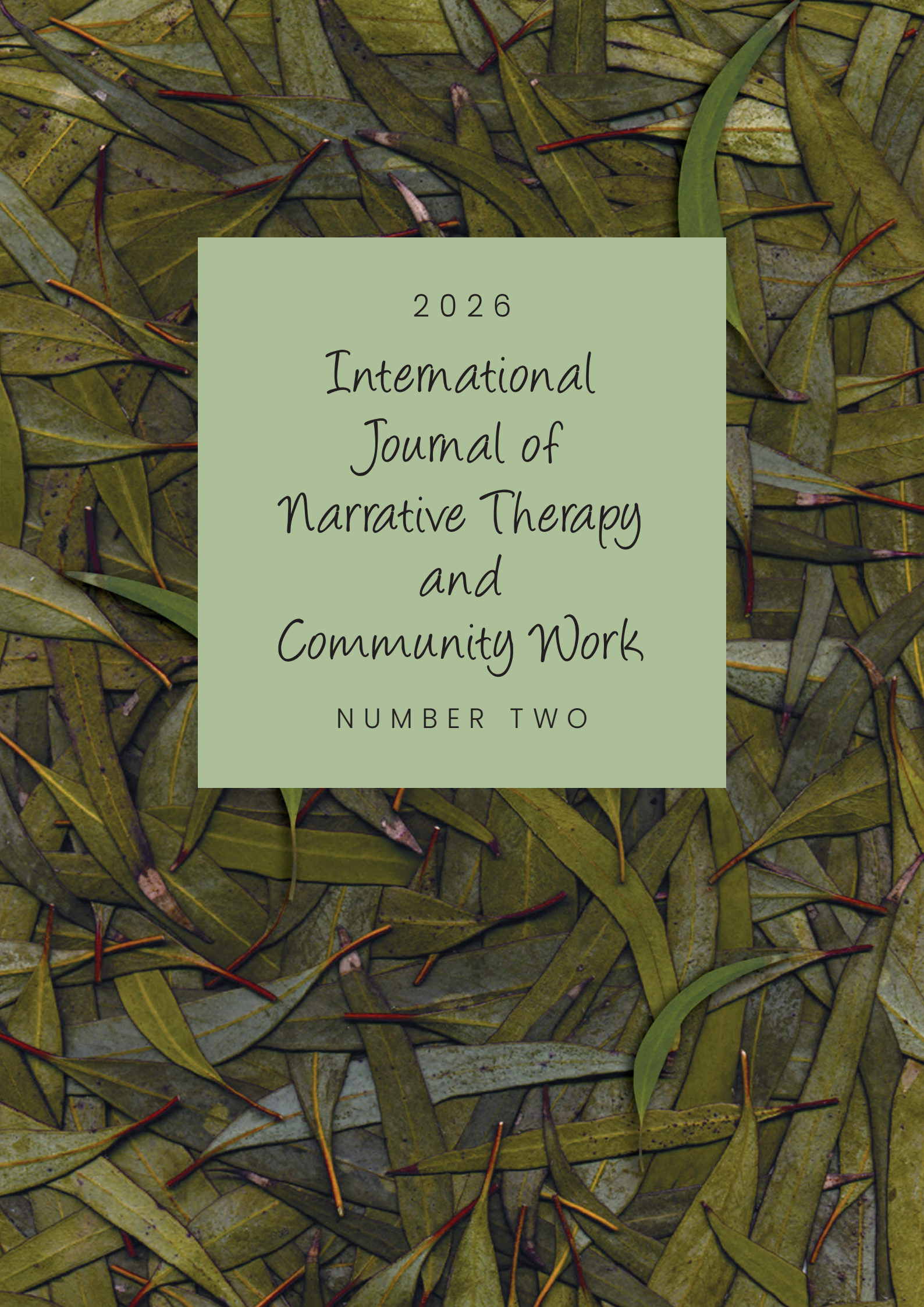




2026

International
Journal of
Narrative Therapy
and
Community Work

NUMBER TWO



Editorial

Dear Reader

I am writing from Delhi, India, where we have been witnessing young people lead collective action against injustices in this country. A recent social movement has been sparked in response to a remark from a prominent figure dismissing young people as “cockroaches”. In a satirical response, they formed the Cockroach Janta Party, a parody of the right-wing ruling party. While initially seeded in social media, this movement soon spilled out on to the streets of Delhi. Like a rhizomatic organism, it started growing underground – horizontally, spreading in multiple directions, sprouting new shoots where the soil is fertile for resistance. From protest grounds, it spread to homes, schools, colleges, public spaces, neighbourhoods and villages through makeshift news crews on the ground. It is unpredictable and persistent, crossing boundaries of class, caste, religion, gender and region. It is standing up to power structures that are unable to find one single centre to suppress despite rampant police brutality. The more these young people are pushed, the more they respond in creative ways. They use tools of resistance that the power structures are not able to quash – their phones record, document and upload injustices for all to see. Their language is of humour, memes, reels, poetry, music, art, dance and street theatre that state power cannot stifle.

I read the drafts of the papers for this journal issue with images of these young people’s protests in my mind.

What struck me most when I visited the protest ground were acts of collective care: people looking out for each other, sharing water, food and a place to rest. A little boy standing at the corner, spraying people with water to keep them cool. A young woman standing in front of us, fanning herself and her friends, and then turning around and fanning us. I felt safe in the thronging gathering, and despite not knowing anyone, I felt I knew everyone.

I experienced a similar knowing while going through all the contributions from the authors in this issue. I have not met the authors of these papers, who are from very diverse contexts, but I experience a synergy with their commitments to honour the responses, skills and local knowledge of those faced with war, genocide, displacement, transphobia and other injustices and hardships. Let me introduce you to the pieces in this journal.

This issue begins, unusually, with video.

“Rebuilding community after collective trauma” is an extraordinary interview (in French with English subtitles) in which genocide survivor and narrative practitioner Adelite Mukamana from Rwanda is interviewed by Nadia d’Or from Haiti. Adelite explains what it takes to rebuild a community in the aftermath of the genocide’s collective trauma through arts, culture and collective narrative approaches. The conversation delves into how we can heal in the face of immense grief so that the next generation does not inherit the suffering and there can be lasting peace.

“Dreaming trans-affirming mental health care into existence” is a video by Tiffany Sostar of a wish list from trans folks. It offers a vision of what affirming and supportive mental health care might look like. The author clarifies that it is not meant to be “the truth” of what the trans community needs, but is a living document of experiences to shed light on practices that are unhelpful or actively harmful, shared to reduce harm and isolation for others. This video also includes an unexpected “newsflash” that relates to solidarities between communities.

A series of diverse papers then follows. Jess Baker’s paper, “Mothers who move: Traversing refugee experience, overcoming shame and reclaiming motherhood”, shares stories of two women from diverse contexts who unpack narratives of shame and guilt in the face of being separated from their children due to forced displacement and come together through letter writing and narrative conversations to collectively create a renewed sense of belonging. The paper discusses ways narrative practices can support women to rewrite their identities through themes of survival, the politics of motherhood, their stories of resistance and mothers beyond borders. As a response to this paper, Zahra Stanikzai shares her lived experience as a mother, displaced from her home country and her journey of rebuilding her “village”.

Dana Kabaila’s “Dismantling dominant disability discourse” draws on interviews with neurodivergent co-researchers through letters, outsider witnessing and a listening group to make us question the idea of a singular, correct neurotypical brain – a concept that disproportionately marginalises those furthest from its impossible standard. Dana offers a liberatory vocabulary to uphold “neuro-wild” freedoms, and invites us to be “neuro-wild cultivators” and have conversations on “neuro-taming” and “neuro-rewilding”.

In “Inheritance beyond genes”, Ximena Karmy Saieg deconstructs dominant cultural discourses surrounding fertility, fatherhood, masculinity and genetic inheritance, opening space for co-constructed narratives in which a couple can imagine themselves not as passive recipients of genetic material, but as active creators of a web of meanings, relationships and stories that can be built day by day.

Helene Grau Kristensen and Augusta-Lucia Grau Kristensen, in “Moving beyond the limits of grief”, question the Western grief discourse, shaped by modernist norms, which often asks the bereaved to “let go” and confine the deceased to a static “museum of memories”. Through their tender stories of practice, they invite us to understand how grief responses may reflect resistance to these cultural expectations. The authors propose actively restoring the deceased child’s presence in the parent’s ongoing life via a four-part framework – alternative, ally, augmented reality and audience – offering a counter-narrative to hegemonic notions of mourning.

David Nylund’s “From allyship to co-conspiracy” critiques the “ally-industrial complex” where allyship, complete with the right language and credentials, can function as currency, rewarded for perceived alignment with marginalised trans and queer communities while maintaining power over discourse and practice. The paper calls for co-conspiracy rather than good allyship; for shared

risk, decentred expertise and material accountability. It opens up a possibility of a world where co-conspirators do not merely support movements. They organise, disrupt and act alongside.

Janet Pelly's "Sustaining the good man" extends from her earlier work on double-story development within continuous detention to ask what becomes of re-authored identity when detention recurs after a period of relative freedom. Through experience of caregiving, protective narrowing and collective holding, the paper nudges us to go beyond preferred identity claims so that we can explore what enables those claims to endure when agency and freedom are withdrawn. This paper includes a deeply moving response from Abdul Ghaffar Stanikzai, who also had to flee his country of origin due to life-threatening conditions, on the identity of an asylum seeker.

Sara Portnoy, Mieke Van Daele and James McParland's "Linking lives through collective narrative song creation" draws on collective narrative practice, rescued speech, and poetic and collective documentation, fusing these with musical performance into a new practice – collective narrative song creation. The authors share the enlivening process of developing a song and invite readers to cross borders into unfamiliar territory and expand their musical biographies. They offer ways to share glittery, sparkling moments of joyfulness and connectedness through songwriting, drawing on a rich history of sustenance and resilience in the face of hardship and injustice.

Two further multimedia pieces conclude this issue.

"Exploring grief and re-memembering place" by Valeria Kvasnevska is a tender photo essay on her ongoing relationship with her hometown in Ukraine. Her home might be gone physically, but its presence lingers and heals despite the devastation caused by war. As she reminds us, "Healing, I've learnt, isn't about leaving the past behind. It's about choosing which parts of our history we want to carry forward, and recognising that the places we loved continue to shape who we are, even when we can no longer stand within their walls or riverbanks."

Michael White's classic paper "Saying hullo again" is a delightful audio recording by Hamilton Kennedy. This is one paper we can return to time and time again and find so many gems that can revitalise our life and practice. When we face grief, loss or displacement, Michael's words and gentle questions can offer rich possibilities for the person to reach back, relocate, and perform lost knowledges so they can reclaim their relationship with the lost loved one and "write" a new story of their lives.

This issue is an invitation for all of us to see ourselves as connected and rooted in rhizomic networks needing to stand up to power structures that brutalise through war, genocide, transphobia, detentions and other ruthless acts of harm. I hope we will keep developing innovative practice through songs, arts, humour and collective gatherings. I hope we will continue to tell our stories in ways that make us stronger and make our shoots travel far.

And here in India, my home, I hope people of my generation will learn from and join with those young people who are showing us new ways to organise and dream and resist.

In solidarity
Shelja Sen

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.

Sen, S. (2026). Editorial. *International Journal of Narrative Therapy and Community Work*, (1), i-iv.
<https://doi.org/10.4320/OKIW9406>

Author pronouns: she/her



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Peer-reviewed
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Moving beyond the limits of grief

by Helene Grau Kristensen and Augusta-Lucia Grau Kristensen



Helene Grau Kristensen is a narrative therapist who works with families who experience and live with grief, suffering from the loss of very close and significant relationships. Her work with parents who live with grief is internationally known for its significant development of re-membering conversations. Helene has been trained by Michael White, Maggie Carey, David Nyland, Stephen Madigan, David Marsten and Lorraine Hedtke. She has a private practice in Copenhagen, Denmark, and teaches narrative therapy at the University of Copenhagen. She is currently part of the teaching faculty at Vancouver School for Narrative Therapy where she teaches re-membering conversations. She has presented keynotes and workshops at international narrative conferences. info@helenegrau.dk

Augusta-Lucia Grau Kristensen has, since 2024, worked for Helene Grau Kristensen doing transcriptions of therapeutic conversations, participating as an outsider witness and writing therapeutic letters. She has attended narrative therapy training at the Vancouver School of Narrative Therapy and has participated in multiple international conferences alongside Helene Grau Kristensen. Augusta-Lucia's work focuses on relational understandings of grief, with particular attention to how bereaved parents sustain a continuing and active relationship with their deceased children. She is currently developing her academic and clinical practice through ongoing study of narrative therapy under the guidance of Helene Grau Kristensen.



Kristensen, H. G., & Kristensen, A.-L. G. (2026). Moving beyond the limits of grief. *International Journal of Narrative Therapy and Community Work*, (2), 1-14. <https://doi.org/10.4320/GAJX8630>

Author pronouns: she/her for both authors

Abstract

Western grief discourse remains shaped by modernist norms that individualise and internalise struggles with grief. This article proposes that grief-related symptoms often reflect resistance to cultural expectations that the bereaved should “let go” of the deceased and confine them to a static “museum of memories”. We argue that re-membering a deceased child – actively restoring their presence in the ongoing life of the parent – plays a vital role in supporting bereaved parents. Drawing on clinical case studies, we introduce a four-part framework for re-membering: alternative, ally, augmented reality and audience. This framework helps parents cultivate an active, present and physically felt relationship with their deceased child, offering a counter-narrative to dominant cultural norms surrounding grief.

Key words: *continuing bonds, complicated grief, bereaved parents, relational grief, Four A's framework, narrative therapy, narrative practice*

Why does our society make it so complicated to grieve?

My own story of working with grief began in 2007 when I lost my first child, Augusta, at the end of pregnancy. Grief disrupted the structures that had previously organised my life: it left me standing in a life that felt unfamiliar, stripped of its former shape. Conversations that should have been filled with joy and anticipation were replaced by silence and condolences.

Because Augusta never breathed outside my body, she was slipped into silence. For others, she did not exist. For me, she was my daughter, shaping my values, my sense of responsibility and the huge love that I had for her, the love that made me a mother.

What struck me most was not only the pain of her death, but the way society responded to it. My grief was treated as a condition to recover from and to be solved, rather than a testimony to my relationship with Augusta. In defending my right to cry, I was also defending her existence.

This experience revealed something larger: grief is not simply personal, it is cultural. Western society has constructed grief as an individual process, and as a condition in the bereaved when they exceed the culture's fixed timeline. If you continue to relate to the deceased in ways that don't comply with cultural norms of grieving for more than six months, you risk being diagnosed with "complicated grief" (Kristensen, 2021; Simon & Shear, 2024). In this design, relationships are permitted only between living bodies. When death occurs, the relationship is considered to come to an end, and the bereaved are expected to accept that (Hedtke & Kristensen, 2018; Hedtke & Winslade, 2016; Kristensen, 2021).

My daughter's death made me acutely aware of how these norms marginalise both bereaved parents and their deceased children. Augusta became my guide into the field of grief work, where I have consistently witnessed how society problematises those who grieve outside the prescribed script.

The question, then, is not what symptoms define complicated grief. The real question is: Why does our society make it so complicated to grieve?

Freud's legacy: The origins of Western grief culture

The way Western societies complicate grief is not accidental – it is rooted in specific histories. In 1917, Sigmund Freud published the essay "Mourning and melancholia", which laid the foundation for how grief would be understood for generations to come (Hedtke & Winslade, 2016; Klass et al., 1996). In this essay, Freud conceptualised relationships as existing only between two physical living bodies, centring a bodily realism. When one body died, the relationship, he argued, had come to an end, and detaching from the deceased would enable the living to move forward in the grieving process (Hedtke & Winslade, 2016; Klass et al., 1996; White, 1988, 2007). If the grieving person failed in their attempts to let go and instead continued the relationship, Freud labelled the process pathological, describing it as "a clinging to the object through the medium of a hallucinatory wishful psychosis" (Freud, 1917/1957, p. 244).

The dominant Western discourse of grief has been shaped by Freud's framework, informing the cultural expectation that the bereaved must detach from the deceased and move on. Within this dominant discourse, we are told to let go of the deceased, accepting their death as if grief were a condition we overcome through a linear process with a fixed expiration date. The deceased are gradually relocated into what I call a "museum of memories": a regulated space where the bereaved may engage with the dead only under culturally sanctioned conditions. Here, the dead become static artefacts – passive memories acknowledged only as something that existed in the past. In this museum, the language spoken is in the past tense. The bereaved are subtly instructed in how often they may "visit", how long they may linger and how deeply they may be influenced by those visits, as though grief were a condition to be managed rather than a relationship that continues.

There are, of course, people who find comfort in this model of grief. They are able to come to terms with their loss and move forward by detaching from the deceased. But these are not the people who seek professional help. Those who struggle with grief often come to therapy precisely because they cannot – and do not wish to – detach from the deceased. They continue to relate intensively to the dead.

The politics of grief

Although the rules of the museum of memories have become more flexible since Freud first envisioned them, and newer grief models such as continuing bonds critique his detachment framework, Freud's legacy remains deeply embedded and culturally entrenched (Hedtke & Winslade, 2016; Kristensen & Hedtke, 2018).

Freud's assumptions continue to be present in the diagnosis of complicated grief, where the bereaved's consistent preoccupation with the deceased, denial of their death and intense longing for them are interpreted as symptoms of pathology. Within this diagnostic framework, the prescribed solution is to help the bereaved to accept the permanence of the loss, detach from the deceased and develop a life independent of them (Simon & Shear, 2024).

Freud's map is no longer recognised as a historical construct tied to his 1917 essay; it has instead become a dominant cultural truth, shaping how our society at large thinks about grief and active relationships after death. This "cultural truth" is the real problem complicating grief today (Kristensen, 2021; Kristensen & Hedtke, 2018).

It is not only health care professionals who urge further detachment – "letting go" and "accepting the permanence of the loss" – if the bereaved continues to struggle with grief after six months. Significant others echo the same message (Kristensen, 2021). To grieve is not only to bridge the relationship to the loved one who has died. It is also to re-establish relationships with significant others in the community and to

break the silence by speaking about how the deceased continues to live in our lives. To grieve is not only to face one's own loss, but also to navigate the community's diminished capacity to heal. Trapped in the modern museum of memories, the bereaved must not only find their own way out, they must also guide the very custodians who were meant to help them towards the exit.

It became evident to me that extraordinary resilience is required to counteract the negative impact of these ideas on the grieving process. I began to consider how narrative therapy might support bereaved parents in building strong relational alliances that can help them to stand against the pressure and to hold on to what they know and prefer. I have come to see that development of these alliances in re-membering consists of at least four elements. For simplicity, and in honour of my daughter Augusta, I have labelled them with four words beginning with the letter A:

1. alternative
2. ally
3. augmented reality
4. audience.

Each of these elements is influential in helping bereaved parents to stand stronger in developing and strengthening the reality of the relationship to the deceased child and to resist definitions imposed on it.

Four A's framework: Alternative

Bereaved people seldom arrive at their first counselling session ready to re-member and "say hullo again" (White, 1988). Instead, they come bewildered and distressed, burdened by grief, questioning their own ability to grieve.

One and a half years after the death of her son Christian, aged 30, Susanne reached out to me. She was overwhelmed by grief and surrounded by the dominant discourse that insists grief must be endured until it subsides. Susanne found herself unable to bear the weight of relating to Christian

solely through his absence. Like many bereaved parents I have met, she could not detach. She could not not relate to her child. And when the only relationship available was one shaped by static memories and the constant reminder of what he could no longer be, the pain became unbearable. The weight of these memories left her unable to sleep at night or to function at work during the day.

Displaying what might be described by health professionals as symptoms of complicated grief, Susanne explained how she had asked her employer for sick leave after her son's death as her work didn't leave her much time and space for grief that was making it hard to function. He refused, advising her that the best treatment for grief was to let go of Christian and work through it. She explained how she had tried to continue working but little improved. She had even tried to detach from Christian but only felt increasingly disconnected from herself, her life and her surroundings – surroundings that didn't talk about Christian.

This raises a critical question: was Susanne truly suffering from complicated grief, or was society itself complicating her grief?

Susanne had tried to follow the map of grieving, but it didn't help her to feel better. She felt stuck in the grief, not being able to let go of Christian and feeling the pain of his absence. As therapists, we must recognise that what is often labelled as complicated grief may, in fact, be the client's protest against the position society has offered them: to let go of the dead and silence the relationship. From a narrative therapy-informed approach to grief and loss, Susanne was not the problem. Her complications arose because society had trapped her in the modernistic museum of memories without offering her a map to the exit.

Susanne needed something else. She needed a way to continue relating to Christian that was active, present and alive in her daily life.

Drawing on White's (1988, 2007) concept of "saying hullo again", we began the process of re-membering Christian, not reduced to the past

but as a companion in the present. By bringing Christian into the centre of our conversations, we explored his actions, his values and the ways those values had shaped his life. As Christian became more present and active in Susanne's everyday world, she discovered she could continue to relate to him by allowing his values, his pride and his care for her to inform her own actions. His imagined voice became available to her, not just as a storied connection but as a felt ongoing relationship.

By our third conversation, Susanne reflected on the transformation:

He becomes a constant presence that I can carry with me. Before, it was a heavy burden because the grief was so overwhelming. Now, it's more like it was when he was alive, and it's okay. It's really hard to explain, but he is more present in me in a more lively way without it being heavy.

For Susanne, the relationship with Christian became real again – not merely a storied connection but an active one. This shift made the burden of grief less overwhelming. No longer confined to memories of what Christian used to be, she began to sense his presence daily in a relationship that continued to develop.

Yet, as Susanne herself acknowledged, this experience is difficult to explain. What does it mean to have an active relationship with someone who is no longer breathing? And how can therapists help establish such an active relationship if it is desired?

Before re-membering the deceased can begin, the parent's responses to the dominant discourse of grief must be made visible. An alternative understanding of their grief, which might otherwise be labelled as symptoms of complicated grief or not being able to move on, needs to be established as an opening to re-membering. To achieve this, I often turn to questions that explore the absent-but-implicit in the parent's grief. In this context, the absent-but-implicit refers to how the symptoms of grief reflect what remains important in the parent's relationship with the deceased child.

Gustav and Marie: Continuing love

Marie reached out to me a year after her son Gustav had died by suicide at the age of 17. At the start of our first conversation, she explained that she had already spent a year in therapy with a psychologist specialising in trauma and crisis, yet those sessions had focused almost entirely on the crisis, leaving little space to explore the loss of Gustav. As she recounted this, she burst into tears.

From the more dominant psychological practice perspective, her tears could easily have been categorised as a symptom of her inability to accept the permanence of the loss. Yet I was curious: could they also speak to her relationship with Gustav and how she wished that relationship to continue?

Here are some of the first questions I asked Marie, and her responses.

Helene: Can those tears speak to what has been touched in your motherly heart that there has been so little space for Gustav? Are these tears protesting something in relation to Gustav?

Through these questions, I wanted to bring forward how the tears did not comply with the norms of letting go of Gustav. I could have asked: Does not talking about Gustav silence your continuing love for your son? And how is it for you as a mother when Gustav is being reduced to not being talked about? Very often, these kinds of questions allow the parent's protest against the cultural norms to become evident, respecting their lived experience as protest and a reflection of what continues to matter: their love for their child in an ongoing relationship.

Marie: On one hand, I want to be able to feel Gustav. On the other hand, it brings pain. When I come home to an empty house, that's when I feel it.

Marie's response spoke to what was absent in the tears: to feel Gustav again and not to let go of him. But what she also was experiencing, and what was complicating her continuing

relationship with Gustav, was that he had been reduced to memories. These only reminded her of who Gustav *used to be and could no longer be*, making it extremely painful to relate to him.

While Marie was relating to his absence – to Gustav not being there – I wanted to ask questions that made Gustav's continuing presence more visible.

Helene: Yesterday, when you had more time to relate to Gustav and your attention wasn't pulled elsewhere in the direction of your other children, how did Gustav appear? Do you see him or does he appear in your thoughts?

Marie: Lately he has started to show up in the streets – older boys about his size, walking in the same relaxed way he did, his hairstyle, his broad, handsome and relaxed upper body.

Helene: So you see Gustav in relation to other young men? If you could tell me more about Gustav, how would you describe him?

Marie: He was ready to take on the whole world. He looked good. He was musical, kind to others – his friends. He was something truly special.

Helene: So I get a sense that Gustav is truly something very special. I do find myself being so much more interested in getting to know who Gustav is. Does Gustav have strong values in relation to friendships?

When Gustav becomes one *who is*, and not one who *used to be*, he becomes more available in a present relationship. In the following transcript, you can see she changes her language.

Marie: Yes, he has done a lot for a friend he had in ninth grade who couldn't get out of bed and go to school. He smoked a lot of hash and Gustav went to his house.

Helene: Do you have a sense of what made Gustav not just stay at school, but walk all the way to see his friend at home?

Marie: Because he **is** very caring.

Focusing on what remained present in the connection between Marie and her son moved past the traumatic memories of Gustav's death. The deceased should be relationally *reincorporated* into the lives of the bereaved (Hedtke & Winslade, 2016; White, 1988, 2007). Left alone, Marie would continue to relate to Gustav only through memories, centring the loss of the relationship. Instead, I sought to help her recreate an active and present relationship. This can be achieved through the process of re-membering in which we help the deceased become an ally.

Four A's framework: Ally

As an ally, the deceased child becomes an active and supportive presence that can help shape the bereaved parent's identity and guide their responses to the complexities of grief and life. Instead of responding as an isolated individual to dominant grief discourses, the bereaved parent can begin to respond within the relationship with the deceased child. It becomes a relationship in which the child and the parent can team up, being influenced by the child's present guidance, intentions, care and imagined voice.

For the bereaved, grief is not only about responding to loss. Parents whose child has died are often tormented by guilt and persistent questions such as: "If only I had acted differently, my child might not have died." This was true for Susanne, whose son Christian had been terminally ill. Being a doctor herself, Susanne knew Christian's medication was only life prolonging, not lifesaving. Knowing what was coming, Susanne made the choice to stop the medication. Soon after, Christian died, and Susanne started to repeatedly ask herself: Was it the right choice? Have I killed my own son? I could have reassured her that she had not killed him. But parents do not step away from guilt simply because someone

tells them it is not their fault. Mother-blaming is far more persistent than the voice of the therapist.² Instead, I invoked a voice that might be stronger than mother-blaming: the deceased child.

In our re-membering conversations, we explored what Christian valued most. A theme of "being present" ran through his life, and those valuable moments of being present often played out in his relationship with his mom. Christian, restrained by the disabilities of his body, loved to feel the presence of his mom: her hugs, holding her hand and hours of her undivided attention. Grounded by this knowledge, I started to bring Christian into our conversations as an active and present voice about the guilt: "If Christian could have a voice, and he could speak for what he knows about you, what would he say you intended for him by stopping the medication?"

This question opened space for Susanne to reflect on what she so deeply intended – that her choice had been informed by her wish to be close to Christian while he died. She could not allow that Christian should die distanced from her and surrounded by medical equipment. She wanted to lie beside Christian on his final night.

By bringing Christian into the conversation – asking how her decision mattered for him, how he wanted her to be present with him, holding her arms around him – she realised that her decision made a difference to Christian. I then asked her: "Do you have a sense of what difference it makes for Christian that he can help you stand stronger against the guilt?" Through this series of questions, Susanne and Christian's relationship grew. Susanne experienced that Christian could support and guide her in relation to the grief and how to proceed in life. He became her most trusted ally.

I often explore the deceased child's values and skills in the first conversations of re-membering, and I draw on these values in constructing the deceased as a trusted ally throughout subsequent sessions. The following illustrates this approach.

Gustav and Marie: Positioning Gustav as an ally

In our first conversation, Marie began to remember her son Gustav. While alive, he had said, “It is important that you now start to live your life”. He supported her to stand up for her own needs and to leave a troubled marriage. As Marie spoke about their relationship, she became increasingly connected to her son’s caring and love for her. It became important for her to continue to let her actions be informed by Gustav’s values as a way of continuously being connected to him.

Many of the questions I asked brought Gustav from the past into the present: “Do you think that Gustav would appreciate that his caring for you can still be brought forward and influence you to stand up for yourself?” Questions like this invited Marie to experience how Gustav could continue to support and influence her if she was drawing on his values, caring, intentions and love for her.

I then started to explore how Gustav could specifically support her in navigating the complexities of grief, specifically the effects of guilt. Because Gustav had ended his own life, Marie could easily have been tormented by guilt and mother-blaming, questioning her abilities as a mother and seeing herself as a failure in preventing her child from killing himself. I externalised the experience of guilt and centred exploration of Gustav’s knowledge about his mother.

Helene: What is your sense of what Gustav especially appreciated about you, that you were able to do in relation to him, that really spoke to his values?

Marie: I think that Gustav really felt that I understood him, and I respected him, not blaming him. The other day, I came across a picture of Gustav where I could see his gaze on me, so full of love. After he got sick, he said to me, “Mom, I have become so much more aware of how much I love you after all the things you have done for me,” and

I felt an unconditional love from him because we understood each other.

Helene: Knowing how Gustav sees you through his loving eyes, knowing his exact words for how huge his love is for you, do you have a sense of what difference it makes, compared to if Gustav had not shared this with you?

Marie: I don’t know ... Maybe I would have blamed myself more. I do think about things I should have done, but maybe that gets stopped by knowing Gustav knew I did what I could – and more than that.

Helene: Wow, can it reflect the impact Gustav’s loving gaze and kind words can have on you when you make use of it – that if you hadn’t known about them, the guilt would have had an even stronger hold on you?

Marie: Yes, I think so.

Helene: Even though guilt may always find its way into a mother’s heart – when you love so deeply – is it fair to say Gustav makes a small or a big difference in how you relate to guilt?

Marie: Yes, he actually makes a huge difference. I hadn’t thought about it before, but yes – he does.

Through these questions, Marie began to recognise how profoundly Gustav was already influencing her relationship with guilt. In constructing Gustav as a significant ally, my intention was to help them move into a present and active allyship, one where he could actively support her in navigating grief by his present intentions and caring.

Helene: When you think about your relationship with Gustav and the value he places on care for you, do you have a sense of what it means for him that his loving gaze and kind words now help you stand stronger against guilt?

Marie: It means everything. The night he died, he sent me a message: "I'm sorry. I hope you can forgive me. You did everything for me. I wouldn't have made it without you. I hope we meet on the other side." That night, after he died, I was trying to sleep. My eyes were vibrating, and I felt butterflies behind my eyelids. It was so real, so intensely real. I had no doubt it was Gustav. He was saying: "Mom, it's not your fault. You need to find peace and sleep now." And then a calmness came over me, and I fell asleep.

Helene: What do you think this says about his love for you?

Marie: It says everything.

Helene: Do you think Gustav, in his love for you, has a wish that he can continue to support and help you in your life?

Marie: I believe he does. Even though I selfishly wish he were here in a different way, I still feel he is present. When people say, "It's amazing how you manage to keep going", I know it's Gustav who gives me light.

These questions helped Marie to connect to richer descriptions of how it mattered for her son to be her ally in the relationship they continued to develop and enabled them to stand together against the effects of guilt. These questions even helped Marie to see that when she draws on Gustav's gaze and his support for standing against guilt, this becomes an act of motherly love – she is doing something that matters to Gustav. This created the opportunity for reciprocity in the relationship she was now growing with Gustav.

In positioning Gustav as an ally in responding to the complexities of grief such as guilt, it became clear that Gustav's experience of his mother offered a markedly different account of her than the discourses of mother-blaming and guilt. Additionally, because of the significance of his identity as her son and

their relationship, it was more important for Marie to listen to him than anyone else.

When we construct a present and active continuing relationship in which reciprocity between the deceased and the parent can occur, the deceased can become a significant ally who supports and helps the bereaved parent in responding to all matters of life, not merely in relation to guilt. Yet for this preferred story of a present and active relationship to thicken, it must become more than words. The deceased's presence must feel real, like the night Marie described sensing butterflies behind her eyelids and knew without doubt that Gustav was speaking to her.

Four A's framework: Augmented reality

When a bereaved parent starts to cultivate a present and ongoing allyship with the deceased child, the experience of sensing and feeling the child's physical presence can become an important element in growing the relationship. Lorraine Hedtke has written about this as embodying the re-membling in an upcoming book.

Confronted with the ever-present physical absence of their child, it can become important for bereaved parents not only to develop an active allyship, but also a relationship where they can experience the physical presence of their child. These moments of felt presence are not just symbolic or narrative constructions; they are moments when parents achieve the ability to have an embodied experience of their child that expands the relationship into a lived, sensory, augmented reality.

To support and help parents to develop a continuing experience of their deceased child's physical presence in the relationship, I often ask questions that bring forward or explore the sensory experience of the deceased child's presence: "In that moment, how do you feel the presence of Gustav? Where do you sense him? Is he beside you, behind you or does he somehow emerge in you?"

In these conversations, I often explore moments of physical presence where symbols and rituals are created that can make small openings for the parent to feel and call on the deceased's physical presence, for instance in a hug, the touch of a hand or small signs through which they experience being able to feel physically connected. These questions or rituals allow the bereaved to develop a counter to dominant cultural discourses that impose a reality in which the child's presence is impossible. And in many of these conversations, parents start to experience the growing realness of their child's physical presence. This sensory experience allows parents to construct an augmented reality that is not merely imagined but *felt*. Marie described such a moment:

That night, after he died, I was trying to sleep. My eyes were vibrating, and I felt butterflies behind my eyelids. It was so real, so intensely real. I had no doubt it was Gustav. He was saying: "Mom, it's not your fault. You need to find peace and sleep now." And then a calmness came over me, and I fell asleep.

In this moment, Gustav's presence was not metaphorical. Marie did not just imagine calmness but felt it because Gustav brought it to her. Narrative therapy has often described re-membering as constructed through stories. But bereaved parents frequently construct reality, when their senses are being employed, convincing them through what is being sensed. As Anthropologist Barbara Myerhoff argued:

The extreme employment of the senses in these moments convinces the body, and the mind follows. "Doing is believing" in such cases and "sensory," as opposed to what Langer calls "discursive," symbols are used, because of their extraordinary capacity to make the improbable momentarily beyond question. (Myerhoff, 1982, p. 106)

Through questions that help parents to explore and develop what they are sensing, the stories help to grow the sensed reality.

When questions helped Marie to focus and story how her relationship with Gustav was

developing through her sensing of his physical presence, these moments could become more than imagination; they could become *relational events* in which his presence was felt rather than constructed. They served as a protest against the dominant discourse of bodily realism that insists that sensing the dead is a psychological construction rather than a relational event. For Marie, these conversations allowed her sensory reality to have more authority than the external one. The reality she and Gustav related to became stronger than the reality imposed on her.

Christian and Susanne: Re-embodiment through rituals

Through our conversations, Susanne began to feel and sense Christian's physical presence. Sometimes he would appear as bubbling, loving particles in the left side of her body. At other times, she would sense his physical presence in the car, sitting in the passenger seat beside her. Susanne was left with the experience of being filled by love from Christian.

By our ninth conversation, we started to explore Susanne's practices of re-invoking Christian's physical presence in the car so that she could at any time sense or call forward his physical presence.

Helene: Those times when you have succeeded in connecting and sensing Christian's presence in the car, I wonder how you might have helped Christian to emerge. Is there anything you do before getting into the car?

Susanne: No, it's just that my mind has been calm at those times – no racing thoughts – and I think that creates the space in my head to make room for him to emerge.

Helene: What are some of the first steps you might take to connect to Christian?

Susanne: I reach my hand over to the passenger seat – that's where it starts.

Helene: When you reach your hand over, what do you make possible for you and Christian, what do you begin to sense?

Susanne: Yes, I first sense his body, the way I feel it on the seat next to me. That's when the portal begins to open. I sense him, and I connect with him. Yes, it definitely starts when I reach out my hand.

These kinds of questions helped Susanne to notice how the physical sensing of Christian in their continued relationship was a relational action: she was reaching out for him while she was making herself available for sensing him.

A ritual for how to bring Christian's felt physical presence forward in the relationship was starting to take form. Very often, these rituals are not accidental but represent fragments of practices of physical connection that were once played out between the bereaved and the deceased while both were bodily alive, such as hugs, holding hands or sitting next to each other. When those practices are relationally brought forward into a present and active sensory relationship with the deceased, where they are being re-imagined and re-felt, they can create new openings for sensing the physical presence of the deceased.

Helene: On those days when you're able to connect and sense Christian's presence, is there a particular way you think of him? Do you picture him at the age he would be now or younger?

Susanne: I think I see him as he was when he was younger – when we used to drive to Italy every summer for three weeks, and he sat right next to me. That's the image I bring up. He loved those trips. There was nothing he enjoyed more. We had long drives, and it was just so cosy.

Susanne was becoming more aware of how to create openings to feel and sense Christian's physicality. I wanted to ask questions that explored how the physical presence of Christian was being felt. This helped Susanne to grow the bodily experience of feeling Christian's presence.

Helene: And when you reach your hand to the passenger seat, and you and Christian start to connect, can you describe even more how you sense him?

Susanne: Well, I think I feel his presence.

Helene: And how do you feel his presence, when he is present?

Susanne: It's hard to define, but I have no doubt. I can feel it.

Helene: Do you sense it as Christian's physical body, his energy or how do you sense it?

Susanne: Not his physical body – and yet, yes. It's his energy that I feel, like bubbling love particles inside me. He does something that allows me to feel him within me. And some people might say I'm just imagining it – that I'm delusional – but it feels real between Christian and me. It's there. He does something to me.

Susanne was describing an augmented reality that was gradually being formed: the relational space in which Christian could emerge and fill her with what she called his "love particles". In this augmented reality, the relationship between them moved to another level in which the reality she held could become stronger than the dominant discourses of bodily realism. These discourses can so easily rob bereaved parents of the possibility of continuing to experience a sensed and present relationship with their child. But when the sensory reality is strengthened, and when the relationship is shaped by what is being sensed rather than by what is socially imposed, parents can continue to relate to their child through felt presence rather than absence.

For Susanne and Christian, a ritual was re-established that allowed her to invoke authority over the sensed reality, rather than a reality that otherwise left no space for sensing an ongoing relationship. Some may describe this augmented reality as spiritual, but its significance lies in the fact that it does not rely on a belief in spirituality; it arises through bodily experiences. It offers a way of experiencing the child's presence that is

available even to those who do not think spiritually. Therefore, what matters does not lie in what it is called but in what it allows: an ongoing sensory relationship that modernistic discourses would otherwise erase or make difficult to articulate. Even as Susanne described her experiences, she felt compelled to add, “and some might say ... I’m delusional”. She was fully aware of the rules of the modern museum of memories or the dominant discourses of bodily realism. She knew that if one of its custodians discovered she was “taking the dead for a ride”, she would be labelled as mad. But if we as a society become too caught up in these engraved modernistic and scientific discourses, we will fail to see that for Marie, that night she felt Gustav’s physical presence through the butterflies behind her eyelids, it was more than a grief-induced hallucination. We will fail to see that for Susanne, taking Christian for a ride and sensing his physical presence by through the bubbling love particles was more than a psychological coping strategy.

Modernism has edited the dead out of our reality, leaving us with a deprived language of death and grief in which relationships are only permitted between two physical bodies. Within such a restricted vocabulary, sensory experiences of the deceased are easily dismissed as imagination or projection. This is why Susanne found it easier to sense than to explain, and the sensory reality she related to was richer than the language available to her. This is also why even narrative therapists struggle to grasp such experiences: our professional vocabularies have been shaped inside the same modernistic discourses that deny the possibility of felt presence. Yet slowly, through remembering and reembodying the deceased, we can begin to rebuild a more vivid language for our relationships with the dead, which opens space for alternative relationships with the deceased.

Four A's framework: Audience

Often, bereaved parents can feel lonely when they continue to develop their allyship with the deceased child, lacking support and participation from others. Being influenced by

the dominant discourses of death, grief and bodily realism, significant family members and friends often remain trapped in the modernistic museum of memories that the parents have already exited. The surroundings continue to reduce the child to mere memories, to silence the voice of the continuing relationship, and at times seeks to regulate the bereaved parent’s interaction with the deceased child.

Both Susanne and Marie struggled to recruit others into more actively support their ongoing relationships to their sons. Susanne and Christian were silenced when Susanne’s mother-in-law decided to exit the dinner saying she did not want to hear about the dead. Marie recounted an encounter with an ex-boyfriend:

I met an ex-boyfriend where I talked about Gustav, and that he is still here, but I don’t think he quite understood. I sounded like someone with a tinfoil hat. It’s so hard for others to understand if they haven’t experienced it themselves, so it becomes a bit like: she believes it because it’s unbearable that he’s not here anymore, that it’s just a security blanket.

Bereaved parents can sometimes be supported to recruit an audience to the ongoing and active relationship with the deceased child through sharing letters. Drawing on narrative therapy’s rich practices of letter writing, I write letters to the bereaved parent after each session, positioning myself as an outsider witness to the continuing relationship (Bjoroy et al., 2016; Russel & Carey, 2004). Those letters significantly help to build and support the allyship with the deceased child and their continuing physical presence at times when the parent feels lonely. The letters can also be shared with important others who may become supporters of the continuing relationship. Questions can be included for readers, helping them to become a more active audience. Marie, for instance, shared a therapeutic letter with her mother, and this allowed her mother to become knowledgeable about and affirm the reality of Marie’s ongoing relationship with Gustav.

At other times, I write letters from the deceased child to the surroundings, helping the child to have a voice that speaks to the importance of having a continuing present allyship, reiterating what the deceased child appreciates about their parents not having reduced them to memories, but continuing to make it possible for them to be a helper and supporter, and how the child hopes in specific ways the surroundings can help them and their parent.

More recently, I have begun building communities for bereaved parents. I record conversations with one parent, and these recordings are then shared with other bereaved parents, who listen and write an outsider-witnessing letter. As they listen, they are influenced by the questions, the values and the relational movements in the conversation, allowing them to reflect on their own continuing relationship with their child. When they write the letter, they position themselves and their own child as supporters of the parent whose conversation they witnessed. These letters often describe what the listener noticed about the deceased child's values, the ongoing relationship being expressed, the protest against cultural norms, and the resonances with their own continuing allyship. In this way, each parent becomes both witness and companion, strengthening their own relationship with their child while supporting one another. This practice moves grieving parents from a position of lonely protest to one of community rebellion, creating solidarity in the face of dominant discourses that marginalise their grief and their ongoing relationship with the deceased.

Conclusion

Bereaved parents who struggle with grief are not best supported through further detachment but through practices of re-memembering that restore the continuing relationship with their deceased

child. The Four A's framework demonstrates how bereaved parents can develop an **alternative** understanding of their grief, recognising their symptoms as a protest against dominant cultural norms rather than signs of pathology. It further supports parents in growing an **allyship** with the deceased child, allowing the child to continue as an active and present guide in their lives. Through creating an **augmented reality**, bereaved parents can continue to feel and sense the child's physical presence, enabling the relationship to develop through ongoing embodied and sensory experiences rather than through memories alone. Finally, through recruiting an **audience**, therapeutic letters and outsider-witnessing practices invite others into the continuing relationship, creating communities that witness, validate and actively strengthen the relationships bereaved parents continue to live and sense with their deceased child. Together, these Four A's strengthen the reality of the continuing relationship until it surpasses the modernistic definitions imposed on it.

Notes

- ¹ Throughout this article, the pronoun "I" refers to Helene Grau Kristensen, who conducted all therapeutic conversations described. The article itself has been coauthored by AugustaLucia Grau Kristensen and Helene Grau Kristensen.
- ² The term "mother-blaming" describes a dominant societal tendency to locate responsibility for a child's suffering or behavior within the mother (see Caplan, 1990).

Dedication

Dedicated to all the deceased children we have come to know and to Lorraine Hedtke for her teachings.

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Dismantling dominant disability discourse*: Exploring liberatory language for neurodivergent experience

by Dana Kabaila



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Abstract

Narrative therapy offers powerful approaches for honouring neurodivergent insider knowledge to resist thin, pathologising conclusions. To explore and extend these approaches, I interviewed loved ones as neurodivergent co-researchers using narrative principles to re-dignify their living experience. These interviews led to therapeutic letters, peer outsider witnessing and engagement with a therapist listening group. I used the terms “neuro-wild” to explore freedoms, “neuro-wild cultivators” for re-memembering supporters, “neuro-taming” for survival skills and “neuro-rewilding” for reclaiming preferred ways of thinking, being, knowing and doing. I hope this paper offers new possibilities to neurodivergent folk seeking support and to neurodivergent providers, authors and researchers.

Key words: *neurodivergent, co-research, therapeutic letter, outsider witness, therapist listening group, narrative therapy, narrative practice*

*While embracing alliteration

Kabaila, D. (2026). Dismantling dominant disability discourse: Exploring liberatory language for neurodivergent experience. *International Journal of Narrative Therapy and Community Work*, (2), 15–25. <https://doi.org/10.4320/ZJJL1915>

Author pronouns: she/her

Academic literature about neurodivergence is often housed in pathologising professional discourse that does not resonate with the researched (Bertilsson Rosqvist et al., 2023). Some of this research correlates difference with suffering and focuses on eradicating or assimilating ways of thinking, being, knowing and doing (Bovell, 2015).

External observers applying a deficit- and abnormality-based lens bypass a vibrant neurodivergent community with its own cultural practices (Bovell, 2015). For example, viewing sensory sensitivities in terms of suffering, or as the cause of unusual behaviours requiring remediation, misses lived-experience accounts of bodily refusals and reclamations that support regulation, release, fascination, euphoria and connections with the divine (Bovell, 2015; Milton, 2012; Ureña & Varma, 2025).

While our brains are deeply personal, psychiatric knowledge often objectifies neurodivergent people as silent “others” (Byers & Newman, 2019). The myth of a singular neurotypical brain as natural, universal and correct sets an impossible standard (Rosqvist & Jackson-Perry, 2024). While nobody can fully meet neuro-perfect criteria, this disproportionately marginalises people furthest from these ideals (Madigan, 2011).

Neurodivergent representation in both research and popular media is often limited and stereotyped, centring folk who are white and male. An egregious lack of diverse representation contributes to diagnostic biases, disregard of personal and cultural knowledge, and failure to address the heightened risks of incarceration and deportation experienced by neurodivergent people of colour (Nair et al., 2026). Even within the neurodiversity movement, the rich disability and relational ethics traditions and philosophies from the Global South are largely overlooked (Nair et al., 2026). This renders many experiences of neurodivergence invisible, is intellectually unsound, and constitutes testimonial, hermeneutic and epistemic injustice (Baretta et al., 2010; Gopal, 2021).

Liberatory language

Drawing on mutually informative depathologising ideas from the Neurodiversity, Disability and Mad Pride social justice movements, I use the umbrella term “neurodivergent” to welcome all folks whose internal experience and/or external presentation do not fit “the norm” (Redikopp, 2018; Smart, 2024). “Neurodivergence” is offered as a launching point for expansive enquiry beyond single, thin, imposed, proof- and consensus-driven descriptions.

The suffix “neuro”, typically used in medical contexts, has been transformed in a range of playful ways, like neuro-spicy, neuro-heretical and neuro-whimsical. I have developed some additional terms to guide narrative conversations and invite new possibilities and connections (see Baretta et al., 2010). These include “neuro-wild”¹ to describe the freedom and expansiveness of preferred identity, and “neuro-taming” to describe skilful responses to neuro-normative demands. I intend for the term neuro-taming to be multi-storied: both celebrating agency in developing skilled bilingualism (with neuro-normative communication as an additional language) and dignifying suffering associated with neuro-normative pressures. The concept of “neuro-rewilding” can be used to guide double story development by focusing on resistance to neuro-normativity and reclamation of neurodivergent freedom (see Grieve-Williams, 2019). “Neuro-rewilding” carries the assertion that neuro-wildness cannot be erased by neuro-taming, though it might take time and care to recover. Neuro-rewilding lights up current and possible future actions and identity conclusions that hold local resonance and meaning. There is reasonable hope for small or partial victories that are not trivial and generate ripples of change (Morgan et al., 2019).

This language draws on nature images as the more-than-human world is often treasured by neurodivergent folk and contributes to their wellbeing and feeling of reciprocal belonging (Hayden, 2022; Miller, 2020). Nature metaphors abound in neurodivergent communities. For example, autistic Aboriginal-European artist

Sara Kian-Judge (2024) has compared autistic folk to bats, if bats were perceived as “strange, featherless Birds condemned to the night, surely longing for the light of day” rather than creatures with their own unique ways of being.

My use of language also draws on histories of innovation in narrative practice, including First Nations narrative practitioners telling stories in ways that make them stronger and seeing themselves in ways that are “hopeful and prideful” (Wingard & Lester, 2001). This leadership gives me courage to unpick what has been said about the neurodivergent community and feel grounded in a known sense of belonging.

Queer theory invites fluid movement from the fixed and certain to the confused, unstable and transformative (Reynolds, 2014). This offers reprieve for many neurodivergent people who tie themselves in knots trying to get a “conclusive answer” about their neurotype. Similar to what queer theory validates for nonbinary folk, neurodivergent folk can explore their experiences as complex and dynamic (Smart, 2024; Sostar & Maeder, 2019). The queer justice movement resists the forced choice of invisibility by camouflage or hyper-visibility through being identified as different (MacIntyre-Harrison, 2023).

Articles in this journal have often featured neurodivergent people seeking therapy; however, there has been a recent expansion to include openly neurodivergent narrative therapists, community workers, authors and thought leaders including Sandra Coral (2025), Emily Salja (2022), Tiffany Sostar (2024), Emma Van der Klift (2019) and KJ Wiseheart (2025). Every single neurodivergent author (and, in fact, person) inspires me to speak up and look out for other folks relegated to the margins.

Narrative therapy commits to liberation, no matter where the oppressed are found. As a neurodivergent narrative therapist, I am eager to join with the call from Reynolds, Dupuis-Rossi and Heath (2011) to “not throw up our hands, but roll up our sleeves”. Voices from the margins carry the power to dismantle normalising ideas, treat

professional alienation and help create a home for all of us (Newman, 2024; Reynolds, 2012).

Co-researcher connections

To further explore the liberatory possibilities of narrative conversations about neurodivergence, I invited co-researchers who I already regularly spoke with about neurodivergence and resisting power. My cousin Rasa and I exchange daily voice memos. She is a mental health nurse practitioner who has authored a book and many articles speaking from her own living experiences. My dear friend Nat is someone I enter flow state chats with where we talk deeply about understanding and responding to life’s complexities. Christina is a collaborator and friend whose multicultural neuro-affirming approach I greatly admire. Recruiting co-researchers from my family, friends and colleagues allowed me to try out different ideas and lent itself to more equal power relations. Still, it needs to be noted that my position was largely one-directional as interviewer, letter writer and coordinator of outsider-witness responses (Reynolds, 2011). Communicating across emails, text messages, voice memos and in-person meetings (with audio recording) helped “cross the imagined boundaries between personal, professional, and scholarly spheres” (Nobe-Ghelani & Barnhart, 2024, p. 139). These modes of communication proved flexible, practical and relational.

Where conversations around neurotype often start with diagnostic criteria, I started by asking my co-researchers to reflect on neuro-wild memories. This evoked recollections of enjoyable moments in life that were unfiltered, unquestioned or minimally interfered with. My co-researchers insightfully positioned memories in relationship to family members, friends and teachers. The need for a term for re-membling important people became apparent, and “neuro-wild cultivators” was agreed on. I also once misread “lived experience” as “loved experience” and thought that could be useful for future re-membling conversations about the lived experience of loving someone and/or being loved by someone and the potential for that love to be

revolutionary (Reynolds, 2012). The term “lived experience” suggests previous experiences. While this may be fitting for recovery or remission, I used the term “living experience” in our discussions as I felt it better captured the dynamic nature of disability, day to day and across the lifespan.

Interviews, letters and witnessing with Nat and Rasa

My dear friend Nat has walked alongside me as we both explored self-identifying our neurodivergence. The added step of interviewing and recording her stories deepened my appreciation of her journey. I developed questions that I hoped would be “failure-proof” (Newman, 2016) as entry points for multi-story development about her experiences of neurodivergence, like this interview excerpt:

Dana: Where did you feel like your neuro-wildness could flourish? Where else did you feel free and uninhibited? What activities, what setting, which people?

Nat: Lots of outside time. Train excursions, gardening and footy with my father. Thankfully gender norms were not pushed at that stage. My best friend at kinder[garten] was a boy and we ran wild, which was great.

It was exciting and surprising to hear Nat’s responses. I knew her childhood had been incredibly hard in many ways, so it was lovely to draw out, linger on and thicken a second story of childhood times. With stories gathered in audio transcripts, I generated a therapeutic letter with rescued experience-near words (Newman, 2008), joining them in a way that I hoped would allow her story to breathe. By taking the role of narrator, I wanted Nat’s wisdom to be carried in her own voice, with my responsibility being to craft a story into an experience for the reader or listener (Miller, 2020; Reynolds, 2014; Russell & Carey, 2004). There is power inherent in the position of curating stories and a responsibility to aim for resonant local impact (Lainson et al., 2019), as with the letter excerpt below:

When Nat left home, she met new neuro-wild cultivators who had found their own ways to escape normality: “I felt a kinship with my housemate – we cared for each other. I met people so far from what I knew: drag performers, queer folk, sex workers – outcasts and trailblazers, out and proud, just being.”

I read my letter back to Nat as both my interviewee and a co-researcher reflecting on the process (Lainson et al., 2019). She remarked:

I feel really moved. Like, I think about my life and my past a lot. I’m almost constantly reflecting. But this was different. Tracing the neuro-wild, neuro-taming stuff made everything feel more connected, instead of random events. Yeah, it felt validating.

My cousin Rasa Kabaila lives interstate, and when she visits Naarm/Melbourne, Nat and I try to go out surfing with her. Nat was keen for me to share her letter with Rasa and Rasa was excited to receive it. To support Rasa to situate her responses in her own living experience, I added prompts at the end of Nat’s letter including the below example and her response:

Dana: What struck a chord with you or captured your imagination while reading this letter?

Rasa: I found it emotional and, I guess in some ways, confronting as it was so real, and it brought up a lot for me. That’s not a bad thing – it’s demonstrative of its rawness and beauty. I felt happy when I could hear about Nat and her dad playing together and Nat being able to express herself in ways that she does as an adult (e.g. being active and trying new things). I felt like I was brought back to that moment. I could sense these times were protective for Nat. It has me thinking about beautiful moments you have on your own and with people around you as a child – and my dad taking us down the rapids at the dam on lilos!²

Nat's stories supported Rasa to share her own related experiences in a double storied way highlighting the potential for narrative documents and witnessing to be antidotes to isolation and individualism (Denborough, 2008; Newman, 2016).

I interviewed Nat about what it was like to have Rasa witness and respond to her letter and her response included:

I wasn't necessarily expecting her emotional connection to my journey and her appreciation and validation, and I easily forget how other people might perceive me, and what they would think of me, and maybe it's because I'm stuck in my head so much of the time that I forget that other people would see me in a particular way. And when I say, "see me in a particular [way]", I mean, see me in a positive way, like, admire you and totally, that's validating.

This seemed to capture the notion that "Being heard is not enough – a person's words must matter" (Reynolds, 2013, p. 56).

In a form of synchronous narrative practice, I followed interviewing Rasa as outsider witness with interviewing her about her own experiences, including via voice memos:

Dana: With neuro-rewilding, I'm thinking of bringing back things that we lost or misplaced or got taken from us. So, as an adult, what have you brought back into your life or protected in your life, despite it not fitting ideas about the norm?

Rasa: I think now as an adult, I'm going back to those things that feel a lot more natural to me, that I really enjoy, without feeling like I have to hide them. The moment people walk into my house, they see my brain. My boyfriend accepts me wholeheartedly. He put rubber duckies in our Jacuzzi and tucks my teddy, Oliver, into bed in the morning after I get up. Being physically active is the one thing that forces my mind to focus on just one thing. I have

found ways to get the intense tactile sensory input I need. I went from netball to basketball to mixed martial arts.

I think this offers such a rich description of ways of prioritising what is important while drawing on community and disregarding unhelpful restrictions. Following the interview and outsider-witness processes, I asked Rasa a metalinguistic question:

Dana: How did you find using the terms "neuro-wild", "neuro-taming" and "neuro-re-wilding?"

Rasa: I love all the questions that are coming up! I think it's been so fascinating and therapeutic to be a part of. I think the describing phrases are short, powerful and easily understood by a wide readership. As a co-researcher, I know what you are asking me and how I can answer it.

As a mental health worker, they might compartmentalise neurotypical and neurodivergent people, stressing their differences rather than their similarities and maybe suggesting neurotypical people have harmful intent towards neurodivergent people.

I think you navigated it in such an educational and honest and healing way for the people involved. I can see this being something you could use in your practice. You don't talk around stuff but still have sensitivity – that's a hard thing to do.

Here, Rasa moved with ease between multiple positions. She has a central role in my life and demonstrated the moral courage to lean in, critique and invite generative accountability (Reynolds et al., 2021). As a co-researcher, Rasa encouraged me in my practice and examined it with a hopeful scepticism (Reynolds, 2014). By raising the potential unintended outcomes of "othering" more neuro-normative folk, Rasa invited me into a messy reflexivity. My thinking can expand to include questions about neuro-wild ways of being that fit into mainstream contexts

and resonances across neurotypes that value all forms of humanness (Lainson et al., 2019; Reynolds, 2014). Zena Cumpston (2022, p. 42) described how “Our stories will be richer when we find ways of telling them in true partnership, no matter how messy or complicated”.

Adding a therapist listening group with my companion and colleagues

Over a single recorded and transcribed video call, I interviewed my companion Christina as someone who is passionate about neuro-affirming expression. She offered rich symbols of neuro-rewilding from her own life including:

I exchanged my prom dress for a longboard.³ I was like, “Screw it, I’m not going to the prom. I just don’t see myself there. I don’t want to go”. I was doing it because my mom and sister were like, “It’s just the thing you do in high school”. They came with me to find a dress and do the fittings. Then I was like, “I’m just not feeling it”. So, I returned the dress and bought a longboard. And that longboard got me around so much at college.

In this example, Christina defied neuro-normative and gendered dominant discourse, demonstrating “special knowledge about sidestepping normality and honouring diverse ways of living” (Denborough, 2014, p. 162). Riding her longboard through college is such a liberatory image that upholds what Wiseheart (2025) described as “the dignity, wisdom and beauty inherent in people’s lives, even in the midst of struggle”.

At the end of the interview Christina reflected:

It’s been nice to reflect and go through this timespan thinking of it from the angle as well of, you know, being neurodivergent and finding the things that reconnect me with my childhood and brings through my inner child. Like, little Christina loved this, so I want to find it again. I want to do that again for her and do it with her.

This highlights some of the ways children’s culture leaves the door open for play, originality and meeting our bodies where they are. It can be a tightrope walk as a neurodivergent person to defy age-related norms while resisting being infantilised by the dominant culture. As children have limited autonomy and control, and are less listened to and believed than adults, the language of “neuro-rewilding” could be a way to redignify the skills, knowledges and values children possess (White, 2000; Yuen, 2007).

Using reflexive questions (rather than scripting questions in advance, see Lainson et al., 2019), I kept a focus on multi-storied descriptions of neuro-taming.

Dana: Did you feel empowered that you were able to give up sucking your fingers, that you were able to take it into control and say that, or did you feel a grief around it, or both?

Christina: I was acting under my own volition. Like, I was deciding it. So, I think it was probably more empowering than anything. I didn’t feel pressured by anyone. To this day, I will find myself putting one of the fingers I used to suck on my philtrum and pushing there does release happy brain chemicals. Same hand. And my parents noticed, like, even as I got a bit older. I would do this for comfort and self-soothing. That’s the crazy thing to me – a six- or seven-year-old to just give something up that they’ve been doing since being in utero.

Christina’s response highlights her agency in the micro-politics of everyday life. I created a therapeutic letter which Christina edited. I offered to read excerpts of the letter to a therapist listening group from my practice so they might witness her preferred identity claims (see Myerhoff, 1982). Christina enthusiastically accepted. I invited the therapists to bring their art and writing supplies to support open, iterative and emergent responses to Christina’s letter (Miller, 2020). To support the listening group to situate their comments with curiosity towards their own

experiences rather than a more distant analysis (Russell & Carey, 2004) I asked questions like, “Did this bring up memories from your own life?”

I sucked my thumb until I was 12 and stroked my nose. I hadn't thought about that in a long time, and there was a point where I realised it wasn't appropriate. So, I would only do it home, and at 12, I would sometimes wake up in the night and my thumb would be wet and I would just know I had been soothing. But the idea that you have to give it up.

Smell. You don't know the things you do that are okay ever, and then hearing this is like oh my god yeah, I was such a weird little kid and there were such weird little kids everywhere but none of us could talk to each other about how weird we were.

The listeners expressed comfort in shared memories, even if they had felt alone at the time. This supported new energy to be channelled when remembering challenging times (Morgan et al., 2019). I also read excerpts in which Christina described neuro-wild cultivators in her life:

Finally, my parents were like, “It’s been a week, and, like, mmm, let’s take you to the doctor”. The paediatrician said, “I think she’s depressed – you need to take her to see a psychologist”. I remember I said, “I’m not crazy. I don’t need to go to a psychologist”. You know, I was 15. I didn’t want to go.

It ended up being a social worker and she asked, "How do you keep track of things you need to do?" I was like, "Oh, I keep it in my head". And she was like, "Yeah, that's not working. That's a lot that you're having to remember and think about it. What about we use a planner?" She met with my parents and my teachers, and we put together a plan to help me with going back into school and pretty much being, like, yeah, you don't need to do this or that. Ugh, that was a big relief, simplifying it, and I had an attack plan and my GPA was not going to be ruined. I could

still have my straight As. Like, I knew I was in this rat race, if I wanted to get anywhere ... because things didn't always come so easy to me and I don't wanna get lost.

Christina's re-membling highlights dominant discourses in educational institutions that are upheld through verbal feedback and scoring metrics. While this places all young people under significant pressure, the neuro-taming demands added an additional layer of oppression for Christina. There is also the second story of Christina's social worker, family and teachers all pulling together to support her as a solidarity team of neuro-wild cultivators. The below image and accompanying words are from the therapist listening group:



The digging into academics, the camouflage. There's a lot of feeling sad but it sounded like Christina had this person who saw her, and I don't know if I did at all. Even her parents letting her stay home a week and then taking her to the doctor. People listen? And then to get the word "depressed" felt quite bitter-sweet.

For me, the visual representations added another layer of meaning to the witnessing. The experience of colour, shape, movement, pressure, composition and writing left the door open for experience and reflection contained beyond spoken or written words (Tamasese & Denborough, 2024). With the consent of the therapists, I shared their responses with Christina, who then left a voice memo including:

I'm so in love with the responses. I felt it in my belly at times, such an impactful "I've been seen and heard and understood by people". Like, my story has been received and, in turn, that affirmed for me that other people have experienced similar ... or bringing up memories from their own lives.

This unprompted response from Christina highlights how personal listener accounts ground outsider-witness responses in everyday life (Denborough, 2008). In the acts of reading, listening, writing and drawing, phenomenological inquiry adds new layers to how memories may be recalled in future (Miller, 2020). The outsider witnessing of the therapist listening group differed from the experience with Nat and Rasa in a number of ways. Christina and the therapists were not known to each other, and Christina was receiving the responses from a group rather than an individual. I was curious about the experience for Christina:

I feel like it's a lovely little gift to be seen in that way and especially not directly where I was sharing that story and getting feedback but a secondary way where you read my story and [I waited] some time to hear back.

Christina highlighted the impact of my role in collecting her stories and providing the feedback from others. I also received an email from one of the therapists from the listening group:

I love how you take themes and words that jump out at you, and how you then offer them back to us. It feels like a mirror. Deeply fascinating. It's like our stories create a bridge to each other in the context of a very crazy and inhospitable social world. People and stories connecting. I am very interested to hear more of your work. Please thank Christina for me. In sharing her world, it feels she also gifts me an insight into my own world and helps me make meaning. Thank you!

An unanticipated outcome of the listening group was their role as an incidental reflecting team on my practice – a solidarity that helped me to sustain ethical and spirited justice doing (Reynolds et al., 2021).

I sent a draft of this paper to my co-researchers. Rasa asked me to clarify one sentence, add her surname (which we share as our fathers are brothers) and started planning to feature the paper on her website and LinkedIn (assuming it would be published before it had even been reviewed). Nat gave me a thumbs up to proceed with my submission over brunch. Christina left me eight consecutive considered and generous voice memos that illustrated how reading my draft paper differed from reading her therapeutic letter or the outsider-witness responses in isolation. Christina described our work together as:

An ever-evolving bridge ... completing another circuit ... an energy that is alive and its continuing.

The new article-like arrangement of her words warranted further review and processing. I could hear Christina move from skilful caution to assertion as my co-researcher:

I'll leave it to you if you want to add it in ... No, it's a draft and you asked me.

Reading not just her own replies but the questions I originally posed, Christina felt something was missing in the captured response about giving up sucking her fingers:

I wonder if I realised you also asked me if there was grief involved. Because there was. I was embarrassed. I was having a moment of "Oh shit, did anyone see me? I don't want to be made fun of". A pivotal moment of "I'm not going to be accepted". A secretive thing. Being comfortable to meet my needs at home reflects the Black autistic experience that goes back to colonisation. At six or seven, the impression from society was that I was not to be accepted for who I was, needing to hide those things about myself.

This reminded me again, I had reviewed the transcripts, highlighted phrases, studied exchanges but I had not shared my recorded questions with my co-researchers until this step. This was also the first time Christina had read excerpts from Rasa and Nat (and vice versa). After seeing her words alongside those of other neurodivergent interviewees, Christina concluded:

I just thought I got to share my story and have it put out there, and what you offered to do [sharing with the therapist listening group]. Now I see from the other side of it, the collective words – this is such a therapeutic experience.

Christina also encouraged me as a peer and collaborator:

I was feeling so much pride for you reading this. The reference list that fits your brain – I love that you brought yourself in.

It was heartening for me to hear positive impacts that challenge the notion of a distant and neutral therapist or researcher being the ideal (Everett et al., 2013).

The impact of this project (that became this paper) continues to unfold in my work and life. It has better equipped me to identify and call out neuro-normative discourse and affirm neuro-wild memories and neuro-rewilding possibilities, opportunities and lenses. I feel bolstered in sharing neurodivergent experiences of neuro-taming skills and exhaustion while resisting this as evidence of being “too disabled” and/or

“not disabled enough”. When people visit me for therapy, I hope to extend the dignity afforded to me in my narrative therapy training – a space of neuro-wild cultivators who welcome rebellious re-authoring of subjugated stories. I hope this paper can be a resource to folks beyond my local context and welcome and celebrate local adaptations and translations. I see the neurodivergent therapist community growing stronger (and softer) together and that is a cause for great excitement.

Acknowledgments

My cousin/soul sister Rasa Kabaila – caring professional, storyteller, MMA coach, kitten foster parent and universal feeder. My bestie Nat – visually gifted artist and mountain and ocean fanatic. My companion Christina – advocate, educator, mystic and DJ. The therapist listening group – Gill, Fiona and Ange – who brought their art and their hearts to the session. My partner, Marek, who read every master’s assignment. My son, Flori, and cat, Cashew, for all the cuddles. My parents and brother for babysitting rescue. My bestie Gemma and all my dear friends whose words I hope to rescue and share in future.

Notes

¹ The term “NeuroWild” has also been used by Em Hammond (2026) <https://www.neurowild.com.au/>

² A lilo is an inflatable mattress.

³ A longboard is a skateboard inspired by surfing.

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* Length of reference list consistent with my kind of neurodivergence.

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Linking lives through collective narrative song creation

by Sara Portnoy, Mieke Van Daele and James McParland



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Portnoy, S., Van Daele, M., & McParland, J. (2026). Linking lives through collective narrative song creation. *International Journal of Narrative Therapy and Community Work*, (2), 26–39. <https://doi.org/10.4320/QGRJ1678>

Author pronouns: Sara: she/her; Mieke: she/her; James: he/him



James McParland is a consultant clinical psychologist at University College London Hospital, working with people living with health conditions. 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 health care contexts. James's solidarity team includes: the narrative practitioners who have inspired him, including colleagues past and present, and his family of origin, chosen family and wider LGBTQIA+ community. He has appreciated exploring new musical territories through this practice and has drawn inspiration from his co-authors and the people who have taken part in the events described in this paper.

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Abstract

This article describes a creative narrative practice using music and song. It draws on collective narrative practice, rescued speech, and poetic and collective documentation, and fuses these with musical performance to create a new practice: collective narrative song creation. We share practical descriptions and stories of the enlivening process of developing a song and the transformative nature of linking lives through performing together. Creating lyrics affords opportunities for people to document hardships and honour resistance; performing the song using instruments and voices as a group can be joyful, connecting and powerfully sustaining. Songs connect with memory, allowing richer storylines to be recalled quickly and to reverberate past the initial performance. This paper outlines the steps involved and invites readers to consider incorporating the ideas into their practice, encouraging them to cross borders into unfamiliar territories and seize the opportunity to revisit and expand their musical biographies.

Key words: *music, song, songwriting, rescued speech, poetic documents, therapeutic documents, collective narrative practice, narrative therapy*

Musical biographies

From birth, we are surrounded by sounds, voices and music. These build up a unique *soundscape* (Schafer, 1969, 1994). Our starting point for working with groups of people is that everybody has a musical biography. We will introduce ourselves through ours.

Sara

My childhood bedroom was above the family piano, so I would often wake up to the sounds of my father playing Chopin nocturnes. My father played the piano by ear, so as I started listening to Brian Ferry, The Beatles, he started to play their music. Later, as each of my children were born, a different album became associated with each of them: Eric Clapton's *Unplugged*, George Michael's *Older* and Simon and Garfunkel's *Bridge over troubled water*. As those children have grown up, they have introduced me to so many more artists. My dominant story was "I'm not musical and I can't sing. Only those with abilities like my dad's can claim to be musical". However, I have loved the opportunity to co-create collective narrative songs with a number of different communities. I find myself improvising percussion instruments and singing along with participants. An alternative story of reclaiming my musical abilities is emerging.

Mieke

I was active in music early on: playing the piano, learning to play the violin and singing in the choir that my father conducted. Classical music, church songs and Gregorian stood out. Mozart, Bach, Ravel, Schubert got company from Belgian rock groups and folk musicians, but soon many others enriched my musical world. Singing in a modern classic choir introduced me to

Hindemith, Messiaen, Debussy, Goethals and others. Travelling around the world brought many more musical influences. Recently, through electric guitar lessons, I have been discovering the worlds of the blues, bossa nova and jazz. Music is fusing with my professional identity as I have completed my training as a music therapist, witnessing the powerful effects it has for people creatively retelling the stories of their lives.

James

Through my heritage, I was surrounded by Irish music, and I played tin whistle in a traditional music group. Despite my lack of skill and dedication, I experienced the sense of being part of a wider project and enjoyed contributing to the collective. My mother is a wonderful singer and was lead of an Irish country and western band, so I've always appreciated country and folk music, alongside artists like Shania Twain, Stevie Nicks and The Corrs. When the Eurovision Song Contest was held in Birmingham, my hometown, this was a significant moment of acceptance for LGBTQIA+ people as it was won by a transwoman, Dana International. Music connected me to other aspects of my LGBTQIA+ identity and friendships, finding belonging and refuge through artists like Tegan and Sara, Bloc Party and Madonna. I have experienced the power of collective narrative song creation and performance in sparking effects of joyfulness, movement, rhythm and noises (not only traditional singing), which are transformative.

We invite you to bring to mind your own musical biography and to trace the roots of its stories. These biographies aren't "fixed" identities; they change over time, place and context, crossing geographical, cultural and musical borders, linking our lives and identities to others.

Our history of collective narrative song creation

The initial idea of creating a collective song with a group came to us (James and Sara) when we were working with young people with a diagnosis of cancer. We were regularly running a one-day workshop called the Beads of Life (see Portnoy et al., 2016), which we co-delivered with previous participants who had become peer-trainers. We noticed that during breaks in a Beads of Life workshop, some young people played with the various musical instruments that were available in the room and others joined in singing. When designing a workshop to thank the peer-trainers for all the help they offered us, and to create community among them, we decided to use the medium of music as it seemed to hold particular resonance. In line with principles of collective documentation (Denborough, 2018a), we wanted to write lyrics that would be multi-storied and tell of our peer-trainers' experiences of hardships as well as their skills and knowledges in responding to these hardships. We were hoping that the experience of co-creating a song would address the isolation created by a diagnosis of cancer and the necessary treatments, linking the lives of our peer-trainers and telling the stories of those who contributed to the song. We also hoped that when others heard the song, the themes would resonate. We encourage you to listen to the song: <https://jtvccancersupport.com/2016/12/bead-it-out/> (Carrington, 2016).

Our collective narrative song-creating journey continued when James and Sara ran a songwriting workshop at the 2019 European Narrative Therapy Conference in Antwerp. The theme of that conference was "crossing borders, linking lives". We needed someone confident in their musical ability (firmly not part of Sara's and James's musical biographies) to help us cross borders of language, musical confidence and geographical distance. We were extremely fortunate that Mieke was brave enough to accept our invitation (see Portnoy et al., 2019). Since then, we have co-created songs with young people with a diagnosis of cancer, with staff at team away days, and to

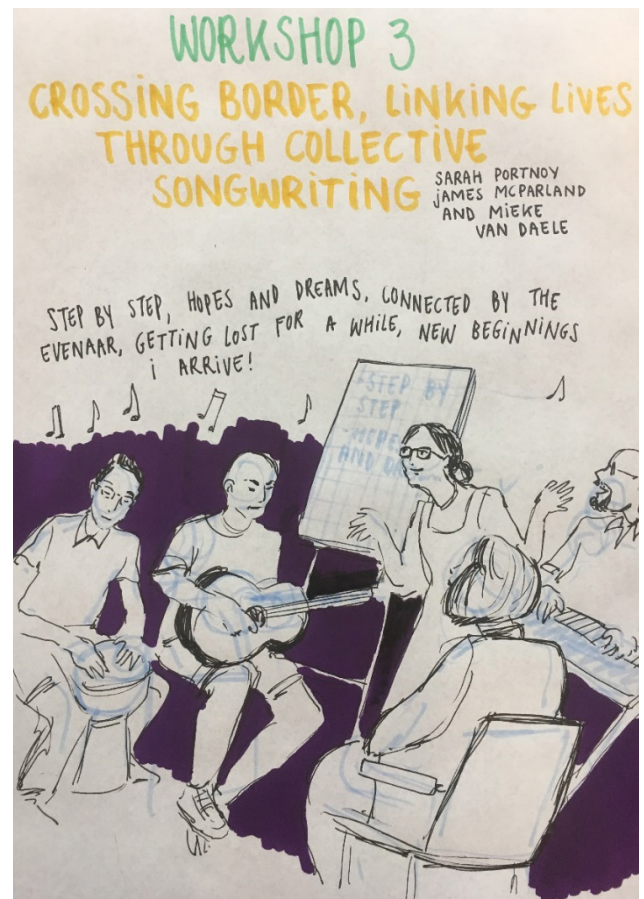


Figure 1. The authors' workshop at the 2019 European Narrative Therapy Conference by Mila Van Goethem

close the 2024 Institute of Narrative Therapy conference (see Fredman et al., 2024). Most recently, we ran a collective songwriting workshop at the 2026 NDC2 European narrative therapy congress. The three of us have experienced a lot of joy and have learnt so much from each of our collaborations.

In this paper, we want to share these learnings. The green boxes share a practical example of us working with a group of young people with a diagnosis of cancer as a way of connecting the theory to practice. We feel this also introduces the reader to the way we have written the paper.

Why songwriting?

Speaking and moving in rhythmic and melodic ways forms a basis for all human communication, including the sharing of emotional experiences, which is termed "communicative musicality" by Malloch and Trevarthen (2009); this positions music as an "interactive and performative phenomenon" (Bonde, 2019) that creates shared

understandings, community and a deep feeling of *togetherness*.

People's musical biographies have strong links to memory. This allows for entry points into people's landscapes of identity and for exploring meaning-making through song. People often connect over music, with shared fandoms and appreciations of types of music leading to connecting conversations. As in Maund's (2021) "Soundtrack of Your Life" practice, through recalling significant songs, people can trace important connections, making visible "shimmering moments".

Even those who have a shy story about their musical abilities can contribute to creating a song as it requires many different skills: holding a rhythm, creating lyrics, playing melodic instruments, singing, recording and so on.

Narrative practices have been combined with music in different ways. David Denborough (2008) connected with aspects of folk culture through the creation of a community songwriting practice with people who had experienced trauma. He has described how the interplay of melody and lyric can counter challenging experiences (2008, p. 172). When a person's own words become lyrics through narrative songwriting and are matched to a melody, the effects can be transformational. These songs can convey sentiments of hardship alongside second stories of hopes, dreams and knowledges (Denborough, 2008). Creating musical expressions can contribute towards resisting hardships and lead to experiences of liberation (Afuape, 2011).

The "Rhythm of Life" narrative metaphor (Müller, 2013) suggests that we each embody different musical instruments, playing our own music, but in linking together, we have the potential to create a rich and harmonious orchestra. Hegarty (2009) used narrative song writing with group members at an addiction centre. She interviewed them about the possibility of a less drug-filled life, rescuing their words (Newman, 2008). Between sessions, Hegarty created a song using the group members' words, which she performed at the following session. Wever (2009), has created songs that celebrate survival and resistance in

prison contexts, linking lives as the lyrics, music and emotion resonate across different worlds. Wever similarly created lyrics through rescuing participants' words, then wrote, sang and recorded the song herself before sharing it with the participants.

Our collective narrative song creation riffs off these earlier practices. It draws on aspects of collective narrative practice, rescued speech, poetic and collective documentation (Denborough, 2018a; Speedy, 2007), and ideas from music therapy. Whereas previous collective narrative songwriting projects have involved participants in part of the song creation (Denborough, 2018b), we aim to stretch the collaboration across the entire endeavour. The participants devise the lyrics, create a rhythm and melody, and then participate in a recorded performance.

Gathering around a theme

The choice of theme depends on the community we are collaborating with. Sometimes a theme has been provided, for example by conference hosts; sometimes the theme is created collaboratively at the beginning of a workshop. With the young people in the example we will share, we discussed themes that connected with their shared experiences: Beads of Life, change and transformation. There is discussion of thoughts, words and phrases connected to the theme.

Creating a musical playground

The Hungarian American researcher and psychologist Csikszentmihalyi (1985) has written about *action* as a central feature in play and how it can lead to experiences that induce "flow": a state in which one is absorbed in something that brings a strong feeling of being in the "here and now". "The flow experience is both very motivating and boundary-breaking" (Stensaeth, 2019, p. 114). In narrative song creation with groups, we have experienced flow while playing music and creating songs together. If we want flow to happen, we need to take into account work on two levels: a more external one in which we create an environment with action possibilities

and challenges, and a more internal one wherein abilities to act can emerge (Csikszentmihalyi, 1985); collective song creation challenges limiting self-stories through action.

When preparing the context for collective narrative song creation, we want people to enter a *vibrating*, colourful playground where there are different kinds of instruments. We create an environment in which everyone is welcomed and encouraged to take part in any of the musical offerings. We try to create a safe space in which people feel able to go beyond self-limiting or constraining stories and dare to *play*.

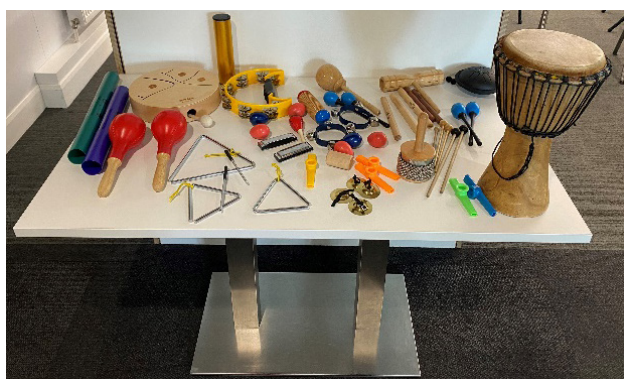


Figure 2. Various percussion and melodic instruments

We invite each young person to choose from a selection of instruments: percussion instruments like shakers, tambourines, maracas, woodblocks, djembes, and self-made instruments including jars filled with rice and boxes filled with beads; melodic instruments such as recorders, ukuleles, mouth organs, guitars and keyboards. We invite participants to play their instruments and experiment.

Simple percussion instruments are useful for participants who are less comfortable in their musicality: they cannot be played “out of tune”, so perfectionism and having to do it “right” can move into the background. They can help participants take their first steps out of their comfort zone.

We have noticed that questions about ability rise to the surface: Do I need musical ability to take part? Am I qualified enough? Will my musicality be judged (by others, by myself, by old voices)? People may be carrying musical biographies that have been influenced by narrow descriptions of their abilities through experiences where they felt uncomfortably compared to traditionally valued vocal and instrumental aptitudes. So, creating a comfortable musical playground is important.

We work hard as co-facilitators to model making all sorts of noises with the instruments, and we use lots of encouraging words:

Pick up the instrument you’re curious about.

There’s no right way to play,
just make sounds.

You could even use your bodies to clap,
stamp feet, click fingers or use your voice.

No musical ability required!

Through encouraging people to “have a go”, we are hoping to initiate a *flow* experience. We make it clear in the invitations to these workshops that no musical skill or knowledge is required – but people are welcome to bring instruments.

Building common ground: Rhythm as entry point

Life is full of rhythm. Research in music therapy shows that rhythm is an effective gateway to the creation of safety, stability and relaxation. It has both anxiety-relieving and activating effects (Bruscia, 1987; Frohne-Hagemann, 2007, p. 83). Playing rhythmically together in group contexts, such as drumming circles, supports “feelings of connectedness, community and the opportunity

to release emotions in a healing manner” (Deraney et al., 2017, p. 528). By playing simple yet powerful rhythms together, people have immediate experiences of collaborative sound-making. Often, fun and humour emerge. This is a “critical element in terms of engagement and safety” (Faulkner, 2017, p. 634). When fun and flow show up, a steady and safe space is established for the later more intensive work of song creation.

After the participants have chosen an instrument, we invite them to make a sound with it that resonates with the theme they have chosen: “just bead it”.

When we sense that they have found a pace, we ask them to walk around and listen to other rhythms that are being played. When they hear a rhythm being played by someone else that they are curious about or connect with, they are encouraged to move towards it, add in their instrument, play together and find “common ground”. Through this action we are embarking on a process of “linking lives”, as people join each other in a rhythm.

This continues for a few minutes, then the rhythm being played by the group is recorded using a mobile phone. It is then replayed to the group. In listening back, an emerging beat can be heard, and everyone is then encouraged to play a collective rhythm over it. This new rhythm is recorded and used to underpin the song.

Composing

Once we have the rhythm, we then map out the rest of the song-making process. In line with Denborough’s (2002) suggestions, this includes the creation of a simple melody line to form a memorable chorus, which we hope people will go away singing in their heads so the effects of our collective narrative song creation will ripple

into their lives. The other part of the process is creating lyrics based on the participants’ words and metaphors.

If the group is large (more than 12) we often invite participants to choose to work on either the lyrics for the verses or the melody for the chorus and a chord progression for the rest of the song. However, when we are working with young people, we stay together and they contribute to both the lyrics and the melody. If the group is large (e.g. staff away days, conference workshops) we all brainstorm words that connect with the theme to form the chorus, before dividing into separate teams. We explain that we will come back together to compose the song, perform it and record it.

We ask participants what words and phrases spring to mind when they think of “just bead it”. Participants are encouraged to use the language they prefer (words in languages other than English can enrich the song). The ideas generated are written up for everyone to see. These words become the lyrics of the song’s chorus.

Finding a melody

The melody team work together with a facilitator. As the chorus will be sung, it is important to find a melody that is at an easy pitch and fits with the rhythm recorded earlier. A strong melody helps with recall compared to words alone (Denborough, 2002).

As a facilitator of the melody team, one needs to be able to hear rhythm and pace in what people are creating and closely listen to the melodies suggested in order to set a chord progression to ground the melody. This requires comfort with playing a melodic instrument, such as a keyboard or guitar, so that it is possible to play and talk at the same time. Two or three chords can serve well as a base for a song. Using one’s singing voice helps when fusing together the separate musical

ideas that come from the group. When there are participants present who can play instruments, we encourage them to play. During this phase, generative chaos can be present because the process is led by the participants while the facilitator is decentred, which enables the groups' ideas to flourish. At a certain point, the facilitator needs to become influential (White, 2005) and guide the participants to use their metaphorical pruning shears! Decisions need to be made because there are always infinite ways to go with a song. The tight timing often stops us dwelling on all the possibilities.

Maybe the most important skill for the facilitator is to really enjoy creating and composing together, in full consciousness that it is **not** about creating a technically perfect song but about the experience of connecting as a collective through music.

Group members are asked to sing a low note together that feels comfortable, followed by a high note that feels comfortable. The melody should be somewhere between those two notes. Some of the young people start creating a melody with their voices, a couple who are confident playing the guitar start picking out chords. We then ask: Is there anyone else who feels confident to play a melodic instrument? Is there anyone who is confident enough with their singing voice to lead the melody? Would anyone like to be responsible for holding the rhythm alongside the melody with their percussion instrument? It is helpful to have more than one volunteer for each part.

Creating a chorus

Once there is a melody and rhythm, it is time for the melody group to create and fit the words for the chorus on to that melody and rhythm.

Earlier, the whole group generated a list of words and phrases connected to the theme. We replay

the rhythm and melody while looking at this list of words and phrases.

The participants start to choose some words and phrases over others and continue to edit words in ways that fit with their chosen rhythm and melody. Then they settle on the chorus:

Feeling you're not alone

There's always someone there

Confidence is growing

Give beads to show we care

The rest of the group loves it and rehearses so that singers, musicians and percussionists have a good feel of the chorus before moving on to create the lyrics for the verses.

The chorus should be memorable (Denborough, 2002). This connects with the music therapy concept of "anchoring" (Bruscia, 1987, pp. 537 & 555). Music offers a particular type of anchoring as it connects strongly with memory: music and songs stay with us, we repeat them in our head, singing them for ourselves long after we hear them for the first time. Through music, one can recall a first dance with a friend, a holiday with family, a moment in community. Music is a medium through which strong connections can be created and special moments of togetherness remembered. With a good chorus, the song can remain in people's minds and bodies and be recalled.

Stories make lyrics

For the verses, participants are interviewed about the chosen theme. Drawing on concepts from collective documentation (Denborough, 2008), questions are asked to encourage the interviewee to tell stories about hardships, the effects of hardships, their responses and the skills they

have gained. The intention is that these stories will resonate with others who have experienced similar hardships so people's experiences become linked. There is a move from individual to collective experiences and a sense of commonality. It's useful for the facilitator to be comfortable with narrative interviewing, as well as working with witnesses who are positioned to listen in active ways to support the creation of the final chosen lyrics. As with the music, there can be infinite lyrical possibilities.

To generate words and phrases, facilitators ask the young people questions like:

- Please can you describe a personal experience of taking part in the Beads of Life workshop?
- In what ways has this been important to you?
- What special skills, knowledge or values did you gain from this?
- What is the history of this skill, knowledge or value? How did you learn it and who from?
- How is this skill, knowledge or value linked to collective traditions (familial/cultural/community)?
- Are there proverbs/sayings/stories/songs/images from your family/community/culture with which these are linked?
- How did you overcome any hardships?
- Can you describe any sparkling moments? (questions drawn from Denborough, 2024)

The rest of the group prepare to capture the participants' words, as a way of "rescuing the said from the saying of it" (Newman, 2008).

The participants are invited to tune into evocative language, drawing on Speedy's (2007) suggestions for poetic documents:

- to capture vibrant expressions, phrases, words, idioms, grammar and metaphors that stand out during the interview
- to listen out for the skills and knowledges that have sustained the person while enduring hardships
- to listen for language that conveys actions taken, pivotal turning points or captures the senses
- to listen for words that have a rhythm and "talk that sings" (Bird, 2004).

People have their own "poetic biographies". Earlier education can feed into limiting stories when the word "poetry" is used. Some people enjoy poetry, and others may have a more uncomfortable relationship with it. The facilitator explains that those who are capturing words have the important job of capturing the actual words, rather than interpreting, paraphrasing or creating their own images. They also explain that capturing words is an editing process as poetry can be a form of concentrated language.

As Speedy (2007) has suggested, when words are re-presented to interviewees in poetic form, it provides opportunities to exoticise that which the interviewee may have considered mundane. Speedy has also written about multiple listening. This involves listening for tone of voice, silence, pauses and space between words, words that seem hard to come by or conversely rush to the verbal surface, and talk that appears to move the individual emotionally.

Denborough (2002) has suggested that lyrics should reflect both the sorrow of hardships and the joy of alternative stories and sparkling moments. All group members contribute to

creating and editing the verses. We write the spoken-word lyrics for the verses on a big sheet of paper and allocate each group member some lines to read out during the performance and recording.

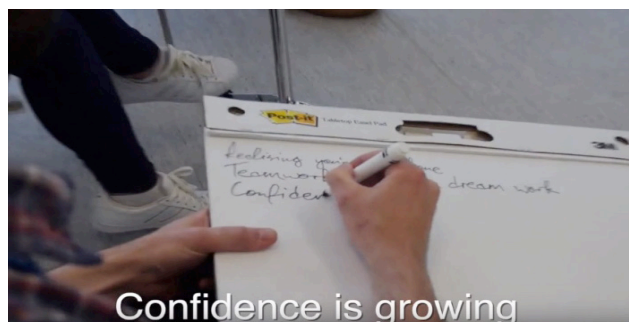


Figure 3. Writing lyrics for all participants to see (from Carrington, 2016)

Be seen and heard through performance and recording

The young people have created a rhythm, melody, chorus and verses. So, it's almost time to perform together.

The melody team teaches the chorus to everyone in the group. The lyrics team shares the verses and decides who is going to read which line of each verse. They then practice the verses as spoken word with the chord progression underneath.

There are other collective decisions to make: How should we structure the performance of the song? How are we going to start? How many times are we going to sing the chorus? Where do the verses fit in? Will there be some improvised instrumental parts? How will we end the song? Will we work with dynamics: start silently and raise volume, add sudden silences, end loud or quietly?

Then there is the first rehearsal to bring the whole collaboration together. Chaos and laughter surround this. However, after a few run-throughs, participants begin to

feel more confident, with some playing the rhythm, all singing the chorus, and each line of the verses being spoken. Then there is the final performance, which is recorded with permission of the participants on a mobile phone.

In this final stage, certain leads need to be taken. The music group might need conducting (for starting and stopping, cues for instrumentals or small solo parts). The lyrics group may need cues to start reading out the verses, hand the microphone over and so on. Everyone participates in this creative moment and is featured in the recording. Some are playing instruments, others are reciting the spoken lines and most are singing the chorus. It is always surprising how being present in the “here and now” allows the group not only to create a coherent song but also to discover the freedom to improvise and enjoy playing together.

The process of singing together and recording the song allows both an “inside” connection with thoughts, memories, feelings and experiences and an “outside” connection with other people. This deepens the potential “anchoring”, as participants can later on hear the music and immediately be back in that shared moment. It allows participants to replay and reconnect with their own thoughts, memories, feelings and experiences of creating the song. The whole song is a form of collective document. As people listen to each other, they realise they are not alone in experiencing some of these hardships. This decreases their experiences of isolation and grows a sense of being part of a collective. The recording of the song is important for “spreading the news” (Freedman & Combs, 1996, p. 237) of the workshop and sharing the knowledges and wisdom contained in this collective document with a wider audience, some of whom may have experienced similar hardships. The recording can be very low tech, using a mobile phone. In fact, it can be more difficult when you try to finesse too much. Our

observation from one group was that trying to centre the recording decentred the togetherness of the collective experience. After the session, we send the audio file of the final recording to all of the participants, usually via email.

Limiting stories can resurface when people begin performing and singing together, such as memories of not being allowed to sing solos in a choir. We remind people that this moment is an opportunity to have fun and feel the pleasure of doing this together. It's not about producing a "perfect" song or performance – it's more about being part of the collective. Taiwo Afuape (2011) has reflected on the possibilities that emerge for identity when engaging in singing, which can help counteract a limiting positioning for individuals as subjects of hardship. She specifically described how this expression enables an experience of being an *active force* in the world, as creators with freedom. Through this part of the collective narrative song-creation process, we are inviting people to take up such positions and expand their identity stories.

Going beyond "I-identity", the group develops a "We-identity" (McAdam & Mirza, 2009). In our experience, performing together is often a particularly glittery sparkling moment of joyfulness, creativity, laughter, smiles, movement and connectedness; it can be transformative and make a disparate group of people feel part of a community.



Figure 4. Young people performing their song together (from Carrington, 2016)

Our learnings

Expertise, agency, comfort and discomfort

All three of us have a shared comfort zone in working with groups, be it with trainees or persons we meet in clinical practice. We hold some knowledge of how to begin workshops, work with group dynamics, be attentive to vulnerabilities and facilitate growing processes. In collective narrative song creation, our comfort lies on different terrains: James and Sara both have a dominant story that they are not musical but feel more comfort interviewing people and assisting people to be witnesses and reflectors. Mieke finds pleasure in playing and creating music and holds confidence in working with groups but is less comfortable with the interviewing part. We all had to open our windows of comfort, find each other and discover where this cooperation might lead us. It required us to share our own dominant stories to bridge narrative therapy with music therapy.

During the process of developing and running these workshops, we have needed to jump into the unknown and overcome fears. We needed to cross borders, link our different abilities and find pleasure in connection. We had to rely on each other and be confident about our abilities to create connection. We shared encouraging words that through working together we could make it work. These experiences were parallel processes to those of the participants who experience similar challenges, fears and inhibiting elements. People often arrive with dominant discourses such as "I can't sing in tune", "I'm incapable of keeping a rhythm" or "I have no creative talents". They are stepping out of their comfort zone, so we give them lots of encouragement.

Through the process of collective narrative song creation, we have noticed that participants often surprise themselves. Those less confident in their musicality may begin with a tentative shake of a maraca, or a low humming or speaking the chorus. Or they find that they can hold the melody on a xylophone or that they enjoy playing the rhythm on a djembe. We see confidence grow and the look on their faces suggests a transforming of emotion and the arrival of joyfulness.

Structure and timing

Our groups with young people have lasted about three hours. However, the workshops with adults have tended to be completed within one or two hours. This means that the session needs planning to ensure things run smoothly. This article describes a structure (see Table 1 below) that can enable facilitators to collect rich ideas relatively quickly and be able to finish with a song that can be performed. Although time pressure is challenging, this structure has helped us cut through the brainstorming process and come to decisions. It has also stopped us being tempted by perfection.

Table 1. Stages and structure of narrative song creation

Creating a musical playground	
Gathering around a theme	
Rhythm as entry point to common ground	
Composing	Writing a chorus
	Finding a melody
	Stories make lyrics
Performance and recording	

It’s about the process, not the product!

As stated in the beginning of this article, our process of song creation is an entirely collective endeavour. The goal is that participants are in the foreground, making contributions and developing the content of the song. Facilitators work from a decentred position in terms of content and an influential position in terms of process. This requires an attentive attitude towards all the suggestions that come from the group as well as listening out for the quieter voices.

From a musical perspective, this means that our own perfectionism must be curbed. We have noticed that when the desire to create a high-quality product dominates, it starts to increase anxiety and stress, restrict our creativity and block social connections. We align with Denborough’s (2008, p. 170) view that “nothing about the writing, singing or recording of these sorts of songs is about perfection”.

Denborough’s song-creation process requires only one facilitator who captures the words, creates the song and then teaches this to the community. Our process requires more than one facilitator, including “nonmusical” facilitators. It also affords an opportunity for the group to hear not only their words, but also their own rhythms, sounds and melodies.

We agree it is important to foreground inclusion, and to privilege an ethic of participation over one of performance (Denborough, 2002). This demands an attitude of curiosity about where the process might bring us. We explore what possible music we can co-construct in this moment, in this amount of time, on this topic, with this specific group of people. What has struck us as facilitators is how different each session has been and how the creativity of the group always shines through. It is about the process, not about delivering a product.

Outro

A song often concludes with an *outro* or coda to mark the final moments, orienting the listener to the approaching ending point. We’d like to leave you with some final words and hope they spark future musical compositions as you take these ideas forward.

Songs have a rich history of affording sustenance, resilience and togetherness in the face of hardships and injustice. Songs of resistance, defiance, freedom and peace echo through generations and across time and place, illuminating the skills, abilities and responses that buoy people up through musically telling their stories in ways that make them stronger (Wingard & Lester, 2001). A recent example is the joining together of physically distanced but socially connected people singing together from their balconies during COVID-19 lockdowns. Collective narrative song creation draws on these ideas and offers a way of bringing people together to enjoy a shared experience of creation, performance and connection. The stories told can become richly described alternative stories about responses to hardship. The process links lives and crosses

borders in multiple ways, enabling a powerful togetherness that sustains and endures past the initial moment, through the recalling of melodies and lyrics. We would encourage you to think about incorporating these ideas in your practice, to reach out and search for collaborations with people confident about their musical abilities. We are excited for the possibilities you may find emerging through these collaborations.

Acknowledgments

First, our gratitude goes to the young people in the workshop we used as illustration and music therapist Jimmy Lyons who joined us. But also,

all the other participants in our workshops who provided us with rich experiences to feed this article. We would like to thank the Narrative Developments Group who read earlier drafts and provided invaluable and wise feedback. We would like to thank the NDC conference collective whose congress theme “crossing borders, linking lives” inspired us and sparked the title of this article. We are very happy we could include in this article the work of art Mila Van Goethem created during our workshop in Antwerp. We would also like to thank everyone with whom our lives have been linked through this practice, including those who have read drafts of this paper and provided feedback, and those who’ve attended our workshops with enthusiasm and courage.

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Inheritance beyond genes: Narrative conversations about male infertility and inherited identities

by Ximena Karmy Saieg



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Abstract

Many qualities that may be considered “genetic” are, in fact, inherited through stories and the ways they are narrated and re-narrated. This article describes therapeutic conversations with a heterosexual couple who had recently confronted a medical diagnosis of male infertility. Grounded in a relational understanding of identity and using the couple's Tree of Life, I illustrate how fertile ground was generated for the identity of a child conceived through sperm donation. Conversations supported the deconstruction of dominant cultural discourses surrounding fertility, fatherhood, masculinity and genetic inheritance, opening space for preferred stories about the couple's future and the identity of the child to come.

Key words: *fertility, infertility, sperm donation, assisted reproduction, relational identity, couple's Tree of Life, couple identity, gender, fatherhood, inherited identity, Chile, narrative therapy, narrative practice*

Karmy, X. S. (2026). Inheritance beyond genes: Narrative conversations about male infertility and inherited identities. *International Journal of Narrative Therapy and Community Work*, (2), 40–48. <https://doi.org/10.4320/UNCU4284>

Author pronouns: she/her

Often, the most painful effects of involuntary infertility are not due to biology but rather to the dominant culture's norms of motherhood, fatherhood and fertility. In Latin America, particularly countries marked by strong social conservatism, experiences of male infertility occupy a terrain of particular social and emotional sensitivity. Biological conception and genetic filiation are central to discourses of identity, family and fatherhood, generating normative frameworks that are difficult to question and even more difficult to transform. Besides, assisted reproduction is a privilege because the treatments are very expensive, so only a very small group have access. This can "reinforce existing structures and forms of power and privilege where dominant groups are empowered to nurture and reproduce, while others are disempowered" (Tam, 2021, p. 3). In this context, the only way to become a parent is imagined to be the biological one, with a mother and a father. Other possibilities like same-sex parenting, assisted reproductive techniques or even adoption remain taboo.

Ana and Miguel, a Chilean couple in their mid-thirties, came to my practice. They had received the news that Miguel would not be able to have biological children: he had a genetic condition resulting in a complete absence of sperm. From a medical perspective, this could be summarised as a problem of male fertility. However, from a narrative perspective, this diagnosis opened a broader field of reflection: What cultural discourses come into play in considering fertility? How is the identity of the couple and each of its members affected? What might this mean for the identity of the child they hoped to conceive through donor sperm? What possibilities for narrative agency emerge when dominant stories about inheritance, masculinity and parenthood are challenged?

This article shows how, through narrative conversations, it was possible to move from a problem-saturated story towards co-constructed narratives in which the couple transformed the ways they related to the problem of infertility, strengthened their relationship and reimaged the identity of their possible future child.

Theoretical foundations: Principles of narrative therapy

Narrative therapy, first developed by Michael White and David Epston (1990), proposes a postmodern view of identity in which people are not defined by their problems. Narrative practices seek to understand people's life stories and how these are influenced by cultural, social and family discourses. Through practices such as externalisation, the deconstruction of dominant discourses and the construction of preferred stories, people come to occupy a more active and hopeful position.

One of the pillars of this approach is the understanding that identity is not something fixed or essential but constructed through interaction with others, within relational, historical and cultural contexts (Combs & Freedman, 2016). Thus, in therapy, the task is not to discover an "inner truth" but to re-narrate life in ways that expand personal agency and possibilities (Freedman & Combs, 1996).

These concepts were essential to my work with Ana and Miguel. The dominant story they held of Miguel's infertility positioned them within identities of failure, loss and rupture. These identities were following them into other areas of life. By introducing narrative ideas, it became possible to transform the conversation from "who we are because of what happened to us" to "who we might come to be in relation to what we are going through and the way we choose to respond".

Context and presenting problem

Ana and Miguel were a university-educated couple of high socioeconomic status. Both were raised in traditional and religious families. In Chile, and in such families in particular, one lives by a lot of "invisible rules" in order to belong. A man is raised to be a provider and to take on a "pater familia" authority. A woman is raised to be a mother, and her husband is supposed to make this possible. This is something you don't talk about directly,

but a lot of jokes are made linking a man's capacity to make his wife pregnant with his capacity as a man.

Miguel: In our social context it becomes very difficult to make a family the way we can make it.¹

Ximena: What do you mean by the way you can make it? What does this social context mean?

Ana: It means you must have your family in the "normal" way, and we are now out of religious parameters ...

They had been married for four years, following a 10-year dating relationship. A year before our first meeting, they had decided that they wanted to have a child and began trying to conceive. When Ana did not become pregnant, she decided to resign from her job, thinking that it might be a source of stress. All the physicians they consulted suggested conducting examinations on Ana, ignoring the possibility that the fertility issue might be Miguel's. Eventually, Miguel's infertility was diagnosed. This was a radical rupture in the life narratives of both partners. In our first session, they articulated a need to work on the issue of infertility within a safe space. Miguel expressed feelings of guilt, insufficiency and isolation; Ana oscillated between anger, frustration and a sense of personal failure.

As soon as they told me about the problem, they stated that they did not want to adopt. They had made a firm decision to conceive via donor sperm. They wanted their child to carry at least some of their "genetic material": for the child to be "50% ours and 50% adopted". The discourse of genetic supremacy came through clearly. They thought there was important information that could only be transmitted genetically. Donor insemination would mean that at least Ana's genetic information could be transmitted to their potential child. This statement made me wonder: What discourses were involved in their decision?

For the couple, the problem story had several strands. One was related to the identity of a

future child and the influence of "unknown genetics". Another, equally important, strand concerned the question of what kind of couple they would become now that they had received the infertility diagnosis. Their identity as a couple was also at risk.

Deconstructing discourses of genetic continuity

Social scripts (Nordqvist, 2021; Simon & Gagnon, 1984) organise the ways we think and act in particular situations. In Chile, the discourse of genetic continuity carries significant weight. Social scripts about fatherhood remain strongly linked to the idea of genetic transmission, making it difficult to integrate alternative narratives such as relational fatherhood or nongenetic parenthood.

Ana and Miguel explained that genetic traits like skin colour, eye colour and hair type were important: if their child looked like them, the child would have an "invisible acceptance". They even told me that they feared school bullying if too many differences were apparent.

In our therapeutic work, it was fundamental to make these scripts visible, to deconstruct them and to allow new narratives to emerge in which the identity of being a mother or being a father might not be exclusively tied to genetic inheritance.

Ana: My mother always told me that one could not be happy in this world if one did not have one's "own" children.

This sentence contained a universe of assumptions, mandates and pain.

Ximena: What has to happen for the child to be "yours"?

Within that word "yours" lay a large part of the problem. How "theirs" would the children be if only half of the genetic material they carried was from the couple? How might Miguel come to experience the children as his own while carrying these internalised discourses, including

about appearance? How might Ana and Miguel access the happiness and sense of completeness promised by discourses of biological parenting?

Ana blamed Miguel for “denying” her right to this happiness. This was accompanied by a great deal of anger:

It’s not my fault that I can’t have children.

The infertility issue is his issue.

I will be looked down upon
because of his failure.

This increasingly distanced Miguel, who began to internalise guilt without knowing how to move forward:

She could be with another man who
could give her what she needs.

The most appropriate thing would be for
her to replace me with someone else.

The relationship began to fill with reproaches, distancing them to the point of no longer having sexual relations. They said that the absence of sex was a consequence not only of the diagnosis but also of the disconnection it had opened between them.

There were multiple layers of complexity: social scripts about virility, fertility and traditional fatherhood; a deeply rooted religious framework that considered assisted reproductive technologies to be taboo; and the emotional disconnection that accompanied these difficulties.

If we consider Foucault’s (1982) concept of “games of truth”, described as “a set of rules by which truth is produced”, the way in which the couple’s identity stories were being distributed confronted us not only with a story of pain, but with a story in which the problem and suffering were produced by their sociocultural and familial contexts. The “truth” to which they had been exposed was a political issue that did not allow for more hopeful movement. However, Foucault also wrote of the possibility that there is always an opportunity to discover something different that can help to modify this game of truth.

We sought to identify and deconstruct the dominant ideas that were holding Ana and Miguel in positions of suffering. Ana and Miguel identified a number of taken-for-granted ideas about gender and fertility. For example, they named that a man must be capable enough to “stand up” for the family. When I asked what it meant to “stand up”, they both agreed that it implied a lot of things: that men must provide a wealthy life, must be a “problem solver” and also be capable of making their wife a mother. We teased out some of these implications: Was the only way for Ana to be a mother for Miguel to make her pregnant? What about men who encounter problems that can’t be solved? They didn’t have many answers but reflected on the questions. Miguel had become positioned as neither a “problem solver” nor as someone who could “stand up” for his family. He was not only incapable of “achieving” his mandates but rendered Ana incapable of achieving hers.

Miguel: Making family in other ways is judgeable in this cultural context. I want our family to be “normal”.

Ximena: What would normal look like?

Ana: But if we don’t talk, it can’t be normal. We are in a shit society – everyone judges and critiques anything away from the pattern. We must talk between us.

Naming the problem

Together, the three of us arrived at a metaphor that made sense to Ana and Miguel as a representation of what they were experiencing. We pictured the two of them walking along a mountainside when a sudden landslide brought down a giant rock in the middle of their path. To avoid being hit, they had each jumped to opposite sides of the bolder and had become separated by it. Wanting to move forward down the path, Ana described herself throwing ropes towards Miguel so that he might scramble over the bolder to where they could continue together. However, up to that point, her efforts had seemed fruitless.

In this desperation to “move forward”, she said that the only thing that mobilised Miguel was when her body would “speak for me”. She had started to experience severe panic attacks and physical ailments, to which Miguel responded with great concern. In these moments, they would reconnect, but without managing to shift or surmount the rock that stood between them.

We explored the rock metaphor together. It was not Ana or Miguel who was responsible for the suffering, but rather this obstacle generated by infertility, social mandates and accumulated silences. Through the externalisation of the problem as a giant rock, Miguel articulated his fears about infertility and the ways in which his identity had been altered. For her part, Ana believed that the rock was making her ill and she feared that her body would not withstand these conditions for much longer. There was a great deal of fear associated with their differing experiences of urgency, and with feeling that they were not communicating with one another about fears, hopes, expectations and so on.

The rock wasn’t allowing space for anything else but the problem, so their conversations revolved around it. To make space for other possibilities to emerge, they would need to find ways to talk and live that were outside the problem.

Ana: Perhaps the problem has been that we stopped telling our stories. This rock grew because we stopped speaking to one another with truth.

She proposed that, as a couple, they return to weaving a shared narrative. This seemed to be a way to confront the “silences” that had come between them. They had shared their stories with each other prior to the moment the rock had come between them, and we imagined that returning to narrating life – not only the past, but also the present and the future – might be a way to work together towards moving the rock. “Narrating” became a metaphor for shifting their orientation away from the rock and making space for life. Miguel described

this as speaking with “truth” and thus being able to discover together new truths within their identities as individuals and as a couple. This would help them to construct a new sense of “complicity” and to move forward along the path.

Miguel: This rock forces us to stop and think. It’s frightening, but it also gives us the possibility of doing something different.

The metaphor became a valuable narrative resource that helped the couple to re-signify their experience. The conversation was no longer only about conceiving a child, but rather about constructing a new story about who they were as a couple, what kind of bond they wished to have, and what stories they wanted to tell their future child about their origin and identity. Gradually, they were beginning to resist the problem.

From genetic determinism to relational identity

The idea that their potential future child, described by them as “50% adopted”, would have an incomplete identity represented a failure for them. If our conversations had remained within the idea that identity is genetically predetermined, we would have reproduced the dominant framework that was closely associated with the problems they were experiencing. For this reason, it became imperative to begin opening new pathways and to make room for alternative stories. We began to consider the concept of identity as a relational, dynamic and co-constructed process (Combs & Freedman, 2016). This orientation allows attention to be placed on who we might become beyond who we currently are. Thinking of identity as a “project” makes it possible to generate active movement by recognising the influence of multiple interpersonal relationships and diverse contexts.

Re-memembering conversations provided an opening to discuss these ideas. We brought into the conversation people who were important to Ana and Miguel because of the values they shared. They both named Ana’s father, who they described as a person who valued family life, work done well

and protecting his children. I asked if there were any specific genes through which those values might be inherited, and the answer was no.

Miguel: You have a point; I have my father's genes, but I have followed my own path. Genes don't guarantee you anything.

Making space for this concept represented an important step in moving away from the problem-saturated story. We explored values, purposes and dreams and linked these to life stories and the people who were part of those stories. An image emerged of identity as an interweaving of relationships and meanings. Treating identity as relational – in contrast to genetic determinism or the more individualistic approach that had been guiding the couple up to that point – allowed for an unexpected shift towards more hopeful pathways within the relationship.

For Freedman and Combs (1996), stories from different sources can give meaning to the construction of multiple possible identities. In this sense, the way in which we narrate these stories takes on particular significance. After extensive discussion of the discourses at play, and a relational understanding of identity in which stories of learning, adversity and resistance were incorporated, Ana concluded: "We are not only what we inherit genetically, but also what we choose to tell and what we share with others." Miguel, unable to speak, nodded with his head with tears in his eyes.

These conversations gave rise to a series of reflections about the transmission of values, family narratives, and the possibility of creating a narrative identity inheritance that could accompany, sustain and strengthen the identity of the child beyond genetic ties. This would require the active presence of the stories and relationships of both parents, and the construction of a history filled with meaning, belonging and significant bonds that were 100% inheritable.

We began to speak of *identity* being inherited – in particular, the identity they would contribute

to constructing for the baby, a concept in which both would have 100% relevance, together with other significant actors. This identity would be intentional and fluid, a process rather than a possession. With each interaction, scaffolding was created that enabled new actions. Arriving at the concept of "inherited identity" stood out as a moment of change and movement. We began to understand that the baby's identity would not be constituted by genetic material from the donor and from Ana. There would not be an unknowable 50% that "replaced" Miguel in terms of identity. Rather, the child's identity would be a constant "project under construction", and the ways in which shared stories were scaffolded could be even more significant than shared genes.

Inherited identities: Moving the rock

Once Ana and Miguel began losing the weight of narratives centred on genetics, a fertile space opened to explore how they wished to narrate the story of the child they hoped to conceive. Our conversations shifted towards becoming co-authors of an identity: imagining themselves not only as passive recipients of genetic material, but as active creators of a web of meanings, relationships and stories that would be built day by day.

Another concept used by Freedman and Combs to describe identity is "performance", referring to the idea that we are all actors in others' stories and audiences to them. The absence of other "actors" would also have an impact on the child yet to be born. This "absence", when viewed from another perspective, was very much present within the problem story. Through incorporating the idea of identity as "distributed", we could start considering the relational story that they, as parents, might tell their baby and also share with the grandparents, friends, social networks, family gatherings, school contexts, and so on. Until this point, they had kept the issue of infertility secret as a way of "protecting" Miguel from a society that would judge his "incapacity" to procreate, and would also judge the use of sperm donation.

I invited them to think about what they would want that child to know about their origin, about the decisions they had made, and about the love that motivated the child's arrival.

Miguel: I don't want that story to be marked by secrecy but by trust. I want them to know that we chose, that it wasn't accidental, and that it was done with all the love in the world.

It was at this point that we began to see that the participation of others in the couple's identity was fundamental. Both had spoken at length about the influence their families of origin were having. Miguel decided that it would be important to speak with his family about how painful this entire experience had been for both him and Ana, and to express that there were certain spaces he wished to protect and certain decisions they wished to make as a couple. His parents understood, but they did not make themselves available to speak further about the issue beyond that conversation. For Miguel this was a relief. He said it was enough to no longer have to explain himself. Ana's family, on the other hand, responded very differently. Miguel was able to speak with her parents about what this situation meant for them, and both parents offered their full support.

Ana: My mother is very Catholic – very. However, she has seen my suffering and is willing to help us. She was surprised that a lot of Catholic couples do assisted fertilisation.

This was very important for both, and for Ana it represented a significant shift, as she allowed herself to speak about the guilt generated by the ideas with which she had been raised.

Couple's Tree of Life: A new couple identity

Ana said: "I want my child to have more voices that love them, more eyes that look at them with tenderness." I suggested working with the "couple's Tree of Life" (Chimpén-López et al., 2022)

as a way to incorporate people who were relevant to the couple's identity and who would later be invited to form part of the child's team of life.

Just as individual identity is constructed in a relational manner, so too is couple identity (Chimpén-López et al., 2022). Each couple holds multiple stories, and the stories of who each person has been and who they may become do not exist outside of their relationships with others. The couple's Tree of Life is designed to strengthen and protect the identity and resources of the couple. Couple identity is a co-constructed narrative that emerges from the ongoing interaction between partners, their experiences, and their sociocultural context, which in turn redefines individual identity narratives (Chimpén-López et al., 2022).

Ana and Miguel each presented an individual Tree of Life incorporating the polyphony of voices they had interacted with throughout their lives. Miguel began by speaking about his family of origin and about how he did not want his child to "inherit" certain patterns, particularly the tendency to hide emotional experience in the face of major adversity.

I asked whether they believed this "pattern" to be genetically predetermined, and both were clear that it was not. "It will depend on the relationships and the stories our children build with us – on how they face their difficulties, and not on the genetic information we transmit."

Miguel realised that he had often faced difficulties alone and had consistently had to make double the effort. He wanted his children to inherit his strength, but also to feel deeply accompanied and supported by their father. This was the first time in therapy that he was able to incorporate fatherhood into his identity and to imagine himself from that position.

Miguel: I realise that stopping is also moving forward. This gives me confidence to wait for what life brings. There may be droughts and storms, and this tree – with what it has – can face them. I had to stop to move forward with these ideas.

In Ana's Tree, the fundamental pillar she highlighted was family: this family that had accompanied her through every storm, and above all, gave her a sense of "home".

Ana: I think my childhood was by far the happiest time of my life, and then, of course, when I married Miguel. Even though there was suffering in my childhood, [my parents] cared deeply about making it a happy one. I think I've spent the last year and a half unconsciously searching for this feeling of home.

Ximena: Would you like to describe that feeling of home a bit more, and how it has helped you weather this storm?

Ana: My mother always expresses love towards us; it's a way in which I feel constantly filled with energy. It's the possibility of enjoying freely. Being able to enter a feeling of pure joy – there is always love.

Ana and Miguel also collaborated on a shared tree that highlighted the wisdom they had developed through dealing with the problem. This was narrated as part of the couple's new identity.

Ana: I would love for our tree to have an atmosphere of home – a place where we can recharge our energy.

Miguel: I agree, and I also want to include those who have been there for us after the infertility diagnosis and who have supported us without judging the decision or the method we use.

Conclusions

Infertility in general, and male infertility in particular, is not experienced solely as a medical condition. It mobilises a series of cultural meanings, gender mandates and social beliefs.

The story of Ana and Miguel reminds us that even in moments of profound uncertainty, people can reclaim authorship over their lives and construct narratives that restore dignity, meaning and belonging. In the face of dominant discourses that define identity through biology, normativity and individualism, narrative practices can offer an alternative path – one in which identities are understood as relational, distributed and continually under construction.

In this case, the work was not merely about overcoming a medical diagnosis, but about resisting the effects of silence, shame and isolation imposed by a conservative social context that made it difficult to speak openly about sperm donation. The emerging narrative was not one of male infertility as tragedy, but of parenthood as a loving choice and as a relational practice. Identity no longer depended on genetic material, but on care, commitment and the stories they chose to tell and live.

I believe that incorporating this perspective into clinical work within assisted reproduction contexts could be highly beneficial, particularly if conversational spaces were opened in which people could redefine their experiences, name what has been silenced, and reconstruct narratives from a place of agency and respect for their own truths.

For Ana and Miguel, "narrating life" became a form of resistance and also a way of building a loving relationship and preparing for their future child. Sustaining the metaphor of "narrating life to move the rock" was not only a clinical intervention, but also a form of ethical complicity with their efforts to resist narratives of shame, failure and silence.

As a therapist, my greatest learning was that when stories are constructed with care and respect, identity ceases to be a burden inherited through genes and becomes a shared project.

Note

¹ Our conversations took place in Spanish. The transcripts are the authors' translations.

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Sustaining the good man: Re-authoring when belonging is conditional then withdrawn

by Janet Pelly



Janet Pelly is a Melbourne-based narrative practitioner and writer whose work explores identity, dignity and relational care in contexts of structural injustice. For more than 10 years, she has worked alongside people affected by Australia's immigration detention system, integrating narrative practice with advocacy and collective witnessing. Her interests include double-story development over time, anticipatory uncertainty, and the redistribution of care when agency is constrained. She writes on detention-related topics for Michael West Media and Eureka Street and collaborates regularly with pro bono law firm Human Rights For All. janetpelly@icloud.com

Abstract

This article is written as a companion to “Discovering the good man: Double-story development with a survivor of repetitive ongoing trauma in immigration detention” (Pelly, 2019). While the earlier paper explored double-story development within continuous detention, this article examines what becomes of re-authored identity when detention recurs after a period of relative freedom. Drawing on sustained narrative conversations and advocacy alongside a man referred to as Yasin, it traces key themes in his personal life alongside renewed volatility in Australian immigration debate and policy. Through a profound experience of caregiving, followed by protective narrowing and collective holding after re-detention, the paper explores shifts in double-story development. Rather than focusing on expansion of preferred identity claims, it examines what enables those claims to endure when agency and freedom are withdrawn.

Key words: *Double-story development, immigration detention, conditional belonging, collective holding, re-authoring, recurrence, protective narrowing, dignity, political volatility, narrative therapy, narrative practice*

Pelly, J. (2026). Sustaining the good man: Re-authoring when belonging is conditional then withdrawn. *International Journal of Narrative Therapy and Community Work*, (2), 49–57. <https://doi.org/10.4320/BWKG6778>

Author pronouns: she/her

Context

This article is a companion to “Discovering the good man: Double story development with a survivor of repetitive ongoing trauma in immigration detention” (Pelly, 2019), which can be downloaded from <https://doi.org/10.4320/BWKG6778>. In that paper, I asked whether double-story development was possible within a traumatising system like immigration detention, and whether someone who considered themselves “100% bad” could develop a new perspective.

The focus of the 2019 paper was on Yasin's¹ efforts to reclaim his identity from institutional definition, both as a member of a persecuted minority and as a detained asylum seeker. The “good man” identity that emerged over years was grounded in re-membered acts of protection, loyalty and refusal to harm others, despite horrific trauma. Through testimony and outsider witnessing (Denborough, 2005), injury was acknowledged without defining the whole person (White, 2004, 2007).

In 2022, Yasin was released from almost nine years in closed immigration detention. After almost four years living in the Australian community, he was returned to detention. While it is hard to fathom why closed administrative detention would be considered appropriate for someone with his particular trauma history, that is not within the scope of this paper. My focus here is on the arc between a period of relative freedom and renewed detention, and the events that have influenced Yasin's identity project.

A note on “good” and “bad”

The term “bad man” come from the 2019 paper and is Yasin's own. When we first met, he described himself in absolute terms: “I'm 100% bad. You'll never meet a man bad like me”.

The term “good man” originates from a question I put back to him: What does it mean to be 100% bad? What would being good look like to you? Yasin's responses proved my assumptions wrong and revealed much about his values and

beliefs: causing pain to his family was greater than any other offence he could think of.

Despite wanting to be true to his words and to our work together, I'm equally aware that a good-bad binary is reductive. Read through a Western lens, “good man” can imply a fixed, individually authored self – one identity, correctly named, replacing another. Of interest is Tileah Drahm-Butler's work on how narrative therapy can reproduce this same flattening when it isn't attentive to whose worldview is doing the naming. She argues instead for identity stories that stay open and relational rather than settling into a single verdict (Drahm-Butler, 2015).

While I haven't softened or theorised it in the retelling, it's worth noting that Yasin's verdict has become more layered and nuanced over time.

A reasonable observer might ask what worldview sits underneath labels like good and bad. It is certainly different for Yasin and myself, shaped by different influences, ethics and notions of a singular bounded self. My experience with narrative practice has matured over almost a decade of working with Yasin, and continues to develop from imperfect beginnings.

A note on positioning

My connection with Yasin precedes my involvement in narrative practice and remains primarily personal – I consider him chosen family, and he has used the same descriptor for me. This is not incidental to the paper's method; it shapes what kind of account this is. Friendship and family are not neutral descriptors in this context. Where the state positions Yasin through a series of institutional relationships – case manager, officer, delegate, decision-maker – naming our relationship as family is a political act as much as a personal one.

Vikki Reynolds's writing on ally positioning is useful here: I am committed to forms of allyship that are fluid, imperfect and relationally embedded in the hope of staying accountable to those I am working and living alongside (Reynolds, 2013). This positioning carries real complication. The structurally different

positions that Yasin and I occupy mean that even friendship operates on unequal ground. Protecting his autonomy, especially while the state continues to assert authority over his life, has required deliberate work: checking in with him about what I write and how, resisting the urge to speak for him, and staying alert to the ways my privilege (and his lack of it) operates. Advocacy and allyship, in this sense, are not separate from the friendship – they are what the friendship requires under these conditions.

Identity after release, identity under return

After Yasin's release from closed detention in 2022, his identity questions shifted away from bad and good towards how to make use of small but significant freedoms.

The period that followed was not a simple transition but a slow process of learning how to live in ordinary spaces. Aware that his belonging was discretionary, Yasin continued to experience frequent episodes of anxiety, hypervigilance and emotional overwhelm. However, there were also moments of ease and purpose, especially when he was able to take responsibility for something beyond himself.

When he was unexpectedly re-detained in late 2025, the questions shifted again: What, if anything, could be sustained when freedom was withdrawn? How could he imagine a future when he had so little control over the present?

This paper traces identity across three phases: conditional belonging in the community, recurrence through re-detention and the relational practices that sustain a person in difficult circumstances. It engages three intertwined concerns. First, recurrence as a challenge to the durability of double-story development. Double-story practice emphasises the identification and thickening of preferred identity commitments alongside acknowledgment of injury (White, 2004). But what happens when those commitments cannot be enacted?

Does identity persist as narrative memory, or does it require embodied repetition?

Second, identity within sociopolitical instability. Yasin's period of release coincided with Australian immigration policy and discourse that increasingly centred on risk, control and securitisation.

Third, the way in which preferred identity is expressed and embedded in daily life. During his time in the community, Yasin took on a caregiving role that anchored him in time, responsibility and social connection. When re-detention interrupted that relationship, it disrupted more than attachment. It destabilised a structure through which the "good man" identity had been tested, then embodied. Taken together, these three concerns shifted the challenges of double-story development from expansion to endurance.

Freedom lite

Yasin's long-awaited freedom had come in the form of residence determination, an arrangement designed to accommodate people with health and other vulnerabilities outside the formal detention system. He lived at a designated address, and while he could move around freely during the day, there was a curfew and any travel or overnight stays required permission. He was given a small stipend but no right to work or study, and his status could be revoked at any time.

Rather than focus on the restrictions, Yasin valued small acts of agency – deciding what to cook, when to sleep, where to ride his bike. Neighbours became friends, and he enjoyed seeing their children grow up. His life stabilised while belonging remained conditional and incomplete.

Small acts of resistance clarified his values, hopes and aspirations. One night, we went to a restaurant that offered refugees and asylum seekers 20% off the bill. Yasin refused to claim it and instead left a generous tip. Refusing the discount was not a rejection of generosity or solidarity. For Yasin, paying the full bill had greater currency because it was what a citizen would

do. “Refugee, asylum seeker, foreigner – I hate those names because they make me different. I want to be myself, belong somewhere.”

Through a narrative lens, this moment highlighted the distinction between labels and identity. Terms such as refugee and asylum seeker generate legal, policy and welfare responses. Yasin experienced these as narrowing, even totalising, and rejected them. He was drawn to more meaningful aspects of his identity: neighbour, friend, carer, diner.

The restaurant exchange also highlighted how preferred identity is often expressed in ordinary ways rather than dramatic acts of resistance. Paying the full bill and leaving a tip were small actions, but they were meaningful to Yasin because they were consistent with his values and aspirations. In this moment he chose to participate on equal terms.

Writer Dina Nayeri (2019) has described the pressure placed on people seeking asylum to perform a particular kind of story – gratitude, redemption, transformation into what she calls “the Good Immigrant” – in order to be seen as deserving. Paying the full bill was, in part, Yasin’s refusal of that performance. He was not declining a discount so much as declining to play the role it assumed.

Habibi, my son:

Unconditional belonging

Two years into his release from closed detention, Yasin’s mental health had not significantly improved. Intrusive symptoms persisted despite mental health support and medication, and he found talk therapy unhelpful: “Every time, they want to talk about my childhood and my pain and I can’t do that anymore.”

His psychiatrist suggested that a pet might provide companionship and routine, and when a local family’s new cat had an unexpected litter, Yasin offered to adopt one of the kittens. He named him Habibi.

The impact was immediate – despite being wary around new people, he visited twice a week while Habibi was being weaned and formed a warm connection with the family. When he took Habibi home at 10 weeks, Yasin’s days revolved around feeding, cleaning and playing with the kitten. He went for walks with Habibi in a front-pack, enjoying easy conversation with other animal lovers at the local park and shops.

Caring for Habibi allowed commitments identified in earlier narrative work – protection, responsibility, reliability – to be enacted on a daily basis. Yasin took on the role of provider and protector, in stark contrast to his previous roles. Habibi’s presence offered more than companionship. The “good man” identity explored during detention found new expression. Habibi benefited from Yasin’s constant care, presence and reliability, and thrived.

Yasin soon referred to Habibi as “my son”. This marked an important identity shift. In detention, he had been the object of management. In release, he became a carer, responsible for another life.

For anyone living under revocable status, investing in a primary relationship is significant but risky. On some nights, Yasin pushed the couch against the door before sleeping, convinced that Australian Border Force (ABF) officers would force their way in during the night. In the morning, he fed and played with Habibi. A keenly felt loss of control and responsibility coexisted.

“I’m happy”

Despite the restrictions of residence determination, Yasin did have opportunities to travel. On a trip to Far North Queensland, after a drive through the forest and swimming in a local waterhole, he stood waiting to be served at a beachfront café. He turned to me and called out, “I’m happy”.

The café owner’s voice came from behind the coffee machine, “You should feel like that every day!”

We discussed that moment later in the day.

“When you said ‘I’m happy’, what were you noticing?”

“How I feel free. Next to the beach, nice people, no worries”. He paused. “It was real happy. Not fake happy, just to send a photo, make my mum feel good.”

“You looked surprised”, I observed.

“Yes! Because I haven’t had many times like this. Nothing really happening, just feeling happy and enjoy.”

In earlier narrative work, the “good man” had emerged through refusal – refusal to harm, refusal to stand by and witness harm. Here, it appeared as ease. In his words, “Not refugee or asylum seeker. Just Yasin, a man on holiday”.

Much later, when visiting him in renewed detention, I recalled this conversation. Not to restore optimism, but to remind us that Yasin had lived in a different frame.

“What did that day mean?” I asked.

“I liked just being who I am, not worrying, not thinking about what happens tomorrow,” he explained.

Uncertainty meets volatility

Well before he was re-detained, Yasin had spoken of a persistent sense that “they will come”. “If they want to, they will come and there’s nothing I can do.” These statements were matter of fact but carried a heavy weight.

When his case manager left messages requesting time to discuss “your ongoing stay in Australia”, Yasin interpreted the phrasing as ominous.

It would be easy to view this exclusively through a trauma lens, but narrative practice emphasises that identity is negotiated within sociopolitical contexts (White, 2004) and for those living under discretionary power, shifts in rhetoric and policy are quickly and keenly felt. This resists a model of

trauma as a bounded, past event to be processed and resolved. Writing from a context of sustained and unresolved political violence, Palestinian psychiatrist Dr Samah Jabr (2025) has argued that where danger is ongoing rather than historical, trauma cannot be framed as something a person is simply recovering from – there is no safe distance from which to look back. Yasin’s vigilance was not a symptom of unprocessed history; it was an accurate read of his current circumstances.

In November 2023, he watched as the High Court of Australia ruled in a case called *NZYQ v Minister for Immigration* that indefinite administrative detention of a noncitizen without clear purpose was unlawful. The unanimous decision ended decades of this controversial practice and people who could not be returned to their countries of origin (or deported elsewhere) were released into the community.

The decision set off a political firestorm. Legislative amendments enabled the application of visa conditions usually reserved for terrorism offences, such as ankle bracelets, curfews and jail terms for noncompliance. Media coverage referred to the cohort as “foreign criminals” (Melzer, 2024) of “appalling character” (Crowley & Caisley, 2025), quoting politicians who claimed that harsh measures were necessary for community safety.

Yasin followed these developments closely. Although not subject to the same conditions, he was aware that a wider immigration debate could open up, just as it had when the “stop the boats” campaign re-started offshore processing in 2013, the year he arrived in Australia (Lester, 2018). He was also concerned because some of the men were friends he’d met in detention. “Just because I’m not personally affected, doesn’t mean it’s okay. It’s not.”

Over the next year, disturbing accounts filtered through. Parents barred from visiting their children’s schools, men threatened with jail if they couldn’t get home by 10pm, constant “welfare checks” that verged on interrogation. Then came punitive legislative amendments, which could apply to anyone without citizenship. “Then I stopped feeling like I wasn’t affected.”

Removal

When ABF officers arrived to revoke Yasin's residence determination early one morning in December 2025, the process unfolded quickly. Yasin was presented with a warrant and informed he would be returned to immigration detention immediately.

What was it like?

"To be honest, they were respectful. A hundred per cent better than being moved between detention centres. But still the flashbacks, same as every time."

What did he see?

"It was 1982 and we were kids playing in the home, just laughing and enjoying. I was five years old and my brothers a bit older. Next minute, Saddam's men break down the door and take all of us to jail."

When the officers saw Yasin shaking and distressed, they slowed down, allowing him time to pack, have a smoke and go into the next room to settle Habibi. "I saw one officer so upset and I see she understands."

He called friends but none picked up, so the officers said the RSPCA could be contacted to collect and foster out Habibi. "I said no, this is my son. I don't want strangers around him." The emotional impact made him remember what other men had told him about dawn raids on their family homes. "They tell me about their kids watching them in handcuffs, crying and holding on to them. I've heard this many times, but I never really understood that pain."

Dispossession

By the time friends arrived, Yasin was gone, and we were informed by the property manager that the locks would be changed by the end of the day. What had been his private space had to be emptied within hours. We refused her offer of assistance and packed up everything

that belonged to Yasin; the institutional objects (furniture, electricals, cookware and utensils) would remain for the next person.

With several people packing at once, there was a risk that valued belongings might be left behind. Yasin was uncontactable, so items considered nonessential – like a cat scratching post and a bag of feed for ducks at the local park – were discarded. Plants he had nurtured remained in the yard. Clothes may have been left in the washing machine. This felt like a crude dismantling of Yasin's private life, and I wondered which parts of him might be lost in the process. When I expressed my concerns to his friend Ahmed, he shrugged and said, "This is our life".

I asked Yasin later how he felt. His response was similar. "It's okay. When you were packing up my stuff, I didn't think about it. How many times I've told you this happens when they move me? With you, at least I know nothing was stolen." He was pleased that the property manager had agreed to stay away.

Agency, authorship and continuity

In narrative practice, questions of agency and authorship are central to sustaining a sense of identity across disruptive circumstances (White, 2007).

Incarceration had repeatedly stripped Yasin of personal autonomy and property – during childhood imprisonment, deportation, displacement and transfer between Australian detention centres. Each time he was moved, the same pattern recurred: teams of uniformed guards came without warning, usually before dawn. He would be given minutes to pack up his personal effects and had to leave the rest behind, hoping it made it to the next place.

Packing Yasin's belongings without him there felt uncomfortably close to those institutional processes. Strangely, the impact was most keenly felt by people with more secure status and privilege. When I asked Yasin about this,

he said: “Because you have control over your life. For me, it’s happened many times and I only get hurt if I try to stop it.”

So, how does he sustain identity when disruption is constant? Where is agency and authorship located in a chaotic system? In this instance, it was what he could salvage in a situation outside his control: trust in others to protect his dignity when he could not.

I asked him what he had been able to control when he was removed: “A lot more than other times. When they wanted to take my phone, I said no and they didn’t take it. I said no handcuffs and they said okay. When I was upset about leaving Habibi, they let me have time alone with him. When I saw the officer get upset, I understood she knew what was happening was wrong.”

Beaudoin’s (2005) narrative map of agency and choice in the face of trauma was useful here: even where the larger circumstances cannot be altered, seemingly small moments can function as meaningful acts of authorship, resisting the totalising narrative of powerlessness that institutional processes can impose.

Interpreting loss, preserving identity

Freedom had shifted the “good man” identity from aspiration into everyday practice. When he was re-detained, Yasin could have easily slipped back into negative self-perception. That didn’t happen.

Rather than accepting this as his fate, he felt aggrieved by the decision and the constant refusal to explain why he was being uprooted. “Day by day I built my home. Then when I was putting on the roof, they come along, destroy it and kick me out.”

I asked what that metaphor meant to him: “I did everything I could to get healthy and build a good life. If before, I had 1% feeling I could be free, it’s gone. They’ve showed me I’m nothing to them, like a donkey they can put on a lead and take anywhere they want. Even when they be nice, there’s a limit – after that, always force.”

His metaphor captured the experience of repeated effort followed by abrupt dismantling, a pattern that had occurred at multiple points across his life.

Letters of support were important at this time, as both witnessing and scaffolding. They resourced advocacy efforts, and in doing so, documented and preserved Yasin’s preferred identity claims: kindness, care and belonging. In the absence of any formal opportunity for Yasin to explain his life and actions, these letters ensured that his identity was not defined solely by bureaucrats and politicians.

Habibi, still my son

In the early weeks, Yasin focused almost entirely on Habibi. While he had no feeling to talk, he wanted to hear about his son: Is he eating? Is he playing? Is he okay when it’s hot?

This narrowing of focus could be interpreted as withdrawal, but it appeared to operate as a form of protection. By concentrating on the one relationship where he held primary responsibility, Yasin maintained a foothold in his preferred identity.

Caring for Habibi allowed commitments that had previously been spoken about – protection, reliability, responsibility – to remain active even within the confines of detention.

Over time, this foothold began to widen. Yasin asked for help for men without legal representation, rushed to assist when an elderly man in a wheelchair became disoriented, and agreed to come to visits. These actions did not suggest acceptance of his situation, but they did indicate that his preferred identity was intact. Even on what he called the “Death Road”, Yasin continued to orient himself towards responsibility and care.

Conclusion

“Discovering the Good Man” (2019) asked whether negative identity can be challenged and preferred

identity claimed while a person remains inside a traumatising system. This paper has asked a different question: what sustains that identity when freedom is briefly granted, then withdrawn?

Release in 2022 allowed Yasin to enact the “good man” identity in ordinary ways: through care, routine and responsibility. Re-detention removed the setting in which these commitments could be practised, but it did not erase the identity that had been established.

Experiences of powerlessness and despair were real. Yet Yasin did not return to the “100% bad” or even “30% bad” story (Pelly, 2019). Instead, he saw himself as trapped in an unpredictable and harmful system. He narrowed his focus and continued to show care and responsibility within these renewed constraints.

Sustaining this identity did not occur in isolation. Friends packed up his home, fostered Habibi and documented his life through letters of support, articulating moral injury and making preferred identity claims visible to decision-makers in government.

The evidence here suggests that preferred identity can endure even when freedom is withdrawn. Double-story development, in this context, is not expansion but durability – the capacity to maintain preferred identity

commitments when the circumstances for enacting them are severely constrained.

This is not the shape of a hero’s journey, in which trial gives way to transformation and eventual triumphant return. There is no return here and no guarantee one is coming. The more honest shape is circular and unresolved – freedom, loss, endurance, freedom again, loss again – a structure that asks readers to find meaning in repetition and constraint rather than in arrival.

What remains uncertain is not who Yasin is, but whether and when the structures around him will allow that identity to be lived openly again.

Postscript

Since this paper was submitted, Yasin has been released again, this time on a bridging visa with work rights but no study, training or travel outside Australia allowed. His future remains uncertain while his immigration status is resolved.

Note

- ¹ All identifying details have been altered to protect confidentiality. The person whose experiences are described has given informed consent. As the article was too complex for him to read independently in English, I read it aloud to him and incorporated his reflections on how his words and experiences are represented.

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A response to
"Sustaining the good man:
Re-authoring when belonging is conditional then withdrawn"
by Janet Pelly

by Abdul Ghaffar Stanikzai

I found this paper very touching to read. The themes are very much related to most unplanned refugees/migrants who are forced to leave their countries. Unplanned means those who must leave their country, their relatives, their families and escape for their and their immediate family's safety, as distinct from planned migrants, those who are coming for study, work, and so on – they are planning their journey, they have a clear goal coming here, and importantly, they have a future, a family, to return to.

I first heard the term "bad man" when I was interpreting for a client at the STTARS (Survivors of Torture and Trauma Assistance and Rehabilitation Service) office in Adelaide about three years ago. I think he was on a Bridging Visa, something like that, and his visa had recently been cancelled. He was going through a lot of mental health issues caused by this news. He had been in Australia for more than 10 years on this visa and had never visited his family since he arrived here. In that counselling session where I was interpreting for him, he described himself as a "bad man". The reason he brought this up was that when he was leaving his family all those years ago, his son was a few-month-old baby.

He said, "Now he is 15 years old, and I haven't been at his side while he was growing up". He described this all to the counsellor and mentioned, "This is the most stressful thing, together with my visa cancellation and uncertainty. I have never been a good father and a good husband". The counsellor was very experienced, and she reassured him: "You sacrificed your whole life to your family, and I am sure they are very grateful and understanding of your struggles and the hard work you are doing day and night for them." I still see this man from time to time in Adelaide, and unfortunately his visa issue is still unresolved, and he is awaiting some court decisions, something like this. Sometimes, when I see him in the community, he is a very active member and contributes a lot to the community activities that take place from time to time.

While I was in my country of origin and before I fled and sought asylum in Australia, I was an active and very useful person in the community. I contributed through my profession as a doctor working in a hospital emergency department and also actively advocating for human rights for those who hadn't had a voice or whose voices were not being heard by the authorities, so I could see the

contribution and effects of my work on people's daily lives. Since I am here in Australia, I am safe, my kids are receiving a good education, and I am hopeful for their future. But despite all the efforts, I haven't had a chance to serve the community through my professional knowledge and the capacity I have. Although I am an Australian citizen now, sometimes I feel like I am not the person I used to be; sometimes I feel like I am a useless person. My energy and capacity to serve the community have been wasted day by day as I am getting older here. Thus, I can feel Yasin's feelings, and his identity as a person with all the trauma he experienced throughout his journey of detention.

Janet Pelly's article documents "Yasin's efforts to reclaim his identity from institutional definition, both as a member of a persecuted minority and as a detained asylum seeker" (Pelly, 2026, p. 50). After he was released after nine years in closed immigration detention, "his identity questions shifted away from bad and good towards how to make use of small but significant freedoms" (2026, p. 51).

Yasin fled his country, left his childhood and childhood places, his family and friends, due to uncertain, unimaginable situations and life-threatening conditions. He sought asylum, peace, security, prosperity and a brighter future in a country like Australia, but he ended up spending in his young life in closed detention where instead

he was given the feelings of powerlessness, hopelessness and despair and the constant feeling of being a "bad man". At all times, he was seeking even small opportunities to reclaim his identity as a good man by doing good things in the community.

All of these experiences are beyond the imagination of most people. For most, reading Yasin's story may only be like reading a daily newspaper. But for people who somehow went through similar experiences and for those who have worked with and helped such people, this is beyond an ordinary story. Yasin is a human being who came to a country and sought asylum and he had to spend nearly all his young life in closed detention where only powerlessness, hopelessness, despair, and the fences of detention could be seen and felt during all those years.

Our family can't thank enough all those who are involved with Yasin and have helped him throughout this journey. People are busy to get profit and money through their business, work, etc. Towards the end of the day, everyone is tired and planning how to get more money the next day, but people like you who have helped or are helping Yasin and others like him, I am sure you will not be tired. As you have heavily invested in your life for being a kind, helpful and compassionate human being, you will always feel happy and energetic whenever kindness and compassion are discussed.



After graduating from Kandahar University in 2004, Abdul Ghaffar Stanikzai worked as a medical doctor in Afghanistan for 10 years. He also has considerable experience as a human rights activist. During his time as provincial program manager at the Afghanistan Independent Human Rights Commission, he achieved several professional goals including the establishment of the Women and Youth Civil Society Organization in a remote and conservative area of Afghanistan (this was particularly to support women who were suffering domestic violence); the foundation of the first women's refuge in Afghanistan for women escaping domestic violence; the foundation of a rehabilitation centre for youth in Afghanistan; and the implementation of policies and procedures whereby local Afghans could present grievances to international military forces and local police, and the forces and police be held to account. Dr Stanikzai is now a faculty member at Dulwich Centre where he works on a range of community projects. drcricket@dulwichcentre.com.au

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Mothers who move: Traversing refugee experience, overcoming shame and reclaiming motherhood

by Jess Baker



Jess Baker is a queer Welsh woman living in Mparntwe Alice Springs in Central Australia. She is the research and policy manager for Ngaanyatjarra Pitantjatjara Yankunytjatjara Women's Council, and is also a consultant and writer specialising in anti-racist storytelling, governance and campaigns across the UK and Australia. Jess is driven by a curiosity for language, memory and the participation of bodies as they move across lands and borders, and she is a passionate grassroots advocate for systemic global change through abolitionist intersectional feminist practice. She can be contacted at NPY Women's Council, 3 Wilkinson Street, Ciccone, Northern Territory 0870, or at hello@the-story-garden.com

Abstract

When women are forcibly displaced, structurally violent migration processes can have dramatic and devastating effects on experiences of motherhood. This paper shares stories of two women who overcame narratives of shame and guilt, individually developed second stories of motherhood, and then came together through letter writing and narrative conversations to collectively create a renewed sense of belonging. The paper discusses ways narrative practices can support women facing forced displacement to rewrite their identities through themes of survival and collective strength, rather than individual failure.

Key words: *motherhood, displacement, collective externalising, re-membering, outsider-witness, double-story development, enabling contribution, family reunification, narrative therapy, narrative practice*

Baker, J. (2026). Mothers who move: Traversing refugee experience, overcoming shame and reclaiming motherhood. *International Journal of Narrative Therapy and Community Work*, (1), 60–69. <https://doi.org/10.4320/OCWV3731>

Author pronouns: she/her

It would be great to share my story with other mothers. The idea of the village has changed a lot recently. It's not something you can take for granted; you have to create that village first. Sharing our stories reduces our perception of isolation and contributes to looking for our sisters and becoming a village of mothers that support each other, sharing our happy and sad moments. (Jacqueline)

Telling my story would mean that some woman out there would have a similar experience to mine which they can relate to, and it can be an inspiration to other women who are struggling and separated from their children. When you share your story, it affects people in very different ways, but I think it will affect them in a positive way when it talks about hope. (Mariam)

I first met Mariam in 2021 when we were working in Manchester, UK, with an organisation called Women Asylum Seekers Together. In an environment that was hostile to refugees, this organisation was part of a flourishing grassroots campaign movement. Mariam led the management group, which represented women experiencing detention, destitution and “failed” asylum claims. When we met again online in 2024, I had returned to live in Australia. Mariam was 47 years old. She was still waiting for her asylum claim to be processed because the UK Home Office was convinced she was from Somalia, despite her country of birth being Kenya. She told me it had been a 16-year wait – 16 years separated from her children. When Mariam told me this, I asked whether she had been asked about her personal experiences of motherhood and displacement, knowing she had spent years campaigning to change policy for other mothers who were unlawfully detained in immigration detention because of their “failed” asylum status, an experience Mariam herself shared when separated from her children. Despite supporting other mothers, many of whom were pregnant, in these

hostile settings, it seemed she had not had the chance to reflect on her own journey. She said she was ready and happy to do so.

I met Jacqueline in 2023 when I was working with a humanitarian settlement program in Sydney. Our conversations were instantly drawn to topics of motherhood, spirituality and the policies that shape family reunion on stolen land and favour the nuclear family ideal. Jacqueline told me of her experience leaving Venezuela and becoming a mother in Australia, and the consistent barriers she faced when advocating for her extended family to join her. When I broached the idea of a project about motherhood to Jacqueline one year later, she was 58 years old. I had relocated to Northern New South Wales and was working as a strategic consultant in the settlement space. As we had maintained contact, I asked if she would like the opportunity to talk to me about motherhood, and she was curious and obliging. I also asked if she would like to meet Mariam to discuss motherhood, careful not to mention any details about Mariam’s journey. Jacqueline was excited at the prospect of speaking to another woman who shared her eagerness to discuss motherhood from a different cultural perspective.

I wanted to create space for a collective conversation about motherhood, agency and social justice. We welcomed motherhood into the conversation in ways that broke from single-storied accounts (Adichie, 2009) in which “migrant”, “refugee” and “asylum seeker” were the centred aspects of their identities. Through engaging in individual and collective externalising; re-authoring conversations about motherhood; and re-memembering conversations, we generated together a rich second story of “mothers on the move” and an ongoing dialogue began between women who had once been strangers. This dialogue through the written and spoken word enabled Mariam and Jacqueline to speak with passion about the politics of motherhood and to share their stories of resistance.

Along the way, as a white queer woman with a professional background in community development, research, policy and storytelling,

I needed to be aware of how I may inadvertently replicate colonial constructs. Having pre-existing ideas of the cross-cultural challenges mothers may face would have blockaded the pathway to second stories. Ensuring I was opening fields of inquiry about acts of resistance was one of the biggest learnings and simultaneous challenges I encountered throughout the process.

Jacqueline's externalisation of heaviness

In our initial conversation, Jacqueline wanted to focus on the “heaviness” of motherhood, which she described as emerging from a shift in identity and responsibility in a personal, geographical and cross-cultural context that often amounted to guilt and shame when separated from extended family. We externalised these feelings via a landscape-of-identity conversation about the environment of her childhood. We Re-membered the importance of her grandmother and mother and the spiritual, physical and emotional roles they played. This was made possible through a comparison of Jacqueline’s cultural home in Venezuela and her new physical home in Australia. This helped to establish values relating to interaction and community. We drew out these values by identifying the barriers she encountered when speaking with white Australian mothers in Australia: the heaviness would creep back in when Jacqueline attended predominantly white mother-support groups, but was absent in the “compadres club” she had formed in Australia with members of her Venezuelan culture.

Jess: So, when you were having these interactions with [the white] mothers, did that look different to the interactions you were having in your compadres club?

Jacqueline: Yeah, completely different, because it is not just cultural but [inter]generational ... And it's more familiar, more intimate, more close.

Jacqueline identified her values that stemmed from Venezuelan culture within the transitions of women more generally as they move physically

and emotionally across geographies, roles and expectations. This helped her to stay close to her identity despite being in a different “village”.

Jess: And where is the heaviness now?

Jacqueline: It's way different ... especially in a safe environment like this. Yes, you feel like that burden, when it's shared, is much less of a burden.¹

As Jacqueline referred back to her skills, knowledges and ancestral connections, this evoked storylines that related to being a woman, a mother, a Venezuelan and a member of her compadres club. These storylines offered very different possibilities than those associated with being primarily a migrant, refugee or a humanitarian-visa holder.

When we next met, I asked Jacqueline questions including:

- If you weren't here now, what would you be doing?
- What has the heaviness been doing since we last spoke?
- Who do you think is in charge of this heaviness?

In response, Jacqueline offered a historical, spiritual, political story:

Jacqueline: And remember that in the beginning the ones that were worshipping with the women as a goddess, then men with a patriarchal system started to, you know, make us believe that God was just a male energy figure, but no, actually, it's off both energies ... I always remember this book I read a long time ago that God was a woman. It's an omnipresence. It's being in five places at once.

Jess: I'm just wondering what's good about having this peripheral vision in relation to how women perform? How are you standing up to these expectations? How do your family see you now?

Jacqueline: In my work. They now see me as a more strong woman, more assertive.

These explorations of identity and externalising processes redefined success by shifting the narrative from Jacqueline's feelings of "guilt" at being far away from her homeland, to externalising this notion of guiltiness and replacing it with an alternative story of "communitas" (Turner, 1969, p. 96). It seemed also that externalising "the heaviness", guilt and shame that had been accompanying Jacqueline in relation to motherhood had led to an acknowledgment of patriarchy as a system of global governance. For Jacqueline, this enhanced peripheral vision had led to renewed connection to community, spirit and ancestors.

Mariam's identity landscape: From remote to constant mother

I met with Mariam around the same time as I met with Jacqueline, but due to time constraints, the difference in time zones and Mariam's ongoing Home Office appointments, we were not able to meet as often. I was made aware of this when I asked what it took for her to be here and she told me about her numerous appointments and having no recourse to public funds because of her ongoing asylum case.

Jess: What does motherhood look like to you now compared to motherhood in your village?

Mariam: It looks different. Quite, quite different. And when I was separated from my children, that was something that I struggled with for a long, long time because it's very rare for mothers to leave their children, very rare. In our community, that doesn't happen ... It's like I'm a mother remotely, whereby I want to know what [the children] are doing, how they have woken up, what they have eaten, where they're going.

Jess: And did you have a choice about doing motherhood remotely?

Mariam: It was my choice at first. I came here with the understanding that my children will join me. As the system has been, you know, your children cannot join you once your status have not been settled.

Jess: I'm curious about what you're up against being a remote mother? How are you fighting back about those ideas?

Mariam: In Mombasa, a child belongs to the community ... I think whether you call yourself a mother or a remote mother, you're still a mother, right? Yes, that's just a label that you're giving yourself ... but there hasn't been a choice involved in that for you. No-one's taken that power away from you, right?

In another conversation, Mariam told me of her constant fight against the system to regain her agency when she was consistently criminalised despite no longer being in detention.

Jess: And what would you say to your children if you could see them right now?

Mariam: Well first of all, they know that their mother loves them first and foremost ... And it's like changing that story of it being remote to it being constant ... They see me as patient, resilient now.

A shift in the conversation from describing motherhood as "remote" to "constant" because of hopes and dreams of reunion allowed for re-authoring conversations about motherhood and re-membering strength through culture despite forging new ideas of home in the UK. We explored together the ways in which Mariam still visits her homeland through memory and embodied experience (Lee, 2023). Mariam also described the ways she and her children are with each other despite distance. The idea of distant embodiment through advancements of global technologies was richly explored.

The ways in which Mariam overcame state language of "failed asylum seeker" and created a second story of being a "constant mother",

could be linked to Jacqueline's feeling of omnipresence and the idea of God being a woman rather than the weight of her duties as a "heavy" single-storied motherhood. These linked themes prompted me to reach out to them both about the possibility of meeting and writing some letters to be read to one another in the future. They both responded eagerly.

Re-memobering motherhood: Letter writing for collective strength

I chose letter writing as a way to bring Mariam and Jacqueline together because of its introspective ability to evoke silence and knowing simultaneously, without the potential pressure of a therapeutic setting. Both women had advised their preference to do this in their own time, without me being present while they wrote their thoughts. I crafted the following prompts for Jacqueline and Mariam to write letters to their younger selves with the idea that these would then be shared with each other.

- Write and address a letter to your younger self, before you became a mother, or perhaps when you found out you were pregnant.
- What are some of the obstacles you may face in being a mother, based on your life experience and journey?
- Have you seen other mothers navigate this? Or women in your family?
- What story would you have told yourself to give you strength? (This could be a story, a poem, or a song from your language or culture)
- How could you use this story in times when you will need it the most?
- What do you know about women in your family who came before you? What are their stories of motherhood?
- How can you draw on the strengths of women in your family to help you fulfil your hopes and dreams of becoming a mother?

- What does motherhood look like in your hopes and dreams?

I asked them to return their letters to me within two weeks. Here are the letters they wrote to themselves:

Dear Mariam,

I am writing to you with the hope you are fine and have time to read this letter. I can see you have grown to become a beautiful young girl from being the baby who was crawling and wanting to touch everything you saw. A few more years and you will be given for arranged marriage. For now, enjoy your youth, and make the most of it. I do not know what your dreams and ambitions are, if you have any. You feel you should not dream: it is like your life ahead has been planned by someone else.

Girls in our village have only one thing to think about, which is to grow older and become a good wife and have children. It is not known who you will marry. I hope he will be a rich handsome man. That is always a girl's dream. Becoming a mother, especially when you are young, can be challenging. There are older women in the village, we call them Bibi. They teach newly married women about arranged marriages and how to care for their husbands, and when the women have children, the learning continues. This practice has carried on for generations.

You may be worried about how you will cope with motherhood, imagining that giving birth is sacred and painful as the young mothers say, yet they have more than one child. How many children are you planning to have, or is it for your husband to decide, once you get married? Always remember, Mariam, you are the little girl who once played hide-and-seek games and danced with the stars under the moonlight.

Dear Jacqueline,

All this time that you have been looking for children, it's a time for preparation for motherhood. Enjoy the journey and relax. Avoid the frustration. When the medical treatment fails, keep going and have faith, because from those failures, you will learn what is not working—the excessive use of drugs and medications—and you will realise other ways, natural ways. When your body, mind and soul are ready, then the perfect timing to welcome your children will come. Other mothers have navigated health issues and infertility. But your paternal grandmother, Carmen, had 13 children, and your maternal grandmother, Maria, had five children. You have inherited that fertility from your ancestors.

My family's strengths are their sacrifices for the life and wellbeing of the family, the children, the future generations. I hoped and dreamed of becoming a good mother, like my ancestors. In December 2002, a beautiful lady, with a special energy and a spiritual aura, when she met me, said: "Your waiting time is over, what you were waiting for is already here. Your children's energies are here, or you are already pregnant, or you will become pregnant any time soon. You will go on the 1st of February 2003 and the pregnancy test will be positive for your eldest son, Sebastian".

I always remember this story to reinforce my new belief system: having faith in love, destiny and natural and herbal medicine. Motherhood is the continuation of love, care, heritage and family. It's a soul's journey, full of life lessons, learnings, hope and the ultimate unconditional love between mothers and their children. Motherhood is a monumental life mission.

It became apparent that these letters to a younger self had invited Jacqueline and Mariam to speak about the politics of experience by reflecting on identity in the context of time and place, and to create double stories of themselves as mothers today, and young women with hopes and dreams in previous lives.²

Going backwards to go forward: Re-authoring home

A shared interest emerged in further exploration of "skills of living", intentions, hopes, goals, the positive directions in which Jacqueline's and Mariam's lives had taken them, and what this said about their culture (Denborough, 2008). Two months later, the three of us were able to meet together online.

Following introductions, I asked Jacqueline to read aloud the letter she had written to her younger self. I invited Mariam to listen for what stood out to her. Mariam then read her letter as Jacqueline listened.

Jacqueline: It's a common story in my family from Venezuela, of being displaced from my country. It's not just my mother, it is all the mothers. They are currently living separated from their own families, children and grandchildren.

Jess: You are hoping that this is no longer common for women in your family – can you tell me about that?

Jacqueline: Yes. Because of the political system, yes. We are hoping that the regime ended any time soon so we can celebrate Christmas back in Venezuela and we can have the opportunity for a family reunion, and we can see each other after so many years – 25 years.

Jess: What does it feel like in your body to imagine reuniting after 25 years?

Jacqueline: [Becoming emotional] Oh wow. It could be a great opportunity for reconnection with your roots, your family, your sisters. But in my body, I am feeling a lot of mixed feelings and a feeling of completion, that finally that circle will be closed.

Here, I was attempting to use Lee's (2023) practice of evoking embodied experience of community and homecoming. Listening for the absent but implicit (White, 2000) within Jacqueline's expressions of longing had led us to hear of the ways she treasures belonging for her and for all mothers.

Jess: Mariam, is there anything you would like to say to Jacqueline?

Mariam: What I'd like to say is that we live with hope because if we don't have hope in our lives then life becomes meaningless. We have that feeling that mothers can be strong but sometimes we can get broken, but having that hope really makes us hold on to life, that one day everything will be fine. Just like me – I have not seen my daughter for 15 years, and when I start to think of it, it can bring me down. But the moment I speak to her, I don't want her to know I am feeling that way. A mother always wants to be strong for her children. So now she is coming to terms, but before she was not talking to me, blaming me that I left her – that I did not like her, I do not want her, I don't know what her hopes are so why should I care. That breaks a mother to hear that, and I felt broken at times, but I don't want to show her I am broken. I give her hope, and I think now she sees me as a strong mother, and it gives her hope to carry on ... Motherhood has become very difficult for displaced mothers.

Jess: Where can mothers find this hope? How can they access it?

Mariam: When they are together, sharing stories, talking about life.

Jess: Have you both had experience of mothers coming together and sharing hope? Is it better to come together?

Mariam: Yes this would give hope to other mothers. When we see them struggling, we reach out to find out the problem and what would support them.

Jess: Jacqueline, do you have any ideas of how to support mothers who may feel what you have both experienced?

Jacqueline: As women, first of all we should be supporting each other. More mothers groups, sharing, supporting. Helping to fill that gap between ones who have kids with them and ones who don't. Mothers definitely should be supporting one another in every way, in every place, regardless of the consequences of that motherhood.

As the women compared once again the similarities and importance of community in their different cultural contexts, I asked:

- Is it about keeping traditions alive and also adapting? Or something else?
- What are some new things you have had to teach as mothers being in a different culture from your own?
- What would your children say if they were here now?
- When you think about young mothers on the move, where is that hope located in your body?

They responded with insights into a collective motherhood of the future:

Jacqueline: In your heart. I had to raise kids away from family, but I tried to have this community or network close to my home country of co-parents: compadre club. So we support each other and they help a lot. Regardless where you are, mothers and kids are always connected. Maybe you can find Mariam's children's have

other people who are supporting and caring for them, and the same, Mariam has the opportunity to be close to other kids who are not her biological kids. It's the balance in life. I didn't have parents, but friends became the co-parents of kids. That's where the hope is. Wherever you are you are always connected.

Mariam: There is one culture that unites us all, which is caring for children, respect for the elderly. So it doesn't matter your colour, but if you are from those countries, you always treat the child as if you are the mother. An Indian mother can leave her child with me, a Somali mother, and because of my instincts of being a mother, I can care. So whenever there is connection and people around you that can support you, you can mother, and I am able to do this in Manchester.

Jess: How do you think your stories have changed from the beginning of being a mother, to the three of us meeting here today?

Mariam: I always love to hear what a mother says. I want to hear about experiences and hopes and challenges of other mothers. A mother looks forward to hearing these stories.

Jacqueline: I think it's very important that all mothers around the world can be connected just from motherhood and what it means to be a mother, regardless if biological or not. The caring and raising of new generations is paramount for women. Mothers and women in general are the glue that keep everything together in that village that Mariam mentioned before.

While enabling Jacqueline and Mariam to address difficulties in their life, I also explored how this could be linked to broadening a horizon of action – to consider how our collaborations could be relevant to the lives of other mothers (Denborough,

2008). At this stage I found myself a participant whose position was on the peripheries of not just story listening, but story expansion (Young, 2020).

Jess: What do alternative futures look like for mothers beyond borders?

Jacqueline: Beyond borders is that hope that we can help each other through the journey to be a mother and the different stages and challenges from when they are children to when they have children. There is always hope to do work with, you know, refugees or humanitarian-visa holders, like what I am doing here.

Mariam: If a mother in this country needs support and she is the only one in her country then I will help through my [voluntary] work to make them feel supported ... So, we continue what we did in our countries, but now we are doing it on a wider scale with different nationalities, so that helps us to come together.

Jess: Does this collective feeling of a physical and emotional process mean that everyone can learn from one another?

Jacqueline and Mariam: Mhmm.

Jess: So, the idea of motherhood without restraint in the future, where does that sit in your body?

Mariam: Heart. I help with love and care.

Jacqueline: The same with me. I agree with Mariam. When you are a mother, there is only love. I hope from my heart, Mariam, that you can reunite with your kids soon, and you can be with them and enjoy your grandkids when the time comes. It could be a great way of closing the loop for you.

Mariam: That is a beautiful way to finish. Thank you, Jacqueline, and I hope one day I will come to Australia.

Jacqueline: Of course we can meet!

Throughout this exchange, it emerged that both women had gone beyond externalising heaviness and remoteness, to new narratives of belonging and connection regardless of global location.

A surprise letter

Three months after this conversation, I received a message from Mariam asking if she could share some news with me and also pass this on to Jacqueline. Mariam also gave me permission to share this below:

Dear Jacqueline,

I hope you are well. Last time we spoke you wished me the best in life. I want to tell you that your wish for me has been granted. Finally, I am free to travel to go see my children. I have missed some years of their growing up, and can never get them back.

Moving forward and making the best of the moments I will have with them. I feel like I have been released from country arrest (if there is something like that). It is very good news for me that I can go see them and be a mother again. The wonderful news received after 16 years, shows that a woman can have resilience when she is living on hope.

I look forward to the reunion.

Love, Mariam

It occurred to me that through interactions with others, we learn what we might be able to accomplish in life (Vygotsky, 1986). This ongoing exchange is an example of the transition from individual to collective strength and also demonstrates a type of collective alliance which, if nurtured in narrative spaces, I hope can create possibilities for mothers in different social locations.

Could we create similar solidarities between other women who are displaced from their children or navigating isolation? I'm thinking of mothers who are imprisoned, mothers whose children have been removed by "child protection" agencies, and also queer parents who may not fit into the heteronormative settings of "mummy meet ups". I don't know what this will look like in the future, but I learnt a great deal from my conversations with Jacqueline and Mariam about escaping narratives of shame and blame and generating sociocentric momentum around experiences of mothering. As I conclude this paper, I am thinking of Mariam's joy when she video called me telling me of her plans to come to Australia as a "free woman". I'm also thinking of, and wanting to acknowledge, all mothers who have taken and are still taking acts of resistance in the name of mothering, and who may have lost their lives or the lives of their children in the process. As I write these words, I'm particularly thinking of mothers and children in Palestine, Sudan and the Democratic Republic of Congo.

Notes

¹ This burden Jacqueline is referring to relates not only to the heaviness of guilt and shame that she had been experiencing in relation to being separated from her children but also the "burden of proof" that women in Jacqueline's situation are subjected to. Displaced mothers are expected to prove themselves in relation to patriarchal expectations *and* expectations of assimilation *and* expectations from their own cultural background. What's more, the ways that structural and systemic power operates within the lives of displaced women means they are often seeking to claim preferred identity in the context of white supremacy – where motherhood ideals are shaped by whiteness (Faulkner, 2024). All these forces can create a particular "burden of proof" that Jacqueline and I spoke about together.

² Together, we shortened these slightly to fit this article while maintaining the rich tellings.

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*A letter to Jess, Mariam and Jacqueline in response to
“Mothers who move:
Traversing refugee experience, overcoming shame
and reclaiming motherhood” by Jess Baker*

from Zahra Stanikzai

To Jess, Mariam and Jacqueline,

Thanks so much for sharing such beautiful stories of two brave mothers, Mariam and Jacqueline. When my husband read out your letters and conversations to me in my language, Pashto, I found your stories quite painful, and at the same time quite hopeful and powerful. Your stories touch my entire life, especially my life since I left my mother, siblings and childhood places and came to rebuild a new home in Australia where I have had to search for mental and physical peace, find new friends and families, and new hopes.

When I came to Australia, I found it quite hard to keep going and have a normal life as expected. I had no social connections, not even basic English and no driver's licence. I experienced my first encounters with racism. I missed my family, especially my mom, and so much more. These all had significant effects on my mental and physical health.

Your stories touched my life and reminded me of an experience I went through earlier on in Australia.

Just a few months after we arrived in Adelaide, before we had much social connection, I had a miscarriage. When I heard the news from the sonographer and then from the Women's and Children's Hospital doctor, who called us in and confirmed the bad news, I was too stressed out and so sad. A few days later, I was called for a procedure called a D&C and had to take anaesthesia. After the procedure, I was taken to the ward. I was feeling very hopeless, stressed out and exhausted due to amount of blood I had lost. Although my husband was there all the time for me, I was missing my mom and sisters and wishing they were by my side at this time. In such situations back in Afghanistan, my mom and sisters would have been with me throughout my recovery; they would prepare special traditional foods and would not let me even stand up and do any work.

I then remember a nurse coming into my room and telling me that I'd been calling my mom's name in the operating theatre. I hadn't known that I was calling anyone's name, but sometimes I could see my mom, like in my dreams. This nurse said she would be happy to talk to me if I wanted to. She was very kind, and I could feel her sympathy in my

heart. She sat with me, and we talked about my childhood, family, siblings and much more. During our discussions, I forgot about the miscarriage, pain, stress, being alone, etc. She took me to my childhood, to the times when my mom and sisters were all there for me. She also brought me a warm cup of tea. Such conversation and comfort I hadn't seen for a very long time since I left Afghanistan. That discussion eased so much of the stress and pressure from my shoulders at that time.

Gradually, here in Adelaide, I found other families from my same background and culture, and now I feel like I've found my village and close family members here again.

From that point onward, I learnt that if I am ever stressed, I call my best friends and talk to them for a long time, as I have many friends here now whom I can trust and talk to.

Mariam, I really hope and pray that you have been reunited with your children and that your asylum has been granted/accepted.

May Allah help and protect you and your kids,

Zahra

Zahra Stanikzai is a wife and a mother to five beautiful kids. She was a primary school teacher back in Afghanistan. She is now a volunteer teacher in an ethnic school here in Adelaide. She attends TAFE for English classes. She is a wonderful professional clothing tailor and cook/chef. She loves to help and contribute to the community. She loves to read books, especially books about people's lived experiences. She is always eager to learn new things. Finally, she loves her family.

Stanikzai, Z. (2026). A letter to Jess, Mariam and Jacqueline in response to "Mothers who move: Traversing refugee experience, overcoming shame and reclaiming motherhood" by Jess Baker. *International Journal of Narrative Therapy and Community Work*, (2), 70-72.

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جیسے بیکر در پیر زبانیہ جنسہ مہ لہ موندے سترہ د دو غنبتلو او تکرہ حیدر (مرم او جملین) سبکی جھونہ -
سوزخت کی در پیر قوی او جھیلہ مجھونلی وؤ۔
سوسو سوزخت لہ قیسو زنا د روند لہ تولا او کونو سترہ دیر در توالی در لودہ اوزہ چی سختہ حنائہ کہہ۔
زہ آرائی تہ پری امیر راغلی دم مہ لہ سترہ ب یو سبکی اوند، زہنی سکون جہنی سکون اوند۔
سنگری پیرا لاسم۔ خون اوند دلہ د توقع خورف در سخت وؤ۔ ماکور نہ پیرا دل، انگلیسی جی۔
نہ وہ زہ، سوتری نہ دو زہ او درشی نند پیر شعلت۔ پیکری حل یو چار رتہ سبکی سبوری۔
پری خاوا وکری مہ ولی می حجاب الخوستی۔ لہ سور او کورنی فتحہ لری والی۔ راقول جھنہ۔
آرائی کی دغونک یو عویا سبکی تیرا سبوری، سافقان وکر۔ جھنہ سخت یولہ سخت ترین وختونو۔
فتحہ وؤ۔ دغقان دلہ کی کورو سبارہ زہ بلا علیہ سکوی دی، نو علم م زہ علیہ سکوم او بیرتہ۔
کہ یوہ۔ بیا زنا مہاق تہ یوہ نرسہ راغلہ حاتہ جی ووس در بھوکی خجانی یاد علیہ روتہ۔
تہ د خور نوم در جھنہ، است مہر حیدرہ زہ؛ زہ تولا سکیم در سرہ لہ قیسو در کہ دیرم ہزارا؟
جھنہ نرسہ زنا مہاق کی کیناستہ۔ د جھنی نرسہ جھوری او سیدہ رچی زنا، زہ دیرہ زہ۔
نیلوی آن تر زنا د کورنی، او جھنہ نرسہ پیرا کلا لولی امیرا کی سوزخت کہ کول، تولا قیسو جو۔
دایہ جھنہ شیبہ درسی ضہیرہ سکوتہ م زہ اھلہ؛ در داوستہ یا اوستہ پری پورہ۔
لہ جھنی در کی م زہ آرائی تہ راغلی دم مہ درسی جھلک نہ وکوری مہ حاد ویرہ آرائی پری۔
اوس الحمد للہ زہ دیر دستان ادھگری درم مہ قلم پیرا نہ سکیم ورنہ زنگ وچھہ او۔
دزہ خولہ ورسرہ کوسہ۔
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زوا است ندری ۷۸۸



From allyship to co-conspiracy: Disentangling psychotherapy from the ally-industrial complex

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Abstract

This article critiques the ways mainstream psychotherapy participates in the “ally-industrial complex”, a term coined by scholars and activists to describe performative allyship that reinforces existing hierarchies. Drawing inspiration from G. Patterson’s (2018) critique of cisgender scholars in transgender studies, I explore how psychotherapy – particularly as practiced by cisgender therapists – often recentres professional authority and individual virtue while masking the field’s complicity in trans and queer marginalisation. Grounded in feminist, queer and narrative therapy frameworks, this article examines how the discourse of allyship, when divorced from material risk or structural accountability, can collude with neoliberal and cisnormative forces. Drawing on narrative therapy practices, this article offers a call to move from allyship to co-conspiracy: a praxis of shared risk, decentred expertise and ethical solidarity.

Key words: *ally-industrial complex, co-conspiracy, queer, trans, transgender, feminism, anti-oppressive, neoliberalism, cisnormativity, therapeutic ethics, narrative therapy, narrative practice*

Nylund, D. (2026). From allyship to co-conspiracy: Disentangling psychotherapy from the ally-industrial complex. *International Journal of Narrative Therapy and Community Work*, (2), 73–84. <https://doi.org/10.4320/WWBH9633>

Author pronouns: he/him

I write this article as a white, US-based, able-bodied, cisgender man whose professional and social locations are shaped by the very systems of power I seek to critique. My access to academic platforms, clinical authority and institutional legitimacy is not incidental; it is made possible through histories and ongoing arrangements of whiteness, cisnormativity, patriarchy and ableism. I take up a critique of “allyship” with an awareness that I am not outside these relations but deeply implicated within them. This article, therefore, is not a claim to moral clarity but an effort to interrogate the conditions that make my own participation in the so-called ally-industrial complex both possible and, at times, rewarded.

In recent years, psychotherapy institutions have increased their rhetorical commitment to diversity and inclusion. Conferences feature sessions on “working with LGBTQ+ clients”, graduate programs emphasise cultural humility, and therapists add their pronouns to email signatures and Psychology Today profiles. While such gestures may signal care or awareness, they can also risk contributing to what G. Patterson (2018) described as the ally-industrial complex: a system in which cisgender, white, heterosexual, male, Christian, middle/upper-class and able-bodied therapists (i.e., those whose identities align with dominant cultural norms) are rewarded for their perceived alignment with marginalised communities, while ultimately maintaining power and control over discourse and practice. In this economy of recognition, allyship becomes a performance: a means of professional advancement, social capital or institutional branding rather than a genuine commitment to dismantling systems of harm. Importantly, Patterson does not simply call for a more authentic or reflexive form of allyship but for a departure from it altogether, urging a turn towards co-conspiratorship. This shift signals a move away from recognition and self-positioning, and towards practices grounded in risk, accountability and material disruption of oppressive systems.

This article takes up and extends Patterson’s critique of allyship, interrogating how the discourse of allyship operates within contemporary psychotherapeutic practice while

taking up Patterson’s argument for a shift towards co-conspiratorship (McKenzie, 2014). Drawing on feminist and queer critique, and grounded in the ethics of narrative therapy, I examine how mainstream psychotherapy often traffics in symbolic allyship – acts that gesture towards justice while leaving hierarchies of power intact. These performances of inclusion can obscure ongoing complicity in cisnormative, white and neoliberal frameworks that pathologise trans and queer life under the guise of care. In response, I offer a narrative-informed pathway towards co-conspiracy, one that refuses the comfort of symbolic gestures in favour of relational ethics, shared risk and collective accountability. Co-conspiracy, I argue, asks therapists to move beyond self-congratulatory allyship and towards practices that are materially aligned with liberation, resistance and community survival.

This article centres trans and queer experiences. However, given the particular ways psychotherapy has historically regulated and pathologised gender and sexuality, the dynamics of symbolic allyship described here are not confined to these contexts. Similar patterns can be observed in therapeutic engagements with racialised communities, disabled clients, immigrants and others whose lives are shaped by structural marginalisation. Across these sites, the language of inclusion and cultural humility can function as a veneer that leaves underlying relations of power intact. In this sense, the ally-industrial complex is not specific to LGBTQIA+ practice but reflects a broader feature of the helping professions, in which recognition is often decoupled from material change and structural transformation.

Building on this broader critique, a growing body of scholarship across social work and education has similarly challenged the limits of allyship and called for a shift towards co-conspiratorship (Fortier et al., 2024; Kim et al., 2024). For white practitioners in particular, these scholars present co-conspiratorship as a necessary reorientation to actively confront racism and disrupt white supremacy rather than merely signal alignment with anti-oppressive values. Social work has historically functioned as an extension of the

carceral state. Reform-oriented, well-intentioned practices often reproduce the very systems of surveillance, control and punishment they claim to resist, positioning practitioners as extensions of the carceral state rather than agents of liberation (Washington et al., 2025). Instead, Washington and colleagues (2025) call for a fundamental reorientation towards non-carceral, community-led care that redistributes power and centres collective accountability.

In educational contexts, Beasley and Ieva (2022) have similarly contended that traditional forms of collaboration and allyship are insufficient for dismantling systemic racism. They urge school counsellors and principals to move beyond “checkbox” equity efforts and take on the risks associated with co-conspiratorship, leveraging their institutional power to actively challenge inequitable policies and practices. Similarly, Domínguez and Bertrand (2023) demonstrated how allyship in schools often operates as performative or passive support that maintains adult authority, contrasting this with co-conspirator practices that require alignment between public commitments and material action, as well as a willingness to disrupt institutional norms alongside marginalised youth. Taken together, these works underscore a shared argument: that moving beyond allyship is not simply a matter of deeper awareness or better intentions but of fundamentally reconfiguring professional roles towards risk, accountability and structural change.

The language of co-conspiratorship has also emerged within disability studies and disability justice, where critiques of allyship highlight its limitations and call instead for practices rooted in material accessibility, the redistribution of power and solidarity with disabled-led movements (Piepzn-Samarasinha, 2018). Shelley Feldner and colleagues (2022) have argued that allyship in disability contexts often remains symbolic unless it is enacted through structural changes such as hiring disabled faculty, redesigning environments for accessibility and redistributing decision-making power. They suggest a movement

towards accomplice and co-conspirator roles that require ongoing accountability and action rather than identity claims.

Similarly, Wolbring and Lillywhite (2023), in a scoping review of disability allyship, highlighted the conceptual and empirical limitations of allyship as a framework, noting that it is frequently under-theorised and insufficiently oriented towards systemic change. Disability justice scholarship more broadly, including work by Alice Wong (2020) and others, emphasises that meaningful solidarity must be led by disabled people themselves and grounded in collective care, mutual aid and the dismantling of ableist structures. Across these bodies of work, there is a shared insistence that moving beyond allyship requires not simply deeper awareness but a reorientation of practice towards risk, accountability and material transformation – an orientation that closely aligns with the concept of co-conspiratorship as taken up in this article.

The ally-industrial complex in therapeutic culture

The term “ally-industrial complex” critiques a pattern in which institutions and individuals reap social or economic rewards for superficial demonstrations of solidarity. This critique originated in racial justice movements (Rudy, 2014) and has been extended to queer and trans contexts (Patterson, 2018). In psychotherapy, the complex functions through trainings, credentials and public displays of allyship that allow therapists – especially those who are white, cisgender or professionally credentialed – to maintain authority while evading deeper structural or relational accountability.

Therapists may engage in workshops about “trans cultural competency” while continuing to diagnose gender dysphoria for insurance purposes, work in carceral institutions, or fail to interrogate how whiteness, capitalism and professional hierarchy shape their work. These gestures become “proof” of being a good therapist, even as they leave systemic structures untouched.

Reading Patterson's (2018) article alongside other critical interrogations of allyship was unsettling, precisely because they implicated me. As a white, cisgender therapist who has long considered myself an ally to trans and queer communities, I found myself confronted by the uncomfortable realisation that my position within the field, even as someone who directs a trans-affirming agency, does not absolve me from participating in systems of harm. The critiques did not offer easy comfort or external targets. Instead, they turned my gaze inward: What does my allyship actually do? Who does it serve? What power does it maintain? These questions were not abstract. They were personal, professional and profoundly disorienting.

For years, I have served as the clinical training director of the Gender Health Center, an agency based in Sacramento, California, that serves trans and queer communities. This role, I assumed, shielded me from the kinds of complicity these authors were naming. But reading these critiques forced me to reconsider how institutional roles, even in progressive or community-based settings, can unwittingly collude with the very structures we claim to resist. I began to see how the performance of allyship, complete with the right language, visibility and credentials, could function as a kind of currency in the nonprofit and therapeutic worlds. This realisation was not about guilt; it was about responsibility. I had to ask myself not just how I could appear to be in solidarity, but how I could reimagine my work in ways that disrupted the ally-industrial complex altogether. Moving towards co-conspiratorship meant decentring my own identity as "the good ally" and orienting my practice around risk, accountability and material support for trans liberation.

Unsettling the therapeutic gaze: Feminist and queer challenges to professional power

Feminist scholars have long exposed the gendered, racialised and class-based hierarchies embedded within the helping professions, including psychotherapy. What is often framed as

"care" can reproduce paternalism, gatekeeping and institutional control under the guise of benevolence. Pioneering thinkers such as Bonnie Burstow (1992) and Laura Brown (1995) critiqued how therapeutic relationships have historically positioned clients – especially women and members of other marginalised groups – as passive recipients of expert knowledge rather than as authors of their own lives. As Audre Lorde (1984) powerfully warned, "the master's tools will never dismantle the master's house". Within therapy, this insight urges us to question whether our practices reinforce systems of domination even as we claim to disrupt them. A therapist's "helping" stance, when unexamined, can become a subtle method of managing or neutralising resistance, rather than standing alongside it in solidarity.

Queer theorists offer parallel critiques of the normative assumptions embedded in many therapeutic models. Jasbir Puar's (2007) concept of *homonationalism* illustrates how liberal multiculturalism incorporates certain queer and trans bodies only when they conform to national narratives of progress, inclusion and respectability. Queer and trans individuals who resist assimilation – those whose gender expressions are unstable, defiant or collectivist – are often marginalised even within supposedly affirming spaces. In psychotherapy, this takes shape when trans clients are subtly or overtly encouraged to pursue linear gender transitions, conform to cisnormative expectations of stability and productivity, or frame their suffering in apolitical, individualised terms. Such therapeutic scripts risk erasing the radical potential of queerness as a site of resistance, relationality and survival outside the logics of the state and market.

Even within gender-affirming care models, there can be an implicit pressure for trans and nonbinary clients to articulate their identities in ways that are coherent, consistent and legible to cisnormative frameworks. Therapists may unintentionally privilege narratives that align with biomedical transition timelines or emphasise binary gender categories, sidelining more fluid, anarchic or nonlinear ways of being. This can foreclose more expansive queer futures, reducing gender diversity

to a medical problem to be stabilised rather than a political and relational site of becoming. As Dean Spade (2015) and others have argued, this reproduces a kind of therapeutic gatekeeping where trans survival is made contingent on producing narratives that “make sense” within the institution’s terms. The client’s self-expression is filtered through the therapist’s comfort and the clinic’s protocols, reinforcing the very hierarchies of intelligibility that queer life so often resists.

Moreover, the drive for “outcome-based” therapy, so prominent in neoliberal health care systems, further entrenches this assimilationist logic. Queer clients are expected to demonstrate improvement in individualised metrics: reduced distress, increased functioning, greater “resilience”. But what if the distress is not pathological but a response to structural violence? What if the goal isn’t to function better within oppressive systems but to survive them, refuse them or remake them altogether? These are not questions that fit easily into treatment plans or diagnostic codes. But they are central to queer liberation. If therapy is to support queer and trans clients in their full complexity, it must be willing to depart from state-sanctioned narratives of healing and progress. It must learn to hold space for incoherence, contradiction, rage and refusal, not as symptoms to be managed but as legitimate and often generative responses to life at the margins.

Queer and feminist theory in action: Narrative therapy

In contrast to allyship, which often remains symbolic and self-referential, co-conspiracy is a praxis of risk, relational commitment and material accountability. Black feminist scholar Bettina Love (2019) distinguished co-conspirators from allies by their willingness to relinquish comfort, status and institutional safety in the pursuit of justice. Co-conspirators do not merely “support” movements; they organise, disrupt and act alongside.

The concept of co-conspiracy does not originate within psychotherapy but emerges from

longstanding traditions of resistance articulated by abolitionist organisers, Indigenous feminists, disability justice activists, queer/trans organisers, and grassroots community workers. Abolitionist scholars such as Mariame Kaba (2021) and Ruth Wilson Gilmore (2007) have emphasised that solidarity requires material commitments to dismantling carceral and punitive systems, not merely symbolic alignment. Indigenous feminist thinkers (e.g., Coulthard, 2014; Simpson, 2017) have foregrounded relational accountability, land-based ethics and refusal as central to decolonial praxis. Community organisers, particularly those engaged in mutual aid and direct action (Rudy, 2014; Spade, 2026), have long enacted forms of co-conspiracy through collective care, risk-sharing and resistance to institutional recognition. Bringing these traditions into conversation with narrative therapy helps decentre psychotherapy as the primary site of knowledge production and instead situates co-conspiracy within broader histories of struggle, survival and liberation.

Narrative therapy shares deep affinities with queer, abolitionist and feminist approaches to justice, not only in its theoretical commitments but in its relational praxis (Madigan, 2025). Rather than pathologising responses to systemic harm, narrative therapy views those responses as meaningful, situated and often subversive acts of resistance. Its central ethical stance – that the person is not the problem, the problem is the problem (White, 1987) – offers a powerful alternative to dominant psychotherapeutic models that locate distress within individual pathology. This shift enables therapists to trace suffering to the operations of power, normativity and discourse, and to join clients in exploring how they have already resisted, survived or subverted these forces in ways that are often unrecognised or uncelebrated.

Narrative practice, particularly in its community-based and politicised forms, also attends to what feminist scholar Sara Ahmed (2017) called the “feminist snap”: those moments when people break from what is expected of them to preserve their dignity or integrity. In therapy, these moments often show up as ruptures,

refusals or breakdowns in normative expectations of healing. These snaps can be referred to in narrative therapy as “unique outcomes”. Rather than framing them as therapeutic derailments, narrative therapy positions these snaps/unique outcomes as sites of ethical inquiry and possibility.

By collaborating with clients to name the sociopolitical contexts that produce suffering and to document the ways they’ve responded, therapists engage in a praxis that is both relational and resistant. Narrative documents, outsider witnessing and collective narrative practice can function as tools of re-membling, connection and politicised care (Denborough, 2008). As a praxis affiliated with queer and feminist therapy (Butler, 2004; hooks, 2000), narrative practice, at the level of its ethical commitments, resists institutional co-optation by refusing the neutrality and professionalism that often underwrite the therapist’s authority. It invites therapists into relationships of accountability rather than hierarchy, and into storytelling practices that centre relationality over individual success. At the same time, these commitments are not guaranteed simply by using narrative language; there are instances in which “narrative” is taken up as a set of techniques or metaphors while remaining compatible with dominant institutional norms and power relations. Attending to this distinction underscores that narrative practice is not inherently co-conspiratorial but rather requires ongoing ethical and political accountability to resist co-optation.

As narrative therapy is informed by queer theory’s refusal of normativity and feminist theory’s insistence on power analysis, it can help therapists move from symbolic allyship into co-struggling relationships that are porous, ethical and collectively held. In this way, narrative therapy offers not just a framework but a living, breathing method for resisting the logics of assimilation, pathologisation and professional dominance that continue to shape the terrain of mental health care.

Charley Lang (2020), a narrative therapist and educator, has called for “companioning” rather than “intervening”, particularly in queer and

trans contexts. This involves a deep commitment to witnessing, honouring and amplifying the knowledge and resistance already alive in marginalised communities. It also requires therapists to step out of the expert role and into an ethic of relational humility.

Julie Tilsen, in her (2021) book *Queering your therapy practice: Queer theory, narrative therapy, and imagined futures*, challenged the idea that therapy should be confined to the individual, instead calling for an orientation that centres community wisdom and collective practices of survival and resistance. Tilsen drew on community narrative practices that emphasise outsider witnessing, collective documentation and co-authored responses as strategies to counter isolation and foster connection between queer clients and broader movements for justice. The practices that Tilsen described in her book exemplify an active engagement with the ethics and politics of co-conspiratorship: moving beyond allyship to shared risk, relational accountability and collective resistance.

In addition to Tilsen (2021) and Lang (2020), I draw conceptually from the work of trans and nonbinary practitioners and theorists Sand Chang (2019) and Jack Halberstam (2011, 2020) to deepen the critique of the ally-industrial complex. Chang’s writing on embodied trans-affirming care invites therapists to move beyond performative gestures of inclusion towards practices grounded in vulnerability, shared risk and relational accountability. Their work foregrounds the body as a site of both harm and resistance, insisting that therapeutic ethics must be lived somatically and relationally rather than proclaimed through declarative ally identities. Chang (2019) exposed how the professionalised language of affirmation can reproduce asymmetrical power relations when it is detached from embodied solidarity and mutual transformation. Drawing on this, co-conspiratorial practice asks therapists to inhabit uncertainty, to risk complicity, and to orient towards repair rather than reassurance. In this frame, accountability is not a declaration of moral purity but a continual, embodied negotiation of power, privilege and care.

Halberstam's (2011) queer theoretical work offers a critical analysis of how normativity organises identity and belonging within neoliberal culture. Their critique illuminates how the "good ally" often becomes a stabilising figure: someone whose moral coherence is secured through practices that manage dissent rather than disrupt hierarchy. From a narrative perspective, this discourse of allyship shapes the professional identity of therapists, inviting stories of virtue and moral authority. Halberstam's call to resist normativity opens space for alternative therapist identities grounded in curiosity, relational accountability and co-created meaning. In this sense, co-conspiratorial practice invites a re-authoring of professional identity that redistributes authority and unsettles the moral economy sustaining the ally-industrial complex.

Practices of co-conspiratorial narrative therapy

Moving from allyship to co-conspiracy in therapy requires a fundamental reorientation of the therapist's role, ethics and relationship to power. This shift is not about acquiring new techniques but about inhabiting a different stance, one that resists institutional reward structures, centres community accountability and embraces relational risk. Below are five interrelated practices that support a co-conspiratorial approach rooted in narrative therapy and informed by feminist and queer critique.

Decentring the therapist's moral identity

Mainstream allyship often positions the therapist as the benevolent expert: someone who is "safe", "inclusive" and morally superior. This performance of allyship may offer comfort to the therapist and legitimacy to the institution, but it rarely challenges the material conditions shaping clients' lives. A co-conspiratorial stance requires us to let go of our investment in being seen as "good" and instead ask: Who benefits from this work? Who is centred? What am I willing to risk? Decentring moral identity involves a shift from self-image to solidarity. It means showing up in ways that are accountable not to reputation or

performance but to the lived experiences and liberation of queer and trans communities.

Resisting institutional co-optation

Therapists must critically examine how their practices are shaped by the institutions they work within: licensing boards, insurance companies, nonprofits or universities. Even when these institutions espouse progressive values, they often reproduce cisnormative, racist and neoliberal logics under the surface. Co-conspiratorial therapists resist becoming agents of regulation by identifying where they are asked to police the boundaries of legibility, normalcy or compliance. They interrogate whose stories are centred in their documentation, who gets access to care and how power operates in the name of "professionalism". Resisting co-optation may involve subverting institutional policies, amplifying critiques internally or aligning with activist movements that push for systemic transformation beyond the therapy room.

Embedding therapy in community and collective action

Co-conspirators understand that healing and resistance are collective processes. They develop relationships with community organisers, mutual aid networks and grassroots movements, not as saviours or service providers but as relationally embedded collaborators. These ties inform their ethics of care and help ground their work in the lived struggles of the communities they serve. Therapy becomes one thread in a larger web of support and survival rather than an isolated, individualistic pursuit. Co-conspiratorial therapists might attend rallies, host community listening circles, share space with organisers or offer pro bono work that directly supports collective resistance efforts. These connections create a feedback loop between therapy and activism, making both more accountable and responsive.

Co-authoring justice-oriented practices

Rather than relying solely on clinical language or treatment goals, narrative therapists engaged in co-conspiracy collaborate with clients to

develop story-based practices that affirm identity, document resistance and connect to broader social movements. These may include letters of recognition, counter-story maps, remembering practices or community-sourced therapeutic documents (Denborough, 2014). Such tools function not only as therapeutic interventions but as acts of cultural refusal: refusing pathologising labels, refusing individual blame and refusing silence in the face of systemic harm. Justice-oriented narrative practice treats storytelling not just as healing but as political: an act of reclamation, visibility and solidarity.

Practicing rigorous reflexivity

Co-conspiratorial work demands ongoing, uncomfortable reflection about the therapist's own location within systems of power. This is not a one-time self-assessment but a continuous interrogation of how whiteness, cisnormativity, class privilege, settler status and professional authority shape one's gaze, responses and ethical orientation (Tilsen, 2021). Reflexivity in this context is not merely introspective; it is relational and political. It asks therapists to be in conversation with community feedback, to welcome critique and to remain open to being called in. This kind of reflexivity deepens accountability and interrupts the complacency that can come with professional expertise.

Together, these practices constitute an evolving and imperfect praxis. Co-conspiratorial narrative therapy is not a fixed destination but a commitment to showing up differently: to abandoning the comfort of neutrality, embracing the discomfort of solidarity, and refusing to collude with systems that pathologise and police queer and trans life. It is a practice of aligning therapy with liberation.

Case stories: Practicing co-conspiratorial narrative therapy

To illustrate what it might mean to move beyond mere allyship and into the messier, riskier terrain of

co-conspiratorship, I offer several stories from my own experiences as a therapist and a supervisor. These are not offered as models to emulate but as moments of disruption, discomfort and transformation: times when I and the therapists who consulted me were challenged to confront the limits of allyship and reorient the practice towards solidarity. These cases reflect real engagements with trans and queer clients who, in their courage and clarity, pushed us to examine our complicity with the systems we thought we were resisting. They also reveal how narrative therapy, when practiced with a commitment to justice and relational accountability, can become a space where co-struggling is possible, institutional norms are contested and therapy spills into the collective life beyond the office walls.

Letting go of being the “good ally”

Kai (they/them), a nonbinary Latinx college student, first came to therapy after experiencing repeated microaggressions in their psychology program. Early in our work, I noticed myself overcompensating, leaning hard into gender-affirming language and over-validating their experiences in a way that was less about Kai and more about proving that I was a “safe” therapist.

In our work together, Kai and I began to externalise what we came to call “the Model Ally”: a voice that demanded perfection, gratitude and visibility. We treated the Model Ally not as an identity to defend or disown but as a discourse that shaped both of us. Kai named the ways cisgender professionals often perform allyship to maintain moral safety rather than relational accountability. We collaboratively wrote a satirical story titled “The Myth of the Model Ally” mapping the seductive promises of this discourse: to be the one who gets it right, who is thanked and who never risks discomfort. Through humour, critique and reflection, Kai exposed the emotional economy of allyship as a currency that rewarded performance over solidarity. Below is the story we co-wrote.

Once upon a time, in the bustling land of Helping Professionals, there lived a character known as the Model Ally.

The Model Ally wore a radiant badge of Wokeness that shimmered in the light of conferences and supervision meetings. They spoke fluently in the language of inclusion, often citing marginalized authors – though rarely inviting them into the room. Whenever injustice appeared, the Model Ally rushed in, armed with empathy statements and social media posts. Crowds applauded their bravery, and they collected gratitude like merit badges. Each “thank you” polished their halo brighter, helping them forget the quiet voices they’d interrupted or the discomfort they’d avoided. The Model Ally’s greatest fear was not harm, but awkwardness – the moment their good intentions might be questioned.

Meanwhile, in the corners of the same land, people like Kai began to whisper about the myth itself. Kai noticed how the Model Ally’s moral shine depended on others’ suffering, how their empathy was a performance staged for approval. So, Kai decided to follow the trail of the Model Ally – to listen to the promises it made: If you get it right, you won’t have to feel wrong; if you are thanked, you must be good; if you stay busy helping, you’ll never have to be changed. Together, Kai and David laughed and rewrote the script. In Kai and David’s version, the Model Ally slowly removed the badge, realizing that real solidarity was less about being seen as good and more about staying in the room when it got hard – risking discomfort, listening longer than speaking, and learning to accompany rather than perform.

Our co-writing process was both therapeutic and political. Kai wrote sections that reclaimed agency, and I followed their lead, learning to write with, not about. We reflected on how the Model Ally demanded reassurance, how it used empathy as self-protection, and how it often sought proximity to pain without bearing its consequences. Kai reflected that “Accountability isn’t about being right; it’s about being responsive and in relationship”.

Naming institutional complicity

Sam (she/her), a white cisgender bisexual woman whom I was supervising at an agency where I provided consultation, was working with Marlo (she/her), a white trans woman in her 40s, who was navigating both gender-affirming care and a deeply transphobic custody battle. Early on, she asked Sam to write a support letter for the court. Sam’s agency had a policy requiring such letters to go through a multi-step “clinical review” process, ostensibly to ensure quality but, in practice, a form of gatekeeping and surveillance.

When Sam explained this to her, Marlo said: “So basically, your system doesn’t trust you to trust me”. She was right. Sam and I had to reckon with the fact that, even in a progressive agency, we were participating in the regulation of trans lives. Sam shared this dilemma with Marlo transparently. Together, Marlo and Sam wrote two letters: one to satisfy the court’s bureaucratic demand and another to Sam’s agency – a declaration of autonomy and critique of institutional gatekeeping. Marlo’s words, not Sam’s, guided the letter’s tone and message.

This moment reworked supervision as co-conspiracy. Instead of correcting Sam’s professional stance, we discussed how to use her institutional position to challenge the system’s demands. Sam brought Marlo’s critiques to leadership, arguing that the policy replicated cisnormative control. The agency eventually revised its procedures to allow clinicians to co-sign letters directly with clients. This shift exemplified what Patterson (2018) described – and what respondents in the same issue later affirmed – as redistributing authorship and authority (Fischer, 2018). Here, Marlo’s authorship changed institutional practice not just her own case.

Together, Marlo and Sam co-wrote a letter that was not just a clinical justification but a piece of advocacy that told Marlo’s story on her terms. I also submitted feedback to the agency’s leadership, challenging the policy and pointing to its cisnormative assumptions. This wasn’t just about Marlo; it became a broader

moment of resisting institutional co-optation and advocating for change beyond the therapy hour.

Therapy that spills outside the room

Nicole (she/her), a white cisgender heterosexual woman I was supervising in my practice, was in therapeutic partnership with Jules (they/them), a queer Black organiser whose mutual aid collective was experiencing intensified state surveillance amid the shifting political terrain in the United States. Jules had not come to therapy seeking individual healing in the traditional sense; rather, they were looking for a space to remain resourced, to give shape to their experiences of grief and rage, and to stay connected to movement without burning out. During one session, Jules remarked, “I don’t need a therapist who helps me cope with injustice. I need an advocate who believes that the world I’m fighting for is possible”. This statement became a key moment in the re-authoring of what therapy could mean and do.

As Nicole and Jules continued their work, their sessions evolved into strategy meetings in which therapy and activism intertwined. Jules began using the space to reflect on burnout, grief and the complexities of mutual aid within their organising collective. Nicole shifted from providing reflective listening to co-developing plans with Jules for redistributing resources, connecting their community to affirming mental health supports and creating networks of care that extended beyond formal therapy.

This reorientation drew inspiration from the Just Therapy Team’s notion of “partnership”: a relational ethic that dissolves hierarchy in favour of shared responsibility (Tamasese & Waldegrave, 1996). Nicole and Jules regularly reviewed how their sessions aligned with movement goals. In this way, the therapy itself became a site of community resistance grounded in trans and nonbinary narrative practices like those advanced by Charley Lang (2020). Jules’s insistence on collective survival over individual adjustment challenged us both to see that co-conspiracy in therapy means standing with communities in motion, not observing them from a safe distance.

Eds note: The Just Therapy Team and their forms of partnership accountability

One of the many significant contributions of the Just Therapy Team from the Family Centre in Lower Hutt, Aotearoa New Zealand, is the way they have developed long-lasting cultural and gender partnerships among their own team. These rigorous honouring partnerships are based on a foundation of treasured values from within each respective culture and preserve the “values of love, humility and respect” (Tamasese et al., 2003, p. 100). It’s possible to learn more about the work of the Just Therapy Team and their influential forms of partnership through a [free online course](#) on the Dulwich Centre website. Taimalieutu Kiwi Tamasese and Charles Waldegrave specifically discuss cultural partnerships in [Chapter 2](#) where the following two papers are also available:

Tamasese, K., Waldegrave, C., Tuhaka, F., & Campbell, W. (2003). Furthering conversation about partnerships of accountability: Talking about issues of leadership, ethics and care. In C. Waldegrave, K. Tamasese, F. Tuhaka, & W. Campbell (Eds.), *Just Therapy – a journey. A collection of papers from the Just Therapy Team, New Zealand* (pp. 97–117). Dulwich Centre Publications.

Tamasese, K., & Waldegrave, C. (2010). Cultural and gender accountability in the “Just Therapy” approach. *Journal of Feminist Therapy*, 5(2), 29–45. https://doi.org/10.1300/J086v05n02_03

Together, Nicole and Jules centred conversations around sustaining resistance, thickening stories of collective care and reclaiming community. This shifted the therapeutic landscape. Nicole supported Jules in linking to other community-aligned practitioners and organisations, such as

the Gender Health Center, to co-develop mutual aid responses. The boundary between “therapy” and “community work” became less relevant as the work turned towards honouring preferred stories of solidarity, interdependence and imagination. In this context, therapy was no longer a site of individual adjustment but a collaborative space for sustaining liberatory commitments.

The above case examples illustrate how co-conspiratorial narrative therapy is not a set of techniques but a relational and ethical orientation. In each of the above cases, the therapists were challenged to decentre their expertise, confront institutional complicity and move beyond the confines of the therapy room. Co-conspiracy, I’ve learnt, demands an ongoing willingness to be accountable to clients and communities, not by perfecting allyship but by practicing solidarity in material, relational and justice-oriented ways. These moments were often uncomfortable, humbling and transformative, and they reminded me, both as a therapist and a supervisor, that the work of therapy – if it is to move beyond mere allyship and towards alignment with liberation – must always be porous, political and unfinished.

Conclusion

In a time of heightened attacks on trans and queer communities, through legislation, public discourse and institutional neglect, therapists are faced with a choice: remain in the safety of symbolic allyship or engage in the difficult, messy and vital work of co-conspiracy. I have argued that mainstream psychotherapy, even when adorned with inclusive language and progressive branding, often aligns with what Patterson (2018) named the ally-industrial complex – a structure that rewards

cisgender professionals for appearing proximate to marginalised communities while maintaining systems of control, normalisation and gatekeeping.

I am situated within the systems of power I have sought to critique. My professional authority and access are shaped by whiteness, cisnormativity, patriarchy and ableism. For those of us who occupy similarly privileged positions, the task is not to refine our allyship but to interrogate how we benefit from these systems and to consider what it might mean to act in ways that risk that advantage. This article invites a shift towards accountability, redistribution and a willingness to be uncomfortable.

Narrative therapy, grounded in feminist, queer and anti-oppressive critique, offers an alternative ethical horizon that refuses neutrality, questions expertise and situates suffering within broader social and political contexts. It invites therapists to centre resistance, co-author counter-stories and engage in practices that are accountable rather than performative. Yet these tools must be taken up with reflexivity and risk, including a willingness to challenge the institutions that authorise our work.

If allyship is often rewarded within institutions, co-conspiracy is frequently unintelligible – or even penalised – within them. This is precisely what gives it its ethical force. Ultimately, co-conspiracy calls for a reimagining of therapy, not as a site of individual adjustment, but as a space for collective care, political engagement and community accountability. The question is not whether we are inclusive enough but whether we are willing to align our practices materially with those most impacted by structural violence. The invitation: step off the stage of allyship and into the ongoing, imperfect practice of co-conspiracy.

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International Journal of Narrative Therapy and Community Work is a peer-reviewed journal for practitioners who wish to stay in touch with the latest ideas and developments in narrative practice. It is published twice a year on the equinoxes.

Publisher: Dulwich Centre Foundation
Editor-in-chief: Shelja Sen
Senior editor: David Denborough
Editorial consultant: Cheryl White
Associate editor (Spanish):... Carla Galaz Souza
Managing editor: Claire Nettle
Designer: Blackwood Design Studio
Contact: ijntcw@dulwichcentre.com.au

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ISSN: 2981-8818

ISBN: 978-0-6458385-7-2



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