided space for young people to include images. Some of the prompts included:

- Are there any important flags or logos you would like to include on your rainbow?
- Any important political symbols or organisations?
- Would you include any symbols for a sports activity or team?

Words

The inclusion of words was inspired by the earlier quarterly rainbow group meetings in which attendees shared many recommendations for literature, films and music, and by Duncan Mills et al. (2018) who included music, songs or lyrics in the Theatre of Life's "music pit". Additionally, as narrative practitioners, we connect with the importance of words in constituting and reflecting preferred identity stories that afford people encouragement, sustenance, inspiration or possibility; we wanted space for such words to be documented. Prompts included asking attendees about words:

- Are there any phrases or sayings that stay with you?
- Any hashtags that you follow on social media?
- Do you have any mottos?
- Are there any lyrics, poems, books or quotes that you appreciate?

Hopes and dreams

As chronic health challenges can rob young people of future hopes and dreams, it is important to create

a gentle and non-pressurising context for them to be voiced and brought forth (Portnoy et al., 2016). In a similar spirit to how we approach the special moments, we encourage young people to think about the smaller goals that might be important to them: prompting them to think about hopes for the next few days, all the way into the far future. We also encourage people to consider global wishes as well as personal dreams, and to use their imagination as they step into preferred futures and "dream big" if they would like to. Prompts include:

- In the future, what do you hope for?
- What do you dream of doing in the future?
- What do you want to do when you are older?

Following the completion of each person's rainbow and an interview about it, the other participants are invited to share "witnessing stars" or "sparkling stars" as a way of witnessing and affirming preferred identity stories (White, 2000). We drew inspiration from Casdagli et al. (2021) who developed Tree of Life groups to include "fruits" given by others (this is discussed in detail in part 4). See Figure 2 for a Rainbow of Life prototype.



Figure 2. A labelled rainbow prototype

Inviting young people to join the Rainbow of Life

Our existing quarterly rainbow group supports teenagers and young adults up to the age of 25 who access medical care at our hospital. When planning the first Rainbow of Life day, we had run two of our young people's groups and started by inviting the young people who attend our quarterly group. They also helped us to think about how we might open the group to other young people. We knew from research that visibility of queerness, including increased visibility of LGBTQIA+ adults and allies, is an important enabler of LGBTQIA+ young people accessing services (Davis et al., 2009; 2010; Eisenberg et al., 2018; Wells et al., 2013). As such, we let young people know that the group is run by staff who are members of the LGBTQIA+ community or allies, and also use visual cues such as rainbow flags, which have also been shown to be important safety signals for young people (Paceley et al., 2019). In our context, staff in the hospital wear NHS rainbow badges and promotional group posters are displayed (Huckridge et al., 2021). Our group members advised us to share the posters both in public places and in areas that can be seen and processed discreetly by young people, including hospital toilets. We introduce ourselves by sharing our pronouns when we make contact with prospective new attendees, which participants have shared is an important safety signal for them. Holding in mind that the young people might not be "out" to all the medical professionals or people in their lives, we assure them that on their patient record, the group will only be recorded as them having attended a "young people's psychology group" (unless a safeguarding concern emerges, in which case confidentiality may need to be broken to prevent risk of harm).

While some young people expressed interest in meeting face-to-face, others let us know they would find it difficult to attend in-person due to distance or ill health. Also, LGBTQIA+ individuals suffered disproportionately during the COVID-19 pandemic, being unable to access supportive services, while potentially facing increased exposure to hostile or unsupportive households (Konnoth, 2021). We offered a hybrid blend of in-person and online access options to facilitate the most comfortable way to attend for all.

Running the Rainbow of Life

We are now going to outline our step-by-step approach to facilitating a Rainbow of Life collective narrative event over a day (around six hours including regular breaks).

Part 1: Structuring safety

We give great consideration to how young people might arrive at an NHS group run by a psychology team. The LGBTQIA+ community have reported witnessing discriminatory or negative remarks against LGBTQIA+ people by NHS health-care staff, being pressured to access services to question or change their sexual orientation when accessing health-care services, and not being "out" to health-care professionals or avoiding treatment for fear of discrimination (Stonewall, 2018). Trans youth have reported missing needed physical and mental health care and discomfort about discussing their health with medical professionals (Veale et al., 2015), as well as negative interactions with health-care providers due to a perceived lack of knowledge about trans health (Heard et al., 2018). It is burdensome when young people have to educate professionals. Navigating health services may be particularly challenging for queer people living at the intersection of multiple identities, such as those with particular religious beliefs (Pallotta-Chiarolli et al., 2022). As such, we begin our event with an emphasis on structuring safety for the young people attending.

- All participants, including facilitators, select songs by queer artists for a group playlist, writing their choices on a warm up board as they enter the space (or in the chat if joining online). As with our introduction to this article, we invite everyone to choose a queer icon or LGBTQIA+ person they've appreciated, and a colour representing how they feel joining or something they did recently that they're proud of. Our intention is to "warm the context" (Burnham, 2005) for the later activity of choosing different elements for rainbow stripes alongside staff voicing positive attitudes towards LGBTQIA+ people.
- We start with a name and correct pronoun round for all people present.
- Ground rules are established together. For example, we suggest that participants be permitted to share what they hear on the day outside the group, but for these stories to only be repeated in ways that preserve the anonymity of the person who has shared them.

- We invite people to attend to their bodies and health throughout the event, including taking movement and screen breaks when needed.
- We share our intentions for the day, including explicitly naming that our hope for the day is to centre queer culture, which we view as fun, involving a sense of belonging, and a celebration of queer lives and joy.

Part 2: Creating rainbows

We introduce the metaphor of the rainbow by encouraging attendees to bring to mind a clear blue sky with a rainbow across it. Then, we invite participants to think about where they have seen rainbows and if they could share any special moments or memories of rainbows (including the pride flag or other contexts), or cultural or spiritual connections with rainbows. We also invite and reflect on further symbolic meanings of rainbows including: hope; light after darkness and new beginnings; treasure, good luck or good fortune; and peace.

We then move from the collective discussion to the personal through explaining that we will be using the metaphor of a rainbow with the different stripes representing different parts of each attendee's identity. Although we show an example of a completed rainbow,

we acknowledge that rainbows are unique and there is no set way to complete one or colours that need to be used. We invite people to feel free and be creative. Also, we note that rainbows can be fleeting and created in a particular moment, among sunshine and rain, with varying appearance at different times in changing weather conditions; this day is a particular moment in time, and is about capturing your rainbow as it might look right now, with an awareness it might be different in the future.

Young people then create their rainbows through filling in the blank rainbow template (Figure 1), working through the stripes, writing, drawing and collaging. For online attendees, materials are sent in advance. This includes different coloured pencils, marker pens and the blank template. We also provide an "image book" from which young people can cut out images to stick to their rainbow as well as drawing them; it includes "queer icons" (celebrities, musicians, etc.), flags and LGBTQIA+ symbols.

Facilitators talk through each stripe using the prompt questions above. Young people can also create their rainbows through a digital drawing if this is more accessible. Figure 3 shows a completed Rainbow of Life, including the witnessing stars described in Part 4.



Figure 3. A completed Rainbow of Life including sparkling stars.

Part 3: Interviews

Following completion of the rainbows, we invite the young people to participate in interviews facilitated by a staff member about their rainbow and what is featured on their stripes. We emphasise a consent culture as part of our ethical positioning and people do not need to expand on anything if they'd prefer not to. Our intention is to thicken and weave between preferred identity stories, making them dynamic and relational; for example, when talking about their *commitments*, we ask about the actions the person has taken in line with them and who is appreciative. During the interviews, we use Logan's (2002) idea of "queer listening", which is characterised by bringing curiosity to the aspects of a young person's story that do not fit with dominant societal heteronormativity, with an intent to purposefully make space for the queer elements of young people's stories. For example, when sharing *special moments*, we show curiosity when a participant mentions queer literature or music or attending pride events and protests. When exploring *solidarity teams*, we give as much space, curiosity and appreciation to chosen families, fictional characters and public figures (including the significance of celebrities, activists, creators and health-care professionals) as families of origin. We weave between "stripes"; for example, asking about the commitments shared with solidarity team members. We also linger in fictional, online/gaming and fantasy worlds if shared, as these can be "landscapes of possibility" in which LGBTQIA+ people can be recognised and valued for identities that confer hostility in other contexts (Salja, 2022). When discussing *words* and *images*, we ask questions about personal meanings and the effects of holding on to them, exploring their place in preferred identity stories. When given permission by the interviewee, we connect to personal and global *hopes and dreams*, including individual plans for travel, education, employment or exploring gender expression and social or medical transition, as well as further liberation of queer people around the world. Our intention throughout is to affirm queer aspects alongside and within preferred identity stories.

Part 4: Witnessing stars

As young people listen to each other's interviews, they note the qualities and values that stand out, how the stories connect with their own lives and what they have learnt from listening. They then document and award these as *sparkling stars*. This witnessing acknowledges "transport" and gives the interviewee an experience of their story having affected someone else's life. This

impact on another's life enables people who experience powerlessness due to challenges (such as health or LGBTQIA+ stigma) to feel they've made a significant contribution (Denborough, 2012). Key words or phrases are written on star-shaped stickers and added to the sky above the interviewee's rainbow to demonstrate they are valued, seen and celebrated by their peers.

Part 5: Storms

Now that the young people have a "safe place to stand" (Ncube, 2006), we facilitate a space for the sharing of insider knowledges about surviving in a world that brings challenges in relation to their identities. To introduce this, we extend the rainbow metaphor to introduce the idea of dark storm clouds filling the sky, which can make it difficult to see the rainbows:

Dark storm clouds can fill the sky and make it difficult to see rainbows. Is it the rainbow's fault that storm clouds roll in and affect them?
That the dark clouds dim their brightness?
No!

This connects to the concept of externalising to discuss homophobia and other oppression faced by LGBTQIA+ people. Externalising has been encouraged to support queer people to position "their" problems as separate to them (Logan, 2002). It has also been used with parents of queer adolescents to help them to identify and acknowledge how homophobia has gained power in their lives and the effects of this (Saltzburg, 2007).

We ask attendees to consider the dark storm clouds that can roll into young people's lives generally, for young people with health conditions, and for LGBTQIA+ young people specifically. Examples of storms in the lives of young people might include: how queer lives are discussed in the media; homophobia, transphobia and other oppressive discourses; and how they might not feel welcome in spaces for youth facing challenges with their health due to being LGBTQIA+, while spaces for queer young people may not be accessible or understanding of health or physical needs.

Part 6: Responses to storms

Discourses of victimhood can contribute considerably to establishing long-term negative identity conclusions for young people. Focusing on responses to challenges can aid in conversations that contribute to rich second story development without being re-traumatising (Yuen, 2007). Narrative therapy recognises that people facing hardship or oppression will be responding to

try to address the effects of challenges, using whatever resource they have available to them. While these responses may not be widely acknowledged, or may be limited in their impact, they are significant, and identifying these responses, richly describing the skills and knowledge used, and tracing the history of these responses can strengthen them. Doing this collectively allows for a sense of solidarity to be created (Denborough et al., 2006). Informed by White's (1986) relative influence questioning, we first map the influence of the problem on the person (the effect), and then the influence of people on the problem (the response), and explore any "sparkling moments" – moments and actions that are inconsistent with the problem-saturated narrative. For us, thinking about what we can do to make the rainbow more visible is also connected with the idea of identity becoming more visible, especially in certain contexts (those that are "sunnier"). We think together about some of the responses that might exist to these storms, focusing on what young people, adults, professionals and communities can do to reduce the storms' impact (Denborough, 2018, p. 65). We make clear this is not about finding ways to "accept" oppression, but rather about finding support and ways through the stormy moments. To do this we reconnect with the metaphor:

Rainbows often appear through heavy rainfall and storms, when things feel at their most dark and challenging – they are sometimes dimmed, but re-emerge with strength and clarity. Then the sun comes out and rainbows reappear as the sky brightens. What lights up the rainbow?

Responses might include finding a community of understanding people, participating in events like Pride, reading and watching queer media content, and trying to take a stand by being your authentic self.

Part 7: Becoming rainbow advocates

To conclude, we reflect on the day and do further witnessing of the stories we have heard. We offer young people an inclusive pride flag badge to represent their completion of the process and membership of the community they have created together. We asked young people at our first Rainbow of Life event what they would like to be called having completed the day. They chose "rainbow advocates", and the awarding of this honorific alongside the pride badge in a short celebration ritual has been adopted into our events.

Rainbows on the horizon

Initial feedback about the Rainbow of Life day has been encouraging, with young people describing how they felt heard, respected and connected. They have shared how powerful it is to have their identities acknowledged, particularly in a medical context where queer identities can be pushed aside. We have run the group three times in the paediatric division, seeing more rainbows emerge through the storms, showers and sunshine of queer young people's lives and further building our community of rainbow advocates.

The second group was co-facilitated by a rainbow advocate in a similar way to how other collective narrative practice groups have developed peer-trainer roles, which allow participants to experience personal development and growth, "a level up" for identity as they take on a new role, and giving people the opportunity to notice a change in their relationship with self and others through adopting such a role, while further developing a community in which preferred identity stories can be lived and witnessed (Casdagli et al., 2021; Henly et al., 2022). Participation in a Rainbow of Life group is now part of our regular offerings to young people in paediatrics.

We have also seen rainbows appear in skies further afield: the Rainbow of Life has been run at an adult gender identity clinic (GIC) in London and is being set up to be run in a GIC further afield. It is also being adapted for LGBTQIA+ people with a learning disability. This demonstrates that the Rainbow of Life can be incorporated into work with LGBTQIA+ people facing challenges and storms in multiple contexts, not only in relation to health conditions.

We would encourage you to think about how it could be applied to your work. The colour and light from the Rainbow of Life have been cast more widely than just the participants who have come to a group. Our rainbow advocates have been invited to share their experiences of the group at the most senior level of the hospital's management, to influence systemic change.

Farewells

As we opened this paper with one of our group practices, we will close it by participating in one. When we reach the end of a meeting with young people, we often ask them to "check out" with us by

sharing how they are feeling or something they will hold on to from the space as a way of hearing about their experience and saying farewell. We often use a visual prompt for completing this; for example, choosing a colour. To close this paper, we would each like to choose a colour that allows us to capture something about our experience of participating in this project, and to say farewell.



James

I choose orange, which I associate with sunshine, warmth and optimism. Witnessing the community of solidarity created by young people attending our groups, as well as their commitments to social justice and change, inspires optimism for the future of LGBTQIA+ people.



Jaymie

I am drawn to turquoise, which originally represented magic on the pride flag. In my work with trans and gender-expansive people, I have been struck by how often the word magic is used to describe those moments when people feel they are able to fully express themselves and have meaningful and joyous connections with others while doing so. Every time we run the Rainbow of Life group, I feel this magic in the room, a shimmer among some of the darker storms in the world right now.

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Note

- ¹ The "+" stands for the diverse sexualities and gender identities that are not named in this acronym.

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The effort and intricacies of generating experience-near language

by David Newman



David Newman lives and works on the lands of the Gadigal people, also known as Sydney, Australia. He is a faculty member of Dulwich Centre and an honorary clinical fellow at The University of Melbourne's Department of Social Work. Through his independent therapy practice, Sydney Narrative Therapy, he meets with individuals, couples and families. He delights in this work and narrative practices have offered invigorating company. david@sydneynarrativetherapy.com.au

Abstract

In this paper I explore Clifford Geertz's distinction between experience-near and experience-distant language. In the process, I draw from mad studies and mental health service user epistemology, both written and generated through my work. I also draw on the work of the historian of emotion Tiffany Watt Smith. Three specific practices in relation to language use are proposed: how we can invigorate the agency or meaning-making in language use; how we can use language to assist people to become familiar with, not alienated from, their experience; and how we might name and question the values or obligations that get smuggled in with emotion talk. I also provide three exercises to explore these themes.

Key words: *experience-near; language; Clifford Geertz; narrative practice*

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Author pronouns: he/him

Narrative practice has drawn on the concept of “experience-near” language (White, 2007, p. 40) to decentre professional language and centre insider language. In using this term, Michael White and David Epston drew on the work of Clifford Geertz (1974):

An experience-near concept is, roughly, one that ... [someone] might ... naturally and effortlessly use to define what [they] see, feel, think, imagine, and so on ... An experience-distant concept is one that specialists of one sort or another... employ to forward their scientific, philosophical, or practical aims. (Geertz, 1974, p. 27)

The distinction between experience-near and experience-distant language (which also get described as “insider” as distinct from “expert” language) has been both intriguing and clarifying for me in my work. I would like to add two considerations to Geertz’s description. First, that experience-distant language is taken up by people other than specialists, including by individuals, families and communities themselves when describing their own experience, especially as psychiatric power swirls around lives and conversations. And second, I would argue that experience-near language is frequently not natural and effortless, especially as a result of psychiatric power and meaning-making processes. These two considerations in relation to Geertz’s concept of experience-near and experience-distant are broad brushstrokes, and one of my intentions with this paper is to paint in more detail.

This paper initially took shape from fairly unrelated reflections about language use in response to the mad studies reading I was doing, the service users I was speaking with and the workings of a psychiatric unit. It is my intention with this paper to include these (at times disparate) reflections around language use, even if they venture slightly away from the concepts of experience-near and experience-distant. My hope is that they add colour to the picture I am trying to paint, even if the brushstrokes are somewhat outside the main canvas. And if that is the case, hopefully the picture will have more detail to assist with our work.

I will start with a story.

Words for all

A week or two back, Patricia and I were having our third meeting. Patricia is in her late 60s and works as a mental health peer worker. When we first met, Patricia said she wished to speak with me about her work, but also about what she called paranoia, stress and “getting help for the crap that happened”. At one point during our conversation, I used the word “suspicion” to describe her experience. Patricia froze, then, after a moment of seemingly quiet disturbance said, “Why did you just say suspicion?”

I replied with a little uncertainty: “I am sorry if it isn’t a word you’d use. I guess I said suspicion as I have heard others use that word”.

She responded, “It’s a good word. It’s a healthier word”.

I was somewhat relieved but also curious about Patricia’s response to the use of one word rather than another. We had the following exchange:

David: It is a healthier word than which word?

Patricia: Than paranoia.

David: In what way?

Patricia: Well, paranoia is when you are labelled, meaning you are mentally unwell.

David: And suspicion is healthier as it is not a label and doesn’t mean you are mentally unwell?

Patricia: Yes.

David: Is there anything more to say about what is healthier with the word suspicion?

Patricia: Well, suspicion happens to a lot of people, not just some. It is a bigger word and the world becomes bigger.

David: Okay. And what’s it like imagining using a word that describes things that happen to lots of people, that makes the world bigger?

Patricia: [Speaking a little slowly, considering her answer] I think I would treat myself better. It is a word for everyone, not just a certain group. I’m part of a bigger group then, David.

David: Well, I am pleased to hear that using the word suspicion means you will be part of a bigger group, and that you will treat yourself better. For some reason I am thinking of a certain Elvis Presley song. I hope you don't mind [starts singing the chorus to "Suspicious minds" by Elvis Presley].

Patricia: [With a smile] Aaaahhh, yes. I like that song.

David: What do you imagine you will do with what we just spoke about?

Patricia: Hmm. I want to have a conversation at work about the difference between the words paranoia and suspicion. I'll see what the other workers think. I think if they used this word [suspicion], it could be better.

Patricia had that conversation with her colleagues and enjoyed where it got to, including a discussion about the language surrounding them all. I was struck by the powerful significance of just one word; how some words can be "words for all"¹ as Patricia elegantly distilled it, whereas some words label and are potential openings for what Erving Goffman (1963) described as "a spoiled identity". So much could be written about the effects of labelling or psychiatric language. I will paint in the picture a little more with just one account of psychiatric treatment, which I read in Michel Foucault's lecture, "The psychiatric cure" (1973/2003).

An apprenticeship in hierarchical language and everyday resistance

Foucault (1973/2003) described a man named M Dupre who was treated in a French asylum by the psychiatrist François Leuret from around 1838 to 1840. Part of the treatment involved what Foucault named as a requirement for Dupre to "reuse" language when the language he used was assessed as incorrect. Foucault described a particular focus of this treatment: "In a way that is quite typical, Dupre is not required to learn the names of the patients but rather those of the doctor, the doctor's students, and of the supervisors and nurses: the apprenticeship of naming will be an apprenticeship in hierarchy at the same time" (Foucault, 1973/2003, p. 150).

Although this particular treatment is from nearly 200 years ago, I appreciate this analysis as I think it shows the linking of language use with hierarchy and power relations in everyday ways that often go unnoticed or unquestioned. For instance, in the psychiatric unit where I worked, "handover meetings" are held every morning. During the meeting, each young person, in their absence, is "reviewed". The review begins by introducing the young person, invariably with the following phrase: "[Person's name], admitted *under* Dr [medical practitioner's name]". In this, a kind of apprenticeship in or solidifying of hierarchical language was enacted.

Yet even with this ritual, I am reminded of the metaphor of multi-storied history, or perhaps better put, multi-storied approaches within institutions. One morning I noticed a very interesting resistance to this hierarchical language. As we set off on the reviews for the "handover meeting", a nurse introduced the young people by saying, "[Person's name] *working with* Dr [medical practitioner's name]". I was so surprised by this resistance that I spoke with the nurse over lunch that day. She told me a little of the origins of her practice, including working outside of psychiatry in a women's refuge.

Language as the limits of our worlds and extending these limits

As I write this paper, thinking about language and about what I might include where, I have been drawn to Wittgenstein's (1922/2010, p. 74) description of writing: "The limits of my language mean the limits of my world". There are angles, analyses and directions that I cannot even imagine as a result of language I can't find, know or use. There are limits to this paper, and realising this can shape a useful modesty and more.

I want to acknowledge that, as a result of the limits of language, there are limits to what we can even imagine. But I also want to emphasise that language and description – or the absence of language and description – don't just limit but also shape. Or at least, the availability of language and description at a specific time and place is shaping of action. Ian Hacking (1995), a Canadian philosopher specialising in the philosophy of science, has discussed the work of another philosopher Elizabeth Anscombe and her assertion that action is action under a description.

Although there are different strands to his argument and his use of Anscombe's ideas that I won't detail, I was drawn to his assertion that when new descriptions become available, one lives in a "new world of opportunities". He wrote:

When new descriptions become available, when they come into circulation, or even when they become the sorts of things that it is all right to say, to think, then there are new things to choose to do. When new intentions become open to me, because new descriptions, new concepts, become available to me, I live in a new world of opportunities. (Hacking, 1995, p. 236)

The availability of these descriptions comes out of the particularities of the folk understandings and language of different cultural communities, so there is a specificity to the language use. Yet Hacking's idea that there are new things to choose to do when gifted with new descriptions reminds me of the importance of always expanding the linguistic repertoire, knowing there will always be some limits swirling around such a project.

The contested and political realm of language use in psychiatry

Language use is a contested realm in psychiatry and in psychological treatment more generally. A few years ago, I noticed this message from the publication *Deep Insight: Leaders in the international mental health consumer/survivor movement share their thinking*, published by Our Consumer Place, an Australian mental health resource centre run by people with lived experience of mental health struggles.

In this booklet we put many words (e.g. "mental illness") into inverted commas. People tend to use these words because they are commonly understood in the mental health field, but by putting them in inverted commas we are acknowledging that not everyone agrees with their use – these terms are contested. For example, the idea of "mental illness" is not something that all consumers identify with – many reject it, often with sophisticated intellectual, political or spiritual critiques of this concept. Others find the term profoundly useful. (2012, p. 5)

Since working more regularly in a psychiatric setting, I have seen this contestation manoeuvred around. I have become interested in considering the delicacy of language – in its history, including a history of contestation, and how some phrases can have such uncertainty surrounding them, such as those used in diagnostic language. I have also become interested in the profoundly political aspect of language: which words get used by whom, which words are available to whom, and what sorts of language use muddies meaning-making.

Language that muddies context as well as the response to context

I have heard on many occasions about how suicide is one of the biggest health challenges we face. I always react to the word "health" in this context. Using this word strips the experience of suicide of its context, of its politics, of its often-heartbreaking injustice. And of the ways that "hate kills", to use Vikki Reynolds's (2016) phrase.

But language can muddy more than just the context of experience. It can muddy the ways people respond to such context. When people are said to use "dysfunctional coping mechanisms", the action (mechanism) is deemed wrong, and we are all robbed of an opportunity to make sense of such action.

There is more that muddies the context of suffering and responses to suffering, such as norms and particular discourses, but language is key in enacting those discourses, and in turn, language is shaped by discourse.

Refusing the thievery of experience

Rachel Waddingham is an independent trainer specialising in innovative ways of supporting people who struggle with extreme states and has been a mental health service user. I thought I would include the following quote from her as Waddingham uses powerful language and the concept of theft to evoke what is at stake with language use.

Does it matter if we sometimes slip into the language of illness when we all agree that these experiences are meaningful, personal and have value? Yes. It does. The language of illness was the language used by the thief who first stole a person's experience and replaced it with

“schizophrenia”. Every time we use words from this language we inadvertently add our seal of approval to this thievery and make it that much harder for people to reclaim their experience as their own. (Waddingham, 2013)

I hear outrage in these words from Waddingham. She asserts that the language of illness can steal *experience*, not just (potentially experience-near) descriptions for experience. This amplifies for me that it is anything but neutral or harmless to impose the language of illness and has made me determined not to add a seal of approval to the theft of story and language.²

Privileging understanding and collaboration over risk assessment and textbook language

A year or so ago in the psychiatric unit where I was working, I consulted young people about what they hoped for from mental health workers and their own networks when they were experiencing die thoughts or way-out thoughts.³ In the first group I consulted, Brendan responded immediately and with great clarity, like he had been waiting to share his vision for mental health service response for some time. He said, “Don’t try to stop us; try to understand us. Then when you understand us, maybe together we can stop us”. Such a plea has stayed with me and shapes the work I do with those who are experiencing way-out thoughts.

Brendan’s words also helped illuminate the words below from Honor Eastley, a writer, blogger and “professional feeler of feelings”. She has written of complex and painful experiences of psychiatric hospital admissions. She also writes about the importance of understanding from those around her during these admissions:

Back in hospital all those years ago, I wanted to be medicalised. I wanted someone to name my pain and for it to be a thing that was real and written down in a text book somewhere. I wanted the answer.

But now I know it’s not that simple. Having someone explain your pain is not the same as having someone understand it. (Eastly, 2018)

Brendan’s and Honor Eastley’s words have invited me to hold close practices of understanding and collaboration over and above risk assessment or

textbook language. And I would argue that experience-near language is one of the most powerful ways to enact understanding and collaboration.

So far I have discussed some of the intricacies of experience-near language use, for which Patricia had a resonant description: “words for all”. I have also explored some broader considerations around language. These have included how some language, especially psychiatric language, runs the risk of muddying context, as well as the responses made to context, and risks stealing not just experience-near language, but experience itself. I have been drawn to and reminded in my work of Foucault’s description of language use within psychiatric power being an “apprenticeship in hierarchical language”, both for those at the receiving end of psychiatric treatment and those enacting psychiatric treatment. And I have discussed how experience-near language can be in the service of understanding and collaboration, which is often preferred by psychiatric service users.

There are now three themes I wish to explore in some detail to take this discussion further into our practice:

- acknowledging agency – language as a meaning-making achievement
- supporting the recognition of experience not alienation from experience
- questioning the values that get ‘smuggled in’ to emotion talk.

For me, these themes have brought clarity and further options for meaning-making, rather than muddying meaning-making; assisted in the reclamation of experience, rather than the stealing of experience; and built a stronger foundation for people to name the politics of what is at play with language use, especially emotion talk.

Agency – language as a meaning-making achievement

Language use and description can be seen as achievements. That is, the act of finding a word or phrase, the deliberation in that process, and the specificity of a word or phrase can be understood as actions that are linked to intention and purpose. I will discuss options for getting a rich sense of such intentions and purposes, and therefore amplifying the agency involved in the use of language.

I notice that when I ask people to name the often-inchoate preferred stories that might be shyly starting to show up in our conversations, they can find it difficult. I can think of some different ways to understand this. It could mean that the stories are only just starting to take some shape or are very thin and barely able to be named, especially if they have been in the shadows of a punishing or dominating problem story. Or it could mean that, in the context of power relations, people are trying to find language they imagine the practitioner appreciating – a name that might be adequately informed by psychiatric expert knowledge, for instance. Or it could mean that finding a name requires meaning-making, and as is the case when trying to make sense of things, it takes time and effort. It can also be shaped by particular intentions and values.

The following extract from a conversation with Julie illustrates the meaning-making in the act of naming experience and stories. When we were speaking about her experience of suicidal ideas, Julie's preferred language was "die thoughts" as opposed to "suicidal thoughts". I noticed this and asked her about it:

David: And you've deliberately not used the word "suicidal thoughts"? Is that a deliberate thing? Or not necessarily?

Julie: I don't know. But it seems like suicidal thoughts is like it's actively doing something, but "die thoughts" is like some influence— it's actually those kinds of things are not from yourself. It's from something else that influences you and forces you to take your own life

David: So it's almost like your life is being stolen by something that's not within you, that your life's been taken in a way, or trying to be taken at least. Therefore, you're less likely to feel wrong or responsible. Is that right?

Julie: Yes.

David: When using the word "die thoughts" which—

Julie: Yeah. Compared to suicidal thoughts.

David: "Suicidal thoughts" seems to centre it more on you, does it? Is that right?

Julie: And suicidal thoughts is a term that's used by those authorities, those doctors or psychologists and that's, I think that's so – I hate that.

David: Oh, that's another reason why you came up with the phrase "die thoughts"? Words or phrases that are not in the realm of the authorities? And die thoughts are not in the realm of the authorities? You said you hate that. Is it okay to say a little bit about why you hate words that are in the realm of the authorities?

Julie: Yeah. Because I had a very hard time with them. And they, they would like to take away my son from me and force me to do things that I didn't want. Schedule⁴ me to the hospital. Just like—

David: And what? To take medication you didn't want?

Julie: Yes, yes. Two nurses did that: push me on a chair and then open my mouth, and that's, that's so terrible. I don't know what type of crime that I had committed or whatever but, yeah, they treat me like—

David: Yeah. It was your sense that you were a person who'd committed crimes, given the way they were treating you? Wow, yeah. And I'm imagining that, you know, what was happening for you was suffering. I don't know if that's a good word to use, but rather than it being a crime that you were committing, I'm imagining you were experiencing some very, very rough times. Like really strong suffering at the time.

Julie: They always say that because I am sick and I cannot make good choices, they have to make choices for me, including what I need to do every day or whether I can be with my son. So you are not yourself anymore. Actually, they work with die thoughts, I think. It's like, if the rest of my life needs to be controlled by them, then I'd rather die rather than—

David: Really? So the controlling aspect of the psychiatric system or the mental health system actually meant for you, "If this is

going to be it, I might as well die”? In other words, it gave a lot of power to die thoughts when the controlling aspects of the mental health system stepped in.

Julie: It was a really, really stressful time in my life for me and also for my family and my son. And then I feel like I’m a burden on the family.

David: What difference, then, does it make to try to use language that’s not of the authorities, that’s not of maybe the mental health system? What difference does that make for you? Is it a big difference or a small difference? How important is it to say “die thoughts” rather than, for instance, “suicidal thoughts”?

Julie: Maybe from other peoples’ perspectives it’s just a small thing, but because I cannot control most of the things that happen in my life, maybe this little thing means a lot to me, you know. So yeah, “die thoughts” – that is really powerful.

David: Yeah. Some people might just consider it a small little thing. But language choice is an area where you have some control, and it’s a deliberate choice of words that don’t belong with the authorities.

For Julie, the deliberate use of language that was not of the authorities was a small way for her to control something in her life. This use of local language was a small action but involved considerable principle. It was linked with a refusal to comply with psychiatric power, its language, and the harm such power and language can create. I got the picture of refusal, and the agency involved in refusal, being a way to build experience-near language.

In many ways, Julie has inspired me to develop the following exercise to build richer meanings out of the achievement and agency.

BUILDING RICHER MEANINGS AROUND LANGUAGE USE

This is an exercise to be completed in pairs with each person using either their own experience or the experience of someone they are working with. Both people take turns at being the interviewer and interviewee.

Can you think of a time when you or someone you are working with had a strong preference for using a particular word to describe their experience? This could be an experience-near or experience-distant (or expert) word. Please answer the following questions about this.

- What was the word or phrase you chose?
- Could you say something about why you chose that word?
- Does it speak to a particular preference for how you, or your network, would like to be understood or how you’d not like to be understood? Does it speak to expectations you, or your network, hold for how you ought to be treated?
- Does that preference suggest something that really matters to you and your network, perhaps something you are refusing to go along with or are protesting?
- What does your preference say about what you are honouring?
- What is the individual and collective history of what you are honouring, refusing or protesting?
- What difference do you imagine it will make to your sense of yourself and your future if you continue to use this word or phrase?
- Are there ways that you would like to let people around you know of the significance of this word or phrase?

Supporting the recognition of experience not alienation from experience

I remember where I was when I read the following quote from the mental health trainer and consultant Ron Coleman: "Psychiatry takes away my experience, moulds it into their model and then hands it back to me in a way unrecognizable to me" (as quoted in Escher & Romme, 2010, p. 32). This sentence lit up for me as a powerfully succinct critique of psychiatry. Although the "model" of psychiatry is more than just language use, this quote made me think about psychiatric language use in particular. After I read this quote from Ron Coleman, I made a promise to myself to not work or speak in ways that foster a lack of recognition of oneself, or an alienation from oneself. This would include not painting people into a corner in which they have to use psychiatric language to forge easier relationships with me, or easier relations with the institutions they are often forced to be in.

The alienation can go in multiple directions, and like a storm, can knock down so much in the landscapes of people's lives. Those whose lives are getting described in psychiatric terms can get alienated from their community, their networks, their families, and their relationships. As psychiatric language is being cast around, the words can often replace the everyday or folk language used for descriptions of extreme states and suffering. However, given the pervasiveness of psychiatric language, people's everyday or folk language may not have been replaced at all, but rather comprise psychiatric language! When psychiatric language comes to enter lives, networks and communities, another requirement then quickly follows: to "know" what those names refer to, for psycho-education about the signs and symptoms of psychiatric illnesses and disorders, and an obligation to learn such technical and often formal phrases. Having then received such an education⁵, people and their communities owe "a debt of gratitude" (Foucault, 1973/2003, pp. 28–29) to psychiatry, and therefore mental health workers, setting up further (often difficult-to-name) power relations.

Another direction where this alienation can reach as a result of the psychiatric model and language includes the alienation that psychiatrists can have towards those they "treat". I was reminded of this when speaking with Gabe.

Gabe approached me at the end of a group I was facilitating on "writing a letter to the problem". She asked me if we could write a "letter to the voices" together, as the voices made the exercise too difficult during the group. We spoke for a while about the voices, their tricks and tactics, their intentions, what possibilities they offered her life, and what helped quieten the difficult ones and connect with the sustaining ones. I retrieved her words and compiled them in a way she was happy with. This is her letter.

Dear voices,

Most of you have been upsetting me, making my life difficult. You are stopping me from having my own life. You make me suicidal. What are you trying to achieve, voices? Trying to make me suicidal and sitting on the lounge doing nothing? Is this what you want for me?

I want you to go away and stay away. If you're not going to go away right now, please be quiet so I can be friends with you.

I do different things to try to make you quiet.

Sometimes I try to change the words of what you're saying. That can be really difficult and you get louder. But when I sing out loud Christian songs, you listen to me. That's good because you're really quiet, and then you're easier to tolerate.

Chewing gum really helps make you quieter. I focus on the rhythm of my chewing and change rhythms. You go away at those times.

There is one of you I like: Chris, my angel voice. Chris taught me about the beach, and that has been a good thing. When I meditate, I hear Chris more loudly. I then connect with his voice energy and there's a flow of good, calm energy to me.

Yours sincerely,
Gabe

After I read the letter to her, Gabe said spontaneously, "Do you think I can show this to my psychiatrist?"

I replied, "If you'd like to do that, it sounds like a good idea". Ron Coleman's words came to mind,

and I asked Gabe whether she was trying to introduce the psychiatrist to her words and her understandings about the voices.

She replied, “Yes, I think so”. Perhaps Gabe wanted to introduce *her model* to the treating psychiatrist in order to treat his alienation from her as a result of the psychiatric model and psychiatric language.

The dictionary of obscure sorrows: Recognising experience and producing better metaphors

I developed the dictionary of obscure experience after my friend and Dulwich Centre writer, teacher and community practitioner David Denborough shared with me the website *The dictionary of obscure sorrows* (Koenig, 2009), which was an innovative way to create words for experiences that are obscure and have no English description. I imagined that creating a similar dictionary in the psychiatric unit where I worked would be one way to respond to Ron Coleman’s critique of psychiatric language as making experience unrecognisable. But in addition to that, I imagined making such a dictionary could be a way to find words for the unnamed, and at times unnameable, complexity that clasps on to people’s lives when they come to a psychiatric unit.

There was another important consideration I was conscious of as I started this dictionary. I was thinking about metaphors.⁶ If this was to be a potentially playful and diverse dictionary, then I imagined it would include playful and diverse metaphors.

Brain and medicine metaphors are in-vogue descriptions for mental health suffering in many contexts.⁷ This is potently symbolised by a comment made by a psychiatrist to a journalist at NBC News when making suggestions about the best way to speak about suicide in her culture: “We talk about death with cancer and heart disease but not death when associated with mental illness. But some people do die from it. Suicide is like a massive heart attack of the brain” (Spector, 2018). And similarly, in my work context in Sydney, language such as “sleep hygiene”, “mental health first aid” and “a dose of therapy” are routinely used, using metaphors sourced from the medical world.

I was drawn to other metaphors, outside of the reach of medical power and what it clutches at in an effort to illuminate more likely experience-near language. Or to find another angle to this, perhaps “better metaphors”, to use Peter Salmon’s term:

Thus, having acknowledged that we live in the mess of the metaphorical, where metaphors are ways of thinking, our task is in a sense to wallow in this unrestricted becoming, and produce better metaphors as we do so. Better, in some readings, means “having more explanatory power” or “correlating better to lived experience”. One often feels with Deleuze that, at times, a better metaphor is simply one that is more interesting or exciting – once all language is metaphorical, why not enjoy? (Salmon, 2022)

These ideas assisted me in crafting the dictionary entries with the young people to produce metaphors that were interesting, exciting, enjoyable and more!

The current dictionary has around 150 entries and it is rich with metaphor. The following entries, “The Form Identity” and “Floating”, along with synonyms and an antonym, are both metaphoric and punning, and comprise directly rescued words from five people in groups I facilitated. They are some of my favourites.

The Form Identity: The process of mental health services trying to get to know me through mental health records rather than through speaking with me. Those records don’t recognise my skills, my achievements, how I’ve overcome things, or who I am at my best. I can feel worse when this is done and see it as inaccurate. (Ref: the 2002 film, *The Bourne Identity*)

Synonym. Cornering: The assumption that you can talk to me for 5–10 minutes, read a discharge summary and know who I am. And then life-altering decisions can be made on the basis of that “knowledge”.

Antonym. Read your fucking notes: When you have to repeat the negative parts of your story multiple times to multiple people.

Floating: Best understood by the following analogy: if you are snorkelling and you come across a current, you could swim against it but sometimes you are too exhausted and you just float. The current then takes you in whatever direction it’s going, even if that direction is much less interesting or even dangerous.

Synonym. I give up: When feeling weak, not having the strength to define yourself anymore other than through the illness.

Some considerations with the dictionary

Before I introduce an exercise that can be done after reading the dictionary, I would like to add three hopefully clarifying distinctions about the dictionary of obscure experience.

First, I would like to emphasise that this dictionary is always in draft form, as it is always being added to. It is incomplete and partial, never definitive.

Second, this dictionary is not meant to be authoritative. Dictionaries have been used to delegitimise marginalised and non-sanctioned language. The dictionary of obscure experience uses descriptions that are local, potentially temporary and from the margins. They are deliberately reclaimed in response to psychiatric power – locating descriptions and experiences before they get described by psychiatry, or to take this one step further, before experience even gets discerned via the lens of psychiatric power.

And third, this dictionary is distinct from efforts like a dictionary of alcohol and other drugs slang. Such important dictionary projects can give status to words and descriptions used by those in marginalised communities. Yet descriptions like alcohol and other drugs slang are already in circulation, albeit limited circulation. The dictionary of obscure experience includes words and descriptions that are mostly not in circulation and are not intended for broad usage.

So this is a dictionary of emerging and particular descriptions that are reclamations in response to psychiatric power, and a partial and incomplete project with no ambition for broad usage.

The following exercise may be useful to do after you have read the Dictionary. It has the dual purpose of assisting you to consider the resonance of such a dictionary in your context as an option for experience-near language that helps people recognise experience, as well as crafting your own entries for a dictionary of obscure experience.

DICTIONARY OF OBSCURE EXPERIENCE EXERCISE

Please answer the following questions with another person if possible, or just consider your answers without a partner.

- Would this be a helpful way to assist people to locate experience-near language in your context? Is the genre of “dictionary” resonant?
- Which entries caught your attention and why?
- What ideas get sparked for you around obscure experiences you, or others in your work or community, have?
- Do you have ideas for how might you share and build such a dictionary in your context?

Suggestions for how to collect a dictionary entry:

1. Listen for experiences that may not be named, may be difficult to name, are unusual or playful.
2. Listen for words or phrases that speak to experience, not the interpretation of experience; the landscape of action, not so much the landscape of identity.
3. It can be helpful, although not necessary, to craft the entry in the present tense, and start with the word “when”.

Questioning the values that get smuggled in to emotion talk

I notice that young people are animated when we share the dictionary⁸ and I have tried to make sense of this. The first page of the dictionary includes a collection of reflections that young people have made about what the dictionary means to them. For instance, one young person said it is about:

seeing intricate experience. There's so much intricate experience that makes up your life. And in this dictionary, experiences are written like people are actually saying it. So when I read this, I can see clearly everyone else's intricate experience and I feel less alone.

The young people's meanings are ones I put at the centre of making sense of their positive responses to

the dictionary. Yet I have wondered how else I can figure out what is happening when such animation and at times exuberance surrounds engagement with the dictionary. One understanding I have considered is that the dictionary, and the practices associated with it, are like the inverse of the treatment obligations placed on the young people. In “person conferences”⁹, individual and group therapy, there are requirements for young people to “work on” or “fix” the “illnesses”, “disorders” and distress they are experiencing. I see that as something that can create pressure or stress.¹⁰ I have wondered if the dictionary might provide relief from having to “fix” or “work on” problems, and instead offers a collective way to “feel less alone in distress”.

Recently I read something that resonated with this guess. The Wildflower Alliance “supports healing and empowerment for our broader communities and people who have been impacted by psychiatric diagnosis, trauma, extreme states, homelessness, problems with substances and other life-interrupting challenges” (Wildflower Alliance, 2019) and they do this in part via peer-to-peer support. Among the principles articulated for their work they include the following:

There are no “fixers” and people being “fixed” within our community. We will not act as therapists, case workers, or healers. It is assumed that all people who become a part of the Wildflower Alliance for support or learning will also pass that benefit along to others in some way. (Wildflower Alliance, 2019)

Reading this principle for the work helped me search a little further in making sense of the notion of “not working on or fixing a problem”. I wondered how to describe what we might be doing when collating this dictionary if we are not “working on” or “fixing”? Perhaps finding collective ways to feel less alone in distress is description enough, but I wondered if there was more I could have brought to the understanding and therefore to my practice. The work of Tiffany Watt Smith helped illuminate an idea.

Tiffany Watt Smith is a research fellow at the Centre for the History of the Emotions at Queen Mary University of London. She has written a book titled *The book of human emotions* (2015). Although I won’t explore the place of emotion in narrative practice, I want to write a little about a particular phrase she used that caught my attention.¹¹

According to Watt Smith, “No one really felt emotions before about 1830” (2015, p. 3). This observation emphasises that emotion is more than just a natural bodily process, unchanging and stable. Rather, it has a history, and is therefore culturally grappled with and produced. She goes on to write, “understanding the cultural stories of our emotions above all helps us uncover the tacit beliefs about what ‘natural’ (or, worse, ‘normal’) emotional responses might be” (2015, p. 12). It was this concept of the tacit beliefs that caught my attention. Perhaps this dictionary is a refusal of the “tacit belief” that one must “work on” or “fix” negative emotions.

Watt Smith made a further observation in her 2017 Ted Talk, “The history of human emotions”, which stretched my thoughts just a little further:

There is a historicity to emotions that we are only recently starting to understand, so I agree absolutely that it does us good to learn new words for emotions, but I think we need to go further. I think to be truly emotionally intelligent, we need to understand where those words have come from and what ideas about how we ought to live and behave they are smuggling along with them. (Watt Smith, 2017)

I don’t aspire to emotional intelligence, or hold that as a goal for people I meet with, but I do hope to assist people to name the obligations that are “smuggled in” with emotion speak. A crafty or underhanded process by which these obligations arrive in people’s lives is evoked by Watt Smith’s word “smuggle”. It takes a bit of work to get to the bottom of crafty or underhanded processes. I thought about some common examples of emotion speak and the values and obligations that get smuggled in within them. The following table is an attempt to represent this. The left column includes five emotion descriptions, general and specific. The middle column shows the values and obligations that can get smuggled in with them. And the right column describes some options for questioning or refusing such values and obligations.

Emotion	Attached value or obligation	How questioned or refused
Negative emotion	that ought to be worked on	Negative emotion expressed collectively in order to build resonance and feel less alone
Worry	that requires reassurance	Worry as a likely expression of care
Regret	that should be left in the past	Regret as an expression of which values and expectations were transgressed
Anger expressed by those marginalised	that ought to be quietened	Anger as an expression of outrage linked to notions of what is fair and just
Happiness	that is necessary to be living properly or normally	Happiness expressed ironically, and/or an exploration of whether normality or the promise of normality via happiness is preferred

I have shared this table with participants in workshops. I then ask them to discuss in small groups the following questions.

QUESTIONING OR REFUSING THE VALUES THAT GET SMUGGLED IN WITH EMOTION TALK

- As you read this table, were you greeted with any examples from your own work or life of something similar?
- Is there a word, image, song or even dance that describes the emotion you thought of?
- Are there stories that come to mind of where values or obligations were “smuggled in” by emotion talk?
- What came to mind?
- What were the values or obligations you noticed smuggled in with this emotion?
- Was the value or obligation named at the time, or is it something that you could see later or now?
- Can you as a group consider ways you might name, question or refuse these values and obligations in your work or life? This could include:
 - ways of listening
 - comments you could make
 - connections or resonances with others you could propose
 - questions you could ask.

You may be thinking about what you have already done, or what you could newly try out.

Conclusion

I began this paper with a quote from cultural anthropologist Clifford Geertz (1974, p. 27) in which he explained that an “experience-near concept” is one that can be used “naturally and effortlessly”. I have tried to describe how in some contexts – in particular, psychiatric contexts – the generation of “experience-near” concepts is anything but natural, but rather requires considerable effort, which is characteristic of meaning-making and is shaped by intentions and principles.

I have also suggested that in some contexts, again with much of my discussion set in psychiatric contexts, people themselves, and not just specialists, utilise “experience-distant” concepts to describe their experience. This can contribute to an alienation from experience.

In working with both experience-near and experience-distant language we can use practices to support people with:

- the effort required to achieve and build meaning around language use
- finding language that helps build the recognition of experience.
- Three practices to support these two agendas have also been described:
- questions that assist in meaning-making in relation to language
- creating a dictionary of obscure experience
- naming and evaluating the values that get smuggled into emotion talk.

I would like to end on a personal note. Often my own history lights up when walking alongside people as they negotiate the often-complex terrain of language use to describe their lives. I regularly think about my mother's life. Usually, I have said my mother died by suicide when I was a child. This description muddies the context of significant limits for most women in Australia in the late 1950s, when my mother was first married. It was this context that would have opened the door wide to the turmoil she experienced for the following two or so decades. As a result of the work I have been doing, and the responses and stories I have witnessed around the intricacies of language use, I will now reconsider and re-work my description of her death, seeking a description that will acknowledge and not muddy the context for her.

I am now imagining how you, the reader, might engage with the ideas in this paper, and in what kind of ways you might use them, both in your life and in your work.

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- The two reviewers for their generous and open-hearted feedback
- Jean Eleanor Newman for enduring a context for her life that would have almost certainly never been adequately named while she was alive.

Notes

- ¹ I appreciate the delightful democratising flavour of Patricia's description: "words for all". However, I don't want to suggest that there are particular words that are relevant for all experience or all people.
- ² I will use the language of illness or disorder if that is the preferred language for a person, family or community. However, I often see that people use many descriptions for their experience, both inside and outside the realm of illness and disorder. We can reflect back all the different descriptions we hear and ask which are preferred.
- ³ These are often experience-near descriptions of what is generally named by psychiatry as suicidal ideation.
- ⁴ "Scheduled" means an involuntary psychiatric hospitalisation.
- ⁵ Of course, sometimes people do their own research.
- ⁶ To read more about the use of metaphor in narrative therapy and community work, see Chapters 4 and 5 of *Collective narrative practice: Responding to individuals groups, and communities who have experienced trauma* (Denborough, 2008).
- ⁷ Neurodiversity is a metaphor sourced from discourse about the brain or nervous system and has become a highly valued description for many.
- ⁸ This is not always the case. After one group reading of the dictionary, we crafted the following entries to describe one person's response:

Fishing without bait: Reading this dictionary and not remembering any of it and/or not being present while it's being read.

Synonym. **Whadutorkinbout?**
- ⁹ Often referred to as "case conferences".
- ¹⁰ As well as some ideas for how to proceed that can be relieving.
- ¹¹ For an excellent discussion about a cultural, rather than neuro or naturalistic, account of emotion and its connection to narrative practice, see Part 2 of David Denborough's (2019) paper "Travelling down the neuro pathway".

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Imagination and metaphor in narrative therapy and collective practice

by John Stubley



John Stubley works as a creative action researcher and narrative designer in awareness-based systems change processes. He is also a trained naturopath. He has a particular interest in the use of imagination (individual and collective) as an organ of perception for preferred futures. He has a PhD in English and comparative literature (creative writing), and a master's degree in narrative therapy and community work. He is the founder of the Centre for Social Poetry. He lives in Walyalup/Fremantle on Whadjuk Noongar Country in Southwest Australia. John is affiliated with Australian National University as a Centre for Dialogue associate; Commonland as an ecosystem activation partner; and the Presencing Institute as social poet and Asia-Pacific development and learning co-lead. johnstubley@yahoo.com

Abstract

In this paper I explore the use of metaphors in the creation of externalised problem narratives for individuals and larger collectives, as well as in the creation of preferred alternative narratives. Through practice examples, I relate some of the ways in which I have been working with imagination and metaphor in my own context in Western Australia. This includes therapeutic work with individuals, as well as collective processes in which I have been able to apply narrative principles. How this connects to the broader field of narrative work is also explored, as are some issues related to ethics and power.

Key words: *metaphor; imagination; art; poetics; social poetry; collective practice; narrative practice*

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Author pronouns: he/him

The metaphor of metaphor

The word “metaphor” comes from the Greek *metapherein*, from *meta* meaning “over, across”, and *pherein* meaning “to carry, bear” (Klein, 1971, p. 500). What is it that a metaphor carries over or across? We could say that it carries one thing over to stand in place of another: that it transfers “a name or descriptive word or phrase” (Oxford English Dictionary, 2002), or perhaps a “shared quality or characteristic across two distinct things” (Literary Terms, 2015), or even that it transfers meaning (Legowski & Brownlee, 2001, p. 20). We might also ask how this is achieved. Given that this process of carrying over does not happen of its own accord, we could ask what role an active or “agentive self” (White, 1995, p. 143) plays in the creation of metaphor; that is, in the creation of meaning by carrying or bearing one thing over in relation to another. Through “personal agency” (White, 2004, p. 71), we can perhaps become more perceptive to and agentive in the creation of metaphors, pictures, images and imaginations¹ – to perhaps even grow more imaginative. At the same time, the use of metaphors can potentially help us to expand our personal agency.

Language itself is metaphoric, as we have touched on in the example of the word “metaphor” above. Metaphors, according to Lakoff and Johnson, are “pervasive in everyday life, not just in language but in thought and action. Our ordinary conceptual system ... is fundamentally metaphorical in nature” (1980, p. 3). Metaphor and imagination also have a long history in therapy, including narrative therapy.

Metaphor in narrative therapy

Metaphor has a place in the history of narrative therapy and related disciplines, including the framing of therapy itself (White, 1986). Within the field of family therapy and counselling, for instance, Zimmerman and Dickerson have pointed to “the evolution of family therapy from a cybernetic metaphor to a narrative metaphor” (1994, p. 233), which has significant “implications” (1994, p. 233). In this sense, as Legowski and Brownlee have pointed out, a metaphor can “bridge concepts and ... extend the imagination into recognizing new possibilities” (2001, p. 20). As Schön has argued, metaphors are helpful for framing and enable a “certain kind of process in which new perspectives on the world come into existence” (1979, p. 254). Some other metaphoric framings of therapy

include therapy as problem-solving, as catharsis, as rite of passage or as co-research. Generally, in my work, I invite clients into the metaphor of co-research, but also invite any metaphors or framings that the client themselves would prefer to work with.

The above points to the ways in which metaphor can frame the therapeutic process as a whole. At the same time, metaphor and imagination can be used within therapy – within this overall therapeutic framing. Traditionally, as Bergman (1985) and others have pointed out, metaphor use within therapy has been therapist directed, involving, for instance, stories, rituals and other tasks as designed by the therapist (Bergman, 1985; Combs & Freedman, 1990). Therapist-directed metaphor would seem to be characteristic of the long narrative of therapeutics. We can also find, however, that some of the metaphor work taking place within therapy is therapist directed, yet client generated – for instance, art therapy, play therapy and so on (Legowski & Brownlee, 2001, p. 20). We find this also especially in collective narrative work, with such processes as the Tree of Life, the Team of Life, Seasons of Change, and many other collective processes (see, for example, Denborough, 2008). It can also be the case, however, that metaphor can be primarily client generated, albeit with scaffolding questions from the therapist. This aspect of attention to client-generated metaphors, in a way that does not seek to interpret such metaphors, seems to be a relatively recent and unique contribution that narrative therapy has made to the wider field of therapeutics.

In my work as a naturopath and counsellor, as well as a narrative designer in the field of social impact and systems change, I work with metaphor and the imagination primarily in the externalisation of problem narratives as well as in the construction of preferred alternative narratives. In a certain sense, “the act of telling a story is in itself the metaphor” (Legowski & Brownlee, 2001, p. 23), meaning story telling can become a framing metaphor for the process of “externalising”, which, as White (1989) argued, is the key to the re-authoring of stories. Legowski and Brownlee have equated externalisation to the building of a metaphor (2001, p. 23). The process of externalisation “is an approach that encourages persons to objectify, and at times, to personify, the problems they experience as oppressive” (White, 1989, p. 1). I find that listening out for and asking questions of particularly metaphoric language can help “thicken” (Geertz, 1978) and make more alive, rich and tangible (and thereby more externalised) this problem story,

as well as the subsequent preferred narratives. Some of the more famous of these externalised metaphors in the narrative therapy field are “Sneaky Poo” (White, 1984), “Fear Busting and Monster Taming” (White, 1985), “King Tiger and Roaring Tummies” (Wood, 1988) and “Itchy Fingers” (Menses & Durrant, 1986). Legowski and Brownlee questioned the role of the client in generating such images, however, arguing, “the very nature of these terms alone attest to the fact that they are essentially therapist initiated. It is highly unlikely that such catchy terms are consistently offered by such a wide variety of clients” (2001, pp. 23–24). This may be the case, but the terms must have originated somewhere, in a creative moment of more or less personal agency in which the client themselves articulated a metaphor, or in which the therapist had the ear to hear or possibly synthesise what was said (while quite possibly checking to see if it resonated with the client themselves). In a similar vein, Legowski and Brownlee pointed out that Winslade, Crockett and Monk (1997) described “Sneaky Poo” as having become something of a cliché, having lost something of its “therapeutic freshness” (Legowski & Brownlee, 2001, p. 24). Other than the tempting reply that we should be glad that poo, sneaky or otherwise, might lose some of its freshness, we can perhaps also ask for whom has it become cliché. The obvious answer for this is narrative therapy practitioners, and not necessarily clients. This concern may still have a certain validity, though, given it is practitioners who need to be in a position to listen out for and foster “therapeutic freshness” and creativity in the telling of preferred narratives. However, this fact itself is not an argument against the metaphor of Sneaky Poo, but rather for the continued development by clients (with support from therapists) of therapeutically fresh, metaphoric and imaginatively resonant images and narratives.

As Denborough has argued, creating a visual representation in such a way is “often influential in creating distance between it and the person’s identity” (2018, p. 88), which has the effect of opening a space for externalising conversations. Sometimes, the more imaginative and metaphorically thickened and lively these externalised images can be, the more effectively an imaginative externalising conversation can ensue. This activity is perhaps related to what Herman called “hypothetical focalizing” (Herman, 2009), in which the given nature of the metaphoric image is questioned and brought into a more fluid and malleable dynamic state through questions that encourage multiple viewpoints. In such a way, personal agency and identity – or even

a “sense of personhood” (White, 2004, p. 46) or “sense of myself” (White, 2004, p. 46) – is encouraged or invited to become more engaged. (White talked about identity as “a territory of life” [2004, p. 46], which can shrink following trauma, but can also become expanded again). Such hypothetical focalising can make use of the characters and settings within the imaginative narrative scene, perhaps asking what one character might say or do in relation to another. The building up of such visuality, Bal (2008) argued, “rivals action-generated events for dominance over plot structure”, calling it “figuration” (as cited in Denborough, 2018, p. 89). This is akin to those moments in stories and in our own lives when momentum is not found in action-generated events so much as in moments of observation, reflection and rich description (à la therapy).

When I discussed the use of metaphor with two other narrative practitioners, they described it as valuable for adding immediacy, feeling, different perspectives, remembering activity, empathy, the shifting of identity, shifting experiences of the past, context, multiple alternative meanings (including contradictions), reframing possibilities, a broad reach, sensitivity, inclusiveness and a nonbinary way of working (Paul Teo & Anny Rodjito, personal communication, October, 2018). Teo said he used metaphor when moving from the problem to the therapeutic image, when checking to see which images might resonate when other words aren’t available, and when wishing to refer quickly back to a person’s situation (Paul Teo, personal communication, October, 2018). Anny described the process of double-listening (for responses to problems or alternatives stories in addition to stories about the problem) (White, 2000, p. 41, 2004; Marlowe, 2010), and asking questions to develop alternative or preferred stories, as being like moving from the image of a stick person to an image of a fleshed-out person with muscles and bones and clothing existing within a whole landscape, including a social environment (Anny Rodjito, personal communication, October, 2018).

In their book *Symbol, story and ceremony: Using metaphor in individual and family therapy*, Combs and Freedman argued that “metaphor, with its multidimensional and inexact nature, allows psychotherapy to be purposive while leaving room for ‘the random’” (1990, p. xviii). This enables therapists to be influential in the counselling process without, on the one hand, being too directive (leaving the client unfree to find their own way) or too random (thereby

not having a useful influence) (Combs & Freedman, 1990, p. xvii). While not being explicitly narrative in approach, this book by Combs and Freedman looks at the way metaphor can be helpful in “developing a relationship, gathering information, accessing and utilizing resources, suggesting ideas, reframing, and facilitating new patterns of thoughts, feelings and behaviors” (1990, p. xix). Indeed, as touched on above, metaphor and imagination (including symbol, story and ceremony) can play a part in all language, thinking and modes of living, including social engagement and therapeutics. And although I work with metaphor and imagination in various ways within my life, in my therapeutic work (including many of the ways touched on by Combs and Freedman in their book above), and in my social impact/systems change work, in this essay I will continue to focus on the narrative techniques of externalising problem stories as well as developing preferred alternative stories. To do so, I will now touch on some examples from across my different spheres of work; namely, individual therapy and poetic mirroring.

The bully and the lioness

I first started working with Marianne in the middle of 2017. She originally presented for a naturopathy consultation with a diagnosis of fibromyalgia. This is a complex syndrome involving chronic fatigue and pain (Clauw et al., 2011). It can involve both physiological and psychological elements (Nihalane et al., 2006).

After an initial consult, in which naturopathic treatment was prescribed, our conversations started to take a different course. Marianne was already seeing a number of other specialists, including integrative health practitioners. One of the first things I noticed while working with Marianne was how visual, metaphoric and image-laden her language was. At this point it was tempting to attempt an externalisation of this thing called fibromyalgia, especially given that it seemed to encompass so much of her physiological and psychological situation.

When informed that I was interested in narrative therapy, Marianne was enthusiastic to try out and consequently to pursue further this particular approach in relation to her situation. But what became apparent in our conversations was that she did not wish to focus on her medical diagnosis and its definition but, rather, on different problems that seemed to relate to one another in various ways.

During one of our sessions, the externalisation of a problem brought to our attention what Marianne was describing as “the weight issue”.

John: Could you tell me a little bit more about the weight issue, and what it says when it appears?

Marianne: Oh, that's easy: “you're dumb, you're stupid, you have no self-control, you're weak, you're ugly, unattractive”. I mean, there's a list that goes on from there.

John: When the weight issue comes, and says these words, what's the effect of that?

Marianne: Well, that just makes me really depressed and just confirms everything that I think anyway.

John: If this weight issue were a person and saying these things to you, what would this weight issue look like, saying these things to you?

Marianne: Oh god, I don't know how to visualise that. Overbearing and a bully. I never thought that before, but they're the two things that came to mind: this standing over/ overbearing and bullying.

John: How long has this bully been there, or how often does it appear?

Marianne: I think it's with me probably all the time when I feel I'm overweight, so if I lost seven kilos tomorrow it wouldn't be there. Or would it be and I'm just not aware of it? Would it be lurking in the background watching and waiting? I think it first appeared after I had kids, so it's been there on and off for 30 years.

Marianne went on to describe cycles where she had to have more food, and when she felt that the bully was constantly on her mind: “It's like an engine that's running 24/7, demanding”.

John: What do you think this bully might have in mind for you when it appears and says the kinds of things you mentioned – what might its intentions be?

Marianne: Just to bully me, to push me, to control me.

At this point, the voice of the bully began to become internalised a little more, so I asked if Marianne could again characterise this bully for me. “It’s black in colour”, she said:

There’s a scene in *The Green Mile* where [one of the main characters] spews out all these – I don’t know, were they bees? – but this black mass that comes out, so it’s like [visualising with her hands] ... that’s what it feels like to me ... I never thought that was the bully, but I think that’s what that is ... It’s exhausting, it’s negative, it’s too hard. I just don’t want to do it anymore.

I asked if this bully had shown up in other places in her life. She said, yes, including in workplaces, but especially with her father. In describing these moments, she began to also talk about the act of “speaking up and standing up”, which I asked her to describe in more detail. She said that at those times she was scared but found the courage to stand up because she was standing up for others, and because she knew she was right: “I can’t not say anything”. I asked if there were any other times in her life when she couldn’t not say anything, where she knew she was right, where she was standing up not only for herself but for others. “With my father a lot”, she replied:

and I really only started to speak up to him when my kids were little, because I could see he started to speak to them how he would speak to me, and I just wasn’t going to have that. There was just absolutely no way. I was very clear and very firm. There was no pussyfooting around. I think being a mother brings out that lioness in you.

I asked Marianne to describe this lioness a little more. She said it had “inner strength. It will not allow, no way ... it’s not aggressive, but very assertive”. I asked what the lioness might say to the bully (perhaps as an example of potential hypothetical focalising), and she replied:

“You are not allowed to bully Marianne anymore”. That’s really interesting, that – it wouldn’t take any shit. “That’s the line, that’s it”, you know. “That’s unacceptable. It doesn’t matter to me what I lose, I’m going to stand up ... Stop. It’s just reached that point: we’re done. That’s not how it’s going to continue”.

(We can perhaps note the way in which the “agentive self” [White, 1995, p. 143] or “sense of myself” [White, 2004, p. 46] became identified in this sentence with the

lioness). When I asked how the bully would take this, she replied, “It’d be a bit taken aback ... The lioness can handle the bully: ‘Nope, not going to happen – it stops now’”. Marianne then went on to describe a number of other situations in which she had been able to stand up and speak up to bullies, including within workplaces (advocating for students in her care), as a student at school (befriending and supporting a much smaller new student who was getting bullied at her school), and with her father (standing up for her kids). She also named people who knew this lioness in relation to Marianne (including family, friends and colleagues).

We later explored how she felt about the way in which this bully appeared elsewhere in cultural life – including the weight issue bully as it shows up in the media, including on billboards and advertising: “The lioness feels pretty angry about [social bullying] on a mass scale”. (For some examples of what we might call agentive responses to such bullying on a mass scale, see, for instance, Clark, 2018.)

After the session with the lioness, Marianne reported having six full days in which she experienced no bully whatsoever. She described it as “existence without anxiety”. She “wasn’t fighting anything, wasn’t resisting ... I belonged in the world and was safe”. She said:

after the last consult, I felt completely different, like an altered state of consciousness. I woke like someone had filled me with anti-anxiety drugs. This must be what happiness feels like. I felt hopeful and didn’t want this experience to be disturbed. I felt free from physical depression, not just mental and emotional. I stopped eating so much – wasn’t interested ... I was peaceful inside with no anxiety. I wasn’t fighting anything, wasn’t resisting. I let go and was in the flow of life, the flow of source.

After six days, this experience began to fade, but Marianne was able to access it again in a following consult, where she drew a picture of and described:

a child, in a field of flowers, with sun and stars, feeling a lot lighter, how I want to feel then and now, not that there is no tough stuff, but overall, it is lighter and a feeling of support – nothing to do, just dancing through flowers – nothing to be achieved [see Figure 1 below].

As a side note, illustratively, Marianne mentioned about a year or so later that she was wrestling with the pseudo-legal definition she had been given called



Figure 1. Drawing of a child in a field of flowers by Marianne.

“permanently disabled”, which by the end of our session she was defining as: “I have permanently disabled my old ways of operating; pushing and striving from my head – that no longer serves me”. Her new way of operating, pictured in the image of the child (Figure 1), she described as “I can be different and in flow”. This she linked to a “knowing in the heart”. This is interesting for me – and I have often heard it reported from people I work with – that metaphors help sink a story or image from the head to the heart, and then into the hands (see also Combs and Freedman’s chapter “Facilitating new patterns of thoughts, feelings and behaviors” [1990, p. xix]).

Marianne said that she had benefited and continued to benefit from working with metaphors and images in this way. She also said that she would sometimes write more about them at home, or use these metaphors or writings as the content for meditation, which she said could help to reinforce, strengthen and expand the preferred narrative.

Metaphor for...

In situations like the above, I am not only engaged in a process of doubly listening (White, 2000, p. 41) but also metaphoric listening. I generally write down most of what clients say, but am especially concerned with: “What am I drawn to? What particular words or expressions have caught my attention? What sorts of images or metaphors have emerged? How have I been transported by reflecting on these words?” (Semeschuk, 2018, p. 33). When listening out for metaphor buried in language, I am interested in how to bring this metaphor from the blind spot to the spotlight, which is akin to the externalising process itself. (In doing so, we are better able to identify the problem narrative [and metaphor] and create distance between it and the client’s identity.) If necessary, I might go as far as to ask questions such as:

- If this problem were a person or a character, what kind of a person or character might they be?
- What colour might it be?
- If it was a form, what form might it take?
- Does it emit a particular sound or have a certain texture?

Primarily, though, I am concerned with “client-generated metaphors ... as the central theme of therapy without prescriptive and interpretive intervention” (Legowski & Brownlee, 2001, p. 19).

As part of this process, I am also listening out for the possibility of deconstructing problematic narratives – of “cracking open discourse” (Semeschuk, 2017, p. 9), and also becoming aware of “disembodied ways of speaking” (White, 1991, p. 27). And I am always listening out for ways of supporting personal agency through a sense of self, sense of personhood, the agentive self and identity. I tend to find that personal agency usually increases in this process when metaphor is involved, whether it be as part of a process of externalisation or of thickening a preferred story – that it is more likely that “new patterns of thoughts, feelings and behaviors” (Combs & Freedman, 1990, p. xix) will develop. In this sense we could also say that metaphor helps to strengthen a “grammar of agency” (White, 1995). Metaphor and imagination can form part of a language of the “agentive self” (White, 1995, p. 143), whether in relation to an externalised problem story, or a preferred alternative narrative.

Metaphors are complex and can contain multiplicities and contradictions. They can express a dominant problem story or a preferred alternative narrative, or even both in the same image. They are as complex as people’s lives – people’s stories. In many ways I am interested in “the use of metaphor in generating solutions that consider a continuum of options which reflects the complexity and depth of many clients’ problem-saturated stories” (Legowski & Brownlee, 2001, p. 19). This sentence calls to mind the image of tree roots underground being as broad and comprehensive as the branches above.

In terms of the image, Wolf argued that “a single picture can never actually represent a narrative but at best ... point to a story” (Wolf, 2005, p. 433). Wolf (2005) also said that the inability of images to represent detailed alternative developments and character’s thought worlds leads to a loss of suspense and eventfulness in verbal narratives (Wolf, 2005, p. 434). While this may be the case from a certain perspective, I would argue that an image or metaphor is a process – often a story – brought to rest at a particular moment of attention or, perhaps, time. That is, an image is a narrative brought to rest or condensed in a particular imagination. In other words, images occur in dynamic relationship with story.

Resonance and personal agency

“One of the primary considerations is to restore that valued sense of who they are, that preferred sense of identity or personhood ... the ‘sense of myself’” (White, 2004, p. 46). In relation to responses to trauma, Michael White spoke of renewing “positive images of life and identity” (2011, p. 128) in order to revitalise a person’s “language of inner life” (White, 2004, p. 46, quoting James, 1890). This process amounts to a revaluing of responses to trauma, which can lead to what White called “resonance”. This resonance “has the effect of evoking positive images of life and identity that often present to the person in metaphorical and visual forms” (White, 2011, p. 128). White went on to say that these images “have the potential to set off reverberations into the history of the person’s experience of life” (2011, p. 128), which can then lead to an identification of how these reverberations relate to memories that are resonant with these present images. This is perhaps akin to the picture of a rock dropped into a pool, or the way that a sound can *re-sound*:

It is in the linking of episodes of life through history that is provided by these resonances that new connections and patterns of experience are developed, and that unifying themes of life are identified and named through metaphor. This process sponsors the development of an inner world that can be visualized, and a sense of aliveness that displaces a sense of emptiness and deadness. (White, 2011, p. 128)

We could perhaps go so far as to say that this process constitutes an autobiography of the “agentive self” (White, 1995, p. 143) or personal agency, with “sparkling moments connecting with previous sparkling moments ... plotting lived experience through the temporal dimension” (White & Epston, 1990, p. 83). Elsewhere, White spoke of memory systems, including the stream of consciousness, wherein “many aspects of a person’s experiences are organised according to the sort of progressive and associative nonlinear sequencing that is a feature of narrative structure. Imagination and pretence feature strongly in this stream, as does analogy, metaphor and simile” (White, 2004, p. 68). White went on to say that “the stream of consciousness is impinged upon by traumatic memories” (2004, p. 70). In this case, White said that:

life is experienced as just one thing after another, and is invariably recounted to others as a problem-saturated and fragmentary catalogue

of events. This is a recounting of life that lacks vitality and animation – it is flat, dead. The language employed in this recounting is linear and matter-of-fact, and it contains no evidence of any content of an inner personal reality – it is devoid of metaphor, association, and co-ordinating themes that provide for a sense of existence that is ongoing and unfolding; it is devoid of a sense of unity and continuity of self. (2004, p. 70)

However, as was the case with Marianne, “once identified, whatever it is about life and identity to which the person has accorded value provides an orientation for the development of resonance within the therapeutic conversation” (White, 2004, p. 71).

This resurrection is restorative of a sense of personal agency, one that is in harmony with the person’s preferred “sense of myself”. This is the “sense of myself” ... that provides an experience of continuity of personhood through the many episodes of one’s history. (White, 2004, p. 72)

This process, White said, is made possible by this “sense of myself”:

These considerations ... emphasise the importance of the priority given in this work to the reinvigoration and redevelopment of the “sense of myself”. Dissociated memory cannot be re-associated if there is no receiving frame to take this into; if there is no storyline through which can be traced a preferred “sense of myself” through the many episodes of personal history. Once there is progress in the reinvigoration and redevelopment of this “sense of myself”, people can be assisted to imaginatively speculate about how they may have responded to the traumas of their history, and about the foundation of these responses. In this imaginative speculation, people are encouraged to project back, into the history of their lives, what is becoming more richly known about their sentiment of life, and about the practices of living that are associated with this, including their practices of counter-power. (White, 2004, p. 72)

This is connected with a “personal agency that would be in harmony with the persons’ familiar and preferred sense of myself” (White, 2004, p. 71).

Poetic mirroring

Another way that I have found to be particularly helpful for articulating preferred narratives and inviting the kind of personal agency and resonance outlined above is through the use of what I am calling “poetic mirroring” (Stubley, 2023) (what one of my colleagues has called generative poetics, or what Semeschuk [2017, p. 2] called “rescued speech poems”). This has especially been the case when I have been working with metaphor and imagination in the articulation of dominant problem stories as well as preferred stories in collective narrative practice in social poetry (Stubley, 2023). I would like to touch on a brief example of this in order to point to further possibilities which could continue to be opened up in the field of collective narrative practice.

In early 2018, I was asked to create a poetic summary at the end of a one-day event called Healthy Soils, Healthy Communities, which was exploring regenerative food systems. There were around 100 participants from across sectors – producers, distributors, consumer groups, government representatives (agriculture, education, health), academics, media and others. The organising team was made up of a similarly diverse group of individuals and organisations, including Sustain: the Australian Food Network, Perth Natural Resource Management, Edith Cowan University, the Heart Foundation, Commonland, the Centre for Social Impact at the University of Western Australia, Presencing Institute, Hassell and others.

Throughout the day, multiple methods were used to help smaller groups and the whole room to externalise the dominant problem stories around food through drawing, 3D sculpting and conversations. Many of these methods were metaphoric and imaginative in nature, enabling an externalised image or picture of the dominant problem story or stories. These pictures were then shared with others in the room through walkthroughs or whole-group conversation. The problems related broadly to issues of food production, distribution and consumption. Additionally, the same methods were also used to articulate preferred alternative narratives, which were also shared with others in the room in similar ways.

Participants gave research permission at the start of the morning. I then attempted to listen throughout the day in ways similar to those outlined above. Mostly, I was listening out for particularly lively, resonant language and descriptions of both the externalised problem stories around food, and the preferred alternative

stories. In many instances, I found myself writing down metaphors and images. I wrote these words, expressions and phrases while conducting filmed interviews, as well as during unrecorded one-on-one conversations, lectures, small group work, breaks and whole-group sessions. I also wrote down particularly resonant words and phrases that people wrote on posters, tables and sticky notes. I wrote all these words in a journal, in chronological order.

Towards the end of the event, I looked over the words I had written and tried to see which among them were most resonant and if they wished to come into poetic form, with at least some semblance of rhythm and rhyme, although being mostly free-form.

I then shared the result with two other organisers, edited the piece based on their feedback, and read it out at the end of the event (but not before minor changes based on those who spoke immediately before it was read). The piece, as it appears below (Figure 2) is an unedited version of what was read on the day. I have additionally made the experiment of colour-coding expressions related to problem and preferred narratives (orange for preferred, blue for problem, with dark text for more neutral or both preferred and problematic aspects). This colour-coding is a mere experiment, with, interestingly, the potential for the preferred story to be found within the questions of the externalised problem. Perhaps, though, a whole gradation of colour-coding, rainbow-like, would be needed.

In many ways, the whole piece is a metaphor – be it standing tall on the edge with friends, or the Supreme Court of Food. Within it, various metaphors appear and reinforce many of the themes of the day. Following the reading, I gave the poem to the rest of the organising team. One of the academic researchers connected to the event wrote “this is a wonderful summary of the day that shares the sense of collaboration and urgency of the efforts. I believe a communication strategy should include this” (Ros Sambell, personal communication, March 2018). The piece was then incorporated within the more formal academic write-up and documentation of the day. One of the facilitators later wrote to me and said, “that captured the imagination of the whole day. I can go back and read the poetic piece and remember the essential pieces of the new story that I must carry forward into my work” (Katie Stubley, personal communication, March 2018).

Problem

Preferred

Stand Tall on the Edge, With Friends

Here we stand on the land
of the first first-nation people.
What do we hear of its speaking?
What of the layers of our listening?
Natural Intelligence.
What have we made of the
real estate between our ears?
Can we read the landscape
with child's eyes?
Are we ecologically, socially,
vertically literate?
Where is the school of our
food and land learning?

Maybe it's time to **reset**
the table, and **sit**
down to dine at the site
where **good stories go**
to grow, and **broken**
systems go to die.

WTF?
WTF (Where's the Food)
WTF (Without the Farmer?)

Maybe it's time to celebrate
life and cry: Inspiration – return!

We need access to this
to produce, process, consume
and learn.

Extra lights on the traffic sign!

Peaches, apples, olives, figs –
Catch the Durian.
Me, I'm an avocado man:
I meet the skin, and punch through
to the seed within.

But how do I need to be
to see the new gold in land and
within my fellow humans?
"There is no greater currency
on Earth," says Noel Nannup,
"than our fellow human beings."
Money moves.
Divest through.
Human capital financing
cultivated soils of
social fields, urban
and rural together and
a place for ethics at the table.

I am water sensitive
and I am able
to let agri-culture
move my hands
and those of my fellow humans.

Maybe, to side step
this **second silent spring**
I need to observe, observe, observe,
then grow silent within,
till a sweet and juicy future
takes my hands and
makes of them something
worthy of yours.
No **second silent spring**,
no second thought.

The future moves,
and moves in us.
I go with it – with you –
to other markets
on the other
side of this underground
revolution – where the
law we answer to
is the land's
and our own networked
peak body of the
Supreme Court of Food.

Figure 2. "Stand tall on the edge, with friends": poem by author

This was the first time I had attempted collective work in this way. On other occasions since then, I have also posted the poetic mirroring document online in a co-editable form so that participants can make alterations or additions if they wish; additionally, they are also encouraged to make their own contributions of completely different poems. On other occasions I have also shared poetic mirroring while working alongside generative scribes who capture day-long or multi-day events in visual diagrams and symbols. I have also worked alongside other note-takers (poets), as well as other traditional artists, in order to capture as much as possible the externalised problem story and the preferred alternative narrative during collective processes, and then share that back at the end of the event (or even during individual days within longer events).

It would seem that the more thick and full the metaphors and images are, the more externalised from one's own identity the problem story can become (and, in an interesting way, the more malleable), and the more thick, full and resonant (also throughout history) the alternative, preferred narrative can grow. If this is mirrored back from multiple perspectives, through multiple artistic disciplines, then individuals and collectives can engage in this process in multiple ways.

Gallery of picture pitfalls

Operations of power and privilege exist throughout all my work. I attempt to be as mindful of these operations as I can while trying to implement practices of accountability wherever possible. In this direction I'd like to share here some operations of power and privilege as I experience them in specific relation to working with metaphors and pictures, either in individual therapy or as part of collective processes. I have documented these in relation to Marianne's story above to offer an example, but the same or similar pitfalls can be encountered when working with collective processes, including poetic mirroring and other methods. I have named these to fine-tune my practice.

Picture colonisation

– if Marianne had no interest in using pictures,
and I imposed this

Picture theft

– taking Marianne's pictures or metaphors and
making them my own

Painting over

– painting over Marianne's pictures with
my own pictures

Finishing the picture

- taking Marianne's original picture and "thickening" it for her

Continuing the picture or commencing a preferred picture

- continuing the externalised problem picture towards a preferred imagination, or else simply starting on a preferred imagination

Exhibiting the drafts

- if I were to become very attached or focused on a particular picture, word or phrase that had no relevance, importance or meaning for Marianne, and still continued using this picture, word or phrase as the dialogue continued

Getting stuck on the first picture

- this is perhaps akin to going to an exhibition and only looking at the first image (e.g. fibromyalgia), when there are a whole lot of other pictures in the gallery

Attending blind

- this involves not seeing or hearing any of the pictures that a client is mentioning because I am not listening out for them

Reworking the finished image

- this belongs more to the post-session phase, in which the practitioner can be tempted to rework the words, phrases and images to suit some other method of appraisal, including literary.

Conclusion

Engaging in narrative practices – especially those of externalising, double-listening and alternative-story development – has made much of my existing work much stronger. It has also given a more methodological framework and broadening of application for my use of metaphor and imagination. At the same time, I have found that the use of metaphor and imagination in my individual and collective practices has helped make more tangible both the experience of the externalised problem narrative, as well as the preferred alternative narrative in the ways outlined above. At all times, however, I need to be mindful of the operations of power and privilege, as touched on in the Gallery of Picture Pitfalls. In this direction, one of my colleagues, working with gang members in Los Angeles, has often articulated the following: "How do I need to be in order for you to be free?" (Orland Bishop, personal

communication, 2010 and thereafter). While different elements of this sentence, including the concept of freedom, might be open for interpretation, something of the spirit of this question helps to guide me in my work, including my narrative work with imagination and metaphor. I experience this question as being generative of accountability to a personal sense of agency and the agentive self – both mine and others'. (For an interesting discussion on reconciling Foucauldian notions of the constituted subject with narrative ideas of the agentive subject [and, in a way, freedom], see Guilfoyle, 2012.)

The etymology of agency is "abstract noun from Latin *agentem* (nominative *agens*) 'effective, powerful,' present participle of *agere* 'to set in motion, drive forward; to do, perform,' figuratively 'incite to action; keep in movement' (from PIE [Proto-Indo-European] root *ag – 'to drive, draw out or forth, move')" (Online Etymology Dictionary, n.d.).

It is this personal sense of agency – this "sense of personhood" (White, 2004, p. 46), "sense of myself" (White, 2004, p. 46), "continuity of self" (White, 2004, p. 70), or "agentive self" (White, 1995, p. 143), in the context of socially constituted and constructed lives – that I continually attempt to make a space or invitation for in my listening and in my speaking. As part of this, I continue to listen out for metaphors that enable a more comprehensive externalisation of problem narratives, as well as description of preferred narratives. It is my experience that a sense of agency is involved in (and develops through) both the externalisation of problem narratives and the articulation of preferred alternative narratives. That is, personal agency – or we could say the agentive self – is active and grows more active in the creation of imaginations and metaphors in narrative work. It is the agentive self, I believe, that can be involved in (and grow from) the transferring over or across – which can engage in the carrying or bearing of one concept in relation to another in meaning creation. It is in service of this process as it exists for individuals and collectives within socially constituted and constructed lives that I do my work. And I am grateful to all those I work with, the spirit of the time within which I work, and the different Countries I work on – including Noongar Country – for the opportunity to be of service in such ways as this.

Note

¹ In this paper, I use the terms "metaphor", "picture", "image" and "imagination" interchangeably. Imagination is related to *imaginari* – to "form an image of, represent" (Oxford English Dictionary, 2002)

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A search for justice using AI-assisted image creation

by Lucy Van Sambeek



Lucy Van Sambeek is a narrative eco-social worker living and working in private practice on Gunaikurnai Country. Lucy's passion is helping people recover from trauma and reduce the impact of stress in their lives, using nature, art and storytelling as passages to health, healing and wellbeing. Lucy's connection to nature through gardening and bushwalking has inspired much of her nature-based therapy, alongside over a decade of working alongside First Nations people in the remote Northern Territory. lucy@metaphoricallyspeaking.com.au

Abstract

As artificial intelligence becomes pervasive, therapists might be left wondering about its implications for narrative practice. This paper explores an unexpected discovery about the power of artificial intelligence in re-imagining a story of injustice. Lucy (the therapist) and Miles (the client) used an AI image creator to assist in the externalisation of problems. Creating imagery representing Miles's story of injustice and sharing the images with outsider witnesses became acts of justice and healing. The process of narrative justice using AI has implications for the practice of narrative therapy. This article finishes with an opportunity for readers and viewers to respond to Miles's online gallery of imagery.

Key words: *artificial intelligence; AI; justice-seeking; aphantasia; anxiety; outsider witness; art; imagery; narrative practice*

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Author pronouns: she/her

A meeting with Mr Black

Miles was referred to me by the clinician leading the 2019 bushfire recovery in our local area, a beautiful valley on the Mid North Coast of New South Wales, Australia. Having lost his home and bush acreage to the fire, I anticipated that Miles might share themes of loss and grief. However, sitting around his dining table at our first meeting, it became evident that something very different was bothering him. Miles was on stress leave from his job as a bus driver. He proceeded to share how he had been falsely accused of wasting time on his bus shifts and creating fraudulent overtime records. I sensed great despair and anger at the unfairness of it all. Miles described how surprised he felt about having been able to get on with life after the bushfire yet being completely derailed by this accusation. In this meeting, I also heard about Miles's past love of pottery making and his current passion for home renovating. Miles shared his interest in op shopping – searching charity or thrift shops to find unique items that he creatively upcycled for his new town-based home.

Ever since a disciplinary meeting at work, Miles had been experiencing anxiety, which he personified as Mr Black. Mr Black interfered with Miles's sense of safety in his home and in his body, hijacking his attempts to get on with his life. Everyday tasks would be full of errors like saucepans in the fridge and milk in the cupboard. On some days, artistic creativity, problem-solving and home renovation tasks were totally impossible. Miles described Mr Black as splitting him in two, with one part of him immobilised and unable to get out of bed. Miles felt like he was watching himself talking to me. His daily cycling pilgrimages were no longer pleasurable, and he was unable to remember any of the sights, smells or sounds after taking to the road on thin rubber tyres.

This was at the beginning of a very long and drawn-out workers' compensation and personal injury claim. In addition, some months prior to the workplace incident, a neighbour had subjected Miles to verbal abuse and a violent home invasion and robbery. He really loved his new home and was trying to settle in, but this invasive act had dramatically impacted Miles's peace and recovery.

A story of injustice

Miles worked through feelings of frustration and anger; however, the longer the workers' compensation case dragged on, leaving him in limbo, the more Miles began to speak of injustice and a feeling of being stuck, unable to move forward with his life. The lack of timely action by the police to respond to the neighbours' actions further added to Miles's experience of unfairness. Injustice trauma is a form of psychological distress. It arises out of experiences of unjust and unfair treatment in which people are mistreated, judged, humiliated or blamed. Informed by the narrative principle of attending to what is "absent but implicit" (Carey, Walther, & Russell, 2009), I was curious about what was so important to Miles that he would have such a profound objection to the way his employer treated him. Miles reflected that being falsely accused of indiscretions at work violated precious ethics and values that he stood for – things like integrity, common sense and intelligence.

Some months later, Miles started to report symptoms of aphantasia: the inability to see pictures in one's mind. He was usually very attuned to imagery, so its absence was causing a lot of distress. Around this time, Miles learnt that he was not going to be told what evidence, if any, substantiated the false accusations made at the disciplinary meeting. Over the course of a few months, Miles started to feel that his imagination and mind's eye were trying to "rewire" themselves. He still couldn't see images in his mind, but he could describe images using words.

Miles had almost given up hope that any form of legal justice was possible. I started wondering whether a different form of justice might be available to Miles through sharing his story with others, perhaps by writing about his experience. Denborough (2013) suggested possibilities for people to experience "narrative justice" through a process of naming injustices and their effects, exploring ideals and values that have not been violated despite the injustice, and convening forums for sharing stories with a view to making a contribution to the lives of others. Denborough (2013) suggested that where legal forms of justice are out of reach, bringing narrative justice to the lives of the people we work with is a therapist's responsibility. Honouring the feelings, thoughts and know-how of those who have experienced injustice can bring healing and justice by contributing to making a more socially just world for others (Denborough 2013).

In my explorations with Miles, we also grappled with the idea of finding peace through acts of forgiveness. Therapists are sometimes cautioned against putting clients who have been harmed in a position that requires them to forgive (Reynolds & Sanders-Kay, 2023). Reynolds (in Reynolds & Sanders-Kay, 2023), has suggested that letting the oppressor off the hook – without apology, accountability and repair – means we miss an opportunity to transform society and ensure the same indiscretion doesn't reoccur. However, Gollan (2002) has spoken about the freedom and lightness that can come from forgiveness, while continuing the work to hold oppressors accountable. In raising the concept of forgiveness with Miles, my intention was to see whether it might offer him relief from the stuck feelings of injustice and anger that continued to plague him, given his belief that the legal fight was unlikely to achieve any satisfactory result and that no apology was forthcoming.

Miles reflected on how much easier it was to forgive nature for burning his house down than it was to forgive his bosses for their indiscretions. Amusingly, he imagined paying for a full-page advert in the newspaper listing all the things he was forgiving the bus company for. He also entertained the idea of designing a poster with his declaration of forgiveness to paste up in his lounge room window so passers-by could view it from the street. These ideas seemed to reflect Miles's intention to not let his employers remain unaccountable for their treatment of him.

An unexpected externalising medium

One day, as Miles was sitting in the pit of injustice, which he continued to sink into whenever Mr Black showed up, I invited Miles to express his feelings in a painting or drawing. When clients are open to the idea, I sometimes introduce art expression as a way of externalising problems. I have observed that this process can sometimes offer clients a different perspective on the problem. The power of using imagery for the externalisation of problems and visual rich story development has been explored extensively by Denborough (2018, pp. 87–97). In this case, I was keen to make use of the urge for creativity, which appeared to be returning to Miles. I also wondered whether image creation might strengthen Miles's sense of his mind's eye. Miles expressed a yearning to rest,

restore and redecorate using his “imagination of solid colour”, knowing that Mr Black was causing him to overthink things. Miles laughed at the thought of taking a spray can to the side of a bus, but was happy to consider using a chalkboard drawing as a medium for externalising injustice. He said he would make his chalk image before our next session.

In a follow-up email, I suggested that Miles get out his drawing and painting materials when he noticed Mr Black coming back. Art in therapy is very different to art creation in other contexts, so as an artist himself, it was important for Miles to know that the process of expressing himself was more important than the outcome of producing some kind of masterpiece. I invited Miles to let go of any preconceived ideas about what might come out on the paper or how he wanted it to turn out. I suggested he try tuning into his body, feeling a sense of groundedness in the moment, perhaps tuning into his breath or his feet on the floor, and then to paint as if his heart or gut were holding the brush. If he noticed his “head brain” trying to take over, I wondered if he could let those thoughts go and give permission for the heart or gut brain to express itself. Miles couldn't wait to get started, and he went off with his newly modified mind's eye already working overtime dreaming in words of colour, shape and form.

To my surprise, Miles presented at our next session as happy as a dog with a new bone and with a big grin on his face. His creativity had sparked a burst of energy and productivity in his home renovations, and he felt as if all the pressure had lifted. Instead of a chalk painting, he shared with me a series of striking images he had produced using AI. Hardly able to contain himself, Miles reflected on his satisfaction at having offloaded things from his brain, heart and gut into an AI image creator. It appeared that the process of “visual narrativity” offered Miles an experience of “aliveness that displaces a sense of emptiness and deadness” (White, 2011, p. 128).

Transforming thoughts, feelings and sensations into images

Miles reflected on the process and the effects of working with AI.

Being of a technical mindset, I found AI very interesting. I came across it by accident in a news story. You simply add the elements.

It works best when you're highly descriptive, so I got creative and added details like adjectives, locations and even artistic styles such as "digital art" and "photo-realistic".

I was initially using AI to create all kinds of images such as bizarre real estate, animals riding bicycles and morphing items. Then I realised I could tell a story using the trauma of false accusations in the workplace as an example. I thought this might also assist with the art therapy task Lucy had invited me to consider. After researching art therapy, I thought it could be rather slow, and I really wanted to get images out quickly. For me, the creation of one or two images with old-school techniques would somehow not work. I was starting to suffer from blank canvas syndrome. I needed a way to get up and running quickly. I was interested in creating a series of images that told a story – my story being that of a bus journey to hell and back. I took on the task of learning how to get the best out of an AI image creator by learning how to formulate the best prompt for the best image. What I learnt during this process was that the AI often thinks outside of the square and so do I.

What I noticed was that while I was working with an outside-the-square machine thinking pattern, it also expanded my own outside-the-square thinking. Like a marketing collective attempting to brainstorm a new advert for a new product, where new ideas create more new ideas, the final results were a long way from the starting point. Brainstorming with the AI resulted in a great solution.

The satisfaction of externalising a thought into an image was a form of mental off-loading. Now, when I think back to most aspects of the saga, I experience most thoughts as the images themselves: as external entities posted elsewhere and not solely in my headspace anymore. This was a goal achieved, a similar effect to writing down a traumatic event. This externalisation has meant that the issues are not in my head all the time. Or if certain issues are, the intensity is less and therefore it is less disruptive to my reality at the time.

I would manipulate the AI image–creator prompt to get an image like that I was thinking of or, importantly, wanted to see in the real world. An image of an externalised thought! At the time, I was becoming more aware of the three brains (an idea introduced by Lucy that comes from leading-edge neuroscience research on the collaborative workings of the enteric, cardiac and cephalic brains), so I paid special attention to gut, heart and head feelings about the saga. I tried to get an image that reflected those feelings, emotions and thoughts as best as I could. I needed to be 100% happy with each image, and my response had to be "Hey, that really does reflect the experience!"

I then tested some of these images on friends to see what their comments would be. All the images had to include an orange bus as this reflected the company I worked for. Other elements I included were a cross for suffering, a court hammer for injustice and blue shirts to reflect bus drivers. I am very visual and see a lot of things visually. Having lost my mind's eye during this saga, I was aware that my brain had somehow rewired this side of things. Now, while I do not see the result in my mind's eye, I know the outcome somehow.



Figure 1. AI-generated image: "Systemic sacrifice and endless power games no matter what the loss"

Transforming injustice

I must admit that my initial reaction at seeing Miles's AI-generated images was one of shock and disgust as grotesque body parts featured alongside a fiery hell of headless humans and crucifixes. Staying decentred and curious, I discovered that for Miles, "something crap" had been "turned into something good". He had no feelings about seeing the "bloody awesome images" on the screen in front of him. Something had shifted, and I sensed Mr Black was backing off. When asked whether creating these images felt like an act of justice, Miles replied, "I can see that in the picture now". "The very act of giving expression to the struggles of life is an example of taking action, of responding in some way" (Carey, Walther, & Russell, 2009, p. 322). Through the lens of what is "absent but implicit", Miles's images of fiery grotesqueness can also be recognised as representing the values he stands for in life, despite these standing in contrast to the violence of the images. The creation of these images felt like an act of justice to Miles.

Over a number of weeks, Miles continued to create images based on a series of words that came to him. I did wonder whether aspects of this process might be retraumatising and whether they might give Mr Black an excuse to stick around, so I invited Miles to step back and take a rest if needed. However, he continued to report feeling relief and excitement at finding another outlet for his creativity. I also noticed that over the time of our consultations, the content of imagery was shifting, and more peaceful objects such as rose petals, white doves and blue hearts were making an appearance. I believe this reflected Miles's intention to move in a preferred direction, which involved a sense of peace for himself. Michael White (2007) spoke of the power of externalising processes through which people identify their moral stance and take action for themselves to redress the injustices they face. For Miles, AI had become an accessible tool for externalising and transforming injustice.



Figure 2. AI-generated image: "Nature and standing by your beliefs: Truth helps one to move forwards"

When I look at that picture, travelling down the road is like a journey of recovery. The rose petals are like a cushion. It's a kind of safe place that you want to be in, like your bed, like cuddling your favourite friend. The road is full of sharp glass. There's flames. It's fiery and hell, but then eventually as you travel that journey, you notice the sun in the distance, the seedlings start to come up and the birds start tweeting. Through the healing, the road becomes more of a nice place.

Witnesses to acts of justice-seeking

Alongside an increased uptake of home renovation and artistic projects, the therapeutic art-creation process appeared to ease Miles's sense of injustice in the world, giving him agency over his experience and the telling of his story in a creative form. We entertained the possibility of exhibiting these images through an online or local gallery to access a larger audience of outsider witnesses to Miles's visual narrative. I wondered whether this might thicken the story of the creation of AI imagery as an act of justice-seeking. Although traditionally in narrative therapy, outsider witnesses are invited into the therapy room to provide responses to a story in real time (Carey & Russell, 2003), most of my experience with the process has involved creating therapeutic documents to share

with outsider witnesses, and inviting their responses through a written message or letter, something Michael White (2007) did in his early work. Miles wrote:

My primary objective in sharing this traumatic experience with others, via an artistic visual format, would be an attempt to create a mindful and emotional connection with the viewer. It becomes a connection where I tell my story, and where the viewer's awareness is focused on what was going on in my head, my heart and my gut at various times of this saga.

When false accusations and lies are made by others, and negatively affect or impact on the innocent, the journey can often be long and tortuous. Sharing my trauma experience with others is a catalyst to help me further try to make sense of a truly senseless event. It is a natural human reaction to try to make sense of such an experience; a process that can be the most difficult in one's life, where challenges are endless. Where the injustice and unfairness are so great as to skew one's normal mind and bodily processes and reactions constantly.

When one has been accused of actions one did not commit, it creates a hideous wall of injustice. A wall so high, it is hard sometimes to see a way over it. It is the sharing of this story with others that is important for me, to assist with my recovery and be able to get over that wall. Important for others also, so as to:

- doubt/disbelieve those accusations were ever performed
- feel/understand some of the same emotions
- try to make sense of the injustice.

My story also allows you as a witness to become more aware of others' challenges and injustices. We do not live in a necessarily fair world sometimes, and it could, at some time, affect us all.

For me, the production of these visual artistic creations has created an externalisation of some of my thoughts and emotions. I hope you are able to connect with these.

I stand next to you, as you see, think, feel, wonder, question, realise and connect with my artwork. Let us both share the journey.

Inviting narrative practitioners to witness the power of AI

In my work, I have noticed how the outsider-witness process can be a powerful tool to give voice to the private concerns of individuals in the political space, therefore reducing the isolating and individualising effects of problems and increasing people's sense of community through contributions to others' lives. In Miles's case, I was also guided by Denborough's (2013) suggestion that sharing stories of injustice can contribute to both healing and justice. I wondered whether other narrative practitioners might be a suitable audience for Miles's images, and whether they also were using AI in their work. I wondered what effects responses from narrative practitioners as outsider witnesses might have on Miles. When I shared my wonderings with Miles, he was buoyed by the idea that other therapists might use AI image creator in their work to assist others who felt a sense of helplessness about unfair or unjust actions in their lives. With his agreement, I shared some images accompanied by a short summary of his story in a Facebook group of narrative therapists, prefacing the post with a warning that the images might distress or offend some viewers. I kept the invitation for feedback open rather than post the usual outsider-witness questions, stating: "my client is keen to know what responses these images evoke for people". In my next session with Miles, I shared the responses that I felt Miles would connect with including:

I am particularly struck by the sense of anguish and violation of being publicly subjected to others' scrutiny and accusation – the internal representations of fire in the mind and depths of bowels. It has me thinking of the feeling of powerlessness when not having a voice, or having to justify or disprove what has been suggested. Feeling the rage of injustice and painfully alone in the world, swept off with all the other stereotypes and assumptions of what people are like. Narrow and shallow spoiled identities. Ugh. Powerful images (anonymous)

I am struck by the fierce intensity of the images. I am also struck by the many images of people with no faces. I wonder if this facelessness reflects something important in his experience? (Jacob Mosgaard)

Miles reflected on the impact of his visual narrative and the idea of making a contribution to the practice of narrative therapy.

When I initially mentioned to Lucy that I would be interested in feedback from viewers of the artistic creations, I did not give it any more thought at the time. I didn't think about how the feedback would affect me, or even what I wanted to hear. So when Lucy shared these messages, to be honest I was gobsmacked.

What I did hear seemed to be a confirmation for me at many levels. It confirmed that the AI art therapy exercise had indeed portrayed many of the aspects I wanted it to, and further involved the viewer in aspects of the journey:

- portraying the saga, the injustice, the insidious actions by management, the personal suffering, the frustration, the anger, the lack of any credible evidence
- creating emotions within the viewer
- for me, developing a sense of connection with the viewer
- knowing I am not alone anymore on this journey
- feeling a sense of positive feelings as to how this AI-driven art therapy has many possibilities to help others.

I remember there was a great sense of relief and happiness, feelings that had not been around for some time. It was like, as others say, "a drug flowing through the veins", for other people now could see and feel my journey through my images. I wanted to meet these viewers, to simply say, "thank you, you don't know how happy that comment has made me feel".

I feel I am at a point where soon the story will be out there. Where others will be able to feel the injustice and understand my journey. Like a bushfire, one is completely stripped of all connections to everything during the time of fight and flight. *Nothing* matters at all except for saving the self.

It is worth mentioning that Miles had sat in the role of outsider witness in our earlier work together, providing a written response in the form of a letter to another client of mine who shared her story of redefining her relationship with anxiety. Through this process, Miles had received a return message from the author, and experienced the powerful effect that witnessing others' stories can provide. Miles's testimony reflects the power of definitional ceremonies providing "an antidote to the

effects of isolation ... and to the sense of invisibility" that can follow an experience of isolation (White, 2007, p. 181).



Figure 3. AI-generated image: "The art surgeon extracts the bus saga—diseased mind and implants the same on to a canvas, for all to see the truth"

The wider cultural context of injustice

Externalising practices aim to expose the dominant systems and social structures that subjugate people we work with and make them feel powerless (White, 2016). For Miles, the dominant systems included the many cogs and wheels he had to negotiate in the workers' compensation system and the demands of lawyers attempting to "prove" that his employer had caused injury through its treatment of him. After meeting with myriad health professionals including doctors, psychiatrists and psychologists in order to meet the threshold of psychological injury required, Miles began to expose this powerful social culture which continued to perpetuate feelings of injustice. "We do not live in a necessarily fair world sometimes, and it could, at some time, affect us all", he said. I watched as he stood up in protest against this system, only responding to their emails in a time that suited him, cutting back on the number of doctors' appointments he attended and refusing to go back to the psychologist who he deemed not to be helping him recover.

Throughout our work together, I witnessed Miles hovering between the struggle with Mr Black showing

up and hijacking his life, and standing strongly against the politics of injustice that contributed to Mr Black's presence. In exploring the dominant discourses or ideas that contributed to his experience of injustice I asked:

- Where are you feeling this sense of injustice? Have power and gender played a role here?
- How have dominant ideas from the patriarchal system contributed to the situation that you have found yourself in and the treatment towards you at work?
- Did you notice a difference between the way female and male managers would operate?
- What conditions create the opportunity for men to use bullying behaviour?

Miles reflected:

When males show emotions, it is commonly seen by default as a sign of weakness by other males. It's all absolute nonsense.

There was never any feeling or humanity shown by male managers. They were just bullies ... Their power is to negate. I knew it was a bully-boy place the minute I walked into the tearoom. In the old days, they might initiate people like that: take them out the back of the shed for a good bashing.

It's the culture that they are in. The manager has to prove himself, that he is strong and he can keep control of the bus drivers. Give them the flick if they did something wrong, even if it means throwing 80 years of experience out the door, so he can prove himself and go up the ladder.

We reflected together on the gender pay gap and demanding equal pay as a way of challenging and changing the dominant culture. This fight for justice is still being played out. Because Miles stands so strongly in protest against the political systems of patriarchy and power, he doesn't want to let his employer off the hook. This influenced his decision to pursue personal injury compensation as an act of justice-seeking acknowledgment of harm caused and attempting to change a system.

A man with a small brain is a man with a small brain, but it doesn't give him the right to incinerate someone. We know that's not right. Sometimes I think I should let it go. But it just makes your blood boil. How much unfairness should we allow? There's principles. It comes

back to making the world a better place. If I just let it go for my own personal gain, the next person suffers injustice in the system.

Miles went on to share values around equity and his belief in fighting injustices in other parts of society "in order to create some kind of power to keep things in order".



Figure 4. AI-generated image: "Driver sacrifice only reduces the main asset – no drivers, no bus runs"

To the viewer, some of Miles's images might also be seen to reflect themes of gender, patriarchy and power.

Transforming narrative practice

I have been struck by the potential for AI to be a positive force after witnessing the impact that this process had on Miles's mood and outlook. Until Miles presented his images to me, I did not believe any good could come from this technology. Although there are concerns about AI, including its use to replace therapists, I was left wondering how we might lean into the technology to enhance our clients' experiences in therapy. Might it benefit clients who struggle to tell their story in words or who feel they cannot draw or paint? Might it offer a new perspective on problems and an alternative way for a person to tell their story? Is it necessary to include text with images when inviting outsider witnesses to respond? Denborough (2018) stated that visuals alone have limitations in telling an alternative story, and I agree. Without text, the outsider witness might interpret a visual story in

many different ways. Yet this underestimates the power of the transportation of the outsider witness through emotional, sensory and felt experience. Initially, Miles simply wished for his story to create an emotional reaction, and whether witnesses knew his story or not didn't matter to him. Miles said the way the audience connected was like "a drug flowing through the veins". In this case, the "processes of immersivity, interactivity and virtual involvement" (Denborough, 2018, p. 95) worked together with striking images to achieve a strong emotional resonance with the audience. Miles has since decided to include more of his story in an online gallery of both images and text.

Discussing other AI affordances that Microsoft Bing offers, such as the textual chat (AI chatbot) and search features, Miles has shared how communicating with the AI chatbot was more satisfying than talking to a "typical psychologist": "You don't get anything back, they just listen, but AI gives me feedback and it picks up your mood", he said. Miles reflected on being in a completely different place, by thinking outside the square and creating weird things visually outside of his head: a place that had been largely occupied by Mr Black. With the sudden onset of AI image-generation technology, we are certainly heading into interesting times.

A collaborative discovery

I'd like to acknowledge that engaging AI to assist in externalising injustice was entirely Miles's initiative. It sits alongside the many other skills and knowledges Miles employed in directing his own journey of recovery. As White (2007, p. 76) wrote, people are always "drawing from a stock of maps relevant to journeys already taken and ... they know a lot about mapmaking". Miles brought with him a big basket of maps and myriad storylines about ways he had found relief from the effects of Mr Black. He was dedicated to the practice of meditation and mindfulness to get through moments of discomfort. His research skills meant that he knew more about the effects of trauma on the brain and the side effects of medication than his doctor did.

My contribution to the therapeutic process included remaining decentred but influential, staying curious about Miles's interest in creative and artistic expression and how this could be utilised in a process of externalisation.

Conclusion

This article set out to demonstrate the effects of creating a visual externalisation of a problem using AI technology for a client who experienced a work-related traumatic incident that violated his values and ethics. As someone who had used visualisation in other creative parts of his life but had temporarily lost his "mind's eye", the process of feeding descriptive words into an AI image creator allowed Miles to express in imagery what his heart, gut and head were thinking and feeling. AI may be a useful tool to introduce to clients who already express themselves creatively through art or "outside-the-box" thinking, those who do not feel they are artistic, or those who feel immobilised with feelings of injustice or unfairness. What was experienced by Miles as "a journey to hell and back" has transformed into a story of resisting injustice. I would argue that acts of justice-seeking can be made richer when we share stories and imagery with outsider witnesses, and in this case, I hope sharing Miles's story and images might also contribute to expanding the practice of narrative therapy.

An invitation to respond

It is on this note that I invite you to respond to Miles's images. Below is a link to the full gallery and blog Miles created since the writing of this article.

Bus Route 666 - Hell & Back

We invite you to reflect and respond to these questions, if you so wish:

- What words, phrases or images about Miles's experience caught your attention in this article?
- What image did you get in your mind's eye of Miles's life and what was important to him? Might you try to recreate this image using an AI image creator using some of the tips Miles offers here and share it with us?
- What was it like creating your own AI image?
- Does the AI image you've created reflect in some way an experience or story of your own in life or work?
- What does it mean for you to have heard Miles's story and viewed his images? How might Miles's experience shape your work with people?

Responses can be sent to Lucy at
lucy@metaphoricallyspeaking.com.au or posted
in the comments on this article's landing page
<https://doi.org/10.4320/MXCK6046>

Acknowledgment

Designer (Microsoft Bing's image creator) was used
with Miles's prompts to create the images included
in this presentation.

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The background of the entire page is a dense, textured pattern of green leaves, likely from a coastal plant like a bay leaf, arranged in a somewhat chaotic but rhythmic fashion. The leaves are various shades of green, from a deep forest green to a lighter, almost yellowish-green, and they have a prominent central vein. A semi-transparent white rectangular box is centered on the page, containing the text.

Review Essay



Recovering assemblages: Unfolding sociomaterial relations of drug use and recovery

by Aysel Sultan (2022)

Reviewed by Tom Strong



Tom Strong is a professor and counsellor-educator who recently retired from the University of Calgary. He writes on the collaborative, critical and practical potentials of discursive approaches to psychotherapy – most recently on concept critique and development (particularly with respect to therapy and research), and critical mental health. Among Tom's books are Medicalizing counselling: Issues and tensions; Patterns in interpersonal interactions (co-edited with Karl Tomm, Sally St George and Dan Wulff); and Social constructionism: Sources and stirrings in theory and practice (co-authored with Andy Lock). Currently, he is co-editing the Routledge international handbook of postmodern therapies. <https://wpsites.ucalgary.ca/tom-strong/>

 ORCID ID: <https://orcid.org/0000-0001-5965-0401>

Abstract

Tom Strong reviews Aysel Sultan (2022). *Recovering assemblages: Unfolding sociomaterial relations of drug use and recovery*. Palgrave Macmillan. 290pp. ISBN 978-981-19-1234-4, ISBN 978-981-19-1235-1 (eBook).

Key words: *addiction; recovery; actor network theory; assemblage theory; book review; narrative practice*

Strong, T. (2024). Review essay: Recovering assemblages: Unfolding sociomaterial relations of drug use and recovery by Aysel Sultan. *International Journal of Narrative Therapy and Community Work*, (1), 107–110. <https://doi.org/10.4320/FBQA5584>

Author pronouns: he/him

Two interests had me jump at the opportunity to review this book. First, I have a longstanding interest in people's efforts to recover from concerns like addiction. Joining potential clients as agents in their own recovery is a challenging-yet-resource-oriented journey in a field that can seem paternalistic in how it responds to people "in treatment". Second, I think that therapists have been slow to come around to the ideas of Bruno Latour and a somewhat related body of "sociomaterial" theory associated with assemblage theory. These latter ideas challenge the individualising views of many therapy approaches, and instead focus on people caught up in the immediacies of events and emerging circumstances. This book was a challenging but rewarding read, drawing on Aysel Sultan's PhD research on young people recovering in different contexts (or assemblages) from drug misuse in Azerbaijan and Germany.

Don't let the locations Sultan selected for her research throw you. The national contexts may seem different, but the ideas underpinning the research borrow from Australian Cameron Duff's (2014) work on applying assemblage theory to making sense of health contexts, recovery from substance misuse included. What constitutes "misuse" of substances is itself a fraught topic, but the focus here is on how young people experience and do recovery – with varying degrees of success and whether engaged voluntarily and involuntarily. Sultan's inquiry aims to sensitise researchers and helpers to the unique immediacies and ever-changing lifeworlds in which substance users attempt recovery. She didn't seek a conventional research-derived story of recovery, as is so often done from inside or outside of the experience. She draws users of her research into unique ways of making sense of recovery, including the messy details of relapses, serendipitous events, different logics of recovery (e.g., those of treatment centres or found on the street), and quirky processes and contexts of recovery. The three main curiosities that guided Sultan's research were:

- (1) What makes recovery possible – what actors (human and nonhuman) entangle in the process of making recovery?
 - (2) How do young people make and remake sense of their personal alcohol and other drug recovery in context?
 - (3) How do we conceive of recovery as an assemblage and what forms does this assemblage take?
- (Sultan, 2022, p. 5)

Context and assemblage should not be seen as synonymous words, particularly in how Sultan has linked assemblage theory (e.g., Buchanan, 2021) with Latour's actor network theory (ANT) (2005, 2013). Assemblage theory draws in part from the ontological process-oriented views of Deleuze and Guattari (1987). Reminder: ontologies are realities or *how things are*, whereas epistemologies are ways of understanding or linguistically constructing *how we know how things are*. A considerable philosophy of science literature has developed around the notion that humans change (or are changed by) their realities through how they make sense of and act on them. If this sounds like human understanding and technical progress unfolding according to plan, that would miss how humans become entangled with the not-fully-predictable vagaries of nature and what their technologies have wrought (Barad, 2009). In relation to how this theorising relates to drug use and recovery, Sultan wrote: "Drugs thus mobilize body and space, which then create an irreducible entanglement" (2022, p. 150). Such entanglements mean adapting to what is over and above our wanting and doing, to paraphrase Gadamer (1988). Further, our entangled circumstances are constantly in flux, making our realities¹ moving targets to which we are constantly adapting (Nail, 2018). Each recovery effort or trajectory is unique in this regard for being shaped by influences caught up with the "recovering" person's efforts.

For Sultan, assemblages show drug use and recovery efforts are experienced differently and done in ways that cannot be generalised across people and time as is so commonly done in social science research. Recovery is often pursued in unpredictably evolving circumstances with influences beyond the agentive efforts of the recovering person. Indeed, some research participants inform Sultan of what recovery is like while trying to wean themselves off the drugs they have been using, while other influences (e.g., a friend's sharing, ending up somewhere drugs are unavailable) shape on again/off again attempts to recover from substance misuse. Where Latour's ANT comes into theorising recovery is in trying to make sense of the human practices of recovery used to address emergent sociomaterial circumstances. Latour (2013) encouraged an anthropologist's curiosity to study how such unique "modes of existence" come together as matters of concern. This sensitising focus on what makes each person's recovery efforts unique in changing circumstances made my reading of Sultan's research rewarding.

Researchers will appreciate that it was no small feat that Sultan cleared institutional ethics hurdles to interview young (under 20 years of age) drug users in recovery to get their accounts of what recovery entailed and was like for them. We are rewarded with the voices of participants whose insider knowledge speaks to doing voluntary or involuntary treatment, self-initiated recovery efforts outside of treatment, successful or not, and a host of other details related to their substance use and attempts at recovery. Clearly, there were differences attempting recovery in Baku (Azerbaijan) and Frankfurt (Germany), but the focus here was on what could be learnt from the participants. Sultan's interviews give voice to participants' responses to concrete events these young persons saw as relevant to their recovery.

While therapists may be concerned with what enables a person's substance misuse, Sultan's research interests draw attention to assemblages that enable recovery. This attention decentres the common focus on the individual client's agentive efforts at recovery for an approach where assemblages are what recovers. What are the combinations of circumstance, objects, understandings and consequential developments in the recovering person's environment that come together in ways that facilitate recovery? Recovery events matter in this approach for showing how the convergence of assemblage features enable or impede recovery, including the person's experience and efforts within that convergence.

What can research participants tell us about themselves in their changing circumstances that therapists might not otherwise access? This latter question has long interested me, as a therapist and researcher, since learning from Allan Wade (e.g., 1997) that his research participants found it easier to answer tough questions about how they resisted sexual violence than related questions they had been asked as clients over years of therapy. Researcher curiosities can be different from therapist curiosities it seems, and Sultan's participants give details that would likely not come up in therapy, especially for being invited to discuss details about their recovering assemblages. This invitation was like being asked to speak from a new (recovering assemblage) discourse, an experience not uncommon for clients of narrative therapists.

There is some overlap between what Sultan's recovering assemblage discourse and narrative therapists' "the problem, not the person, is the problem" concept (e.g. White & Epston, 1990) aims to accomplish. Sultan's inquiries into recovering assemblages are informed by challenging sociomaterial ideas from which her questions of participants arose, and she was not aiming to linguistically separate her participants from the fluid contexts in which they were attempting recovery, so that they could better draw on their individual agentive efforts to recover. Sultan's research draws attention to the assemblage as the unit of change, or recovery. At a minimum, readers here could find themselves intrigued by Sultan's notion that the assemblage is the problem or solution, not the recovering person.

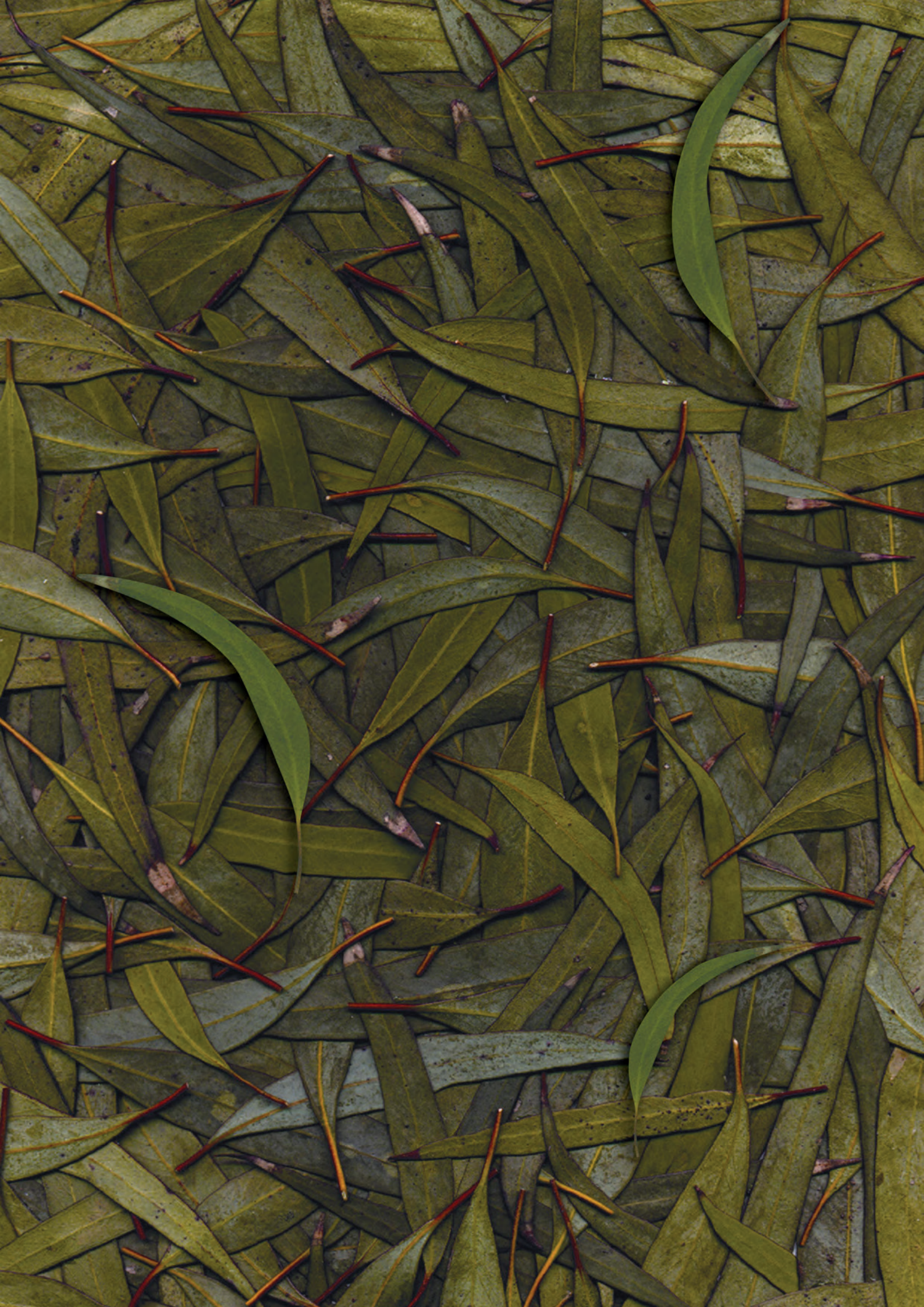
This book was not an easy read, and I confess that part of the reason I sought to review it for this journal was its cost. It is a well-written and theoretically sophisticated PhD dissertation written primarily with a researcher readership in mind. Community workers will find this book potentially useful in co-developing and making sense of their work. While Sultan deftly melds participant quotes with theoretical insights, these are not straightforward stories of recovery, but instead show how their accounts fit within a new approach to making sense of experiences relevant to being a therapist. I continue to hope that more ideas from assemblage theory and actor network theory make their way into narrative therapy. Therapists preferring to read how a therapeutic approach is conceptualised and used with clients will probably not find this book a useful read. As an introduction to how assemblage theory and Latour's actor network theory can be used to make sense of recovery, however, the book teems with ideas begging to be adapted for use in therapy and community work. It is the kind of book to get your library to order so that it can enable group reading and discussion, for those interested in innovative ideas on recovery.

Note

- ¹ I note here that my Word program spellchecker is not happy with the plural spelling of reality as realities.

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Dulwich Centre Foundation

HUTT ST PO BOX 7192, ADELAIDE, SOUTH AUSTRALIA 5000

PHONE: (61-8) 8223 3966 | FAX: (61-8) 8232 4441

EMAIL: dcp@dulwichcentre.com.au

www.dulwichcentre.com.au