

Narrative Therapy in Pastoral Ministry

a postmodern approach to Christian counselling

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Introduction

This book seeks to introduce narrative therapy to pastors and others who practice counselling in a parish or church community. Narrative therapy is a relatively new development, which is proving exceptionally effective over a wide range of counselling situations. Its optimistic approach to life, its love of stories, and its deeply respectful regard for the value of persons, give it a natural point of affinity with the Christian community. However, its intimate connection with social constructionism and the enterprise of deconstruction is potentially problematic for Christian religion. This is partly because of the moral relativism inherent in a constructionist approach, but also because deconstruction carries with it a disdain for essentialist foundations of thought such as those on which traditional Christian values and beliefs are built.

Yet it is my contention that, far from being a threat to Christian religion, narrative therapy can be adapted in such a way as to richly enhance our Christian faith and pastoral practice. As I will attempt to show, some narrative therapists have tended to confuse disproof with disdain in their attitude to structure and foundations. When this confusion is seen for what it is, social constructionism ceases to be a stumbling block and deconstruction becomes a powerful tool for critiquing the function and effects of all systems and structures of thought, including those of both religion and the psychotherapeutic disciplines. The historical method of the social constructionists (Michel Foucault in particular) can also be put to service in recovering some valuable forgotten knowledges within the Christian tradition, which can greatly enliven our sense of God's restorative work in us. These knowledges can then be integrated with the methods of narrative therapy to provide a uniquely Christian narrative therapy approach. Further, the storying emphasis in narrative therapy fits with and reinvigorates the Christian religion's own usage of stories, for Christianity is very much a storying religion - as the recently emerging 'narrative theology' is reminding us. Finally, the ethical traditions of the Christian Church enhance the process of this therapy and provide a disciplined framework for its practice.

In April 1995 Newsweek reported on the astonishing success of narrative therapy in turning lives around and solving intractable human problems which had

rendered other therapies impotent. The sheer effectiveness of this therapy leads one to think its impact on the theory and practice of counselling throughout the world is set to be enormous. It also has the cultural advantage of being identified with 'postmodernism,' the very name of which provokes excitement in some academic and intellectual circles. These factors alone should make it of interest to the Church. As a New Zealander I have the added interest that narrative therapy was developed here and in Australia, conjointly, by two very creative therapists, Michael White (Adelaide) and David Epston (Auckland). My hope is that this book will enable church people - and all others who are interested - to catch a glimpse of how this 'therapy from down under' could revolutionise, or at least enrich, both pastoral ministry and our understanding of persons and the healing of their souls.

In chapter one I outline the social and intellectual background that gave impetus to the emergence of narrative therapy, in particular a social constructionist critique of the social sciences. Chapter two follows on from this, describing the development of narrative therapy within this context, and the practicalities of its working. Chapter three deals with the main questions that have been raised against narrative and social constructionist approaches, bearing in mind the question of how these could be refined so as to be compatible with mainstream Christian faith. In chapter four I outline the synthesis which I have developed for using narrative therapy in a pastoral context, including a detailed look at relevant biblical passages. The concluding chapters provide examples of the use of narrative therapy from my own pastoral practice, together with reflection on these.

A work of this nature cannot cover every aspect of the practice of narrative therapy. For those who wish to obtain a more detailed grasp of its practice in a wide variety of counselling situations, Jill Freedman and Gene Combs have produced what amounts to a comprehensive manual (Freedman and Combs, 1996), and Gerald Monk, and his colleagues (Monk, et.al., 1996) have published a collection of articles on narrative therapy's application in a diverse range of spheres. The reader can use the suggestions of this dissertation to relate these ideas to a pastoral context.

Throughout this dissertation I have adopted the following conventions with regard to inclusive language: When discussing a therapist and client together I label one 'she' and the other 'he,' with no particular bias as to which player is of

which gender. This enhances clarity of meaning, saves words, and makes it immediately clear who is doing what in the sentence. Elsewhere I use plural, non-gender-specific pronouns, or 'he or she'-type phrases, but revert to a specific gender chosen at random where the language would otherwise be cumbersome.

Although this book is my own work and I take full responsibility for the peculiarities it contains, the help of a number of people have made its writing possible. The ideas in this book have been developed in discussion with such people as Hans Everts and Margaret Nelson Agee at Auckland University, Gerald Monk, Wendy Drewery and the counselling educators at Waikato University, and Zania Spornberger at the University of Vienna. A number of people from other walks of life have also contributed significantly to the formation of these views through challenging conversations: Waltraud Kainzbauer, Gabriele Jansky, Donald MacMenanin, Fiona Marquet, Mark Lorent, Klaus Bögniel, Birgit Dobrinski and Brigitte Kuen, and all the people of St Andrews and St Philips Presbyterian Church, Birkenhead, Auckland. Others have helped me with the practicalities of accommodation and computer equipment in Austria and Germany during the final phase of writing: Gabriele Kanzian in Vienna, Joachim and Margot Groß in Würzburg, Ulrich and Brigitte Fischer in Mannheim, Dina Brandt in Munich and Gordon Matthews and Christian Hohmann in Wezlar. Among those who have helped most in the formation of my ideas are my clients, in New Zealand and Europe, who have impressed me with their courage and creativity in dealing with life's troubles, but cannot be named here due to the rules of confidentiality. I wish to express my sincere thanks to these people and the many others whose friendship or challenges have influenced my views more than they will realise.

Finally, I must acknowledge my sincere thanks to David Epston for introducing me to narrative therapy one wintry Auckland night at a four hour seminar sponsored by the Counselling Section of Auckland University's Education Department. If, as David would lead us to believe, lives are constituted through stories, then that particular event will figure very large in the story that makes my life what it is. I trust this book will do something similar for some of those who serve as pastors in the Church.

Chapter One

The background to narrative therapy

This is a book about pastoral counselling. Much of it is very practical, and aims to provide a step by step introduction to narrative counselling methods and practices that are proving effective, and respectful of persons, in pastoral ministry. Like most counselling modalities, narrative therapy requires specific skills which need to be carefully learnt and sensitively applied. This is a practical undertaking which we would expect with any new approach to pastoral care.

However, narrative therapy rests upon a somewhat demanding intellectual basis. Narrative therapists question many of the ‘modern’ assumptions about the world, the person, society and the individual, which we tend to accept uncritically as we play out the roles and assumptions of western 20th century culture. Hence, to grasp the nettle of narrative therapy we have to embark on something of an intellectual journey. This is a fascinating journey which brings us at times to breathtaking precipices of thought, and which shakes some of the most unquestioned ‘foundations’ of our modern, secular approach to life. It brings us into dialogue with such intellectual giants as Ludwig Wittgenstein, Jaques Derrida and Michel Foucault. It introduces us to an array of concepts and ideas which open our minds to fresh and creative ways of looking at the world and at our own lives. For me personally, this journey has revived and renewed my Christian faith, setting it free from some of the deadening assumptions of ‘modernist’ thought, bringing the Bible alive again and forging robust connections between the personal, social, political and spiritual dimensions of my faith. Yet it has not drawn me backwards into a pre-modernist, biblicist naiveté, but forward into a new realm which leaves the ‘modern’ behind.

Like any journey into new territory, this intellectual journey is tough at times. It demands concentration and reflection. Some books on narrative therapy (e.g. Epston & White, 1989; Feeedman & Combs, 1996) suggest the reader skip the intellectual introduction at first, and come back to it after reading the practical sections. I am reluctant to suggest this, as it would be incongruous to lead people

to practice this type of therapy without understanding what it really assumes and implies - indeed, it is doubtful whether such practice would be properly effective without the world view and the convictions and beliefs in the worth of the person which develop for us as we embark on this journey of understanding.

Hence, I am attempting to put forward the intellectual basis of narrative therapy in as clear and simple terms as possible. I have sacrificed brevity for the sake of clarity, in the hope that readers will not get lost in a jungle of technical terms and abstruse assertions. I have also attempted, wherever possible, to anchor the theoretical in aspects of the actual practice of narrative therapy. But for those who are reading this book in order to plunge immediately into case studies and practical hints, I beg your patience, and trust you will find the intervening journey worthwhile.

A 'postmodern' therapy

Narrative therapy is just one practical outworking of a diverse and increasingly influential movement of recent decades known as postmodernism. This movement stands within the broader western intellectual and academic tradition, but turns upon this tradition with a criticism that is often stinging and disturbing. Hence, narrative therapy is not merely one more modality of counselling alongside all the other, previously developed modalities, such as person centred therapy, transactional analysis, family systems therapy, cognitive therapy, Gestalt therapy, psychoanalysis and psychodynamic therapy. These therapies accept, to a greater or lesser extent, the assumptions and methods which modern science inherited from the Enlightenment. The critique of these assumptions and methods is the unifying characteristic of postmodernism. It is also one of the main pillars of narrative therapy, as we will see.

Hence, narrative therapy occupies a rather peculiar place in the spectrum of counselling modalities. It is branch of psychotherapy, yet it criticises and stands apart from many of the dominant assumptions and practices of psychotherapy with which we are familiar. It is a scholarly, academically respectable discipline with tough intellectual credentials, yet it chooses to stand somewhat outside the mainstream of 'modern' intellectual thought. Its proponents include psychologists, family counsellors, social workers and at least one psychiatrist (Simblett, 1996), yet their approach to their clients is often radically different from that of their colleagues.

Narrative therapy represents a radical and decisive break from much of the view and understanding of human beings that has accumulated within the social sciences over the last one hundred years. Narrative therapists often make devastating critiques of some of the sacred cows of psychology and psychoanalysis, such as the notions of ‘normality’ and ‘abnormality,’ the idea the problems can lie ‘deep’ within the ‘psyche,’ and the notion that we can solve our problems best by looking back into our past for their ‘cause.’ These therapists often speak about human functioning in such radical and unusual ways that their language hardly sounds like ‘psychology’ at all.

Narrative therapy was developed in the late 1980s by two very creative family therapists, Michael White and David Epston. Before outlining the steps in this development I will attempt briefly to explain some of the important social and intellectual conditions in our ‘modern’ world that made this development possible and necessary.

Humanity and the Scientist

Some three hundred years ago there was a great shift in western culture's understanding of the world, popularly known as the Enlightenment. Up until this time, questions of what was ‘true’ or ‘false’ about the world were answered in a dogmatic, authoritarian way by priests and clerics. But thinkers like Copernicus, Newton and Galileo made a radical break from this tradition by suggesting that any rational, enlightened human being could find out the truth about the world for themselves, without having to accept the dogmas of the Church. The individual, they said, had a rational mind and a perceptive eye, and if he or she looked closely at the world, the structure lying behind it would be seen and known.

This new movement, which came to be known as the ‘Enlightenment,’ led to a burgeoning of scientific investigation and technological progress, and ushered in the ‘modern’ world. Nevertheless, it actually rested on a cluster of unproven assumptions.

Firstly, it was assumed that there is a realm of perfectly orderly reality lying behind or underneath the somewhat chaotic world we apprehend in everyday life, operating according to strict rules of cause and effect. When, for example, an apple breaks off a tree and falls to the ground, its fall is governed by a strictly mathematical formula, and this is true for all falling objects at all times and

places. We cannot 'see' the mathematical formula directly in the world, but we assume it is 'there,' lying behind or underneath the world. This is what I call an '*ontological*' assumption - it has to do with the *being* (ontology) of the world. It is also often called 'essentialism' or 'structuralism,' as it assumes there are 'essential' truths underlying the 'structure' of the world.

The second assumption was that this orderly realm of reality could be known by human beings. Even though we could not see it directly, we could know it by implication and rational argument. What the observer actually sees is an apple falling to the ground - nothing more, nothing less. The orderly realm of reality that governs the mathematics of this fall is not directly visible to the observer, but she assumes she can know about it through its effect on the apple. This is an '*epistemological*' assumption - it has to do with what can be *known* by human beings.

Thirdly, it was assumed that this knowledge could be attained through observing the smallest details of the world, each in isolation from every other element in the world. To calculate the acceleration of the apple through space to the ground, the scientist has to somehow isolate it from all the other forces and influences on it, such as the wind, the spin of the earth, the gravitational pull of the moon and sun. This is what I call a '*reductionist*' assumption - the assumption that you can know the truth of the world best by *reducing* the world to its smallest constituent parts.

A fourth assumption also lies buried in here, namely, that you can detach yourself sufficiently from the piece of the world you are observing, so as to be able to examine it 'objectively' - i.e. without actually influencing it while you are observing it. If apples fall to the ground because bodies are attracted to each other (in this case the apple to the earth), then the presence of the scientist's body in the vicinity will also influence the path of the apple. The Enlightenment thinkers knew this, and so tried as hard as possible to be 'detached' and 'objective' in their observations, bringing as little as possible of their own influence to bear on the object they were examining. This is what I call the '*objectivist*' assumption. It is also often called *the 'subject-object dichotomy,'* or '*Cartesian dualism,*' after Rene Descartes, the philosopher who made it intellectually respectable.

Finally, the purveyors of the Enlightenment assumed that the realities they discovered through this process of observation and rational thought were true for all times and places and situations. If apples fell off trees in England in 1773 according to a given formula, they would fall off trees in Cuba in 1959 or Shri Lanka in 1977 according to the same formula (taking into account the differences in latitude and in the earth's mass between these countries, of course). The realm of truth which governed the world was seen as entirely independent of culture, region, time or situation. This is what I call the '*a-contextual*' assumption.

This approach to the truth of the world has proven astonishingly effective in the physical realm, as the work of the scientist, in finding out how the world works, has dovetailed in to the work of the technologist in devising useful applications of this knowledge. Virtually all our labour saving devices, medical advances, means of transport and communication, have been made possible through the systematic application of the assumptions of the Enlightenment to every field of physical reality in the world.

Of course, this has also brought problems and suffering. Nuclear weapons and large scale ecological destruction are also products of the Enlightenment, and some writers question the validity of Enlightenment assumptions on these grounds alone. Others, as we shall see further on, point out that these assumptions are just that - assumptions founded on a kind of faith, and nothing more. Indeed, there is considerable discussion as to how people in this early Enlightenment period came to believe so strongly in a set of assumptions that could not be proven, and some ask what it was that kept this faith going, often against the resistance of the Church, during the long years when scientific research was expensive and had born hardly any fruit for its efforts.

Nevertheless, the success of the 'hard' physical sciences, like chemistry, biology and physics, has been so great in their own terms that there is little point in questioning these terms in a book on counselling. They have, in fact, been questioned by some of the foremost thinkers of our times (Wittgenstein, 1953; Kuhn, 1970; Rorty, 1980; Feyerabend, 1991), but discussion of the 'hard' sciences is beyond the scope of this book. It is in the area of the social sciences that our questions need to be raised.

The Enlightenment and the social sciences

Over the last two centuries the assumptions of the Enlightenment have been applied to the study of human beings, both as individuals and as societies. As Kenneth Gergen (1994) and John Shotter (1993) point out, in order to have their work taken seriously by a world which pays great homage to scientific method, those who study social and psychological phenomena have taken on the scientific, Enlightenment assumptions in the development of their disciplines. They have presented themselves as scientists. Hence, the so-called 'social sciences' were born. Human society and the human 'psyche' have been 'studied' in the same way the behaviour of inanimate objects was studied.

This means that one more assumption has been added to those which fuelled the Enlightenment, namely: that the Enlightenment assumptions about the world and our knowledge of it can be applied equally well to persons and societies. It is assumed there is a realm of orderly, cause and effect reality lying behind or underneath the somewhat dis-orderly behaviour of human beings; that a detached, objective investigator can grasp this reality by looking carefully at isolated instances of the functioning of persons and societies, and that this reality holds true for all times, places, cultures and situations.

In other words, it has been assumed that we can know (or at least that we are on the road to knowing) what a human being is supposed to be like, what represents a deviation from the norm, what represents a malfunction of the 'psyche,' and therefore what possible courses of action might be available to fix or cure a damaged psyche.

It is important to note a distinction here between the study of the psyche and the study of the physical brain. Psychiatry, a branch of medical science, studies (among other things) the physical, electrical and chemical functioning of the brain, just as urology studies the urinary tract. When you study the brain in this way, you are concerned with physical phenomena, like synapses, neurones, and chemical balances. It is not my concern in this book to examine whether the Enlightenment assumptions are appropriate to this type of study.

But studying the physical brain is not the same thing as studying the psyche, which is more a study of a realm we have constructed in our language, to explain how the person behaves, speaks, feels, etc. This is the area of interest to the social scientist. And the important thing to note is that social science's understanding of the human psyche has been built up over the last 200 years on

the basis of the Enlightenment assumptions. Social science claims to know a very great deal about orderly, cause and effect realities which lie behind and underneath the somewhat disorderly, chaotic behaviour of human beings, and which are assumed to hold true for all times, places, cultures and situations.

This view of reality is clearly ‘essentialist’ and ‘structuralist,’ as it assumes there are real, underlying *essences* upon which the incidences (or so-called ‘accidents’) of life are based in a rationally understandable, *structural* way. The ‘essences’ are the general psychological categories and ‘truths’ which are assumed to hold true for all times, places, cultures and situations, while the ‘accidents’ are physical manifestations of these in the concrete world we actually experience.

Psychotherapy and the social sciences

Generally speaking, the modern enterprise of psychotherapy was founded and built up on this essentialist, Enlightenment approach of the social sciences, as attention shifted from the essentials lying behind the concrete, physical realm, to the essentials lying behind human cognition and feeling. To begin with, psychiatrists such as Sigmund Freud shifted their focus of attention from the physical brain to the human ‘psyche,’ or ‘mind,’ in their concern to help people cope better with life. Freud built up a picture of the psyche as an entity functioning according to fairly strict cause and effect principles, an entity with inherent conflicts due to competing urges from natural and socially induced sources. Freud’s psychoanalysis was an attempt to engage with this psyche directly, through talking with the person who was troubled, and cure its ills by helping the person gain insights into its functioning - the so-called ‘talking cure.’

Meanwhile, the discipline of psychology was developing, wherein non-medical ‘scientists’ were investigating the psychological functioning of human beings, mostly through experimental methods. Psychology eventually came to take on a helping, curative function, as it spawned clinical psychology in the 1950s as a counselling, psychotherapeutic discipline.

It is well known that psychology has tended to oscillate between cognitive and behaviourist emphases. In strict behaviourism, such as that of B. F. Skinner, the psychologist is concerned to study the person purely as a ‘black box’ reacting to its environment. The purely behaviourist psychologist avoids all thought as to what might be inside the box causing it to react this way. In cognitive psychology, however (as also in the Gestalt psychology of the nineteenth

century), the emphasis is on the entity inside the box - the mind or psyche of the person - which causes the box to react in this or that way. There has always been tension between the behaviourist and cognitive schools of thought, and postmodernist social psychologists such as Kenneth Gergen (1985, 1994) and John Shotter (1993) question whether the concept of the 'mind' or 'psyche' is a coherent notion at all. We will return to this point later.

Cognitive psychology and psychoanalysis have formed much of the theoretical basis of the diverse disciplines of psychotherapy in the latter half of this century. They have in common the notion that the person has a mind, or psyche (as distinct from but in some way related to the physical brain), which behaves according to cause and effect laws which can be known and understood by the psychologist or psychoanalyst. The 'malfunctions' of the psyche are now thought to be well understood, have been categorised and tabulated, and are listed in such prestigious manuals as the Diagnostic and Statistical Manual of Mental Disorders produced by the American Psychiatric Association (1994) and the International Classification of Diseases, overseen by the World Health Organisation (1992). There are now over 400 recognised psychological 'malfunctions' which you and I might 'suffer' from - a point which in itself might lead us to question the validity of such approaches.

This understanding of human beings is now thoroughly entrenched in western culture. We talk about the 'mind' or the 'psyche' and its functioning in Freudian and psychological terms, as if these theories and models were proven truths which were as evident and obvious as the shape of our noses. We use expressions like 'neurotic,' 'depression,' 'inferiority complex,' 'deep emotions,' and think in terms of cause and effect processes operating in our 'unconscious,' as if these terms denoted actual, matter of fact entities which have always been part of human life and which psychologists have 'discovered' in the last 150 years.

These ideas are recycled into and through the counselling disciplines, partly through these disciplines' dependence on the theoretical basis provided by psychology and psychoanalysis, partly by the literature and conversation of counsellors themselves, and partly by the popularisation of these ideas in our culture.

The important point to note is *that they represent a particular way of seeing persons, which is actually quite peculiar and specific to our culture and period in history*. Persons are seen as having minds or psyches which are subject to underlying laws of cause and effect which operate on us and largely control us. This cause and effect realm is thought to be accessible to the therapist as an objective investigator, and the person is thought to be able to be cured or helped by the therapist and client working on this realm and seeking to change it.

Breaking free

But this ‘modernist’ approach to the person is not the whole story. When we look closely at what actually happens when psychologists counsel their clients, we begin to see another story, a ‘counter-story,’ unfolding. Donald Polkinghorne (1992) argues that experienced clinical psychologists actually make use of very little of their formal, theoretical, academic psychological knowledge in the way they counsel their clients. Instead, they and their colleagues together build up their own personal stock of experience. Polkinghorne refers to studies which indicate that ‘the source of information about psychotherapy that practitioners found most useful was their ongoing experience with clients’ (Morrow-Bradley & Elliot, 1986; Barlow, et. al., 1984; Cohen, et.al., 1986). He suggests practising psychologists tend to turn to a body of knowledge outside of scientific research, namely their own oral tradition and their professional literature, in discovering what works with and is best for their clients.

This body of knowledge is very different in character from the objective, cause and effect, universally ‘true’ knowledge of the detached scientific observer. It is characterised by what Polkinghorne calls foundationlessness, fragmentariness, constructivism and neopragmatism.

Foundationlessness. The knowledge that practitioners come to rely on is not based on a single, consistent, undistorted view of psychological reality. There are in fact many theories claiming to have grasped the essentials of psychological functioning - which in itself raises the suspicion that no one theory is correct. Freud and Jung wrote as if they had discovered the actual inner workings of the psyche, Rogers as if he had discovered the actual operations of the substantial self, and Skinner as if he had discovered mechanisms of learning that were precise descriptions of real human dynamics (Polkinghorne, 1992: 155). But many practising therapists reject the ‘truth’ claim of such theories, and tend to

treat them as merely models or metaphors. There is a loosening away from the notion that the practice of therapy rests on firm, matter of fact foundations.

Fragmentariness. In dealing with their clients, therapists find that each person is unique. No psychological theory fits neatly into the outlook and experiences of any particular person. Further, the particular treatment method or intervention a therapist uses may work well with one client on one particular day, but not in another situation. The therapist cannot tell in advance whether one theory or approach will help a particular client. ‘Universal or general laws that would allow the practitioner to predict client responses do not hold’ (Polkinghorne, 1992: 159). So the practitioner’s working knowledge is fragmentary, non-universal, a patchwork quilt of discoveries, insights, experiences and surprises that provide pointers to future action but no grand unified theory or consistent approach.

Constructivism. One of the important insights from cognitive psychology is that each of us ‘constructs’ our world in line with mental patterns or schemas that are already familiar to us. (This phenomenon is generally called ‘constructivism’ or ‘cognitive constructivism,’ in distinction from another phenomenon, ‘constructionism,’ which we will discuss below.) We do not see just ‘what is there’ in front of us, but interpret it in terms of what we already know. Some analysts of psychological practice (e.g. Bietman, 1987) point out that therapists are just as much subject to this phenomenon as their clients are. They see their clients in terms of patterns and schemas that are already familiar to them. ‘The clinician’s experience of the client is not a transparent reflection of the client, but a cognitive construction’ (Polkinghorne, 1992: 160). The way we experience our client depends very much on the perceptive apparatus we bring to the encounter. Hence, it is not a matter of us ‘objectively’ discovering that the client has this or that psychological characteristic, but that we ‘construct’ the client according to the patterns and templates of human understanding that we already have. Many therapists are well aware of this process and make active use of it, trying out different ways of seeing the client according to different templates which they as therapists are familiar with, checking for which one works best in the situation. Indeed, this insight has led to the development of so-called ‘eclectic’ approaches to therapy, which applaud the array of templates and models available to the therapist (Bietman, 1987; Garfield, 1989).

Neopragmatism. In the real world of clients and therapists, the goal of therapy is not, in fact, the successful application of a particular scientific theory, but the helping of the client. For this reason the actions of therapists tend to be guided by pragmatism rather than theoretical orthodoxy. What helps this particular client to overcome her problems and gain personal power and freedom? The aim is to discover what works for a particular client, and do that. It is interesting to note that different theoretical approaches to therapy do not appear to have produced appreciably different outcomes for clients, as Smith, et.al (1980) concluded in their meta-analysis of 475 different studies of psychotherapy. Psychotherapy does appear to be beneficial if certain positive, supportive conditions are met (Garfield, 1989), but the benefits seem to come regardless of the theoretical framework with which the therapist officially identifies.

So the story of psychotherapy as the clinical application of orderly, scientific, academic ‘truths’ is supplemented by another story, of psychotherapists learning directly from their own experience, developing their own oral and written traditions of knowledge and wisdom, learning from their clients through trial and error, and stitching together an array of ideas and realities in a manner that is as haphazard and disorderly as it is attuned to real life. Polkinghorne (1992) regards this as a sign that psychotherapy has never been comfortable in the modernist, Enlightenment mould that was supposed to give it academic respectability. As it works itself out in real life, its very subject matter draws it toward a postmodernist way of working.

The social constructionist critique

Alongside this ‘postmodernism’ in the practice of psychotherapy, a number of stinging intellectual critiques of the modernist, Enlightenment approach to psychology and the other social sciences have arisen. The most important of these for our discussion is what has become known as ‘social constructionism’ (see, for example, Gergen 1985, 1994; Shotter, 1992; Parker, et.al., 1996). This critique began in earnest in the English speaking world with Berger’s and Luckmann’s ground-breaking work, *The social construction of reality* (1966). This critique maintains that the realities psychologists talk about - such as the psyche, neurosis, schizophrenia, depression, borderline personality disorder, etc., are not solid, already existing truths which science has ‘discovered,’ but are ‘made up’ realities, which social scientists have constructed in their discussions and interactions with one another. For example, there was no such thing as ‘borderline personality disorder’ until psychologists took a cluster of commonly

observed ‘symptoms,’ put them together under one label and pasted that label, as it were, on certain clients. The same is the case with schizophrenia, paranoia, psychosis, depression, and virtually the entire armoury of psychological labels and categories. These are the constructions of a particular community - the psychological sciences - and exist only in the language which this community uses to give expression to their ideas. Social constructionist critics use the word ‘discourse’ to describe the language practices that hold these particular social constructions in place.

It is not that these constructions are partially adequate theories pointing to some hidden but solid realm of psychological truth which we are getting closer and closer to understanding but have not yet fully understood. Some social constructionists claim that the very idea of there being such a realm is itself a construction of social scientists. The entire psychological world view is a ‘made up’ reality - a social construction. While it may serve many useful purposes for the psychologist, it is no more ‘true’ than the candy house that Hansel and Gretel were imprisoned in.

We should note at this point that approaches to social construction differ widely in their view as to what is true in the world. If psychology rests on foundations as insecure as the house of Hansel and Gretel, with what can we replace this structure to establish a firm foundation for psychology as an academic discipline subject to open, public critique? Later in this book I will be exploring and advocating an approach similar to that of John Shotter (1993), which carefully combines a realist, empirical approach to human behaviour, with a thoroughgoing social constructionist critique. Meanwhile, however, it is sufficient to note the force and impact of the social constructionist attack on so-called psychological ‘truth.’

The ‘normalising gaze’ and the ‘practices of power’

The French philosopher Michel Foucault (1961, 1963, 1966, 1969, 1975, 1976, 1984) carefully explored the question of how this labelling language of the psychological community influences and exercises power over people everywhere in society. Foucault noted that our society has deferred to the social scientists the ‘expert’ right to speak authoritatively on questions of the human soul. The language of these ‘experts’ has now become absorbed into our everyday speech and conversations, so that we ourselves tend to police each other’s and our own behaviour in terms of what the psychology professions have

deemed 'normal' or 'sane.' We check ourselves and our neighbours for signs of 'depression' or 'neurosis,' we carefully modify our urges so as to fit in with what is deemed to be 'normal,' even though this might cause us great distress and discomfort. Foucault called this 'the normalising gaze.' It is as if we all collude with the powers behind the discourse to keep ourselves and each other within the range of what is considered 'normal.'

However, Foucault did not claim this was a conscious plot on the part of social scientists to control and have influence over the masses. Rather, he was concerned to chart the influence of the language of the social scientists as it flowed through society - in the media, in academic texts, in official pronouncements of professionals regarding their clients, and in our ordinary conversations - and expose how it pushed certain people and groups into a subordinate position in society and gave privilege and status to others. The political edge of social constructionist thought is not so much an attack on the motives of the professionals who benefit from the widespread acceptance of their world view, but on the power and influence of the language itself, as it runs on under its own steam in society. Foucault called this 'the practices of power.' He claimed there was a direct correlation between 'knowledge' (what is purported to be true or false by those whom their society gives the right to speak with authority) and power. One of his best known assertions is 'knowledge is power.'

The social constructionist critique is wide ranging, comprehensive and unrelenting in its critique of this linguistic power and of the privilege and oppression it causes. We will be returning to this subject many times throughout this book.

The cult of the individual

A further difficulty which social constructionists see in our modernist culture is its excessive emphasis on the person as an individual. It is often remarked, in a rather off-hand way, that western society is extremely individualistic. We pride ourselves on the high value we place on each individual person, enshrining his or her inalienable rights in our constitutions and basic laws. But there is also a negative side to this individualism: we tend to forget the extent and degree to which each and every person is inextricably part of a social whole.

Each of us is conceived within another human being, born into a human community, learns to speak in a social context, and forms our attitudes, hopes

and expectations in community with others. The meanings of the words we use are given to or negotiated with us by the community. What we think of ourselves (loveable, interesting, worthwhile, courageous) is a reflection on the way others respond to us - I could not say I was 'loveable' if nobody was able to love me; I would not be an 'interesting' person if others were not interested in me; I would not be 'valuable' if nobody was able to value me; I could hardly say I was courageous if there was no social datum to compare my behaviour with.

Narrative therapists (Epston and White, 1989; Freedman & Combs, 1996; Monk, et. al., 1996) and a growing number of social psychologists (e.g. Shotter, 1993; Gergen, 1994; Harre, 1987; Kvale, 1992) argue very strongly against the popular western notion that a person can have a fixed identity as an 'individual self' apart from a social, communal context. They claim that the view: 'I can still be me without you' (Shotter, 1993: 23) is a gross misunderstanding of the actual situation people find themselves in. What really happens, they claim, is that I am who I am only in relation to the community I am part of, and I am a slightly different person when I am in one community, from the way I am in another. Further, the narratives of the community I am in tend to fuse with other narratives of mine, so that the community's view of life becomes to some extent my own view.

This is not to suggest every person is a mere chameleon who simply reflects *in toto* the views and outlooks of the group of people he or she is currently involved with. We are able to choose which narrative of which community we prefer to identify with and live our lives through, and narrative therapists seek to help clients do this as part of the way to resolve and solve their problems. Often it is a question of which community and whose narratives are best to identify with. But it is a myth to think that I am who I am entirely as a fully defined entity with a self-contained psyche.

One of the damaging and oppressive aspects of much 20th century psychotherapy has been its individualising of the person and her problems (Parker, et.al., 1966: 7-8). When a person is depressed, for example, that is seen as an illness or malfunction in the individual. The social and cultural factors contributing to her sorrow are set aside as irrelevant, and the onus is placed entirely on the individual to cope and overcome. It is astonishing that some books on depression begin by declaring that one of the main reasons for depression in our society today is the loneliness and isolation of the person from

meaningful community, and then proceed to put forth solutions to the individual's problem of depression in entirely individualistic terms. The psychotherapy industry often isolates people more than they already are, by treating them as if their problems were entirely malfunctions in their own personal 'psyche.'

Once again, however, there is nothing new in the idea that a person is who they are only in relation to their community. The Germans have a saying, *'Ein Mensch ist kein Mensch'* - One human being alone is no human being. John Donne once wrote, 'No man is an island, entire of itself; every man is a piece of the continent, a part of the main ...any man's death diminishes me, for I am involved in mankind.' Jesus said, 'Wherever two or more are gathered in my name, there I am in the midst of them.'

Social constructionists and narrative therapists recognise this infusion of the person in the community. They are careful not to see the person's problems merely as sicknesses or malfunctions within the person, but are attentive to the social dimension, the ways in which the community's narratives weave in with the person's life, supporting the person, diminishing him, oppressing him, stunting or expanding him. Identifying these narratives and 'deconstructing' them is an integral part of narrative therapy.

Deconstruction

One of the most frequently employed terms in narrative therapy is 'deconstruction,' a term associated with the work of French philosopher Jaques Derrida (1973, 1976, 1978). Like his contemporary Michel Foucault, Derrida was interested in the way the language we use creates realities which then turn and exercise power over us. One of Derrida's particular interests was academic texts - the articles, books and lectures written by scientists and other academics to put forward their arguments about the way the world is. Like Ludwig Wittgenstein (1953), Derrida believed that language is not a straightforward, simple reference system. It is not the case that each word we use is a sign pointing, or referring, to a specific reality in the world. Rather, words take on meaning in relation to the other words we use around them, and in relation to the particular conversation we are having at the time with another person or persons, in the particular social, cultural and historical context of that conversation. The word 'house,' for example, may be used to speak of a dwelling place, a dynasty, a system of ideas, a group of pupils in a boarding school, a hand in a pack of

cards, a type of enthusiasm ('like a house on fire,'), an apartment building, and other realities. Normally we get the idea of what someone means by 'house' in a particular conversation by listening to them and feeding back to them what we think they mean, thus checking our understanding. A colourful conversationalist might use the word 'house' in metaphorical ways we have never heard it used before, yet we will probably grasp her meaning if we have the opportunity to interrupt her and check our understanding.

The word 'house' is a relatively plain and uncomplicated word. If we get stuck, we can at least point to or draw an entity which gives a kind of basis for the meaning - although even this might not work if we are wanting to talk, for example, about 'the house of David.' Wittgenstein showed that, even with a simple notion like 'house,' in the end the only way to define a word exactly is in terms of other words. Pointing is not good enough because you then have to specify which aspects of the thing you are referring to and which are extraneous to your meaning.

A word like 'compassion' is even more difficult to pin down. There is nothing simple to point to. With such words we are even more compelled to explain our meaning in terms of other words - which may relate to actions but not be completely explained in terms of those actions.

Taking this one step further, let us consider the word 'paranoia.' To define exactly what we mean by paranoia we need an enormous array of words. If paranoia is a 'persecution complex' or an 'unhealthy excess of suspicion,' then we have to define 'persecution' and 'complex,' or 'unhealthy,' 'suspicion' and 'excess' quite specifically, as these words, too, have a range of meanings. We also have to convince sceptics who think there really is a great deal to be suspicious of in the world, or who conclude from our explanation that psychologists are the most paranoid of all because 'it is an important part of their role to be intensely suspicious of their patients' (Parker, et.al, 1996: 50).

If such words are so slippery, then, how can an academic write a text where all the meanings of all the words will be clear? Derrida showed that a tradition has grown up in literate cultures, especially our own, whereby written arguments are 'policed' to guarantee a fixed reference point, an essential point of 'truth.' The reader is led to take this basic 'truth' for granted and see it as the foundation for less important things, or for things that are purported to be derived from it. But

in order to pin this ‘truth’ down, the writer of the text has to suppress a lot of other notions which might actually compete with it as alternative truths. In writing on ‘paranoia,’ for example, the writer has to suppress the idea that all ‘paranoid’ reactions might actually be reactions to real persecution, and the idea that he himself is paranoid by being so suspicious of humanity as to need to invent a disease called ‘paranoia.’

Derrida showed how we can recover these suppressed ideas in academic texts if we look at the arguments carefully. He also showed that the ideas the text privileges (i.e. the ideas it puts forward as essentially and undeniably true) are actually *dependent* on the ideas the text claims are *derivative* of this truth. The ‘truth’ the argument rests on is actually derived from the ideas which claim to be derived from it. This process, of turning the argument of the text upside down, is called ‘deconstruction.’ The ‘truth’ constructed in the text is dismantled and shown to be not truth but merely the construction of the author.

For example, a psychologist might write a text about bed-wetting. She might begin with a seemingly robust argument about the psychological causes of bed-wetting as academics have come to discover and understand it better and better over the last 50 years. On the basis of this ‘truth’ she might then cite some examples of bed-wetting from her clinical practice, and show how they have been caused by the psychological factors she initially outlined. The derivative ideas (the examples of bed-wetting) are claimed to be dependent on the essential ‘truth’ of bed-wetting which was already known. When we deconstruct her text, however, we find that the actual incidents of bed-wetting are the primary reality she is dealing with, and the general, essential ‘truths’ about the psychology of bed-wetting are merely constructions of psychologists. As every incident of bed-wetting takes place in a specific cultural, social and historical context, and every bed-wetter is dealing with different stresses and difficulties, the primary reality with which we are dealing is the actual experience of specific people. Theories on bed-wetting are merely secondary. They may or may not be helpful for any particular situation. They cannot be treated as an essential basis for understanding any particular incidence of bed-wetting.

The attentive reader will notice that it is impossible to write about deconstruction without falling into the very traps deconstruction seeks to expose. In writing this book I am policing my arguments very carefully to make sure the words I use are understood to mean what I want them to mean. I am setting up logical sequences

in which certain ideas are being suppressed, so as to make clear and forceful the meaning I want to convey. Unfortunately it is impossible to write an academic text without doing this, as Derrida himself realised. One can only invite the reader to look with great discernment on this text, and be as sceptical as reason allows.

This is the process of deconstruction. More generally, Derrida demonstrated that western thought is thoroughly infused with what may be called ‘logocentrism’ - i.e. the assumption that there are ‘essential’ truths underlying reality as we experience it, and that this essence, or foundation, supplies the laws, rules and possibilities which govern each and every actual occurrence of anything in the world. Western thought tends in this respect to be shot through with hierarchical distinctions, such as essence/accident, transcendental/empirical, literal/figurative, deep/superficial, where the first term in each of these pairs is conceived of as prior, and the second as merely a derivation or manifestation of the first. Derrida reversed the order, inverting the hierarchy and showing that the first term in each pair is dependent on the second, rather than vice versa. His works call in question the style of thinking so common in western culture, where we tend to value and bow down to the hidden ‘truths’ which ‘lie behind’ or ‘underneath’ the more obvious, disorderly everyday realities we actually deal with.

Narrative therapists and social constructionist psychologists use deconstruction a great deal, to demystify and break the hold of so-called ‘psychological truth’ on people’s lives. They do this with so-called psychological ‘illnesses,’ like depression, anxiety, schizophrenia, anorexia, psychopathic disorder and paranoia, and with broader psychological notions such as normality, abnormality and mental illness. They deconstruct these notions, refusing to accept the essential ‘truth’ on which they are based, and deal instead with actual incidents of persons experiencing problems and empowerment in their lives.

Deconstructing the wider powers

But deconstruction goes wider than the psychological disciplines. As we saw above, Michel Foucault looked at the effect of socially constructed ‘truth’ on many aspects of life. A great number of the realities that impinge upon us every day are of the same character as the psychologist’s basis of ‘truth.’ This includes notions of what is ‘masculine’ as compared to ‘feminine,’ what is ‘adult’ as compared to ‘childish,’ what a ‘family’ is, what is politically ‘correct,’ what is ‘crazy’ and what is ‘acceptable’ what is ‘sexually normal’ and what is ‘sexually

deviant.' Many of these notions come to us in academic texts of various kinds, in the media, in pop songs, in the film industry, and in the oral traditions of popular conversation that derive from (or in some cases drive) these sources. As we will see, narrative therapists are very concerned to help people recognise their captivity to such notions, to deconstruct these notions (showing that they are not 'the truth' but are merely social constructions), and to co-author with the client new narratives which bring to the fore other, more helpful aspects of reality which have been suppressed in the discourse of our culture.

Concluding

The social sciences today are facing a huge challenge from the social constructionist critique. It is no longer accepted that we can study humanity using the basic assumptions that underlay the Enlightenment. Michel Foucault has shown how this approach sets up unacceptable power relations in society, privileging those who are given the right to speak authoritatively on matters of the human soul, and putting others in positions of weakness. Jaques Derrida has exposed the contradictions inherent in academic texts which promote this discourse about humanity, giving us the powerful tool of deconstruction to dismantle their proud assertions. Ludwig Wittgenstein has made us aware of the tricks we play on ourselves with language, helping us see that many of the sacred cows of psychology and psychotherapy are little more than linguistic constructions, metaphors running out of control. Social constructionists of the English speaking world - Berger, Luckmann, Gergen, Shotter, Parker and others - have relentlessly critiqued the contradictions in Enlightenment-based psychology and psychoanalysis, dismantling their systems and frameworks of 'knowledge.' Meanwhile, western preoccupation with the 'individual' is being seen more and more as a blind alley in the pursuit of human well-being, and the priority of community in our understanding of persons is growing in acceptance. Finally, the actual practice of therapists shows a pragmatic shift away from the world view of the Enlightenment, as these practitioners attempt to help specific, unique persons with real problems.

These are the conditions in which make up background against which narrative therapy has risen. We turn now to the story of its development.

Chapter Two

The development and practice of narrative therapy

We will now look at the emergence of narrative therapy in the light of the ‘postmodern’ developments outlined in the previous chapter. We will see that narrative therapy seeks to operate within a social constructionist world view, and is often regarded as the most thoroughly ‘postmodern’ of all counselling modalities (Parker, et.al., 1996: 108; McNamee & Gergen, 1992). Nevertheless, all new things come from somewhere. Narrative therapy grew out of counselling practices which borrowed heavily from (modernist) cognitive psychology. It has retained these roots, alongside its predominantly postmodern approach, as we shall see.

Michael White (Epston & White, 1989), a very creative social worker and counsellor working in Adelaide, Australia, traces his own personal journey toward his and David Epston’s development of narrative therapy from ‘constructivist’ (as distinct from ‘social constructionist’) insights in the writings of Gregory Bateson. Bateson was concerned to explore how it is that people make sense out of the world. In the hurley-burley of everyday life we are assailed by millions of stimuli in a chaotic, disorganised assault on our sense organs. As we walk down the road to the shops, for example, we do not hold our eyes steady on one feature of the street, but flick them backwards and forwards, up and down, constantly scanning the vista before us. What actually flashes onto our retinas is a series of hundreds of quite different pictures every few seconds - much as you would record if you walked down the road with a movie camera held loosely in your hand. Fortunately, however, the picture we actually ‘see’ is steady and stable, with clearly differentiated objects, such as houses, telephone poles, moving cars, cats, dogs and people. The Gestalt psychologists of last

century, and the cognitive psychologists of this century, explored this phenomenon of perception and noted how we are continually feeding chaotic incoming information into orderly patterns that give it form, structure and meaning. It is as if we have already formed categories in our minds (house, dog, human being approaching) and construct a picture of the world around us in terms of these already formed categories.

This applies not only to visual experience, but also to more complex acts of perception, such as the attitudes and intentions we believe other people have toward us. We feed the reactions we observe in them into our already formed systems of patterns and possibilities, and ‘construct’ these people and their attitudes in terms of these already formed patterns. We do the same to the world as a whole. The incoming data simply would not make sense to us if we did not have these pre-formed patterns and categories to hook it onto.

For this and other, more philosophically subtle, reasons, Bateson (1972, 1980) argued that human beings cannot know the world directly, but interpret the world through the frameworks or filters which they already have in place. The way people interpret events is determined by how these events fit with patterns of events that are already known and familiar. So, for example, if I see an object in the garden which consists of knobbly brown tendrils rising upwards from a thick brown stem, with small, thin, green, oval shaped filaments attached to the tendrils by way of small green stems, I may immediately, without thinking, interpret that object as a deciduous tree. Even though I have never seen exactly that kind of deciduous tree before, it fits the pattern I call ‘deciduous tree.’ In New Zealand we actually have a great many evergreen trees which look very much like European deciduous trees, and I have often seen overseas visitors mistake such trees for deciduous. The tree fits the pattern they know, so they interpret it that way.

This process also happens in human relationships. When someone is kind and considerate to us, we notice their kindness because its characteristics (a smile, a reassuring touch), fit the pattern we already know and interpret as kindness.

Bateson also argued that events that do not fit any of our pre-existing patterns tend not to be noticed at all. They are not selected out for survival. It is possible, for example, not to notice a kindly approach from another person, if the style or cultural characteristics in which it comes are at variance with the patterns we normally interpret as kindness, or if we have already decided in ourselves that certain people are not capable of being kind and considerate no matter how they approach us.

Bateson also drew attention to the *temporal* dimension in our interpretation of events. He argued that all information is ‘news of difference’ - the information content lies in the fact that what comes next is different from what has been before. We apprehend what is there in terms of how it is different from what was there a moment ago.

The narrative metaphor

When Michael White put these ideas together he found the notion of *narrative* to be a very appropriate metaphor for understanding and dealing with them. People can be thought of as interpreting the events of life in terms of narratives - i.e. stories or parts of stories. White found narrative an appropriate idea because it covers both the instantaneous and the temporal dimensions of human experience all in one. We interpret life through a set of narratives - i.e. stories or parts of stories, which we tell ourselves or share together with others. When something in our world happens that fits one of our narratives, we notice it very clearly. When something happens that does not fit any of our narratives, we tend not to notice it - or we do notice it but tend to regard it as insignificant, of no real consequence.

At this point we should note that over the last two decades the notion of narrative has become increasingly interesting to academics in many fields - theology, sociology, psychology, anthropology, political studies. The Harvard cognitive psychologist Jerome Bruner (J. Bruner, 1986, 1987) did important experimental work on the way people construct their worlds through the narratives they tell and share. Bruner's work has led many psychologists to re-think their notions of how people deal with the realities of life.

Human beings are story telling creatures. Our children come home from school and start immediately into their stories about their day. A tourist gets mugged in a park and goes to the police and tells the story of his misadventure. A politician opens a new youth centre and gives a speech in which she tells the story of how her party's policies made such a new venture possible. A woman complains to her neighbour about her husband's attitudes, proving her point by telling the story of his inconsiderate behaviour over the last week.

In all these stories, of course, the tellers are very *selective* in what they include in the narrative. The tourist does not bother to tell the police about the Achilles tendonitis he was suffering at the time of the mugging, as it is not significant for the story - even though the pain was significant in other ways. The woman does not include in her story the many incidents of kindness her husband displayed over the last week, as they are not significant to the thrust of her story that he is an inconsiderate man. Every story, or narrative, represents but a slice of the reality that makes up our lives. To put it another way, the narratives we construct represent what is *meaningful* to us in any particular situation. Things that are not meaningful to us do not get drawn into our narratives. Narrative and meaning go hand in hand.

Narrative and meaning

In his work in family therapy, White had noticed that the *meanings* people attributed to events was often far more important than the events themselves, and

that the *problems* people experience tend to live in the *systems of meaning* that inhere in their narratives (Epston & White, 1989: 13-14). For example, if a man is frequently short tempered with his children and with others who interrupt him while reading the newspaper, we may ask what narratives he is telling himself about the need to be undisturbed, how these narratives produce for him the meaning of being left at peace or drawn into disorderly social interchanges, and how this meaning persuades him to feel the need to fight back against disturbances or perhaps even punish those who disturb him.

Note that this has nothing to do with psychoanalysis in the traditional sense. We are not asking questions about the man's childhood or past formative experiences; we are not looking for 'deep' principles of cause and effect operating in his psyche to produce his angry rages. Our questions are much more directed at the present moment and at what lies 'on the surface.' We are asking about the stories he is telling himself - and perhaps also the stories his peer group tell each other - about peace and quiet, work efficiency, the rights of the father, etc. This man's problem (unreasonable bad temper outbursts) can be seen as living in stories. We do not have to see it as living 'deep down' in his psyche or inextricably wired into his mind.

The power of stories

To illustrate the power of narrative to alter our behaviour and produce or solve our problems, White draws on the work of anthropologist Edward Bruner (E. Bruner, 1986a, 1986b) with native North American peoples. Bruner noted that in the 1930s and 1940s the dominant narrative about native North American peoples - held and told by these folk themselves as well as by European North Americans - was that they had been a great people in the distant past but now their culture was coming to an end and their only hope was to be assimilated to European culture as smoothly as possible. More recently, however, a new narrative had emerged among these peoples, namely, that they were peoples who

had been unjustly exploited, and that these injustices would be corrected and they would re-emerge with a resurgent culture and political power.

In terms of energy, and positive behaviour, the second narrative has the opposite effect in these people's lives to the first. It draws them into an attitude of hope and a programme of cultural and political revitalisation. It has given these people the energy and conviction to develop and sustain a movement which is now confronting the dominant culture with the issue of land rights and other important redresses. We should note, however, that either story could be constructed from the 'facts' or events of these people's history and situation. It is not a question of which story is 'true,' but rather of which story selects out which events, and what meanings come to life through each story.

White's colleague, David Epston, had trained and worked as an anthropologist before becoming a family therapist. This had provided him with many experiences of the role and power of stories in a range of cultures. As he brought this experience into his work in therapy, he and Michael White combined their insights in a way which highlighted the storying side of human motivation and life.

Story before facts

Further, Edward Bruner had noticed that the story, or narrative, was the *primary* element in the person's or society's interpretive apparatus, and the 'facts' or 'events' were *secondary*. In Bruner's words:

In my view, we begin with a narrative that already contains a beginning and an ending, which frames and hence enables us to interpret the present. It is not that we initially have a body of data, the facts, and then we must construct a story to account for them. Instead, ... the narrative structures we construct are not secondary narratives about data but primary narratives that establish what is to count as data. New narratives yield new vocabulary, syntax, and meaning in our ethnographic accounts; they define what

constitutes the data of those accounts (1986a: 143; cited in Epston & White, 1989: 20).

Not only, then, are the narratives through which we see life very powerful motivators and determinants of our behaviour, outlook and attitudes; they are also the primary element in our perceptive apparatus. We do what we do and feel what we feel, largely because the stories that circulate within and among us construct our world for us. White saw this as a key to helping people reshape their outlook and thereby begin to overcome their problems - without having to delve into 'the depths' of the 'psyche' or undergo years of intensive analysis.

Externalising the problem

While he was considering these ideas, White also developed a technique for giving people 'elbow room' away from the problems that beset them. He proposed that people be invited to see their problems not as residing within themselves - wired into their psyches, as it were - but as existing external to themselves and frequently seeking to intrude upon their lives. By speaking of common problems like depression, bad temper, low self esteem, anxiety, and self recrimination as objectified realities living outside the person, while addressing the person herself as good, valuable, worthwhile and capable, White found considerable success in helping his clients cope with and overcome these scourges. The technique of externalising problems (White 1984, 1986, 1987) requires considerable skill with language, and will be explained more fully later in this chapter and in chapter five.

Meanwhile, however, we can see the relationship between this 'externalising of the problem' with the notion of narrative as the purveyor of meaning in our lives. If our problems live in the narratives we tell ourselves and share with others in our social interactions, then they can be placed, as it were, outside ourselves by a restructuring of the narratives we employ to give meaning to our lives. Take, for example, the father mentioned above. We have already described his temper

outbursts as his acting out of a narrative about the meaning of being interrupted and disturbed. We can now also help him to see bad temper not as intrinsic to himself, but as living outside him and seeking to intrude upon his life and lead him to act it out. In other words, bad temper not only lives in the man's unhelpful narratives; it also lives outside him. The problem is now two steps removed from him and he can deal with it either by re-authoring the narratives through which he lives his life, or by externalising it and refusing to let it intrude upon him - or even better, by doing both.

Emotions as performances of meaning

One of narrative therapy's more difficult concepts to grasp is the idea that emotions are 'performances of meaning' (Epston & White, 1989: 21; J. Bruner, 1986: 25). In our culture we tend to think of emotions (like sorrow, anger, happiness and fear) as residing deep within us and at times rising to the surface and being strongly felt and expressed. This view of emotions is actually largely culturally determined, as social psychologists such as John Shotter (1992) and Kenneth Gergen (1985, 1994) have shown, and as Ludwig Wittgenstein (1953) has argued from a philosophical perspective.

Michael White drew on the social constructionist notion that emotions are 'performances of meaning' around narratives which persons hold. This is perhaps best explained by way of an illustration. If we were to talk to the man referred to above, who has an outburst of anger when interrupted by his children, we may find he believes his bad temper lives 'deep down' in his 'psyche' and is 'triggered' by certain events, whereupon it 'rises to the surface' like a volcano erupting. It would be foolish, he might say, to try to 'bottle it up,' as it would then come out in some other way, such as a long, sour mood or even an ulcer or the beginnings of cancer. In this man's world view, then, temper is a real entity wired into him at some deep level, and he believes he must respect it and give it the freedom it needs to express itself.

White, Epston and other narrative therapists (and social constructionist thinkers) would say this view is entirely culturally determined. It is embedded in the language and labels of the social sciences, which have become so widely accepted that they are treated as proven fact on the popular level. A narrative therapist would see the man's behaviour in terms of a 'performance' - the acting out of a story which has important meaning for the man. This story might be 'I am an important man who must be constantly up with the news, clear headed and always fully prepared to make my contribution to the ongoing debates about society, and those who interrupt my concentration are threatening this role and undermining the security which I as husband and father bring them. They must be taught that this is not acceptable.' When the man is interrupted, then, he acts out this story.

If the dominant story he held regarding interruptions were different, he would perform differently - no matter what childhood experiences had contributed to the forming of his temperament. For example, his alternative story might be, 'I am a very privileged man to have a son and a daughter who love me, a wife who cares for and understands me, and neighbours who have a genuine concern for our family's welfare. When my children or other folk interrupt me reading the paper or thinking quietly about the problems of the world, I count myself lucky that they enjoy interacting with such a serious and sometimes boring man as I. My children need to be rewarded for showing such love. Of course, at times I do need peace and quiet but I get plenty of it because the children have their own interests and do leave me alone a lot of the time.'

If this were the dominant narrative held by the man, he would 'perform' quite differently when his children interrupted him. The problem can be dealt with simply by changing the narrative. There is nothing particularly 'deep' or intractable about it.

Indeed, there is nothing new about this view. There are elements of language in our culture which have reflected it for centuries. Parents often tell their children to 'stop performing.' When we see an adult consumed with bad temper, we sometimes say, 'What a performance.' In Austria and Germany, where I visit frequently, parents sometimes say to their children, '*Führ dich nicht so auf!*' - Stop performing in that way! When they see or hear of an adult acting in such a way, they often say, '*So ein Theater!*' - What theatre!

This is not to deny that we have real feelings - sorrow, joy, fear, fury, irritation, etc. These feelings can be aroused in ways that are quite appropriate and non-problematic to ourselves and those around us, and sustained appropriately through the acting out of appropriate narratives. But they can also be aroused or sustained in ways that are problematic, in that they do not help us and others to live the lives we want to live. When this happens it is very helpful to ask what narratives might be lurking in our sphere, and how these narratives are being acted out in our behaviour. The view of emotions as performance of meaning around narratives is not a denial of our feelings but a description of how and in what circumstances we produce them and sustain them.

The social dimension of human problems

The reader will by now be aware that narrative therapy sees people's problems as not just specific to the person as an individual, but as intimately related to the social context and culture which the person is part of. When the man mentioned above performs his bad temper narrative, a large part of this narrative consists of social attitudes and expectations which he has subjected himself to - the priority of the male's rights in the household, the role of the male in keeping up with the news, western culture's understanding of anger as living 'deep' within us and needing to be energetically expressed. These narratives blend in with the man's own personal narratives - indeed, it is impossible to say where the boundary is between the two - so that his problem really needs to be dealt with in its social, cultural context.

Unique outcomes

One side of the work of the narrative therapist, then, is to help the client recognise and move away from the toxic narratives and ‘truths’ which bedevil the client’s life. But this cleaning out of negatives is only half the story. From the moment the client begins talking, the narrative therapist is also attentive to the positive, empowering, freeing aspects of the person, which every client has in very great measure.

The trouble with narratives, or stories, is that they highlight some aspects of reality and suppress others. A person whose dominant narrative is that they are unattractive and boring will tend to remember many incidents from their life which support and concur with this narrative. Indeed, the more they talk about this in an accepting, affirming atmosphere, the more they might inadvertently reinforce this narrative. Therefore it is not always helpful to the client to simply affirm what he or she says.

Instead, a narrative therapist will also be looking for aspects of the person’s life which contradict the dominant, toxic narrative. From the very start, she is looking at the value and worth of the person, and his specific attributes which prove his value. So, for example, if he says, ‘My problem is that I’m an unattractive person and I don’t know what to do about it,’ she might respond, ‘So this idea that you’re unattractive has somehow intruded on your life.’ Her response separates him, the person, from the toxic notion that he is unattractive, yet it still shows she has heard him and understood him. With this type of response used consistently throughout the encounter, a new social reality is constructed in which the client is not unattractive but is bedevilled by the story that he is unattractive. This removes him one step from the problem (externalises it) and prepares the ground for a search for ‘unique outcomes.’

David Epston and Michael White (1989) coined the term ‘unique outcomes,’ to describe incidents and events in a person’s life which stood in *positive contrast* to the dominant, toxic narrative that was causing them problems. Other narrative therapists, such as Jill Freedman and Gene Combs (1996) prefer the term ‘sparkling moments.’ To look for unique outcomes or ‘sparkling moments,’ we would ask the client who sees himself as unattractive (at an appropriate moment) whether he can think of any examples from his life which might suggest people were actually finding him attractive and interesting. Often he will say a straight ‘no’ at first, as he has just been at pains to outline the destructive narrative, and has been focusing his attention on its force and power. But usually (almost inevitably, in my experience) he will eventually remember one or two such incidents. We narrative therapists become very interested in such incidents, and ask a number of questions about them, to help the client describe them fully, recover them in all their vividness, and feel the impact of them. We then help the client construct a new narrative of their life based upon these unique outcomes. This narrative - in this case of a man who is often attractive and interesting to others - stands in contrast to the other, toxic narrative, and the client now has a choice of which narrative he wishes to identify with.

This is not a trick of ‘positive thinking’ based on made up realities, in which one denies the unpalatable ‘truth’ and pretends all is well. It is a reasonable, appropriate narrative based on actual events in the client’s life which he has genuinely experienced. Real life is extremely varied and multiplex. Nobody reacts the same way to the same situation all the time. We often react in ways which are quite 'out of character' to our dominant view of ourself. Narrative therapists are very attentive to hearing about these diversions from the 'norm,' as they provide the basis for new stories and new performances of meaning to emerge.

Recovering repressed knowledges

Finding unique outcomes is closely related to another aspect of narrative therapy, namely, the recovering of ‘repressed knowledges.’ This has nothing to do with ‘repression’ in the Freudian sense. It refers instead to the many aspects of folk wisdom and human knowledge which have been pushed aside by the privileged ‘knowledge’ of academics and ‘experts.’ I referred above to the German expression, *‘Führ dich nicht so auf,’* which contains a very profound insight into the way bad temper can function. This knowledge has been repressed in our society by Freudian and cognitive views of the ‘psyche,’ so that it is not allowed, as it were, to be put forward in official mental health circles as valuable and worthwhile. Alongside Michel Foucault’s painstaking work in hunting down many such knowledges in our speech and in the forgotten recesses of old libraries, narrative therapists are learning to bring many similar knowledges to the surface and recover them for the benefit of their clients. Indeed, most clients already possess an array of such knowledges, but their western understanding of the ‘psyche’ and, for some, the influence of years of psychotherapy, have led them to lose confidence in this knowledge. In chapter seven, on depression and the blues, I attempt to show how the recovery of one such knowledge is proving beneficial to people who are troubled, and in chapter four I set out to recover a repressed knowledge from the Bible which I have found very powerful in helping people toward personal growth.

Many repressed knowledges may be found among peoples who are marginalised in western society, such as single parents, gypsies, the homosexual community, so-called ‘ethnic’ minorities and indigenous peoples. The Maori people of New Zealand, for example, have never accepted the western cult of the individual. For them it would be unthinkable to leave a person alone at any crucial event in their life - like a job interview, a marriage break-up, a court case. For a Maori person, his or her identity is very much connected to the ‘*whanau*,’ or extended family group, to which he or she belongs. A person cannot be thought of as separate from his or her *whanau*. The African-American people have preserved an understanding of personal sorrow (‘the blues’) that, in my view, is far

healthier than our view of people suffering from the illness of ‘depression.’ The Buddhist community has a view of the moral nature of the person which runs counter to Freud’s view of the psyche as fatally flawed by neurosis and the Oedipus complex. The recovery of such repressed knowledges is an exciting part of the work of narrative therapy.

THE PRACTICE OF NARRATIVE THERAPY - AN OVERVIEW

Having explored the intellectual basis of narrative therapy and noted several points where this basis leads to a particular therapeutic approach, we are now in a position to explicate some of the basic aspects of narrative therapy in practice.

To begin with, narrative therapy is a **phenomenological** approach to counselling, in a parallel but quite dissimilar way to person-centred therapy. As in person-centred therapy, the therapist orients herself to the world view of the client, listening attentively so as to 'get inside' the outlook of the client and see his life and his world through his eyes (Rogers, 1951). As with person-centred therapy, there are no pre-set notions as to what a properly functioning human being should be.

However, the aims and intentions of the therapist, and therefore the way she listens, responds and asks questions, are vastly different from what occurs in person-centred therapy. While narrative therapy is person-centred, it is certainly not non-directive (Drewery & Winslade, 1996: 33).

Every conversation between narrative therapist and client is of course different; there is no set pattern as to how things should proceed. Various aspects of narrative therapy will be used at appropriate points in the conversation. However, for simplicity of explanation, the main elements of narrative therapy are outlined below in sequential form.

Externalising conversations

Many of the therapist's questions and responses are designed to drive a wedge between the person and his problems. From the moment the client talks in terms of having a problem, the therapist orients herself toward him as a free, personal 'I-subject' and the problem as external object. She does this by means of an 'externalising conversation,' asking a series of questions based on the assumption that the problem dwells outside the person - i.e. in the web of societal discourse - and affects or influences him. Such questions might include the following:

- *When Bad Temper intrudes upon you, how does this mess up the family?*
- *How does Bad Temper hook into you and lead you to give in to it?*

Through questions of this type, the client begins to see himself as separate and distinct from his problem, which is being objectified by the therapist and spoken of by the proper noun, 'Bad Temper.' As the conversation proceeds, client and therapist may negotiate a name for the problem which the client finds more appropriate. The externalising conversation may continue at length, the therapist asking many questions about the behaviour of the problem, the tactics it uses to hook the client, the effects it has on him and on those around him, and in what ways it colludes with other problems to defeat him.

One of the assumptions of narrative therapy is that the problem may be put outside the person (externalised) because it does not actually belong to the person but is a construct made up of discourse from society/culture. Externalising the problem is therefore often spoken of as 'deconstructing' the problem (e.g. Freedman & Combs, 1996, 42-72). This way of viewing a problem can have a powerfully therapeutic effect (see, e.g., Monk, 1996), as it frees the person from the de-energising notion that the problem is somehow 'wired into'¹ them and intrinsically part of them. Nevertheless, in chapter 3 we will raise the question as to whether this might be too simplistic an approach, as there may be aspects of

¹. The phrase 'wired into' - with respect to the way problems are seen as attaching themselves to persons in a positivist view of the human psyche - comes from Parker, et.al., 1996, e.g. p. 18.

human difficulty which cannot reasonably be explained in terms of social/cultural discourse.

Finding unique outcomes and the new story

Having externalised the problem, the therapist may typically then look for 'unique outcomes' in the client's life, i.e. occasions when the problem has *not* succeeded in hooking him or leading him to act it out. A standard question might be:

- I can see how successful Bad Temper has been at leading you to mess things up, and that it seems always to win out over you. But have there ever been occasions when it's tried to grab you but you haven't given in to it?

Many clients respond immediately with a straight 'no,' but on further questioning begin to recall one or two occasions when they have responded differently. The therapist then asks a good number of questions about one of these occasions, helping the client to bring it alive again. Having set the scene, the therapist asks what the client did then that was different. Usually this is an apparently insignificant thing, such as, 'I said to myself, 'No! I haven't got time to lose my temper today. There are too many important things happening.' Or it might be something more dramatic: 'When I felt it coming I sat down on the couch and said under my breath, Darn it! I'm not going to stuff it up this time.'

The therapist writes these words down on her note-pad and repeats them back to the client verbatim. Together they reconstruct the scene into a proper little story with a beginning, a middle and an end. This becomes the first chapter in a new story which the client can identify with as his preferred self. The story is filled out as more unique outcomes are identified and storied. They can now be woven together into a narrative that stands against the dominant story of the client as a bad tempered person. He now has an alternative story about himself: 'I am the gentle but tough spirited man who stood up to Bad Temper at least three times

and won outright - and what's more, I know *how* I won, and I can use those methods again!

The client can now decide which of the two stories he prefers. Almost all clients without exception prefer the new one.

The client can now *identify* with this story as genuinely him. It is not some piece of arbitrary positive thinking which he or the therapist has made up. It really *is* him. It is a true, believable account of a strand in his life which he had previously overlooked. He can now choose to see himself in terms of this story rather than the old story. If this is all that takes place in a narrative therapy conversation, many clients report a turnaround in their behaviour from this point on. But of course, it is only the beginning.

Thickening up the new story

The new story usually needs to be 'thickened up,' to enable the client to be more fully empowered to behave as he prefers. This may involve more wide-ranging conversation about events in his life which seem to have a bearing on his problem. For example, he may see a connection between his tendency to give in to the intrusions of Bad Temper, and a general feeling of unworthiness. He may feel his sense of unworthiness leads him to be vulnerable to the attacks of Bad Temper, as if this type of behaviour suits that view of himself. The therapist may put this in narrative form: 'I am an unworthy person, so it doesn't really matter if I behave in ways I find shameful. People would naturally expect such behaviour of me.'

The therapist may then conduct another externalising conversation, so as to deconstruct this story of his unworthiness. Or she may move directly to ask whether there have been moments in his life when he has acted in an exceptionally worthy manner. When such moments - unique outcomes - are

located, they can be storied in detail and woven together into the client's new story.

As this process continues, other aspects of the client's behaviour which he wishes to move away from are externalised, more unique outcomes are located and storied, and further storying of preferred ways of being is undertaken. In deconstructionist terms, the discourse which constitutes the problem-plagued person is being deconstructed, and new discourse is being created which reconstitutes the person in accordance with his preferred way of being. This new discourse is not being dreamed up out of nothing, but from a recovery of repressed knowledges which were always there.

More specialised questions

Narrative therapists have refined and expanded the range of types of questions. Some of these include:

Landscape of action questions. These are questions designed to help the client explicate the action content of unique outcomes and reconstruct these into coherent stories. Michael White (White, 1991, 30) gives typical examples of such questions:

- *How did you get yourself ready for this step? What preparations led up to it?*
- *Just prior to taking this step, did you nearly turn back? If so, how did you stop yourself from doing so?*
- *Looking back from this vantage point, what did you notice yourself doing that might have contributed to this achievement?*
- *What were you thinking at the time?*

In family therapy, the other people present may also contribute in this discussion. Landscape of action questions addressed to them might include:

- *How do you think your parents managed to keep their act together in the face of this crisis?*

- *What did you see Sally doing leading up to this achievement? How does this contribute to an understanding of how she got ready for it?* (White, 1991, 30-31)

Other questions may seek to bring forth the more distant history of the unique outcome:

- *What can you tell me about your history that would help me to understand how you managed to take this step?* (White, 1991, 31)

The therapist can generate a great range of landscape of action questions, looking not only at unique outcomes in themselves, but also at how these relate to the client's recent and distant history and to current struggles and achievements. Freedman and Combs (1996, 131f) have given these questions the less abstruse sounding name, 'story development questions.'

Landscape of consciousness questions. These questions are designed to help the client discover or assign the meaning, for herself, of the stories which have been developed through landscape of action questions. Freedman and Combs (1996, 136) call them simply 'meaning questions.' As White (1991, 31) explains, these questions encourage the client to articulate and to live out her 'alternative preferences, desires, personal and relationship qualities, and intentional states and beliefs, and this culminates in a 'revision' of personal commitment in life.' Such questions (taken from Freeman and Combs, 1991, 137-139) might include:

- *What does this new perspective tell you about yourself?* This question focuses on the *implications* of the newly developing story.

- *What does it say about you as a person that you would do this? What characteristics does it show?* This focuses on *characteristics and qualities*.

- *What do you think motivated him to take that step?* This is one of a class of questions which invite people to see how particular developments reflect larger life projects, such as *motivation, hopes and goals*.

- *From what I've heard (of your new story), what would I say you value in friendships?* This deals with *values and beliefs*.

- *Is there something you can learn from this that might be important in other aspects of your life?* This deals with *knowledge and learnings*.

Once again, there is a plethora of questions and types of questions which can be generated to fill out the landscape of consciousness. Throughout this process, the therapist stands ready to challenge any trivialising of the unique outcome as self-explanatory and non-significant.

Experience of experience questions. These questions 'encourage persons to provide an account of what they believe or imagine to be another person's experience of them.' (White, 1991, 32) These can be particularly effective in enabling a client to reflect directly on her life. Typical questions (these from White, 1991, 32-33) include:

- *If I had been a spectator to your life when you were a younger person, what do you think I might have witnessed you doing then that might help me to understand how you were able to achieve what you have recently achieved?*
- *Of all those persons who have known you, who would be the least surprised that you have been able to take this step in challenging the problem's influence in your life?*

This type of question may also aim to bring forth future developments in the landscape of consciousness:

- *If you did witness yourself taking these steps, how might this confirm and extend on this preferred view of who you are as a person?*

Past prediction questions.

Experience of experience questions have been further developed experimentally by Daphne Hewson (Hewson, 1991), who calls these 'past prediction' questions. Among these are questions which invite a *hypothetical* consideration by the client of preferred behaviour, based on an imaginary experience of a past observer. Such questions might include:

- *If you were to tell me next week that you had done x, what could I find in your past history that would have allowed me to predict that you would have done x?*
(Hewson, 1991, 10)

The beauty of such a question is that it does not depend upon a unique outcome having already taken place. Both the unique outcome and the observer in the past are imaginary. However, the question is still anchored in reality for the client because it is *her* world she is focusing on in the imaginary situations. Hewson reports that these questions are very effective in helping clients develop preferred outlooks and behaviours.

Future prediction questions.²

With these questions, also developed experimentally by Daphne Hewson (Hewson, 1991, 9), *both* the imaginary elements are in the future. Hewson's examples include:

- *If you were to tell me next week that you had done x, what processes would you have gone through between now and then to have achieved x?*
- *When you are ready to do x, what steps will you have taken between now and then to have achieved that?*

Like past prediction questions, these questions can create new narratives for clients and provide a framework of expectation in which new, preferred behaviour and outlooks can develop. They have the further advantage that they do not depend on unique outcomes already having taken place. Again, however, they are anchored in reality for the client because it is she herself whom she is imagining in the fantasised future unique outcomes.

Questions and values.

². There is a printer's error in Hewson 1991, 9, where the section discussing these is entitled 'Past Prediction Questions.' The text, however, uses the term 'Future Prediction Questions.'

As will be obvious from the style of questioning characteristic of narrative therapy, these questions are value-laden and designed with a specific agenda in mind. Unlike most other therapies, narrative therapy uses questions 'to *generate experience* rather than to gather information' (Freedman and Combs, 1996, 113). We often tend to think experiences are stored as they happen, and can be retrieved through recalling. Narrative therapists maintain that experience is coloured and shaped by the meaning people make of it. This follows from their constitutive view of persons - a person is constituted by the meaning-laden stories she tells herself about herself and the world.

Narrative therapists are aware of how their questions *co-author* their clients' experience (Anderson and Goolishian, 1990; Freedman and Combs, 1996, 116-117). 'They put a spin on the experiences that they call up; they suggest beginnings and endings for those experiences; they highlight portions of experience while dimming and excluding others' (Freedman and Combs, 1996, 117). Their questions do not so much access experience as generate it.

Hence, narrative therapists are very sharply aware that the therapist's values shape the questions they ask. Questions are not neutral in terms of their value content. There are always assumptions behind questions. It would be easy to assume that the problem a client is experiencing is an inseparable part of her. Consequently, we might ask questions such as, 'What sort of coping strategies do you use, for living with this persistent anxiety?' This question, morally bland though it might at first appear, is laden with values and beliefs about the relationship of the client to her anxiety. As such, it colludes with her identification with her anxiety and reinforces this identity. A narrative therapist, however, would tend to believe that we are constituted by the stories we tell, and that the client's expressed problems must be external to the person who is troubled by them because her mere act of seeking help regarding them is the beginning of a new story in which she is acting out her preference to be different. This belief leads the narrative therapist to ask only questions which assume the

problems are not (part of) the client. Michael White's assertion, 'The person is not the problem; the problem is the problem' (Epston & White, 1989), has become something of a slogan of narrative therapy. It is no glib slogan, however. It is thoroughly grounded in the therapist's values and beliefs.

Further aspects of deconstruction in therapy.

So far we have considered the deconstruction of problem-saturated narratives in the re-constitution of the person around preferred narratives. But narrative therapy takes the enterprise of deconstruction further, applying it to the normalising gaze of society/culture and the knowledge practices of the psychotherapeutic professions themselves.

Deconstructing the normalising gaze.

As outlined above, the normalising gaze functions as 'practices of power' which constitute the person in relation to norms, standards, and expectations grounded in the 'essential' nature of humanity and of the world. This objectifies persons and incites them to embrace their own subjugation.

The deconstruction of these practices of power is achieved in narrative therapy through externalising conversations. The therapist encourages the client to provide an account of how these practices affect their lives. As White (1991, 35-36) explains, 'In these conversations special emphasis is given to what these practices have dictated to persons about their relationship with their own self, and about their relationship with others.' Through these externalising conversations, persons come to see that these practices are not authentic ways, for them, of being with themselves and others. These persons are then in a position to develop alternative, preferred ways of understanding themselves and their relationships.

Deconstructing knowledge practices.

According to White, professional disciplines tend to develop practices of language use and techniques which cause society to see them as having exclusive access to the 'truth' of the world. This tends to make people think the members of these professions 'have access to an objective and unbiased account of reality, and of human nature.' (White, 1991, 36) These professionals are then accepted by society as being able to speak with authority beyond the range of their actual personal experience. Their language is seen as neutral, respectable, rational and unbiased. What they say seems to belong to a world of solid truth that exists independently of the speaker. In Foucault's words, these knowledges are considered to be 'global and unitary.' It is very difficult for anybody to challenge these knowledges, because 'the language practices that constitute them have built-in injunctions against questions that might be raised about their socio/political/historical contexts.' (White, 1991, 37)

The therapist belongs to a group of professionals. She is therefore likely to be seen by the client as having some objective, disembodied knowledge about him - knowledge which exists independently of any experience she may have had of him. The therapist herself may indeed be responding to the client in this way.

This objectified knowledge needs to be deconstructed in the therapy process. The Narrative therapist therefore orients herself toward the client in such a way as to seek to learn from him about reality as he experiences it. She can do this by enquiring of him which aspects of the therapy he finds most helpful and why; by calling into question any assertion by him that she has a privileged knowledge of reality; and by seeking to find out from the client whether the effects of her therapy are preferred by him over other paths. White (1991, 38) and Neal (1996) recommend that the therapist join in a reflecting team whose members question each other about the process of their therapy, avoiding the assumption of superior knowledge and seeking to situate their responses in their own personal experience of life. Neal also recommends that the client or clients (if a family)

be invited to observe the reflecting team in action and raise these same questions with them.

Confidentiality and audiences.

Confidentiality is a fundamental issue among the counselling professions. The 'confessional' nature of the client-counsellor relationship demands the counsellor be committed to confidentiality. While narrative therapists totally respect the client's right to privacy, their style of therapy works well - and is often enhanced - when there is a live 'audience.' This audience would consist of close friends or family members of the person being counselled - or in family therapy, the members serve as audience for each other. There are several reasons for this.

To begin with, unique outcomes can often be recalled and their details filled out more readily when people are present who know the client well. They can reinforce the emerging new story by joining in the telling of it, and challenge the client if he begins to explain away the unique outcomes as trivial or self explanatory.

Further, clients often emerge as heroic in the narrative therapy process, as they discover and begin to employ strengths and qualities long forgotten or overlooked in themselves. Many clients are only too pleased if this development is witnessed by a supportive audience. David Epston reports that many young women and girls who are winning the battle against anorexia want very much to make their struggle and their victories known to others who may be vulnerable to anorexia's attacks (Epston, 1989).

Finally, an audience can join with a client in her unfolding progress in supporting the client as she seeks to live out her new emerging story.

Wider applications

Narrative therapy is often associated with the solving of particularly severe, entrenched problems such as anorexia, delinquency, acutely low self esteem, and unbearable stress in families. Some therapists see its use only in such areas. Bill O'Hanlon sees its value chiefly for 'clients who have organised their identity around the problem - cases involving schizophrenia, severe depression, persistent misbehaviour or obsessive compulsive problems' (O'Hanlon, 1994, 28).

However, narrative therapy is not simply a problem-solving technique but a coherent approach to life in all its aspects. It speaks of our entire experience of life being held in story form, and of our freedom to develop new stories and to choose which stories we identify with. Published works on narrative therapy already include examples of grief counselling (Epston and White, 1992, 27 ff), counselling adult survivors of childhood sexual abuse (Durrant and Kowalski, 1990; Harker, 1996), couple counselling (Epston and White, 1989, 18), counselling those in alcohol dependence (Winslade & Smith, 1996) and a range of presenting problems such as most therapy practices would encounter. In subsequent chapters the use of narrative therapy in a pastoral context over a range of everyday life issues will be presented.

Concluding

Narrative therapy emerged out of family therapy but also has roots in Batesonian and constructivist views of persons and a phenomenological approach to the counselling process. It allies itself with a social constructionist approach to culture and society and the constitution of the person. It is firmly grounded in clinical practice and experience, its chief advocates being published, accomplished therapists. Yet at the same time it claims to represent a clear break from the mainstream of psychotherapy, as it not only shies away from objectifying tendencies and metaphors in the social and psychological disciplines, but sees the causes of human problems as lying outside the individual, within the web of language and discourse that impinges on each of us within society and culture.

Narrative therapists report successes with clients to a degree and on a scale which would astonish many counsellors. This story of success, together with the intellectual and political appeal of the social constructionism to which narrative therapy is allied, give it an energy bordering on the evangelical. But does it have the intellectual rigour that would sustain it in the long haul? Is it internally consistent? Does it take deconstruction as seriously as it claims? And could it be adapted to pastoral goals and assumptions within the mainstream churches? These issues will be addressed in the following chapter.

Chapter Three

Social construction and Christian faith

Narrative therapy is a young movement, and has only just begun to draw criticism from the wider psychotherapeutic community (Hart, 1995; Held, 1995; Fish, 1993). Further, the social constructionism with which it allies itself is an expanding movement within the social sciences, and is tending to put psychologists and psychotherapists on the defensive, rather than the other way round. Nevertheless, the challenges which are being raised could be crucial for the ongoing credibility of narrative therapy in the academic community and, regarding the subject of this book, for its appropriateness in a Christian pastoral context.

In this chapter, then, we will look carefully at some of the questions that are raised about narrative therapy and its underlying philosophy, social constructionism. We will check whether these criticisms discredit narrative therapy intellectually or morally in general terms, and what they imply regarding its place in a Christian setting. I personally have found narrative therapy to be broadly compatible with Christian faith and practice - indeed to richly enhance our faith and mission - provided the form of social constructionism on which it is based is developed in certain crucial directions.

This critique represents yet another intellectual journey, possibly even more demanding than that in chapter one. While one can practice narrative therapy without embarking on this second journey - i.e. by simply accepting the social constructionism and its therapeutic implications outlined in chapter one at face value - our credibility will be more robust if we subject these ideas to careful

examination. This will also help us to integrate narrative therapy more fully with our ongoing theological and spiritual journey.

What place in the Christian spectrum?

The word ‘Christianity’ covers a huge range of endeavour, from rabid fundamentalist to wildly liberal, from mystical Eastern Orthodox to drum-beating African indigenous. My own development of narrative therapy in pastoral ministry naturally reflects the style of Christianity I am comfortable with. It is within this context that my personal critical examination of narrative therapy has been pursued. Hence, I will briefly outline where I am in the Christian spectrum, so as to make clear my points of reference.

I was brought up in a post-Catholic, atheist family and came to faith in Christ through a decisive conversion experience in a liberally evangelical Presbyterian church at the age of eighteen. My faith journey has gone through many phases and incorporated diverse dimensions, including an early period of evangelical missionary zeal, a solid, liberal theological education in the historico-critical tradition, a mystical, charismatic approach to worship and devotion, a solid engagement in social and political issues such as nuclear disarmament, ecology and support of indigenous people’s aspirations, and the endeavour to help people personally by means of pastoral counselling and support. Alongside the recent incorporation of narrative therapy into my ministry, my approach to pastoral care has been broadly orthodox, in line with such tried and tested manuals as Brister’s oft-revised and reprinted *Pastoral care in the church* (Brister, 1994).

In the Presbyterian Church of Aotearoa New Zealand, in which I am a minister, I am frequently ‘pigeonholed’ as a ‘liberal,’ but the people who come to me for counselling and who seem to benefit from narrative therapy in a Christian context include many from pentecostal and evangelical churches. As we will see in chapter four, the simple core of the Gospel, of Christ taking away our sin and

nailing it to the cross, provides a therapeutic basis for (narrative) therapy of amazing power, respect and effectiveness.

It is into this style of Christian setting that I have brought my interest in narrative therapy.

Blending two movements

The question is immediately raised as to how we are to synthesise or join together the Christian endeavour and narrative therapy - which of the two should have to change in order to accommodate the other? The standpoint from which I am working is that of the pastor, where the given datum is the tradition of Christian belief and practice. As Sue Patterson points out, if we (pastors) are to retain our identity as Christian, then 'context must be assimilated to Christianity and not the reverse' (Patterson, 1994: 9). This is not to suggest a narrow, rigid, blinkered religion which cannot learn from its surrounding culture. It is a religion open to criticism and change, but which rests on venerable foundations which require more than a passing fad to overturn them.

Hence, we are asking, how can narrative therapy be brought into this particular Christian context, in such a way that Christian faith and practice are respected and pastoral ministry is enriched?

The problem of truth and relativism

The main obstacle to be overcome is the inherent 'relativism' of social constructionism. Put simply, social constructionism is a critique of the notion that there is such a thing as truth existing independently of the language and ideas of human beings. In its more radical form, as, for example, in the work of Kenneth Gergen (1985, 1994), social constructionism maintains that all claims about what is 'true' are simply linguistic activities - people constructing things together in their conversations. For example, the notion of 'paranoia,' together with its definition(s), is the invention of a particular cultural group (western

psychoanalysts), to help them cope linguistically with a cluster of disturbances their clients experience. The notion of 'entropy' is a linguistic invention of physicists, to give verbal expression to a range of phenomena they frequently observe in the universe. The notion of 'God' is a linguistic invention of believers, to give a focal expression to a range of feelings and ideas they experience in life.

In the same way, moral realities are also relativised by social constructionism. Moral notions such as 'goodness,' 'heroism,' and 'love' are seen as linguistic constructions, created in conversations between people, as they seek to agree on general terms to give expression to a range of actual incidents and needs which occur in their daily lives.

We should point out here that the target of social constructionist critique is not so much the truth of the visible, concrete world of trees, walls, other people and physical obstacles which we bump into as we go through our day. The relationship of the physical world to the language we use about it is indeed problematic, as Wittgenstein (1953) showed so eruditely. But the social constructionism we are concerned with here is more to do with realities which we cannot touch and see and smell and hear and taste - the 'essences' or 'foundations,' which are said to contain the laws of cause and effect, or the governing principles, or the timeless truths, which lie behind and underneath the visible world and its workings.

In this discussion we also need to be careful to distinguish between (cognitive) constructivism and (social) constructionism. Constructivism is the theory of human perception, outlined in chapter one in connection with Gregory Bateson, which maintains that individuals do not apprehend the physical world as it actually 'is,' but process incoming information through already existing patterns or frameworks, which control for them the 'world' they 'know.' This theory

caught the attention of Michael White and Jerome Bruner, and led them further to posit that these patterns or frameworks can best be understood as narratives.

Constructivism, then, has to do with how individuals construct their world. It is a theory about the perceptive apparatus of individual persons.

Social constructionism, however, is about how communities construct realities which, generally, go beyond the physical, observable world. These realities may be 'scientific,' ethical, cultural, religious, legal, political, social. And social constructionism, in its crudest form, maintains that such realities do not have the force of independently existing 'truth' but are the constructions of particular social groups in particular cultures and settings in history.

With this background in mind we will now explore some of the specific difficulties a social constructionist approach can lead us into.

DIFFICULTIES OF SOCIAL CONSTRUCTIONISM

Undermining from within

In a subtle way, narrative therapy could be seen to undermine its own enterprise through its constructionist assumptions. One of the tenets of narrative therapy is that it seeks to help clients construct their *preferred* story and live their lives through this. Through the externalising of problems, clients are freed from having to live in terms of previously dominant, disempowering narratives, while, through the exploration of unique outcomes, they are able to construct new stories which stand against or alongside the problem-saturated narratives. This provides the client with a choice: which story would they prefer to identify with and live through?

But narrative therapists cannot consistently talk about a *better* story or a story that would do more *good*. While individual narrative therapists may privately

believe a client's preferred story is better, more ethically viable, or of greater value than the problem-laden story with which the client presents, their social constructionist base prevents them supporting this claim on consistent ethical grounds.

Nor can narrative therapy speak of itself as a 'better' or 'truer' form of therapy than any other approach. It can only claim to be the *preferred* way of its adherents.

This relativism is rooted in social constructionism's disdain for the notion of essences or foundations upon which ideas and theories are grounded. Constructionism holds this notion in question, and is consequently free to examine the discourse of scientists, researchers, professionals, etc., in terms of its function in society and culture rather than any 'truth' it might claim for itself.

As Roger Lowe points out (1991, 48), the development of narrative therapy was not so much the development of a new theory or the discovery of new knowledge, as a 'self-conscious change in *metaphor*.' In keeping with social constructionism, narrative therapy speaks not of 'the *discovery* of new objective knowledge or the *revelation* of fundamental realities, but as the *constitution* of new experiences for both clients and therapists' (Lowe 1991, 48). In other words, narrative therapy cannot claim, under its own terms and assumptions, to be a new discovery of something that is actually 'the case' regarding human beings. It can only claim to be the construction of a new set of experiences and outlooks (of counsellors and clients).

The problem for narrative therapy is that once we surrender the notion of foundations (which ground objective knowledge, and the distinction between truth and falsity), we leave ourselves without grounds upon which to make truth claims. We can say we 'have a strong preference for' (Epston & White 1989,

18) one way of looking at the human person over another, but we cannot claim this is the right way or even a better way than others.

Essentialism in narrative therapy

The situation is further complicated for narrative therapy in that the constructivist side of it does entail the embracing of a particular psychological theory. While narrative therapists now claim to have left constructivism behind and applaud only social constructionism (e.g. Freedman and Combs, 1996: 26), they still teach a replicable form of counselling which includes the externalising of the problem, the location of unique outcomes, and the re-authoring of the person's life in terms of newly constructed stories. The constructivism in this approach is based on essentialist foundations - the assumption that human beings function in a particular way.

Narrative therapists cannot have it both ways. They cannot claim, 'There are no essential truths' (Freedman and Combs, 1996, 22), and at the same time say it is always (or even usually) the case that persons make sense of the world through a process of filtering information.

So narrative therapy is caught in a bind. It retains essentialist assumptions for a crucial part of its work, yet claims to eschew such assumptions. At the same time, it presents itself as a good form of therapy which should be taken seriously, yet eschews the notion that one thing can be better than another.

Feminism, social criticism and narrative therapy

As we noted above, social constructionism takes away the basis of ethical claims. While it accords well with ideas of choice, dissent, liberation, and self determined change, it cannot consistently support notions of justice, equality or compassion, as these are predicated upon foundationalist or essentialist notions of truth. At worst, social constructionism in the social sciences 'can have the tendency to reduce politics and society to language, and in fact to reinforce rather

than challenge dominant power relations' (Lowe, 1991, 49). Lowe cites authors from feminist perspectives (Mascia-Lees, et al, 1989; Burman, 1990; and others) who warn that this may result in 'a dominant discourse which does not fit with the experience of women and other disempowered groupings and may constitute a diversion and dilution of political change projects, such that *reflexivity* effectively replaces *resistance*' (Lowe, 1991, 49).

The irony for narrative therapists is that some of the values that most strongly attract them to social constructionism are based on aspects of Enlightenment thought for which social constructionism has such disdain. The desire to deconstruct the practices of power which enslave persons arises out of a keen sense of social justice. But social justice needs Enlightenment notions of truth and structure to give it grounding and substance.

Following M. Poster (1989), Lowe suggests that a possible way out of this impasse might be in developing an alliance between social constructionism's 'postmodern' critique of Western reason and aspects of Enlightenment thought (Lowe, 1991, 50). From constructionism would come an emphasis on the contingent nature of all knowledge and the centrality of discourse, while from Enlightenment thought would come the possibility of collective social change. Another possible alliance could be between feminism and postmodernism. As N. Fraser and L. Nicholson (1990) observe, these two outlooks approach similar kinds of problems but from different points of departure. Lowe comments, '... postmodernism offers sophisticated criticisms of philosophical foundationalism and essentialism, but has an inadequate conception of social criticism, while feminism has a more substantial conception of social criticism but lapses at times into foundationalism and essentialism' (Lowe, 1991, 50).

Lowe correctly observes that a credible ethic for a new society would have to have a sound essentialist base, and that social constructionism by itself could not offer this, as it functions out of a disdain for essentialism. Unfortunately,

however, an essentialist world view is simply not compatible with an intellectual enterprise whose departure point is disdain for essentialism in principle. Any attempt to blend constructionist and essentialist approaches would have to take these inherent contradictions into account.

When preferred outcomes seem unworthy

Before suggesting a way forward it is worth pausing to illustrate how this absence of ontological and ethical foundation could seriously discredit narrative therapy in practice. Let us assume a family presents for counselling with the 'problem' that the father does not feel his authority is being properly respected in the home. On listening to the family it becomes clear to the therapist that all family members hold to the patriarchal view that the father is unquestioned head of the household, and all, including the mother, see the problem in terms of her inability to knuckle under and humbly obey her husband. It becomes clear that the preferred outcome for all family members would be to strengthen the mother's ability to submit and obey.

If the therapist were genuinely committed to the epistemology of narrative therapy, she would work so as to assist the mother achieve her preferred outcome. This might involve an externalising conversation in which 'Disobedience' was objectified and its effects on the family charted, followed by a search for unique outcomes where the mother had successfully fought off the attacks of Disobedience. These would then be landscaped into a meaningful new story of a meekly obedient wife and servile mother, which the mother could identify with and begin to practice.

This approach would seem fully consistent with narrative therapy's commitment to the client's preferred outcomes. It is conceivable that such might even be practised, were this therapy to be picked up by fundamentalist Christian or Muslim communities. Yet it is difficult to believe that any of the narrative therapists in print to date would actually behave in this way, since all are *also*

committed to social justice and gender equality. But this ‘also’ is problematic in that it does not inhere in or follow logically from the stated, reasoned explication of narrative therapy, and is not *able* to follow from its social constructionist roots.

It may well be that in some cultures, domestic patriarchy can function within the context of human dignity and the right of all to be fulfilled. It is conceivable that, within that context, a narrative therapist would feel comfortable in assisting such a family to help the woman submit to and serve the man. But the danger is that the narrative approach could be picked up by communities which practice patriarchy, discrimination, etc., *outside of* a context of human dignity and fulfilment for all. The social constructionist roots of narrative therapy would seem to make this inevitable.

Social justice an exception?

Of course, the major proponents of narrative therapy are fully committed to social justice. White and Epston state their personal commitment to social justice in their groundbreaking exposition of narrative therapy (White and Epston, 1990, 49). White has also published an article on counselling couples where the man has been violent (White, 1989, 101-105). The difficulty, however, as Vincent Fish (1993) points out, is that the mention of social justice in White and Epston seems an *exception* to the general approach of narrative therapy, achieved by stepping out of its theoretical model.

Charles Waldegrave, an Anglican priest who counsels in the narrative framework and is well known for his courageous and tireless work for social justice, makes explicit reference to this weakness:

Constructivist³ (sic) approaches to family therapy can fall into the same trap as the systemic approach. The realities created by both family members and therapists are viewed as interpretive observer descriptions, each carrying their own meaning. The denial of objective reality in these observer descriptions can lead therapists to treat the attributions of meaning given by different family members as being of equal value. The stories of abused children and women ... are more likely to reflect what really happens in a household than the reduced story a person who abuses often gives.

The moral relativism latent in the constructivist (sic) approach fails to identify the preferable or even malign meaning webs intrinsic to such therapy situations. In other words, this approach de-politicises the broader social context and inequities (Waldegrave, 1990, 31).

In other words, for a narrative therapist to advocate social justice, he or she would seem to have to support two contradictory philosophies at once.

Deconstructionist relativism and Christian theology

Social constructionism also has direct implications for Christian theology. If God is conceived of as a real being who truly exists, deconstruction of this concept would render language about God problematic. Language about God would simply become another discourse. Its significance would be entirely in terms of its function in society and culture, and all claims to 'truth' would be nonsensical. As Carl Raschke eloquently (and approvingly) argues, deconstruction leads to the death of God. 'Deconstruction is the dance of death upon the tomb of God ...' (Raschke, 1982, 28).

³. A number of authors use the word 'constructivist' to mean what I have described as 'constructionist,' but the tendency today is to follow the distinction in meaning which is adhered to in this book.

Further, Christians make ethical claims which they say are grounded in the divine order. Elsewhere I have argued (Galvin, 1986, 1993) that specific, definable ethical principles such as justice, peace, compassion, righteousness and forgiveness are discernible as threads running through the Hebrew and Christian scriptures, and that the God of these scriptures exhorts humanity to live according to these principles. The claim that such principles are ethically true would also be dismissed by social construction as mere discourse.

The dilemma for a Christian pastor, then, is how to embrace narrative therapy without undermining the Christian endeavour. *How can we use narrative therapy's insights into human nature and its methods of dealing with human problems, while preserving both the ethical and ontological foundations and implications of our faith?*

Even outside of a specifically Christian context, the ethical and ontological dilemmas still arise. If therapists wish to make rigorous claims about social justice (or other ethical principles), or if they wish to claim their approach to therapy is *better* than some other, they need a foundational, structural basis. Indeed, the very heart of narrative therapy is itself a place of logical tension, between essentialist cognitive constructivism and anti-essentialist social constructionism.

A WAY AHEAD

In charting a way ahead I will be drawing on several streams of thought which, taken together, begin to address the problems and dilemmas outlined above. This will include a brief look at some challenging ideas from Kenneth Gergen, an exploration of the difference between 'ontological' and 'epistemological' issues, a closer examination of aspects of the work of Michel Foucault and Jaques Derrida, a questioning of social constructionism's extreme scepticism regarding Enlightenment assumptions, some reflections on the nature of personal

knowledge, and an introduction to John Shotter's 'conversational realities' (Shotter, 1993) as a basis for psychological research.

Contextual appropriateness

Some of the issues before us come sharply into focus as we explore an approach put forward by Kenneth Gergen in his *Realities and relationships* (1994). Gergen, a social psychologist and one of the most prolific and well respected writers on social constructionism, suggests the problem of relativism dissolves when we consider the question of the appropriateness of any particular social construction to its own cultural, social and historical context.

To begin with, Gergen points out, the assumptions of the Enlightenment are themselves morally relativistic. The ideas on which Isaac Newton and his contemporaries based their work never privileged one moral claim over another. The scientific world view does not afford any greater moral respectability to compassion than it does to genocide. In the 20th century we are no closer to proving that social justice is right and unbridled competition wrong, than we were before the Enlightenment.

Of course, there are traditions of moral thought within the Enlightenment, the most prominent being the utilitarianism of John Stuart Mill and the categorical imperative of Emmanuel Kant. These are very helpful ways into thinking about moral and ethical issues, but their own bases are themselves relativistic, dependent on assumptions which not everybody shares.

Gergen (1994: 74-82) sees an advantage here in thinking of moral positions as social constructs. He points out that *the moral positions taken by any particular community can be constructed by that community only in accordance with those socially negotiated realities which are appropriate to it.* As Wittgenstein showed, the words we use as we converse with one another in a particular community (a church group, a family, a scientific association, a political party)

are not so much conduits which convey information from one mind to another, but acts of influence over one another. We do not usually speak simply to tell each other what is in our head; we speak to engage one another in a relationship. This relationship proceeds according to certain rules and boundaries, and only a certain range of things are appropriate to be said between us, depending on the social context.

It is within such social contexts that social constructions occur. A family decides what the rules will be for the watching of television; a house club decides what the levels of betting may be; a church decides at what age children shall be admitted to communion; a political party decides what process it will use for selecting parliamentary candidates; a group of children decide on the rules for a game of tiggly. The rules so made are clearly social constructions, but the question of relativism need never arise. Such rules are appropriate within their social and cultural contexts.

Gergen suggests all ethical issues are like this, and we need not see this as a disadvantage. Indeed, he criticises the need some of us feel to claim a moral high ground that stands outside of and sits in judgement on all other moralities, pointing out that such moral grounds are themselves social constructions, but can be oppressive if accompanied by the claim of superiority. The question is not whether a moral claim is right or wrong, but whether the community in which it emerges finds it appropriate for their needs.

Gergen puts forward a similar approach to the *ontological* relativism inherent in a social constructionist position. He points out that scientists developing theories of the workings of the world are communities of people in conversation with one another, and the theories they develop are social constructions appropriate to those communities. The theory of evolution, for example, is a negotiated, conversational reality which has emerged and been developed within a world wide community of palaeontologists, biologists, geologists and others, and which

serves the social end of linking these people together in ways they find useful. The same is true, says Gergen, of the social constructions of the medical profession, such as the socially constructed notion of the disease pneumonia (Gergen, 1994: 74-75). The notion of this disease, he says, serves the social end of co-ordinating people together, such as patients with doctors at certain times of human need. He suggests that in a shaman-based culture, if similar symptoms were labelled 'voodoo,' this social construction would serve an equivalent social function.

But it is at this point that the weakness of Georigian's argument becomes glaringly evident, for he goes on to say:

Thus, as a participant in western culture, I would prefer to take my daughter to a western doctor. I would do so not because western medical knowledge is transcendently superior, but because I participate in relationships where western values predominate, and I code events as 'illness' and 'cure' in ways that are congenial to local medical practices. It is because I participate in a community that values the practices of 'cure' in western terms that doctors are permitted to achieve what we call 'success.' At the same time, whether these values and associated practices are universally preferable is open to serious debate. (1994: 74-75)

Gergen seems unable to countenance the possibility that virtually any parent in virtually any culture would prefer to take their daughter to the authority with the most likely ability to cure a life-threatening illness. The socially constructed reality 'pneumonia' does not simply serve the social function of co-ordinating people in a society. It also makes a claim to truth, which people of any culture ignore at their peril.

It seems, then, that some socially constructed realities are 'harder' than others - they turn out to be true for us whether or not we belong to the culture or social group which constructed them. They have a way of catching up with us in the

dark. I will illustrate this rather vividly with a somewhat crude and unlikely story.

The story of a landmine

A postmodernist and a rationalist met beside a field in Cambodia. The rationalist said, 'You shouldn't go into that field. It's got land mines in it.' The postmodernist replied, 'That's an interesting piece of discourse. I wonder what its function is in the power relation between us.' The rationalist responded, 'Obviously its function is to prevent you stepping onto that field and getting your legs blown off.' The postmodernist continued, 'So this *is* a practice of power. Very evocative, too, with emotive terms like 'land mine.' Do you realise what cultural and political baggage that expression carries?' The rationalist, becoming desperate, shouted, 'I'm telling you the absolute truth; there are land mines in that field.' The postmodernist replied calmly, 'There are no absolute truths. But it's been nice talking to you.' The postmodernist then stepped onto the field, walked a few paces and was blown to pieces.

In this improbable narrative, the rationalist's conviction that there is 'absolute truth' may not stand the scrutiny of quantum physics or aesthetic metaphors for social reality, but it is *good enough* for the situation she is dealing with. It does everything we normally require 'true' statements to do when we use the word 'truth' the way we usually use it. Such a notion of 'truth' could be a helpful starting point in establishing a foundation for narrative therapy in a pastoral context. We will return to this point after considering several other related issues.

Ontology and epistemology

In order to proceed, we need to come to terms with two of the great concepts of philosophy: ontology and epistemology. Ontology has to do with what *is*, while epistemology has to do with what we can *know*. There are many things in the world that we do not know about. We assume, for example, that there are

thousands of yet undiscovered species in the rain forests of Brazil. We do not *know* these species (epistemologically), but we assume they *are* there (ontologically).

This distinction, between what is and what we know, was essential for the development of the Enlightenment. As we saw in chapter one, the early scientists assumed there was a realm of orderly, cause and effect reality lying behind or underneath the physical world, and that this realm was replete with all the possible truths and laws that would be needed to run such a universe as this. This was an ontological assumption - an assumption about what *is*, quite separate from the (epistemological) question of whether we can *know* it or not.

In some ways this is a dangerous assumption. If we assume, for example, that there is a pharmaceutical cure for schizophrenia but it is not yet known, we might be motivated to spend millions of public health funds on research for this elusive cure, to the detriment of other important health projects - as the Schizophrenia Society in Britain is currently doing (Parker, et.al., 1996). There may in fact be no such cure, but we will never know this because no amount of not finding it can prove it is not there, still waiting to be found.

So there are problems in drawing a distinction between ontology and epistemology. But the development of science would have been impossible without such a distinction. In order to spend the time, money and energy seeking to know the laws of nature, the early scientists had to first assume these laws were there, lying unknown and waiting to be found.

One of the problems of much social constructionism (and much other recent philosophy) is that it blurs this distinction. It assumes that, because we do not know something, it is not there. This point is made very forcefully by Bhaskar in his important work, *Reclaiming reality: a critical introduction to contemporary philosophy* (1989). Bhaskar is at pains to re-introduce into western philosophy

the notion of the distinction between ontology and epistemology. He does not suggest we can posit any realities we like, and then claim they exist even though we do not know them yet, but that it is reasonable to assume there are realities beyond those which we already have knowledge of. While aspects of Bhaskar's approach may be criticised (e.g. Shotter, 1993: 65-78), his recovery of the distinction between the ontological and the epistemological is crucial.

It means, for example, that a socially constructed reality may not necessarily be *merely* a social construct. The theory of gravity, for example, is a social construct, made up by physicists to explain the behaviour of falling objects. Nobody has ever seen gravity directly, but only its effects in the world. But the fact that we do not *know* gravity *directly* does not mean our notion of gravity points to no particular thing. It would seem reasonable to assume there *is* something causing apples to fall off trees (which does seem to happen in every culture and time and place in history), and that the more we investigate this phenomenon in a spirit of open enquiry, the more our understanding of it will approximate to the thing itself. Bhaskar suggested this is a quite reasonable assumption, provided we proceed in such a way as to be able to be proven wrong in any of our assumptions or prior beliefs about the thing. If it really is there, then it can slap our hand, so to speak (or blow our legs off), when we make wrong assumptions about it.

It would not be the case that any and every social construction functions like this. For example, it is virtually impossible to disprove a diagnosis of schizophrenia once it has been given, as Rosenhan (1973) and his colleagues found, to their great discomfort. Rosenhan and a number of colleagues presented themselves individually at a number of psychiatric hospitals throughout the United States, claiming to be troubled about having heard voices, but being completely honest about all their other life details. All were admitted and diagnosed as schizophrenic, and no amount of normal behaviour from that point on convinced the psychiatrists they were sane.

Many of the social constructions of psychologists and psychoanalysts are of this nature. Once a psychological category has been established or a patient diagnosed, it is virtually impossible to say what sort of evidence would challenge the validity of the category or diagnosis. Hence, I would consider it reasonable to place various social constructions on a 'scale of ontological worth.' At the positive end of the scale are theories about such things as gravity, land mines and the mechanics of contraception, and at the other end are assertions about sanity, normality, and the array of psychological 'illnesses' that patients are said to suffer from.

Such a spectrum allows for the idea that some realities are 'merely' social constructs, while others are ontologically well founded but our knowledge of them can only be expressed as social constructs. Everything we say about gravity, pneumonia and explosive velocities is a social construct, but it does still point toward a reality which would exist whether or not anybody spoke of it. On the other hand, everything we say about paranoia and borderline personality disorder is also a social construct, but in this case it is very questionable indeed as to whether such a thing exists of itself apart from in our language. In the former cases the ontology is secure but the epistemology uncertain, in the latter the ontology itself is highly questionable.

Foucault and Chomsky

This type of distinction is illustrated by the famous radio debate in 1974 between Naom Chomsky and Michel Foucault on the topic, 'Human Nature: Justice versus Power' (Chomsky, 1974 and Foucault, 1974; Rabinow, 1986, 3 ff). For Chomsky, there is some form of relatively fixed human nature. This ontology is fundamental, otherwise true scientific understanding is impossible. Chomsky's research had shown that human beings in every race and culture were capable of learning their own language and using it in a creative way, based on only partial and fragmentary experience of it. There must be, he insisted, a 'mass of

schematisms, innate governing principles, which guide our social and intellectual and individual behaviour ... there is something biologically given, unchangeable, a foundation for whatever it is that we do with our mental capacities' (Chomsky, 1974). Chomsky devoted his scientific career to uncovering these structures, content to work in the tradition of Cartesian rationality.

Foucault, however, avoided the abstract question, 'Is there such a thing as human nature?' and asked instead, 'How has the concept of human nature functioned in society?' Foucault draws a distinction between the actual operations and claims of a particular discipline at a particular moment in history (the *accidents*), and those broad conceptual notions such as 'life,' 'human nature,' ' (the *essences*) which Chomsky and the structuralists claim are givens awaiting the scientist's discovery. In Foucault's opinion, the essences have not actually controlled the work and actions of the scientists. Rather, they are merely constructions which have been used in order to bolster the esteem or privilege of the discourse surrounding the accidents. But the point to note is that Foucault does not actually engage in the (ontological) debate about the existence or otherwise of the essences. Instead he changes the subject and examines the social functions that such concepts have played, in practices such as economics, technology, sociology, politics and sociology. His concern is to uncover what it is in 'social forms that makes the regularities of science possible' (Foucault, 1974).

As Rabinow (1991, 4) explains, 'For Foucault, there is no external position of certainty, no universal understanding that is beyond history and society. His strategy is to proceed as far as possible in his analyses without recourse to universals. His main tactic is to historicise such supposedly universal categories as human nature each time he encounters them.'

In other words, Foucault never allowed himself to be pinned down on the issue of whether universal laws or foundations exist. He just avoided it. He never produced any compelling arguments against the existence of foundations or

essences. He simply employed the technique of deconstruction to show how mischievously such notions were regularly used.

Hence, social constructionists who invoke Foucault to show that there is no ontological reality beyond our social constructions are quite mistaken. Foucault's concern was to critique social constructions wherever they occurred, whether or not they could reasonably be seen to be groping toward an essential reality.

The enterprise of this book includes Foucault's concerns but goes beyond them. We are indeed concerned to expose the damaging effects of socially constructed realities - in the social sciences and in our culture in general. But we are also concerned to respect and preserve those other realities whose existence we and the people in our pastoral care benefit from.

Derrida and the circularity of deconstruction

The discerning reader may have noticed there is a strange circularity to the general shape of social constructionist and deconstructionist thought. On the one hand, these writers are challenging the notion that the realities formed by human language have an ontological, truth status. Yet on the other hand they are putting forward a point of view as if it is true - or at least, as if it is closer to the truth than the world view they are challenging. Their very act of engaging in this debate demands of them the assumption that there is essential truth. Jacques Derrida, the father of deconstruction, was very much aware of this. He admitted that deconstruction could not proceed *without* essentialist (structuralist) assumptions. He declared:

... the movements of deconstruction do not destroy structures from the outside. They are possible and effective, nor can they take accurate aim, *except by inhabiting those structures...* Operating necessarily from the inside, borrowing all the strategic and economic resources of subversion from the old structure, borrowing them structurally, that is to say without being able to

isolate their elements and atoms, *the enterprise of deconstruction always in a certain way falls prey to its own work* (Derrida, 1976, 24; my italics).

This is not only an admission that deconstruction can only function by borrowing from essentialist structures, but that in doing so it ultimately disqualifies itself.

One can see this graphically in our discussion, in chapter one, of the inherent contradictions in academic texts. This book itself has the form of an academic text. It is impossible to critique the essentialism of academic texts, in an academic text, without falling prey to the same essentialism. This is a problem social constructionists have to live with - not because of any internal inconsistency in social constructionism as a position, but because virtually the only means available to us to promote our ideas are the media already established by a world committed to essentialism. This will become clearer as we consider notion of ‘conversational realities’ in the work of John Shotter.

Essentialism in social constructionism

Shotter (1993) provides an alternative approach which manages to hold essentialism and social constructionism together, and in so doing offers a new foundation for the scientific study of psychology. Shotter observes that the personal, moral, and social realities people deal with in everyday life are constructed in their *ordinary conversations* with other people. These realities are not presented to us as abstract, essentialist theories about life, but emerge and arise in the discussions, interactions and conversations we engage in. In Shotter’s words:

For let me state what seems to me to be the undeniable empirical fact which a natural scientific psychology has consistently ignored: the fact that our daily lives are not rooted in written texts or in contemplative reflection, but in oral encounter and reciprocal speech. In other words, we live our daily social lives within an ambience of conversation, discussion, argumentation, negotiation, criticism and justification; much of it to do

with problems of intelligibility and the legitimation of claims to truth.
(1993: 29)

For Shotter, then, the most basic truth about human beings is not the (Freudian) Oedipus complex, not the (Gestalt) perceptive apparatus, not the (Rogerian) congruent person, not the Parent, Adult and Child of Transactional Analysis, all of which are abstractions one or two steps removed from what we actually observe human beings, as individuals, to be doing, but the meaning-making, reality-creating conversational activities which people engage in *together* as the social bread and butter of their lives. Shotter notes that it is in such conversations that we, together, negotiate meanings of words, agree on what is true for us, and create abstractions which become reality for us.

Shotter draws heavily on the work of the Russian Vygotsky (1978), who set out to show that all the 'higher' functions of language originate as actual relations *between* human individuals. In other words, all our grandiose claims about the essential nature of the universe and the human 'psyche' have their origin in the haphazard, hit and miss process of people talking to one another and creating meaning together.

Shotter accepts Wittgenstein's view that the abstract realities we tend to conceive of as 'out there' are realities created by us in the 'hurley-burley' (Wittgenstein's phrase) of our common, everyday conversations. We fool ourselves if we think all these realities we are talking about are already there, waiting for us to grasp and describe. These realities exist in our language, in the social and cultural context in which we converse and make meaning together.

Further, Shotter is saying that this phenomenon is *observable*. An alert observer would notice it, in the same way that an alert scientist would notice the rumblings of an immanent volcano. It is an 'empirical fact,' of the sort of material science is meant to observe and reflect upon. Shotter is not saying

psychology is wrong to observe human beings and seek to make generalisations about them. Rather, he is saying psychology has missed the most basic fact about human beings - that they create their reality together in pairs and in threes and in larger groups, through their conversational interaction.

The basic human reality, then, is not one person alone, but two or more people conversing and interacting together in community. This is the basic unit psychology should study. It is empirically incorrect to found psychology on the study of the individual.

What Shotter is saying has profound, far-reaching implications. In one sense it softens the social constructionist critique of psychology considerably. It allows for psychology as a discipline looking for general truths about human beings, and in this sense it is 'essentialist,' in the spirit of the Enlightenment. At the same time, however, it completely overturns the particular basis on which the empirical study of psychology is founded - the individual human being. It claims human beings function as human beings only in community, and one of their most basic activities is the construction, through conversation, of (socially constructed) realities.

This is a very rich blend of the social constructionist and the essentialist. The starting point is our observation of people - in a sense in the detached, objective, empirical mode of the scientist. We immediately see, however, that people function in groups, not as individuals, and that their most basic activity is the creation of (socially constructed) realities. Hence, to be consistent with our findings, our own comments on our observations of these people must be negotiated within our own community, so that we engage in the same activity we find them to be engaging in, namely, making meaning together. This is a remarkable synthesis. The essentialism in the argument is entirely dependent on the social constructionism, and vice versa.

Knowing the personal and the impersonal

Before we draw together the threads of this discussion there is one more issue to consider: the distinction between personal knowing and objective knowing. As we saw in chapter one, one of the foundation stones of the ‘hard’ scientific approach is its ideal of the detached, objective observer. The scientist abstracts himself as much as possible from having any effect upon the thing observed, so that he can see it in its purest, most unmolested form. As we saw, it is never possible to remove every last trace of the scientist’s influence from that which he is observing, but there is a general acceptance (apart from in quantum physics and relativity theory) that this ideal should be striven for. This detachment is often called the ‘subject-object dichotomy,’ or ‘Cartesian dualism’ - the dualism of observer (subject) and observed (object) - after Rene Descartes, the philosopher who provided a rationale for it with his *cogito ergo sum* - ‘I think, therefore I am.’

Following the physical sciences, psychoanalysis and psychology were founded on this ideal. The scientist assumed she could get to know what a human being is by standing detached from the person as much as possible, and observing him or her from a neutral, detached position. But common sense tells us we cannot really know a human being like this. To know a human being you have to engage with her personally, let yourself be known to her as she reciprocates to you. You cannot know her if you relate to her as an object, an ‘it;’ you have to enter into a reciprocal relationship in which you are ‘I’ and ‘thou,’ in which neither of you is an object under observation but both are ‘I-subjects.’

In the more mechanistic models of therapy critiqued by White (Epston and White, 1989: 16), the therapist frequently relates to the client as would a detached observer to an object. Even therapists from more aesthetic traditions can slip into relating to their clients in this way, as Neal (1996) shows. Whenever we use pathologising and objectifying language of our clients, or when we recruit our clients into speaking of themselves in this way, we are

treating them not as I-subject but as object. Narrative therapy is right to abhor this practice - which is clearly a 'practice of power.' Foucault was right to express such concern about this and similar practices in the human sciences. Perhaps the greatest attribute of narrative therapy is that it stubbornly refuses to relate to the client as object. The client's problems are externalised and objectified, unique outcomes are amplified in their objective content, but the therapist is committed to relating to the client herself as I-subject from start to finish.

Concluding

Let us now draw these ideas together to see what kind of basis there might be for promoting and practising narrative therapy in a Christian context. To begin with, I have suggested it is legitimate to think of an ontology of certain orderly truths underlying the contingent world, provided we do this cautiously and with solid criteria for checking the reasonableness of these claims. The 'truths' we deal with in the sciences are indeed social constructions, but that does not mean that all of them are *merely* social constructions. Some of our social constructions may be nearer to the truth than others; some may be merely metaphors running out of control; still others may be nothing but the most oppressive practices of power.

One social construction which we may claim points to an ontological 'truth' is the assertion that the primary material for legitimate psychological study is not the individual person, but persons making meaning together in their ordinary, everyday conversations and interactions. It is in this activity that we become who we are. *Ein Mensch ist kein Mensch*. No man is an island.

Further, the relationship of therapist to client is a relationship of this sort - two people (or more in the case of family and group therapy) making meaning together, discussing, negotiating the meaning of words, creating realities which help them achieve their aims within the encounter. It is the encounter of 'I' and

‘thou,’ which becomes a oneness that is the unit of reality which is psychologically significant. In this context, toxic stories are uncovered, deconstructed and externalised, and new, helpful stories are co-authored by therapist and client together.

The therapist herself belongs to a community of helping professionals who encounter each other and create their own sets of meaning, their own social constructions, in the course of achieving the social goals of these relationships. The social constructions they create (theories of personality, replicable counselling interventions) are subject to the criteria outlined above insofar as they claim to be ‘true.’ One of these theories concerns the cognitive constructivist ideas inherent in narrative therapy’s view of the person as constructing his or her world through stories. This theory is treated by narrative therapists as if it is ‘true,’ ontologically founded, of the essence of the world. As such, it must be open to challenge, and ways must be found to keep this claim open to ongoing critical scrutiny.

This approach, it would seem to me, can provide a firm basis for narrative therapy in a context where we do believe in essentials and foundations, where we want to be able to say that one thing is true and another clearly false, yet we also want to say that most of the realities that influence us in everyday life are social constructions.

With regard to our faith in God, we need to admit that our theological claims are social constructions. This does not necessarily disqualify them. Rather, it shows they fulfil a legitimate role within our community of faith. Inasmuch as we open our faith claims to the scrutiny of the wider community, their legitimacy is enhanced.

But if we take social constructionism seriously we must also check our religious discourse - the words we use and claims we make about God, morality, social

justice and spirituality - for the effect it has on the community in which it is spoken. In what ways is our religious discourse a practice of power? Whom does it privilege, and whom does it marginalise? How do its stories benefit others, and how do they become toxic and rob people of their freedom and happiness?

These kinds of questions are inevitable if we invite narrative therapy, and therefore social constructionism, into our churches. In my view the time for this invitation is now.

Chapter Four

Toward a Pastoral Narrative Therapy

This chapter offers a way of incorporating narrative therapy into the Christian endeavour, and shows how the resulting synthesis can provide an effective basis for counselling in a pastoral context.

As was maintained in chapter two, there need not be any outright contradiction between narrative therapy and Christian belief. Social constructionism and deconstruction do not discredit essentialist thinking, either in ethics or ontology. Rather, they are a very powerful tools for critiquing the function, role and effects of discourses of all kinds in society and culture.

Further, Christianity has a natural point of contact with narrative therapy in its *love of stories*. The Christian and Hebrew scriptures are replete with stories. The Christian Gospel is itself a story - of the birth, ministry, death and resurrection of Christ, who was himself a prolific story teller. The Church tells yet more stories, of its two millennia of life, its heroes of faith, its mistakes and its revivals. The discipline of preaching includes the art of story telling.

Indeed, the Church itself has recently been reviving its story-telling basis through the burgeoning new field of *narrative theology*. Hints of this new movement came as early as 1941, with the publication of H. Richard Niebuhr's groundbreaking essay, 'The Story of our Life' (Niebuhr, 1941), which came to be seen as 'one of the key focal points for this discussion of narrative' (Hauerwas, and Jones, 1989). By the 1980s, narrative theology had become a recognised force in mainstream Christian theology (e.g. Stroup, 1981; Goldberg, 1982; Hauerwas and Jones, 1989). This is a very broad and diverse movement, which looks at

theology as story from many different perspectives. Central to it, though, is the idea that the reality which Christians call God may be best appreciated when we explore the role of storying in our lives, faith, thinking and endeavours.

Narrative therapy is therefore predisposed to fit comfortably in a pastoral setting, provided some of its more extravagant (and less tenable) claims vis-à-vis deconstruction are answered. However, it is possible to integrate narrative therapy even more thoroughly with Christian belief, in such a way as to enliven and enhance this therapy's effectiveness.

For the pastor or Christian counsellor, the client's religious views are very important because they constitute, or at least inform, the client's values and world view. In a historically 'Christian' society such as western culture, the values and world view of most churchgoers are not that much different from those of the broader culture. However, because church attenders generally do take their religion seriously, they usually have a significant faith experience which can provide a positive, empowering centre to the growth they are embarking on. The pastor also has available the entire data of the Bible to make use of in helping the client move and grow toward a more satisfactory life. This includes the stories in the Bible, biblical metaphors of personal growth, the insights of psalms and proverbs, theological and philosophical discussions, as well as the array of interpretive frameworks in the Bible itself and in use or used by the Church throughout its history.

Recovering some forgotten biblical knowledges

In the following discussion I will present a particular set of biblical landscapes which, when afforded a meaning and significance that seems to be implied in them, are proving extremely helpful for the development of a pastoral narrative therapy. The pattern of thinking represented by these landscapes is very ancient. Its roots go back at least as far as Psalms written some 700 years before Christ, and it is very prevalent in the first century writings of Paul and in those attributed

to Paul. It is not an outlook which churches use much today, for reasons which could have to do with this outlook's incompatibility with modernist assumptions about human functioning, which have become widespread in western society (Parker, et. al., 1996, 1-17) and hence in the western churches. In the deconstructionist language of Derrida and Foucault, it represents a (somewhat) 'repressed knowledge,' a knowledge which twentieth century discourse regarding the nature of human beings has pushed to the margins. I will now attempt a brief Foucauldian 'archaeology of history' in order to bring to light this (somewhat) repressed knowledge.

To undertake this project we must first rediscover the very common biblical word 'sin,' as this word is a key factor in the vocabulary of this repressed knowledge. This word is popularly abhorred today, as it seems to represent a negative, judgmental and condemning attitude. But the most common New Testament Greek word which we translate 'sin' is *hamartia*, which the Greek-speaking Christians used to translate the Old Testament Hebrew *chata*. This word has its roots in archery, and means 'to miss the mark.' To sin is to fail to hit the target - to fail to do or achieve what one was aiming to achieve in the sphere of personal or ethical conduct.

So the word sin is not so terror-ridden. Almost everybody who presents for counselling does so at least partly because they are failing to achieve what they want to and what they think they should achieve. They come because they know they are missing the mark.

Another key New Testament word is 'evil.' Again, this word has dreadful connotations today. But it simply means, that which damages and impoverishes the lives of persons, the community and the earth.

With this in mind we turn now to an explication of the repressed knowledge.

Forgiveness, separation, problems, sin and externalisation

One of the central strategies of narrative therapy is the externalising of the problem. The problem is objectified, given a proper name, and spoken of by the therapist as if it lives and belongs outside the person. The point of this strategy is to enable the client to dis-identify with the problem - to see himself as different from and ontologically separate from it.

A New Testament equivalent of ‘the problem’ (in this sense of the word) is ‘sin’ - missing the mark, failing to achieve what one wants and thinks one should achieve. It is popularly understood that the New Testament's remedy for sin is forgiveness - that God has forgiven us of our sin. The New Testament does, indeed, proclaim this forgiveness, but not very prolifically. Indeed, in all the writings of and attributed to Paul, God's forgiveness of human sin is only mentioned explicitly five times. This may sound surprising because the Church today proclaims the healing of the relationship between God and humanity primarily in terms of forgiveness of sin. On the other hand, this notion is rather weak because it does not imply any *removal* of sin. If forgiveness is the primary remedy, then the person who is forgiven may still be conceived of as having the sin in her. It has been forgiven but it is still part of her.

We can see how compatible this ‘forgiveness’ notion is with modernist⁴ views of personality, such as those promulgated by Sigmund Freud. The ever-present *neurosis* or *psychopathology* in the person according to Freud (Freud, 1901) parallels the ever present *sin* in the person according to Christians. As both neurosis and sin are destructive and limiting of personal fulfilment, it has been easy for Christians to blend their sin-forgiveness model of humanity with modernist psychopathology models (e.g. Tournier, 1957, 60). Other New

⁴ . In using the word ‘modernist’ here, I am referring to the world view which emerged from the Enlightenment, as compared to a *postmodernist* world view which is associated with the social constructionist critique of the assumptions of the Enlightenment. I am not indicating the modernism that is decried by some fundamentalists as the opposite of religious conservatism. Indeed, fundamentalism is itself shot through with modernist (i.e. non postmodernist) assumptions.

Testament models of the healing of the human being and her relationship with God have been repressed by the prevalence of these modernist models in our culture.

Separation models

In the New Testament, however, a different group of models is far more prevalent. These models can be described under the metaphor of *separation*. Often employing very vivid imagery, they proclaim that, through the work of Christ, persons have been *separated* from their sin, and that this separation is the basis of the healing of persons and of their relationships with humanity and God. Persons have not been merely forgiven of their sin. It has been *taken away* from them. They no longer have to identify with it. Instead, they are invited to identify with the (sinless) person of Christ.

There are two distinct types of separation image in this respect in the New Testament. The first may be described as *ontological* and the second *practical*. In the ontological separation images, the person is seen as ontologically distinct and separate from his sin, whether or not any appreciable behaviour change has occurred. It is as if the sin has been excised from the person, and a wedge driven between the person and his sin. In the second type, the person is exhorted to effect a behavioural separation of himself from his sin in the actual living of his life.

Ontological separation images

In Colossians 2:14 Paul talks of persons' sin as a list of debts which has been *nailed to the cross of Christ*. As the cross is far away from Paul's readers in space and time, the obvious implication is that they are radically separated from their sins.

Paul also uses the analogy of *baptism* as a separation image (Romans 6:1-11; Colossians 2:12). Baptism was originally a total immersion of the convert in

water. Paul uses this analogy to suggest that our 'old self' been left behind in the water, and we have been raised to life away from it. As the physical act of baptism was such a memorable and normative experience for the early Christians, this image would have been easy to identify with.

Another ontological separation image is Paul's analogy of the *new creation*, in 2 Corinthians 5:17. 'Therefore, if anyone is in Christ, there is a new creation. The old has passed away; behold, all things are made new.' The old - i.e. that which is destructive or sinful in the person - has *passed away*, or been removed from the person, who has been made new.

Another image is that of *transference between realms*. The person has been transferred from the realm of darkness, into the kingdom of Christ (Colossians 1:13-14). This is slightly different from the other separation images, in that here the person has been taken away from the sin, rather than the sin from the person. But the effect is the same.

Indeed, it has been pointed out that in Paul's theology, human redemption was seen primarily in apocalyptic terms, whereby humanity is dramatically and decisively transferred from a corrupt, degraded realm into Christ's realm of goodness and light (e.g. Rowland, 1988, 66 ff). This image could conceivably also provide a basis for pastoral counselling. However, it would need a counselling method which fitted in with such imagery, and it is difficult to conceive what such a method would be. In general terms it is probably easier for a person to visualise herself staying stationary while her problem moves away from her (as in externalisation), than to visualise herself switching between realms.

A very vivid separation image is given in the Pauline-like epistle to the Ephesians, chapter 6. Here the person is likened to a Roman soldier in full battle dress, standing firm against the attacks of the enemy. The soldier represents the

ordinary follower of Christ, seen here as good, noble and pure hearted. Sin and evil are represented by ‘the flaming arrows of the evil one’, which are coming at the soldier from outside. The person's task is to use his or her armour and weapons to fend off these attacks. The armour and weapons include such devices as faith (the shield), the Word of God (the sword), and personal integrity (the breastplate). The clear assumption behind this image is that the person has been radically separated from her sin, which she may now see as intruding upon her violently from without.

Separation images are also to be found outside the writings attributed to Paul. In John's Gospel, John the Baptist sees Jesus and says, ‘Behold the lamb of God, who takes away the sin of the world’ (John 1:29). The world's sin is not merely forgiven but *taken away*. This passage has particular significance for Christians because it was long ago incorporated into the communion liturgies of all the major denominations (the *Agnes Dei*). While the threefold repetition of this verse was probably first introduced by the Roman bishop Symmachus in the 6th century, its incorporation in the communion liturgy could be as old as the Christian Church (Cross & Livingstone, 1974, 25). It is spoken or sung at the crucial moment immediately after the bread and wine have been blessed, before the people partake of these elements. Ironically, although modern Christians converse far more of the forgiveness of sin than of separation from sin, this latter repressed knowledge is spoken loudly by them or their priest every time they have communion!

Another separation image is found in the final book of the New Testament, the Revelation to John (Revelation 7:14). Here we see a picture of martyrs standing before the throne of God, their robes sparkling white, having been ‘washed ... in the blood of the lamb.’ The sacrificial lamb - Jesus - bled on the cross for their sins. These sins have been *washed away*, as dirt out of a garment.

The prevalence of separation images in the New Testament has its roots in the doctrine of the atonement - the notion of Jesus effecting a remedy for our sin by his death on the cross. In some effectual sense, the early Christians believed, Jesus took our sins upon himself and suffered the consequences of them for us. This is a central tenet of the Christian faith. Nevertheless, this mode of effecting the separation of the sin from the sinner was anticipated hundreds of years earlier in the 'servant songs' in the latter portion of the Old Testament Book of Isaiah, dating from the 6th century BC. In describing the role of the suffering servant the prophet reports, 'The Lord has laid on him the iniquity of us all' (Isaiah 53:6). Our sin has been taken away from us and laid upon the suffering the servant.

The notion of being separated from sin is indeed ancient. In the earlier parts of the Book of Isaiah, dating from the 7th century BC, King Hezekiah gives thanks to God, saying, 'You have put my sins behind your back' (Isaiah 38:17). This is an extravagant separation image. Hezekiah's sins are absolutely and finally separated from him, lying behind God's back, where he can no longer get at them and God cannot see them.

Another ancient separation image comes in Psalm 103:12, from the 7th or 8th century BC: 'As far as the east is from the west, so far does he remove our transgressions from us.'

This brief archaeology of knowledge shows that one very common biblical view of the basis of the remedy for sin (with its attendant guilt and disfigurement of the person) was that God had separated us from it. It had been taken away from the person. It no longer belonged to or was accounted as part of the person.

Sinners become saints

This leads directly to an important corollary: the person is now a saint, holy, blameless and noble. When Paul addresses Christians - those who have accepted

the separation of themselves from their sins through the sacrificial work of Christ - he generally does so with lavish and extravagant epithets of nobility and goodness. They are 'saints;' they are 'holy and blameless before God;' they have been given 'every spiritual blessing in the heavenly realms;' they are 'children of God' (e.g. Ephesians 1; Colossians 1, and the opening paragraphs of most of Paul's letters).

Now that the person has been separated from her sin, she herself is seen only in terms of nobility, worth, and value. It is not that her behaviour automatically *becomes* saintly. Rather, she is invited to *identify* with the person of Christ, and *dis-identify* with her sin. This is merely the beginning - but a profound and radical beginning - of a lifelong journey of growth in character.

Paul takes this yet another step in Romans 8, the pinnacle of his great treatise on redemption. At the conclusion of this chapter he proclaims in extravagant tones that nothing can ever separate us from the love of God in Christ Jesus (Romans 8:31-39). It is as if in our pre-Christian state we were intricately bound up and identified with sin and evil, and separated from God. But now a wedge has been driven between us and our sin; we have been declared holy and blameless; and we have been joined to God so intimately that nothing can separate us from the divine love. The wedge of separation has shifted. Previously it was between us and God, while we were identified with our sin. Now it is between us and our sin, while nothing can separate us from God's love.

This is not to suggest, of course, that we are magically transformed into a person who never does any more wrong, or is never again tempted. Rather, it is a series of pictures or images that enable us to dis-identify with destructive tendencies that we sometimes or often act out, and see these as alien to us and seeking to invade us - rather than as so much part of us that we have no elbow room to move against them.

The separation image and therapy

In doing narrative therapy in a pastoral context the imagery of separation from sin provides a powerful and empowering backdrop to the externalising of problems. The pastor has a vivid ontological model to offer the client as she helps him externalise the negative, destructive forces which bedevil him. She has at her disposal a range of biblical images of separation, which the client is already familiar with through his knowledge of the Bible. These can sharpen up his sense of separation from the problem and give the externalisation the sense of an ontological and spiritual framework. Although it has been necessary to use the word 'sin' in this explanation, it is not usually necessary to use it in this kind of counselling. The Christian client is usually well aware that externalised problems such as 'Negativity,' 'Pessimism,' 'Anxiety Attacks,' 'Bad Temper,' and 'Self Blame' are driven by destructive, evil force. In my counselling of Christians I use words of this type (generally negotiated with or suggested by the client) to name problems, but often set these within the context of the biblical separation images to help the client get a clearer picture of a way of dealing with them.

Personal responsibility

The sin-separation model also has implications for the question of personal responsibility. With a modernist approach to personal difficulties, the difficulties are seen as a fault in the mechanism or an illness in the organism, and the danger is that the person can identify too strongly with their problem. The problem is part of them, inextricably wired into who they are. Not only does this compromise their belief that they can throw off the problem, it can also provide them with an excuse for acting it out: 'It's part of me; I can't help it.' But the sin-separation model shares the advantage of other externalising models, that the person not only gains hope from the concept of the problem being outside of and distinct from her, but also sees herself as responsible for keeping it out. This is not to say she will *always* succeed in keeping it out. However, with externalisation and the sin-separation model, her agency in working against the

problem is aroused, and she can loathe and work against the problem without loathing and working against herself.

The sin-separation model can enliven and energise this process, as it is seen as a *moral* contest, appealing to the very best characteristics of the person - her nobility, courage, will-power, faith, and perseverance. These are biblical terms and concepts, which the client already admires and aspires to. If the counsellor draws these into the discussion, they carry with them the value which the client already ascribes to them, and can therefore be very powerful motivators. The 'practical separation images' can also have this powerful motivating effect.

Practical separation images

The Christian may understand himself as separated - ontologically - from his sin. He now has to act out this separation. Once again, the Bible offers a helpful range of appropriate images and metaphors.

One such metaphor is in Hebrews 12. The writer appeals to Christians, 'Therefore, since we are surrounded by so great a cloud of witnesses, let us lay aside every weight and sin which clings so closely, and let us run with perseverance the race that is set before us, looking to Jesus the pioneer and perfecter of our faith' (Hebrews 12:1-2a). The image is of the person running a race as an athlete in a stadium, surrounded by cheering witnesses. Like a runner who is carrying too much weight, the person is exhorted to 'lay aside every weight and sin which clings so closely.' We may already be ontologically separate from these sins and burdens, but we have to make the effort to separate ourselves from them *in practice*. An image such as this can help a client get a picture of herself in relation to his ongoing task of keeping the problem out of her life.

Another image of ongoing, practical separation, with very ancient roots, was that of 'repentance.' This is introduced in the New Testament story by John the

Baptist, and later adopted as central in Jesus' preaching. People are called to 'repent, for the kingdom of God is at hand' (e.g. Mark 1:14-15). The word 'repent,' like 'sin' and 'evil,' has been repressed in the modern world because of its apparently judgmental ring (apart, of course, from some fundamentalist churches which tend to make capital out of a judgmental approach). But the root idea of repentance is simply to make an about turn - to turn away from sin and evil, leave these behind and head off in another direction. Again, this is an image of separation in practice from our sin. It assumes we are already separated from it ontologically, and exhorts us to effect this separation in practice. It is not such a helpful image in counselling as that of the athlete of Hebrews 12 as, even among Christians, the word 'repentance' is clouded by judgmental connotations. However, it could be useful in situations where a person is finding it difficult to muster the motivation to turn aside from a behaviour that is damaging of others - as in physical abuse. It could also be helpful where the client is ready to make a change but feels guilty about past mistakes. The pastor can remind the client that repentance is always followed by forgiveness.

The Roman soldier image (above) also doubles as a practical separation image. Not only does it provide a picture of the client dis-identified from her externalised problems. It also pictures her waging war against them, keeping them from intruding on her.

Another practical separation image is the 'change of garment' in Colossians 3:1-17. This passage contains a jumble of mixed metaphors, including both ontological and practical separation images. Simplified, the person is exhorted to take off their old, sinful nature as one takes off a dirty old garment, and put on the new nature which reflects the character of Christ. The old nature includes such destructive behaviours as 'wrath, malice, slander, lying, fornication and covetousness.' The new garment is 'compassion, kindness, humility, patience, forbearance, love, and mutual encouragement.' The image of taking off a soiled garment might be useful in helping a person keep the externalised problem at

bay. Putting on the new garment can serve as a picture of the person identifying with the new stories that are formed around unique outcomes.

A further image, intermixed with this one in Colossians 3, is that of putting the old nature to death. First, Paul uses the ontological separation image of the person's sin having died and been buried, while the person himself has been 'raised to life with Christ.' Paul then exhorts the person to 'put to death' his sins in practice. This was a very striking image in a culture which often witnessed executions. The person is to execute the externalised sin/problem, not merely to keep it at bay but to deal it a death blow.

This and the above images should not be seen as guarantees of success against sin in every instance, but as strong, motivating hyperboles. For example, the latter image is particularly vivid and can sound brutal to our 21st century ears. But it is quite appropriate for a problem that is intent on harassing the person, destroying their happiness and compromising their relationships. It is my experience in using narrative therapy that a moment of choice or decision often comes at the point where a problem has been externalised, unique outcomes have been located and storied, and the client now has an alternative self-narrative to the problem-saturated one. Frequently at this point the client is confident of being able to run with the new story, but unsure whether they want to. The old story, despite its destructiveness, provided a certain security and an identity the client was familiar with. In counselling Christians at such points of decision I have noticed that the Christian belief in the evilness of evil, the sheer depravity and destructiveness of sin, sometimes acts as a spur to the client to turn hard against it and embrace quite vivid imagery in the commitment to keep it out. Bill O'Hanlon (1994) observed that the imagery clients use in support of their efforts to ward off the problem seems often to come from the therapist. 'When I asked David Epston why his anorexic clients speak so often about being in concentration camps and under death sentences, when not a single one of mine do, he very sincerely told me that his clients came up with those metaphors. But

as I watched videotapes and read transcripts of this work, I saw time and time again the moment when the therapist introduced a metaphor or some new language to the client' (O'Hanlon, 1994, 28).

But there need be nothing wrong in offering the client appropriate metaphors, especially in light of the fact that the process of keeping at bay an externalised problem is not one that most people are familiar with, let alone practised at. The separation images in the Bible were designed to help people keep their sins at bay; they are mostly vivid and strong, and are likely to have a familiar and safe ring to the Christians whom the pastor is counselling.

Another level of images

Christians also have at their disposal another set of images to do with evil: those which speak of demonic-type entities. Unfortunately, some branches of Christianity seek to make capital out of spreading a fear of demons and devils, and can cause severe trauma by leading their converts to believe they are demon-possessed. But, outside of that milieu, demons *as symbols* can be very useful. In Bill O'Hanlon's article on narrative therapy (1994), there are three cartoon drawings of such a creature. In the first, the client is externalising his problem, which is represented as a demon-like creature made up of the client's words. The second cartoon depicts a tussle between the client and the demon/problem, and in the third, the client is triumphantly jumping on the dead demon.

I often use the words 'bogey' and 'gremlin' as a category description of the externalised problem, especially with young people. These words are less formidable than 'demon,' yet carry the same connotations of free agency, evil intent, and malevolent intelligence. In letters to clients the tactics of these creatures can be discussed and disclosed. In one situation, where a client was at a crucial point of decision, I wrote a letter to a her which purported to be a communication I had intercepted from the Chief Gremlin to the gremlin who harasses her, giving him instructions on how to destroy all the good work she had

been doing (see chapter 4). She reported that the letter had a profoundly empowering and healing effect.

Another client, a nine year old girl, who was deeply into the habit of switching off when her mother spoke to her, named her externalised problem as ‘Mr Mind-Blank.’ She later drew a picture of Mr Mind-Blank, who looked remarkably like an over-fed demon.

These kinds of images, used carefully, can enhance the counselling process and provide extra avenues of empowerment for the client.

Deconstruction and separation from sin

In this approach to externalisation I have not yet discussed the question as to what, exactly, the externalised problem (or separated sin) actually *is*. In their most recent publications, narrative therapists (Freedman & Combs 1996; Monk, et.al., 1996) tend to identify the externalised problem *entirely* with unhelpful discourses from society and culture. According to these therapists, these discourses have been appropriated by the client and are thus the source of her problems. Now that they have been externalised (i.e. ‘deconstructed,’ in the parlance of these writers), the client is free from their grip and can work against them (see also Drewery & Winslade, 1996).

It is plain that many problems are, indeed, generated by the unhelpful effects of discourse. For example, Tim Harker offers a case study of an adult male survivor of childhood sexual abuse (Harker, 1996), much of whose difficulty with life was incited by his uncritical acceptance of the cultural pressure upon men in New Zealand to live up to a macho male stereotype. This ‘discourse’ led him to put himself under the ‘normalising gaze’ of a culture which demanded he be what he could not be. Harker's counselling of this man included deconstructing this discourse, externalising it and helping his client to dis-identify with it and resist its promptings.

Many of the problems we experience function in a similar way. We embrace discourses about the shape of the ideal body, the 'correct' family configuration, the social expectations of a 'cool' person, the alleged morality or immorality of our habits and preferences, the rights and privileges of the husband over the wife. But there are other human problems which do not seem to function this way. For example, it is not always easy to see how problems such as temper tantrums, the habit of stealing, or an overly nervous disposition - all of which can be alleviated by externalisation - could be the effect on a person of discourses from the prevailing culture or subculture. In his early work, Michael White reports his counselling conversations with a small boy whose problem is incontinence. He externalises the problem as the character 'Sneaky Poo' (White 1984), who intrudes on the boy's life and leads him to soil his pants or bed-clothing. It is difficult to see how such a problem can be conceived of as a social construct or discourse - and White does not claim it is. Indeed, White (e.g. Epston & White, 1989) does not seem as convinced as the later narrative therapists (Freedman & Combs, 1996; Monk, et.al., 1996) that *all* problems are social constructs and that externalisation is always a form of deconstruction⁵.

This raises the question as to the role of discourse in the problems I as a pastor am externalising by means of the separation-from-sin metaphor. Does the 'sin' consist entirely of socially incited constructs, or does it, at least to some extent, originate from the person himself? When we externalise bad temper and call it 'The Temper Gremlin,' we may visualise it as a gremlin attacking from outside, and we might find a significant socially sustained narrative associated with it, which incites angry performances at times. But we may also feel that part of the problem is beyond our powers to describe in terms of a socially sustained narrative, and that the individual's personal responsibility for it is an appropriate

⁵. Drewery & Winslade (1996) comments, '... in the narrative literature, the notions of externalising and deconstruction are sometimes used interchangeably. Our discussion is intended to augment understanding of, and to some extent to challenge, this limited usage.'

framework to deal with it at the time. I have argued elsewhere that in the Bible and in Christian tradition, sin and evil are seen as both social and individual in origin (Galvin, 1986). Of course, it is problematic to speak of ‘an individual,’ as every human being is born into a society and culture, and develops and sustains their language, personality, outlook and attitudes fully immersed in that culture. An ‘individual’ is certainly very much a localised expression of an interactive and inter-fusing societal and cultural web, as we saw in the work of John Shotter (1993) in chapter two. Nevertheless, some of the problems a client presents with simply do not fit realistically with the notion of narrative or discourse which can be deconstructed, but can nevertheless be externalised..

This raises a further question: if we are externalising features of a person's behaviour, are we not then somehow splitting up the person into parts we approve of and parts we disapprove of? And if the externalised part cannot be dis-embodied by identifying it with societal discourse, what is to be done with it?

To begin with, the idea of approving some aspects of a person's behaviour and attitude, and disapproving of others, is very common within Christian tradition, being at least as old as St Paul (see, for example, Paul's inner struggles in Romans 7). The strength of externalisation is that we are enabling the person to dis-identify with the problem and identify instead with other aspects of their life (which may have been forgotten up to this point) which will help them stand against the behaviour or attitude they have chosen to move away from. Even if the problem were sourced within the person himself, we may still externalise the person's problem-saturated self-storying, look for unique outcomes which contradict it, and develop these into new stories with which the client may identify, to his benefit.

And where do these externalised problems go? The Bible is rich with imagery. I often encourage clients to think of their externalised problem as nailed to the cross of Christ (see above). The cross of Christ is a very dominant image in the

Christian Church, and is seen virtually universally as a repository for that which we wish to leave behind. Images such as this give people somewhere to ‘put’ their externalised problems, in instances where these cannot be seen as discourse which originated outside of them.

Further aspects of pastoral narrative therapy

Using images such as those outlined above, in the context of a framework of radical separation from and therefore dis-identification with our sin/problems, pastoral narrative therapy may proceed along much the same lines as secular narrative therapy. Unique outcomes are located and storied, further new stories are created out of apparent thin air through the use of past- and future-prediction questions. New stories are thickened up and new successes are experienced, reported and storied in.

There are, however, some further applications for a pastoral narrative therapy.

Primary health care

The pastoral minister has the advantage of also being a preacher. Every Sunday he or she stands before the congregation and expounds some aspect of the Gospel. The framework outlined above lends itself to preaching. It draws on biblical stories and images; it is relevant to everyday life. The (greatly under-used, if not altogether neglected) separation metaphor, recovered and explicated, can be seen to impinge on a wide range of Christian themes and beliefs. The same is true of the notion of story as constitutive of reality.

Since my own beginnings with narrative therapy I have sought to integrate these ideas into my weekly preaching. Some typical sermons, which draw on narrative ideas to a greater or lesser extent, are given in Appendix 1. It will be noticed that the term ‘narrative therapy’ never occurs in these sermons. This is not necessary. The preacher's task is not to promote one particular type or technology of counselling. Rather, I have simply expounded the themes or biblical passages

with the new understanding in mind which is informed by my own personal dialogue between narrative therapy, social constructionism and theology.

This type of preaching has resulted in the congregation becoming generally conversant with key principles and outlook of a story-centred approach to personal growth and problem-solving, enhanced with notions of externalisation or separation from sin. Three discernible effects are already apparent. Firstly, parishioners whom I am counselling pick up on the processes of externalising, locating unique outcomes and re-storying quite quickly. Frequently they comment, 'It's like you said in your sermon.' I hear them using terms and expressions - in particular the term 'bogey' for an identified problem which could be externalised - without having to introduce these in counselling.

Secondly, I find that some people are applying the insights from the sermons directly to their own personal growth issues. Often such people do not see themselves as having 'problems' which require pastoral counselling, but are simply being enriched in areas of new growth. This was particularly noticeable after the sermon on death, loss and bereavement, when a number of people who had been widowed for some time reported that it had helped them process memories of their partner in an enriching way.

Thirdly, the narrative-based sermons are stimulating an interest among people for a programme of interactive seminars to look more closely at key themes.

Overall, then, preaching in this way is creating a new interest, awareness and practice in our church community of an approach to religion and personal growth which seems both relevant to life and faithful to the gospel.

The social justice ethic

In chapter two we explored the weakness of narrative therapy in its inability to support a consistent ethic of social justice. I argued that this is related to a rather

extravagant anti-foundationalist/anti-essentialist bias in many who appreciate the value of deconstruction. I suggested this bias need not be absolute, as social constructionism does not actually disprove essentialist thinking but is at most a stinging critique of the way such thinking pushes people around in society. I then suggested it is not inconsistent to maintain an ethical stance which arises out of religious conviction, while continuing to use deconstruction as a tool to critique the function and effect of the discourse which conveys this ethical stance. The narrative-aware Christian would admit that ethical systems are human constructions, built up out of language and designed with particular practices of power in mind. Nevertheless, these constructions are founded upon a view of moral value in God's world, which is informed by religious conviction in its broadest sense.

The question as to how these moral values can be established to the satisfaction of a critical academic community is important for Christian theology and ethics, but belongs outside of this dissertation (see, e.g., Galvin, 1986). It is sufficient here to say that the pastor should be responsibly engaged in this discussion and aware of the limitations of what can be confidently asserted.

Meanwhile, it is reasonable to expect that pastors will draw upon the church's moral and ethical tradition to a greater or lesser extent. This brings two great strengths. Firstly, there is a broadly agreed basis for discerning what client aims a pastor as counsellor can support. If a pastor were faced with the theoretical situation of a family who wanted the wife and mother to learn how to be submissive, in a way that would deny her fulfilment and justice, the pastor could attempt to persuade the family not to go with this aim. The pastor may also use language in such a way as to marginalise any statements of the family which supported the conviction that an unjust constellation of domination-submission was the moral ideal, and to privilege any statements which stood against that. One intervention might be: *'I hear you saying that Mary is not happy having to submit to Clive's domination, and I get the sense that some very real and*

important part of her is searching for another way. Is it possible that God created Mary in such a way that she would be most in tune with God's will and intentions when she's in a leadership role - or at least a role of shared leadership? Is it possible that what you see as the problem is actually the beginning of the solution to the problem?'

An intervention such as this is loaded with the pastor's own moral convictions of social justice (founded on a view of God as desiring justice). But a pastor can be open about her or his moral convictions so that nobody needs to feel manipulated.

Secondly, the pastor has a moral framework with which to value the client. Clients who present with a problem-saturated narrative often speak very negatively of themselves. As the problem is externalised, the therapist addresses the non-externalised person-herself, i.e. the I-subject who is not the problem, who often contrasts with the problem and who (usually) wants to be rid of it. This can be one of the most moving moments in therapy, as the 'person herself' slowly emerges from under the tangle of the problem. Time and time again my experience at this point is of a truly noble person, characterised by care for others, courage, good intention, and humility. I have never yet met a client whose company I did not enjoy and feel enriched by at this moment.

The personal characteristics emerging here run parallel to those listed in the New Testament as Christ-like, summarised in Galatians 5:22-23 as 'the fruit of the Spirit' (love, joy, peace, patience, kindness goodness, loyalty, gentleness, self-control) or in Colossians 3:12-14 as 'the garments of God's chosen people': compassion, kindness, humility, meekness, patience, forbearance, forgiveness and love.

In the Christian endeavour we are called to see others in these terms - i.e. to identify the person himself with only such characteristics, and to regard any

negative characteristics shown by him as alien to him and intruding upon him. The Christian narrative therapist, therefore, seeks to see her client in these terms from the moment he walks in the door. She is attempting to emulate the attitude of Christ himself toward people - Christ who loved and appreciated others, discerning the good in the person which the person himself has not yet seen.

This attitude by the therapist has a very powerful effect on the client once he starts externalising problems and looking for unique outcomes. The therapist is providing him, right then and there, with a reason to believe he is not as bad as his problem-saturated narrative would have him believe.

Bill O'Hanlon writes:

... I have to give you a warning - if externalisation is approached purely as a technique, it will probably not produce profound effects. If you don't believe, to the bottom of your soul, that people are not their problems and that their difficulties are social and personal constructions, then you won't be seeing these transformations. When Epston and White are in action, you can tell they are absolutely convinced that people are not their problems. Their voices, their postures, their whole beings radiate possibility and hope. They are definitely under the influence of Optimism (O'Hanlon, 1994, 28).

The effectiveness of Epston's and White's counselling is directly related to their belief in their clients. For a pastor, this belief is buttressed by the Christian concept of the person as valued, noble, 'holy and blameless.' The Christian pastor must learn to see persons as we believe God sees them - tolerant of their failings and attentive always to their qualities. Narrative therapy simply does not work unless the therapist genuinely believes in and admires the client.

God's story

Finally, the God whom Christians worship is known largely through stories. God is not just an ontological entity but is 'The God of Abraham, Isaac and Jacob'

(Exodus 3:6). The Ten Commandments are prefaced with God telling something of God's own story: 'I am the Lord your God, who brought you up out of the land of Egypt, out of the house of bondage' (Exodus 20:2). In the Psalms and prophets of Israel's later history, God is frequently referred to in terms of the stories of God's great deeds among God's people. The life of Jesus is seen by Christians as a continuation of the story of God - how God in Christ became a human being, lived a life of service and humility, suffered on the cross for our sins and rose again from the dead. Theological students have traditionally been taught that what is unique about the Hebrews' God is God's activity in *history*, as compared with other deities whose deeds were confined to a mythical or other-worldly realm. This point has important implications for theology and social ethics, as it locates the activity of God in specific social and historical situations. But its implications go further. These events are the building blocks of God's personal story. It is through these events that God - or at least our knowledge of God - is constituted. This provides a point of contact for Christians with their own lives, which are also constituted through the storying we make out of the events which we count as significant. Similarly, Christians may ask, 'Where is God in my life?' - and construct the story of God moving, inspiring, empowering and challenging them at significant points throughout their lives.

This can add a further spiritual dimension to narrative counselling, as the person sees herself as participating in God's story through developing the best possible story of her own life.

Concluding

Narrative therapy can provide a new framework and outlook for pastoral work. The notion of the separation of the person from the problem is reflected in the ancient knowledge of the separation of the person from their sin. The Bible is rich in imagery and story for resourcing pastoral work which proceeds along these lines. With its long tradition of seeing sin as both personal and social, a Christian approach can also challenge the person to take *personal* responsibility

for refusing to act out the toxic, often *socially* constructed narratives which tempt him to perform destructively. Further, the preacher-pastor can share the insights of Christian narrative therapy in the local community of faith, and so give added impetus to the pastoral task of healing souls through the mutual reinforcement of counselling with the preached word. The church's concern for ethics can provide a foundation for narrative therapy's concern for social justice, while the intense valuing of persons implicit in Christian faith serves to empower the healing process in narrative counselling. We now turn to look at some detailed implications of these key issues.

Chapter Five

Externalising with Christian concepts and images

This chapter reports on how externalising conversations are being used in a pastoral setting. These conversations proceed along usual narrative therapy lines, with two main differences. First, the pastor can make use of images and concepts from Christian tradition, in particular the biblical separation images, which he or she can relate to the externalisation of the problem. Second, the pastor is operating within a Christian moral framework of values and ethics. This provides motivation for the pastor to value the person immensely and to believe in the greatest possibilities for her. It also provides boundaries and guidelines as to which of the person's preferred realities are worthy of support.

I will begin with a somewhat detailed account of an externalising conversation, as this illustrates several important points. I will then fill out the picture with reference to other pastoral situations.

Greg, Lee and the Bogey

Greg and Lee, a married couple of about 40, were both on medication for schizophrenic illness. They had spent considerable time in psychiatric hospitals and often referred to themselves as mental patients. Both had been previously married. Greg had a career in the Army until his mental illness developed. At the time of this conversation they were receiving a sickness benefit and doing a few hours per week part time work.

Greg and Lee asked to see me after I visited their church as a guest preacher. They said they were going away for the weekend to visit Lee's mother, Winnie, in Matamata and would then bring her back for a few days with them in

Auckland. This, they said, would be stressful, as they find her demanding, picky, disrespectful and irritating. Greg, especially, gets 'furious' with her at times. On one occasion he 'threw her out of the house.' These outbursts of demonstrative anger have led to Lee leaving Greg for short periods, as she feels a divided loyalty, and 'can't stand it' when Greg gets so bad tempered.

Greg agreed that his temper gets him into trouble when Winnie is around, and seemed quite concerned about this. He and Lee both expressed their concern and feelings of defeat about this at some length. What follows is an abridged account of the ensuing conversation. The entire conversation would have been too long to report in full. While the abridged version does not convey all the fine nuances of what transpired, I trust it gives an fair picture of the significant issues.

One practical comment is that I always find it helpful to take notes during these conversations. This enables me to repeat back to the person their exact words, which enables us to build up a detailed and vivid picture of the situation as they see it. Many of my responses, as will be seen, are little more than repeating Greg's or Lee's own words back to them verbatim, but put in an externalising form.

Me: I appreciate your telling me all this. You know I'd be really pleased to talk with you some time about your (Greg's) reactions to Lee's mother, and ways you might be able to improve this, if you like.

Greg: Oh yeah, that'd be good. I have this terrible reaction to her. I'd love to be able to control it better. I just get so wild. She riles me. I get so angry.

Lee: That's right, Greg does. And that's why I sometimes leave him for a while.

Greg: What can I do about it? I'd really like to talk about it now.

Me: OK I'm happy to talk about it now. So Greg, this wild, angry riling thing comes upon you, and you lose it with your mother in law?

My very first comment is externalising in nature. The 'thing' 'comes upon' Greg.' I see it not as part of Greg but as an alien intruder upon his life.

Greg: Yeah that's right. I get wild, I get furious.

Me: When it comes upon you it leads you to get wild, and furious.

Greg: Yes it does. And I'm worried about it.

Me: So you're also quite concerned about this wild, furious thing that comes upon you.

Greg: Yes I am. And it's not just with my mother in law. I've always had it. I've always got really angry and lost my temper. I've had it for years.

I make a note that Greg's temper problem pre-dates the onset of his schizophrenic illness. This confirms to me that we are discussing here a normal human failing that any person can have, and I am not transgressing on the more specialised territory of the psychiatrist. Note also that my responses are externalising in nature - designed to drive a wedge between Greg and his problem.

Me: So this thing has been affecting you for years and years. It doesn't just come upon you when your mother in law's around.

Lee: That's right. It's a problem Greg's always had.

Greg: Yeah, she's right. And it's really terrible. It gets me.

Me: Sounds like it makes you do things you don't want to do.

Greg: That's right. It makes me get so wild. And then I hate myself afterwards. I think to myself, why did I let myself do that?

Me: I see what you mean. The real you wouldn't do that. The real Greg is a good guy, made in the image of God, transformed into the likeness of Christ. You're a good guy, but this bad thing comes upon you.

Greg: Yes I suppose you could see it that way. I like that.

Me: You're OK, but this thing comes upon you and you let it mess you up.

Greg: Yeah, yeah, that's a good way of seeing it. I've never thought about it like that before.

We reflect for some time that this is a new way for Greg of seeing the problem, talking about other specific incidents of 'it' 'messing up his life'. Then:

Me: Lee, I bet you've seen the good side of Greg. What are the good things about him?

Lee: Oh he's kind, and he's helpful around the house, and he's loving.

Me: He's kind, he's helpful around the house, he's loving. That sound like you, Greg?

Greg: Oh yeah (laughs) I think that's right. But not always.

Me: Not always.

Greg: No. This bad temper comes on me.

Me: Now I just want to pause for a moment and explain what I'm doing. You see Greg, I see you as a really good guy. You're a Christian, that means you're made in the image of God, filled with the Holy Spirit, transformed into the likeness of Christ. That's who you really are - this good guy who's kind, helpful and loving. But quite often this thing comes upon you. It's not the real you, it just hangs around you - sits on your shoulder. And every now and then it invades you, gets its fingers into you and before you know where you are, it's led you to lose your temper and blow someone up.

Greg: Yeah I see that. That's what it's like.

Me: Now of course, if you let it in, if you let it control your behaviour, you're responsible. You've got no one else to blame.

Greg: That's right. It's me who gave in to it. I can't blame anyone else.

Me: Right. So it's not you, but if you let it in, you're the one who's let it in.

Greg: That's absolutely right. I've got no-one else to blame.

Me: What shall we call it, by the way, shall we give it a name, to help us talk about it?

Greg: Um, um, let's call it a bogey.

Lee: Yes, it's Greg's bogey.

Me: Greg's bogey. The bogey of wild, uncontrolled anger. The bogey that tries to lead you to jump on people.

Greg had remembered the word 'bogey' from the sermon, 'Beating Back the Bogies' (see Appendix 1), where I had talked in this way about our problems. This gave the externalising process a significant boost, as Greg was already familiar with the concept of a bogey belonging outside, rather than inside, himself. We now continue talking about the bogey and how it leads Greg to lose his temper with people. Finally Greg asks,

Greg: That's the bogey, but how can I get rid of it?

Me: Good question. How can you get rid of it? How can you ward it off when it comes? How can you defend yourself against it?

Greg: Yeah, how can I defend myself against it. I like that way of putting it. I feel different about it already.

Greg now talks at some length about how different he feels already, seeing the problem as a bogey which intrudes upon him and not as he himself. In the next phase of conversation I enlist Greg and Lee's help to hunt for exceptions to the 'rule' of the bad temper bogey defeating Greg. We are looking for 'unique outcomes' which might provide a clue to how Greg can beat the bogey.

Me: Let me ask you, Greg, can you remember any times in your life when you have beaten this bogey?

Greg: Um, no, I don't think so. It always gets me.

Me: Always? I can believe it's beaten you - what, how many times would you say?

Greg: Oh unbelievably so many.

Me: Hundreds? Thousands?

Greg: Yep. All the time.

Me: OK, so it's won hundreds, many, many times. But can you think of any occasion when you've beaten it, even just for a while?

Lee: Course you have.

Greg: Have I? Um, well there have been times when she (Winnie) hasn't riled me. When she's been really horrible and I've just been perfectly polite and said, 'Excuse me, I don't like that. Would you mind not doing that.'

Me: And how did you beat the bogey that time?

Greg: Well it just wasn't there. It didn't come at me at all.

Me: Uh huh. So there wasn't even a fight. It was having a day off.

Greg: Yeah.

Me: Well that's a bit of good news. Now we know it's not always there. But what about the times when it has tried to invade you? When you've felt tempted to lose your temper but you haven't? Have you ever fought it and won?

Greg: Yes! Now I remember. There was a time. It really did come upon me but I didn't give in to it.

Me: You didn't give in to it. What happened? What did you do that was different?

This 'landscape of action' question is very important to build up a specific picture of the event when Greg beat the bogey. The more detailed picture we can get, the more complete this aspect of Greg's new story can become.

Greg: Well, I sat down, I stopped, I thought for a moment, and then I thought of other things. I put my mind on other things.

Me: You sat down, you thought for a moment, you thought of other things, you put your mind on other things.

Greg: That's right; that's what I did. And after a while it just went away.

Me: It gave up and went away.

Greg. Yep, and then I didn't lose my temper. I was calm. I didn't get wild.

Me: So you have beaten it. At least once.

Greg: Now I remember I've beaten it a couple of times like that. The same way.

Me: You've beaten it several times like that. Not just once?

Greg: And it's amazing. I'd have never thought of that. I thought I'd always given in to it. But I haven't. I can remember now.

This is a frequent learning for those who first experience narrative therapy. The dominant story we tell about ourselves, which defines our identity, usually excludes or causes us to 'forget' those events in our lives where we have behaved differently from the norm. The therapist's task at this point is to help a person

remember these events, describe them as fully as possible, and then find meaning in them which can be drawn into the renewed narrative of their life.

Greg and I now go over the way he has beaten the bogey several times more, and I re-iterate Greg's words about how he beat the bogey ('sat down and thought, put his mind on something else, thought about other things'). Then I say:

Me: Greg this is good news. You've now got a weapon to use against the bogey. It's a weapon that's worked at least a few times and I can't see any reason why it wouldn't work again.

Greg: Yeah! This is great. I feel so good about that. I've done it before; I can do it again.

Me: You'll have to use your weapon. That's a weapon God's given you to beat the bogey. What do you do when the bogey comes upon you? You sit down ...

Greg: I sit down, and think about something else. I put my mind on something else.

Me: You sit down, and think of something else, put your mind on something else.

Greg. This is great. Ray I feel so good. I haven't felt like this for ages.

Me: Well I'm pleased about that. Now Greg you've got a real challenge coming up in the next few days. You're going to see your mother in law, and the bogey might try very hard to harass you. But you've got your weapon and you can try it out. We can't guarantee 100 percent success but you could have a few victories in the next few days.

Lee; I'm sure you can do it Greg.

Greg: Ray this is great. I feel so good. I've talked to dozens of psychiatrists but I've never felt like this.

Me: Well you've got a battle on your hands.

We agreed to talk again about the subject after Winnie had come and gone. They thanked me profusely for the discussion. When I returned home that afternoon, Greg had left the following message on my answerphone (transcribed verbatim):

Hello Ray it's Greg. I just wanted to say thanks very much for calling and giving me all that help in the discussion we had. I feel far better now. And Lee came to me afterwards in the kitchen and said, 'Greg, if a bogey comes over you just think, 'It's a bogey, it's not me.' That seems to work too. Thanks so much Ray. All the best. Hope you have a good week. See you soon.

Lee has given Greg another 'weapon' to use against the bogey. Merely recognising it as external and intrusive can be sufficient to ward it off. A number of other clients report the same experience.

Epston and White have developed the art of letter writing to clients after a therapy session (Epston and White, 1989). This provides opportunity for the new, emerging story to be set down in a formal way, which the client can read, re-read, modify and come back to. The day after our conversation I wrote the following letter to Greg.

Dear Greg,

Thanks so much for the discussion we had on Thursday. Thanks to Lee too. I really enjoyed talking with you about the bogey.

I sometimes write letters to people I've had that kind of discussion with, to help them remember some of the points that seemed most helpful. I'm writing this letter as a kind of story - the story of Greg and the bogey. I'd be very grateful if you'd read it through a few times, and change

anything in it that you don't think is right. You might even like to change 'Greg' to 'I', etc., so that it really feels like your story. Here goes:

The story of Greg and the Bogey.

There was once a man named Greg, who had a loving wife named Lee. Greg was a kind, thoughtful and loving man, who always tried to do his best to serve God and to help others. He was such a good man, that he even wanted to be kind and thoughtful to people who irritated him and got on his nerves. Greg was also a Christian, which means Jesus was his friend, his sins had all been forgiven, and he was made in the image of God.

But there was a bogey which hung around Greg's life - the bogey of bad temper. When this bogey invaded Greg's life, it led him to get wild and furious with a person who was irritating him. Sometimes it even made him slip into a bad mood and have a whole bad day. It led him to get angry and say nasty things.

This bogey had been around for as long as Greg could remember. It had messed up his life many times. Sometimes Greg felt bad about himself because of this bogey. He wanted to behave like a calm, thoughtful loving man, but sometimes the bogey led him to behave very badly.

Then one day, Greg realised a very important thing: the bogey is not part of himself. He himself is a good man, Christ's man. The bogey is an outside force, an alien, something that comes upon him and leads him to do bad things.

Of course, Greg knew that if he gave in to the bogey, that was his own doing. He couldn't blame anyone or anything else. He couldn't blame Lee, or his mother in law, or his upbringing, or the Army, or the psychiatrists, or anything. This was Greg's fight - between him and the bogey.

Now this bogey had beaten Greg hundreds of times in his life. But Greg realised an even more important thing: there *were* times when he had beaten it! Yes, there were a few times when Greg had *not* let the bogey take over. The bogey had tried to rile him into shouting at someone or saying nasty things to them, but he had not given in to it.

How did Greg do this? It was quite simple. He had sat down, and put his mind on other things - thought about something else. It was that simple. When he'd done this, and stuck at it, the bogey had given up trying to rile him and gone away.

So Greg *had* beaten the bogey, and *he knew how he'd beaten it*. He knew he had a *weapon* to beat it with - all he had to do was *sit down, put his mind on other things, and think about something else*.

This was very exciting. Greg knew this weapon worked. So he could use it when the bogey came upon him. Life was going to be different from now on!

Later that day, Greg found out about another weapon he has. Lee came to him in the kitchen and said, 'Greg, if a bogey comes over you, just think: 'It's a bogey; it's not me.'

Greg realised what a powerful thought that was; '*It's a bogey; it's not me.*'

So now Greg has two weapons to use against the bogey of bad temper. Two weapons! This bogey has beaten Greg hundreds of times, but Greg is starting to win the war now. He's looking forward to some victories over the bogey. And with every victory, he'll get better and better at it.

Well Greg, I hope that's a helpful story. Please tell it to yourself often. I believe every word of it.

I'm looking forward to seeing you both again soon and talking more about this. God bless you both,

Sincerely,

I saw Greg and Lee again after their week with Winnie. They reported that Greg had not lost his temper once, and that the visit was less trying than usual. Greg also reported that he had been 'on a high,' so excited about his new discovery that he was having difficulty sleeping. Greg and Lee had also decided that the 'voices' they hear (a typical experience of people whom the medical profession classifies as suffering from 'schizophrenic' illness) are also bogies, which are not part of them but intrude on them from outside. They said they had found the externalisation idea very helpful for dealing with these. I did not follow this up with them, explaining that I was not qualified to deal with this area. Nevertheless, they continued to affirm the value of externalisation for them in this area. Michael White observes that people with schizophrenic illness can benefit from a narrative approach to counselling in that it alters the relationship they have with their illness (White, 1995).

Most of our second conversation covered other issues. Greg and Lee did not ask for any further counselling. A few weeks later, Greg applied for and got a full time job, and Lee increased her hours of part time work. Ten months after the first conversation, Greg and Lee continued to report his much reduced occurrence of bad temper.

While it was primarily Greg who was being intruded upon by bad temper, the problem was also affecting Lee. In narrative therapy it is usually helpful to have those others present who are being affected by the problem. In this situation, for example, Lee simply disagreed with Greg when he claimed not to have ever beaten the bogie in the past. This encouraged Greg to look more closely at his life. Lee was also involved as a supportive witness, who could confirm or deny

any ensuing success story. Further, Lee's words to Greg in the kitchen - which provided him with another 'weapon' against the bogey - would not have been possible if she had not been present in the conversation. As Epston and White frequently point out, strict confidentiality is often not wanted by clients in narrative therapy, as clients emerge as heroes and victors.

Obviously the degree of change was dramatic, through just one conversation. Naturally, people who have experienced such difficulties in life as Greg and Lee would need a great deal of sensitive counselling to deal with all their difficulties. However, it is good to see they have made one large step.

We should note here that this simple externalising of the problem is only one possible way of dealing with it in a narrative mode. We could also have looked at the narratives surrounding bad temper which Greg was 'performing,' in the terms we described in chapter one. Narrative therapists see emotional outburst as 'performances of meaning around a narrative.' If we can find what meanings, woven into what narratives, are being performed, we have a further means of helping a client deal with their outbursts. Greg, for example, may have been performing the narrative that he, as the man of the house, deserves his peace and tranquillity, and his mother in law therefore has no right to intrude and make demands, and should be punished for doing so. This narrative may also be interwoven with one about the competition for Lee's love that his mother in law brought with her.

In this particular situation, circumstances did not permit such a sophisticated exploration of the issues. It was a fairly basic piece of 'brief therapy,' but still effective in terms of the help sought.

Mr Mindblank and Mr Crankey

Janet was having difficulty with her nine year old daughter, Kirstin. Though regarded as highly intelligent and creative, Kirstin had the habit of 'switching

off' when her mother talked to her or when she was involved in a task which required concentration. She would often switch off right through dinner, eating nothing and just staring into space for half an hour or more. On one occasion while she had been climbing a tree to escape from her mother who wanted to penalise her for a misdemeanour, she had switched off when her mother began to shout instructions to her as to how to get down. This had resulted in her falling to the ground and breaking her arm.

I talked to Kirstin with her mother and brother, James, aged 13, as the problem was affecting them all. I brought to the counselling session two Chinese meditation spheres, and placed one in front of Kirstin on the coffee table. I told her I knew she sometimes forgot how to concentrate, and that it was very important that she concentrate right through our discussion and didn't switch off. To help her do this, I said, I had brought this special ball along. Its job was to sit on the table and watch her, helping her concentrate if she ever began to switch off.

The conversation lasted one and a half hours. There were only two occasions when she appeared to begin to switch off. Each time I quietly drew her attention to the ball, and she came back.

I opened the conversation by asking all three to tell me what they thought was good about the others. We did this for the first 15 minutes. I felt it was important for Kirstin to feel valued and loved, so that she had a strong sense of self worth from which to look squarely at the issue of her switching off.

Early on in the next phase of the conversation it became clear that Kirstin did not want to have the problem of switching off, but felt helpless against it. It also seemed to be intensified or prolonged when her mother tried to snap her out of it or threaten her with punishment.

In an externalising conversation, Kirstin decided to name the problem ‘Mr Mindblank.’ We agreed that Mr Mindblank had no right to mess up her life, as she was a very special person whom God loves with all God's heart. Nor did Mr Mindblank have the right to spoil life for others in the family. We talked in detail about Mr Mindblank's tactics, in particular his trick of creeping up on her unawares, and switching her mind off even to the fact that her mind was switched off. In looking for unique outcomes (where she had been able to overcome the problem) the only one we found was that it did not come upon her when there were guests for dinner. Kirstin explained, ‘I think Mr Mindblank is shy and gets embarrassed when there are visitors at dinner, so he stays away.’

Eventually we decided on the following strategy. Whenever Janet saw that Mr Mindblank had come, she would address Mr Mindblank rather than Kirstin. She would say, ‘Aha! It's Mr Mindblank again! He's got no right to be here.’ Janet would not tell Kirstin off or make any attempt to control her behaviour. Kirstin agreed she would throw Mr Mindblank out as soon as she realised he was upon her.

This strategy worked reasonably well. The next time I saw the family, they reported that Mr Mindblank usually ran away when Janet identified him. Kirstin drew a picture of Mr Mindblank, which is reprinted in Appendix 2. She said her first attempt to draw him resulted in a creature that looked too nice, so she had re-drawn him to make sure we all knew how nasty he was.

An interesting spin-off was James's reaction to the counselling. For the first three quarters of an hour in our first session he sat in an armchair with wheels, and was swivelling, sliding and careering all over the lounge. He responded to none of his mother's requests to sit still. I then pulled out the other Chinese sphere, and explained to him that this sphere's job was to keep him steady in his seat. If he ever got the urge to swivel or slide, he could look at it and it would calm him. He sat still for the rest of the session.

But James also got something out of the conversation. He told me toward the end that he had a problem too, and his problem was ‘Mr Crankey.’ Mr Crankey came into his life regularly and led him to lose his temper and smash things. We decided to meet again to talk about how to beat Mr Crankey. Kirstin drew a picture of Mr Crankey alongside that of Mr Mindblank (also in Appendix 2).

This conversation and its aftermath illustrate how narrative therapy can be used in a pastoral situation with children. They catch on very quickly to externalisation, and are usually very much in touch with the world of imagination. There is a lot of fun in the narrative counselling process, and the pastor's affirmation that they are good, valuable children, whom God loves dearly, adds to their sense of security while they deal with issues which are often associated with unhappiness in the home. I also felt it was important to spend the first 15 minutes discussing what everybody liked about each other. This established a positive atmosphere and gave us an indication of what strengths there might be in the family, to bring against the problem.

The private life of a gremlin

One of the more dramatic changes I have seen in narrative counselling came in the life of Malia, a fifteen year old who had done no school work for four years. She had had hours of counselling with the school counsellor, an educational psychologist and a social worker. The teachers had ‘done everything possible’ to help her, and were ‘at the end of their tether.’ To cut a long story short, after four sessions of narrative therapy with Malia and her family she was diligently attending all her classes and doing three hours homework per day.

A special feature of my work with Malia was the fun we had in tracking the ‘intelligence’ of the problem - the tricks, ruses and strategies it was using to lead her to be lazy. In our first session (together with her parents) we externalised the problem of laziness and found ourselves calling it ‘the gremlin.’ We found some

unique outcomes, where Malia had beaten it in the past, and wove the stories of these into the beginnings of a new narrative of Malia's life. I wrote two letters to Malia, one after each of the first two sessions. The second letter illustrates a unique approach to the externalised problem:

Dear Malia,

Look what fell into my hands! It's a message from the Chief Gremlin to the little gremlin who tries to intrude on your life. I think you'd better read it because it lets out the secrets of the Gremlin Battle Plan.

My Dear Little Gremlin,

I was distressed to hear that Malia has blown your cover. This is a disaster for us. The worst thing a gremlin can do is let himself be identified. When Malia didn't know it was you who was leading her to be slovenly and demotivated, you had a free hand. You messed up her life very cleverly. You got better and better at it over the years. Our ugly, destructive plan for Malia's life was right on track. But now look what's happened! Gremlin Control reports your success rate has dropped dramatically from 70 percent to around 40, and our prediction is that if Malia keeps up her counter attacks on you, you'll be down to 20 percent or less by the time the new school term starts. What a disaster.

But all is not lost. You've very lucky to have a wise old Arch-Gremlin like me for an adviser. I've had centuries of experience, ruining people's lives, stuffing up their happiness. I'll tell you what we have to do to get this girl back into our clutches.

Firstly, play on the fact that she hates to be told what to do. You know how much she loathes authority. Try to get her to focus on the 'do's' and 'don'ts' of authority figures like her parents and the school teachers. Get her so cheesed off with them that she'll want to fail, just to get back at them. Try to make her forget that she herself has turned over a new leaf, for her own sake. Don't let her dwell on the fact that her new outlook is actually the outlook of a responsible adult, doing things for her own benefit.

Secondly, bear in mind that she hasn't actually started doing any actual school work yet. So far she's beaten you in everyday things like saving money and doing housework (but shame on you for letting her even get that far!). Make sure she has a big crisis about getting started on her school work. Let her win a few everyday battles if you like, but *please* don't let her even get started on her school work. Put as many obstacles in her way as you can. Once she opens that first book, you're on a losing streak. If she solves just one maths problem or reads just one page of a text book, you're in serious trouble. That's the point where you've simply got to stop her. If she tastes victory over you with even the tiniest bit of school work, she'll be on a roll and there'll be no stopping her. For badness' sake, don't let that happen!

Thirdly, I've called in reinforcements to stuff up things at the school. Your cousins are going to goad the school staff into behaving in an authoritarian way - laying

down the law, telling Malia to shape up or ship out (that won't be too hard; your cousins have had plenty of practice at that school). This will help us to get Malia's hackles up and make her want to fail, just to get back at them. Fortunately the school staff don't know about us. They still think Malia's 'got a problem.' We'll keep them thinking that way as long as we can.

Finally, make use of your best weapon; the sneaky little lies you put into her head. Tell Malia she can't do it. Whisper it in her ear while she's not paying attention. Tell her she's so far behind she'll never catch up (that's one of our greatest lies - it sounds so plausible!) Tell her she'd rather fail at school and be a drop-out. Tell her that school drop-outs have the best fun (it's amazing how many humans believe that stupid lie!). Tell her that her parents only want her to succeed at school so they can feel proud of themselves (That lie usually works well with teenagers).

Give it your best shot, little gremlin. The next few weeks are crucial. You're in *real* danger of losing her - I repeat, *real* danger. I shudder to think what will happen if she starts opening her textbooks or doing her algebra.

Good luck, you wonderfully sneaky, evil little gremlin. But don't worry too much if you fail. We've been watching a 13 year old kid in Siberia who's just a bit too smart and good. I'm sure your years of experience with Malia will stand you in good stead for that assignment.

To battle!

The Chief Gremlin.

Well Malia, I hope you find this as helpful as I do in understanding what's going on. Good luck for the next few days.

Sincerely,

This approach is unique in the degree to which it focuses on the internal logic of the externalised problem, putting this in a hypostasised form as a mythical being in cahoots with its superiors. The idea for such an approach came from C.S. Lewis's classic, *The Screwtape Letters*, which purports to be correspondence between a junior devil-tempter and his superior, which had 'fallen into' Lewis's hands (Lewis, 1942). This way of thinking about the effects of evil on our lives is very ancient (compare Jesus' story of the conflicts between devils, in Matthew 12:22-30), and represents a somewhat repressed knowledge in our rationalist-dominated culture.

Malia herself is not a church attender and does not identify as a 'Christian' in the narrow sense. But this way of thinking about the problem that harasses her was fully real and meaningful to her. She was forthcoming in her thanks for the letters, and said she showed the second one to a friend of hers who also benefited from it.

Nevertheless, the letter contributed only one of a number of factors to Malia's turnaround. The real breakthrough came after we had had a session specifically to discuss the difficulties in the relationship between Malia and her father. In reading through the transcript of our (taped) second session and looking at my notes of the third, I had noticed a recurring pattern of subtle interactions between father and daughter which aroused my curiosity. When I raised this concern (in the fourth session) we had a very long, exhausting conversation in which we identified the dominant stories Malia and her father were seeing each other in terms of. Malia's story about her father was that he was motivated entirely by arrogance and was insincere in anything positive he said or did toward her. Her father's story was that she was irresponsible and would work only if he forced her to. This led to our examining a unique outcome in which they had related contrary to these stories, after which we co-authored new stories and a strategy which freed Malia from what she saw as her father's judgmental surveillance. While Malia had made some progress in doing schoolwork after our first sessions, it was directly after this fourth session that she began to study in earnest.

This illustrates the value of taping discussions where possible. It was only in transcribing the tape and puzzling over some of Malia's and her father's remarks to and about each other that I began to notice a pattern. Obviously taping is not appropriate in routine pastoral visits, but pastors can request permission to tape conversations where a person comes with a specific problem, provided

agreements are made and adhered to regarding confidentiality (see discussion in Corey, Corey and Callanan, 1993, 83 ff).

This also illustrates the point that narrative therapy is not merely about the stories we tell ourselves about ourselves; it is also about the stories we tell ourselves *about each other*. The stories, too, have a constitutive effect. The sermon 'How to Start a War or Make a Saint' (see Appendix) explores this theme.

Further externalising images

Part of the value of externalising is that it provides a simple, manageable construct of the problem, which is easy to talk about and can act as a focus for exploring the problem's effects. Some clients find a visual picture helpful. Michelle saw her problem of furious temper outbursts with her daughter as a 'big, red, ugly thing' that crept up on her and hovered around her shoulder. The first letters of each word in 'big red ugly thing' are BRUT. We pronounced this 'brute,' and talked about ways she was planning to beat the brute.

Clients who have been harassed by depression, anxiety, pessimism or low self esteem are often sharply aware of the destructive, evil effects of these on their lives. Some find they can deal with such problems more decisively if they give them names commensurate with their nastiness. The word 'demon' has a rich and varied history in Christian tradition. Unfortunately the word has been co-opted by narrow, extremist religious groups who make a cult of exorcism. This can magnify people's problems by leading them to believe they are subject to malevolent, outside forces completely beyond their control. For this reason, pastors need to be very wary of the use of such terms as 'demon' or 'evil spirit.'

Nevertheless, some more liberal Christian clients find that the word 'demon's' associations of pure destructiveness and evil make it the most appropriate metaphor for their problem. When a client uses this word to describe their externalised problem I always check out carefully what they mean by it. One has

to be careful to avoid any suggestion that a demon, gremlin or bogey has power over a person. The language we use is very important. The problem does not *make* or *force* or *cause* a client to act up bad. It *leads*, *persuades*, or *draws* them. It intrudes on their life, harasses them, seeks to invade them (cf. Freedman and Combs, 1996, 47). This attitude needs to be carefully preserved when clients use hypostatising⁶ imagery, so as to avoid the notion of demons as ‘possessing’ or controlling persons. Therapist Karl Tomm comments that the use of externalisation is not new as ‘it captures some of the ancient wisdom of demon possession and exorcism’ (Tomm, 1989, 58).

Concluding

The externalising aspects of narrative therapy blend very appropriately with the use of Christian symbols and images. The keen Christian sense of the battle between good and evil can enhance the sense of the problem's inappropriateness in the person's life, and energise the person in their commitment to throw it off. Throughout this process, the pastor, as priest and minister, must convey to the person a sense of their worth, value, nobility and goodness. The pastor must believe in the person. The pastor's story about the person is that they are infinitely valuable and prized by God. This story contributes to re-constituting them as they work for the defeat of their problems and the re-storying of their lives.

⁶. ‘Hypostasis’ is a theological word drawn from Greek (upostasis = nature, being). It refers to the tendency of language about abstract concepts or metaphors to develop to the point where these concepts are spoken and thought of as being real, concrete entities standing by themselves. Hence, to ‘hypostasise’ an idea is to speak and think of it as if it has being and life of its own.

Chapter Six

Grief, Loss and Narrative Pastoral Counselling

Pastors deal constantly with the dying and the bereaved. Most families request a minister to take the funeral, whether or not they or the deceased were regular churchgoers. Among church members, ministers are regularly called to attend the dying and comfort the bereaved. Most congregations include a good number of widowed people, many of whom are in various stages of grief, often many years after the death of their spouse.

Hence, death and bereavement are significant themes in the work of a pastor. If the pastor has a view of death which is genuinely comforting, empowering and believable, he or she will not only be of great help to others, but will also find this aspect of his or her work less draining and more invigorating. In my experience a Christian narrative view of death makes a huge difference in all these respects, as well as being compatible with the Bible and Christian tradition.

Death as separation

The view of death that informs my pastoral work is similar to an idea from David Epston. In his work as an anthropologist, Epston found a repressed knowledge inherent in the mortuary rituals of the voodoo religion. ‘One feature of these mortuary rituals that is very apparent is the distinction drawn around the death of the body and the survival of the personhood of the person’ (Epston and White, 1992, 28). At a particular time after the person's death and burial, the relatives assemble for a post-funeral ritual, this time to take on the virtues of the deceased.

It is not clear from Epston's writings whether the Voodoo religion sees this as the taking on of the deceased's virtues in a literal, spiritual form, or in a metaphorical

sense grounded in the people's memories of the deceased. But from a narrative perspective, one could see this as an acknowledgement of the persisting 'stories' of the deceased among the mourners. While the body of the deceased is now disposed of, returned to the earth, the personhood of the deceased remains 'storied' in the lives and experiences of the mourners. They actively acknowledge and celebrate this in their post-funeral gathering.

To Epston and White, this 'suggests a considerable awareness of the extent to which a person's 'self' is social, of the extent to which one's sense of personhood is negotiated and distributed within the community of persons' (Epston and White, 1992, 29).

This aspect of the person is not annihilated at death. It lives on in the persons whom the deceased knew and influenced.

Like White and Epston, I have always been interested in the way people's memory of the deceased survives not merely as a fixed, static picture, but as a living narrative which seems to have an ongoing personality. We are not talking here of a metaphysical entity which continues to exist on earth and interact with the mourners, but a 'presence' which exists in the storying of the mourners. The Bible bears witness to a similar phenomenon. For example, in Hebrews 11, the author writes in vivid terms about the great heroes of Judeo-Christian faith - Abraham, Moses, Gideon, the prophets and others. She then exhorts her readers:

Therefore, since we are surrounded by so great a cloud of witnesses, let us also lay aside every weight and sin which clings so closely, and let us run with perseverance the race that is set before us, looking to Jesus the pioneer and perfecter of our faith ... (Hebrews 12:1-2a).

This is an image of a Graeco-roman sports stadium, with a race underway. The athletes are Christians. The race is the task of following Christ throughout life. The audience, cheering the athletes on, is the 'cloud of witnesses' - the great

heroes of faith whose struggles and victories have just been described. But these heroes are long dead. Their bodies have been returned to the earth and, in the view of the first century Christians to whom the Epistle to the Hebrews was addressed, their ‘souls,’ or centres of consciousness, have gone to be with God in heaven. But the writer talks about them as if they are vividly present to her Christian readers, as an audience looking on and giving encouragement. It is as if their personalities have been imprinted on the community of faith and survive in a socially distributed form, making up much of the spirit and personality of that community.

The early Christians would have been especially conscious of this with regard to the personality of Jesus. In a predominantly oral culture, the stories and social impact of Jesus were simply passed on in the Christian community as ripples through water. Quite apart from early Christian belief in the resurrection of Christ, which was another matter, the Christians would have felt the impact of Jesus because his personality lived on, socially distributed within the ever-expanding Christian community.

This general notion was incorporated into the Christian creeds, as ‘the communion of saints.’ It could be said that the Christian community is ‘inhabited’ by the personalities of those who have gone before. Hundreds of years ago their personalities became imprinted upon the lives of others around them, whose personalities were imprinted on others, and so on. The communion of saints is all those followers of Christ who are alive now and who have ever lived - a vast web of interacting, interconnected persons stretching way back in time and all around the world, each influencing their contemporaries and those who come after them.

In the Black churches of the southern United States, the personality of Martin Luther King lives on. The spirit of John Wesley, who died 200 years ago, lives

on in the Methodist Church, just as the personal influence of Wiremu Ratana lives on among the Ratana communities in New Zealand.

Christians' awareness of the communion of saints is perhaps at its most heightened in the sacrament of communion, when the minister announces, 'This is the table of the Lord.' It is not *like* the table of the Lord, nor a *replica* of the table of the Lord; it *is* that table - the same table Jesus presided over on the night of his betrayal.

A Christian narrative view of death

Out of these two repressed knowledges I have developed a Christian narrative view of death, based on the metaphor of *separation*. Death is the separation of the *body* from the *soul* and the *personality*. When we are alive, these three aspects of ourselves are fully melded together. When we die they go their separate ways. The body goes to the earth. The soul (the centre of consciousness) goes to be with God. But the personality remains socially distributed in the storying of those in the community to which we belonged, and is especially present with those who knew us most. The pastor can minister to people on each of these three levels.

The departure of the **body** is obviously what induces grief and loss. The deceased is no longer physically present with the bereaved as a living person. Where previously he was close to her on a day to day basis, now she feels a yawning, painful gap. There is a rich tradition of grief counselling which is designed to help people cope with this massive readjustment (e.g. Lendrum and Syme, 1992; Littlewood 1992; Wallbank 1991; Parkes 1972), and pastors should obviously be skilled and sensitive in this aspect of bereavement counselling. It applies whatever the relationship between deceased and bereaved. Where the two were spouses with a warm, intimate relationship, this aspect of bereavement will be most painful. The loss of a child is also extremely traumatic in this regard.

The departure of the **soul**, or centre of consciousness, to be with God is another area of traditional interest for the pastor. People usually find this assurance comforting and meaningful.

The survival of the **socially distributed personality** of the deceased in the storying of the bereaved is yet another area of human experience of bereavement. By being alert for opportunities to minister to people in this area, my experience is that pastoral care of the bereaved has taken on a significant and energising new dimension.

PASTORAL IMPLICATIONS OF THE SOCIALLY DISTRIBUTED PERSONALITY

The notion of the socially distributed personality has given me a means of affirming people's lived experience of continuing to relate to the deceased after their death. This experience is very common. When I preached the sermon 'Death, Loss and Grieving' (see Appendix), a good number of widows and one widower told me after the service how much it accorded with their experience.

This sermon explains how personality can be seen as socially distributed. My personality does not live just in me. It lives in everybody who has ever known me. I was born into a community, learnt to speak my mother tongue in and through a community, became a person through interaction with others in a community. Who I am is uniquely me, but much of me is borrowed from others. My father, mother, sisters, brother, primary school teachers, immediate family, mentors and close friends are all 'inside' me and go towards constituting who I am, just as I am inside them and contribute to constituting who they are. When I am absent from them through travel or their death, I do not cease to be the person I am; what constitutes me continues to do so.

The narrative metaphor is a helpful way of describing how these people constitute me and I them: the story which constitutes their life is grafted onto the story which constitutes my life, and vice versa.

During a pastoral visit to two widowed sisters, Beth and Martha, this topic came up in our conversation. Beth laughed and said, 'I still speak to my husband, after 10 years (of widowhood). I ask his advice; I tell him about my day.' Martha, widowed just one year previously, responded with a broad smile, 'It's the same with my Keith; he's here all the time.' I affirmed their experience, and we talked about ways of recalling joyful memories and processing these for meaning.

Continuing to talk to or draw strength from a partner long deceased does not represent some kind of maladjustment to bereavement. We do not have to force ourselves, against our felt experience, to embrace extreme rationalist ideas of the total annihilation of the person at death. In terms of their continued affect and influence on us, the person is *not* annihilated at death, any more than they are annihilated when they walk out of the room we are in.

The living personality of the deceased

Rosemary's husband Michael died after a sudden, brief illness at the age of 60. They had no children. Both were professional people, he a solicitor, she a public relations consultant. I had met neither before Michael's death, but got to know Rosemary when called in to take the funeral. This led to ongoing pastoral counselling of Rosemary.

From the start, I pastored Rosemary on all three levels of the above understanding of death. She spoke of the comfort she derived from knowing Michael was now safe with God, where the pain of his sudden illness could no longer afflict him. My response to this was simply to support her affirmation. But she was suffering a great deal from being severed from his physical

presence. I responded by listening sympathetically and affirming the legitimacy of her feelings .

However, in the first few days of bereavement, she was already noticing the persistence of Michael's 'presence' with her when she processed issues in her mind or reflected on the day's events. This was confusing to her because he was obviously not physically present, which was extremely painful. She saw this as evidence of not having yet adjusted to the 'shock' of bereavement, and wondered whether she would feel more fully separated from the presence of her husband as time moved on - the thought of which was not at all comforting.

In talking with her I counselled on both levels simultaneously. Empathising with her in her pain of physical separation, I nevertheless reported to her that most people who are bereaved continue to feel the presence of the deceased for decades after his or her death - indeed until the end of their lives. She shared with me some of her experiences of Michael's presence of the last few days and the comfort this had brought her, and I was able to affirm with her the value of such experiences. We also talked about the years of her marriage and the good times she and Michael had enjoyed together. We agreed that nothing could take away from her the memories of this long relationship, and that she could, in time, ponder on these memories and re-tell the stories so as to gather them more fully into herself.

In a subsequent session we talked about her career as a public relations consultant, the approaches she was pioneering and the joys and satisfactions she derived from this area of her life, which had always been quite separate from her relationship with Michael. I encouraged her to talk about her career in some detail, as it represented a story of her life which was not in any significant way damaged by Michael's death.

I felt that in these ways a new foundation was being laid for the stories which constitute Rosemary's lived experience. She was a successful professional who was adjusting to the loss of her husband while beginning to gather into herself the stories of their long life together. Of course she would need ongoing pastoral care, and her 'adjustment' to the physical loss of her husband could take years. But there was already a new story rising out of the ashes of the old.

This is not to claim that this experience is entirely different in kind from other forms of grief counselling - threads of new beginnings often tend to emerge early in the grieving process, if only because of the person's need to find some sparks of hope. However, a narrative approach of this type provides a conceptualisation that can enable the pastor to help the bereaved articulate and navigate her way through some of the complex and contradictory elements of her grieving.

Pastoring the elderly terminally ill: Reminiscence as narrative

A narrative approach can be very beneficial in pastoring elderly terminally ill folk. In the previous chapter I discussed one of the key elements of narrative therapy, the externalisation of problems. As was explained in chapter one, another important element in narrative therapy is the re-storying of the person's life in line with preferred realities. This re-storying does not have to take place after, or in the context of, the externalisation of problems. It can be valuable for a person at any time to recall moments in their lives when they have acted with nobility, to meditate on the significance of these (i.e. to construct a landscape of consciousness), and to weave this into a new narrative that enriches the story of their life as they see it. This process can be used directly in *reminiscing*.

It has long been recognised that reminiscing is an important task for people in the last stages of life (Belsky, 1990; Lückel, 1994). In reminiscing, a person gets in touch with the events and moments in their life which are of most significance to them, gathering these into their present outlook and exploring the meaning of their life as one whole journey nearing its completion.

In stimulating and assisting a person in their reminiscing, a pastor needs to be aware of what framework he or she is working out of. In Kurt Lückel's pastoral *Gestalt-integrative* approach, the concept of life-balance (*Lebensbilanz*) is used as a guiding principle (Lückel, 1994, 49 ff). Lückel, who is in the forefront of pastoral care of the dying in Germany and Austria, suggests the aim of reminiscing is to enable the person to obtain a balanced understanding of their life in all its features, so that they know who they are in relation to the whole spectrum of their life in all its moods, shades and manifestations, and can 'round off' (*abrunden*) their life by scanning back and putting the past in perspective. This includes processing unfinished business, rediscovering half-forgotten or fragmentary scenes of the person's life, and getting an overview which represents their life in such a way that they can look back at it and say goodbye to it as a completed whole. In Lückel's words, we do this:

... in order to attempt to grasp my life in its entirety, as a continuum; to bring the past into the present, to identify with that which I was and now am - and so to come to own the segments, scenes and events of my life (my translation)⁷ (1994, 50).

Lückel's approach is deeply influenced by the concept of wholeness, wherein maturity and fulfilment are seen as dependent upon the person owning and re-integrating into their life all the various aspects and shades of who they are and how they have lived.

The narrative approach to reminiscing which I am developing represents a departure from Lückel's work in that I am somewhat less concerned with wholeness and more concerned with quality and value. Having spent many hours with terminally ill people I have observed that their view of their past life

7. the original reads: '... um den Versuch, das Leben als Gesamt und Kontinuum zu 'begreifen,' Vergangenes zu vergegenwärtigen, mich mit dem zu 'identifizieren,' der ich war und nun bin -, und so Abschnitte, Szenen, Ereignisse meines gelebten Lebens mir zu eigen zu machen.'

is often very strongly influenced by the state of mind they are in as they approach their death. Some are distracted by pain and discomfort, some are feeling abandoned in a rest home, some are bewildered and angry that their life has been cut off. These discomforts can darken the filter through which a person looks back on their life, putting a dark edge on the overall pattern of what they recall.

It is a tenet of narrative therapy that no one is directly in touch with 'the truth' about their life. Events of the past are filtered through the stories we live by in the present. Hence, it is not always safe to assume that a person can form a balanced, accurate picture of their life as they meditate upon it unassisted on their death bed.

Further, any particular person's life contains virtually an infinity of experiences - some happy, some sad, some perplexing, some confusing. A person may see their past life in any one of a dozen different ways, depending on which sets of experiences they pick out in their recalling process, and what weight and slant they give them.

The narrative pastor is aware that the way we ask our clients questions will always influence the perspectives through which they respond. Our questions can create new realities for a client, or reinforce old ones.

So in assisting elderly, terminally ill people to reminisce, I form my questions very carefully, with quite specific aims in mind. I seek to help the person *recreate* their life according to their best and most preferred Christian values. 'If anyone is in Christ, there is a new creation. The old has passed away; behold, all things are made new' (2 Corinthians 5:17). A person can become a new creation at any stage in their life. Often they most need to as they near its end.

Harry died of prostate cancer at the age of 75. During the last six months of his life, as the physical discomfort took its toll and the thought of leaving his life and

family pressed upon him, he became very despondent. He and his wife, Martha, who were normally a cheerful couple, went about in their home with an atmosphere of gloom. When they talked about their past life it was of the form, 'Of course we've got to be grateful because we've had a good life up till now. But that 's all gone now and it's so hard facing this illness.'

In pastoring them I acknowledged, of course, that this was a terrible blow, empathising with their feelings of grief and bewilderment. However I also felt their current focus on Harry's illness and impending death had obscured their view of the fulfilled and happy life they had enjoyed, *and in the context of which* Harry was approaching the end. So I asked them some simple, positively slanted questions about the past, such as: 'You've been together for over 50 years and you often say you're best friends. I'd love to hear what that's been like.'

This kind of questioning led to a number of lively conversations including much laughter, as they recalled significant events and issues from their past. It also led to them developing a pattern of initiating such conversations themselves, in my absence. Admittedly it did not lead to Harry working his way through a full and balanced reminiscing process (in my experience very few New Zealand men do this). But it brought some of the more uplifting elements of Harry's past into his present, and enabled him and Martha to face his death with a more positive spirit of genuine thankfulness and joy for the meaningful and mutually enriching life they had shared together.

This is not to say that 'everything must be beautiful' at the end. It may well be deeply meaningful to a client to approach death having recalled and come to terms with his worst and most destructive mistakes, as well as his successes and joys. But death does not always come in such a way as to leave a person the luxury of having the mental space, physical comfort, or time to work such issues through. In the real world a pastor has to take the opportunities that are given.

There is also value in simply enabling a sick, elderly person to have the experience of joyful reminiscing. Beatrice, in her late 80s and becoming more frail every year, was in hospital after a fall. Those who had been visiting her regularly in her home had found her constantly unhappy and complaining. When I arrived to see her she immediately began a torrent of complaints - about the hospital, her relatives, her health, and life in general. At an opportune moment I said, 'My goodness, you're 88 years old. What a long time you've been on this earth! You must have some remarkable memories.' She began to soften, saying, 'Oh yes; I've seen an awful lot.' I responded, 'And I bet you must have had your moments. I bet you've got some wonderful memories.' She smiled and began to talk about her childhood, catching my genuine interest. Whenever she slipped back into grumbling I shifted the focus by asking about the positive side of the story - how she *overcame* difficulties, how she *survived* hardship, how she laughed and played as a child. After half an hour she was in buoyant spirits. We then discussed what we had been doing, and she commented that she had not looked at some aspects of her life in that way before. As I made to leave she started to complain about life again, but then smiled, checked herself and said, 'Oh but I've got plenty to be thankful for.'

A few days later when I reported to the pastoral committee (including the lay visitors) of Beatrice's parish that I had enjoyed a lively and happy conversation with her about her wonderful memories, they looked stunned, asking if I was joking. Their experience of Beatrice did not fit this picture at all.

The beauty of a narrative approach is that it enables the pastor to help the person *create new realities*. 'In our therapeutic conversations, we are 'making up' meanings in interactions with others, not discovering truths' (Freedman and Combs, 1996, 45).

Note that we are making up *meanings*, not events. Only Beatrice can say what the events were in her life. The pastor, however, can ask questions about these

events in such a way that valuable meanings are created out of them. For example, I sometimes ask, 'If I had been a fly on the wall during that terrible family crisis you went through in the late 1940s, what qualities and strengths would I have seen in your character that would have led me to say to myself, 'Aha! This woman is going to do well in her life.?' This type of question, used during reminiscing, can shift the person's focus from their defeats to their strengths. It goes toward creating new realities for them which enhance their sense of nobility and value as they approach their death. It does not deny the negative but puts it into a creative, positive context.

But we do not have to wait till our old age to begin reminiscing. The narrative approach to reminiscing can begin at any age. Whenever a narrative therapist helps a client identify unique outcomes from the client's past, a process of reminiscing has begun. A person does not have to 'have a problem' to benefit from this kind of exercise of recall. It would seem healthy and re-creative for anybody, at any stage of life, to spend time examining their past, recalling the special moments that are indicative of strength and nobility, filling out the landscape of consciousness and of meaning in relation to these, and drawing these meanings in to the person's ever-developing story. A pastor can stimulate this kind of reminiscing in many different ways - through Lenten study groups, confirmation classes, sermons, informal discussions, and regular pastoral visiting. The sermon, 'The Creative Art of Reminiscing' explores this theme.

Christian narrative reminiscing can have the added dimension of recalling special moments which the person would identify as 'the hand of God' on their life. These might include dramatic growth points, akin to Saul's conversion (Acts 9:1-30), moments of decision, times when the person's strengths had brought them through adversity, and times when new challenges had forced them to reassess the direction of their lives. Questions like, 'How has the hand of the God of love been manifest in your life?' can help focus persons' attention on the positive, re-creative side of their past experiences.

In a narrative approach, persons would be encouraged to 'story' these moments into the present, and would then have the option of identifying with these stories as their preferred perspective on their lives.

Narrative therapy and reminiscing at a church social

Church life is busy with social events - weddings, post-funeral luncheons, after-church morning teas, parish pot luck dinners, picnics and get-togethers. The pastor is frequently presented with opportunities to socialise with parishioners, where serious one-to-one conversation may be possible but there is no opportunity for the more intimate encounter of counselling. This can be frustrating for pastors who are aware of needs in their people and would prefer to use the time talking quietly to individuals in their homes or in the counselling office.

But the storying aspects of narrative therapy make it easily adaptable to the one-on-one conversations that can spring up in a corner at a casual social function. At a recent church morning tea function I found myself sitting next to Kate, a woman in her early 70s whom I knew virtually nothing about except that she had been widowed for a long time. At an appropriate moment in the conversation I said, 'I understand you've been on your own for some time now.' She replied that her husband had died some 10 years ago. My next comment was, 'You must have been married for a good long time.' She smiled and said proudly that they had spent 35 years together. I responded, 'You must have a lot of great memories from that time.' Her smile broadened and she began to tell me of some of the special moments in their life. I listened attentively and asked questions designed to fill in details and build the snippets of memory into full blown stories. When she touched on sad times - like her husband's wartime horrors and their separation during that period - I acknowledged and affirmed her sense of sadness, but then asked what strengths she remembers finding in herself which brought her through so well. We then reflected together that it was an

important realisation for her that she could show such strengths. She commented that it was a pleasant surprise to her to see herself as such a strong person. From a narrative perspective one could say she was discovering a new narrative about herself, through which (if she kept up the process and developed it) she could look at aspects of her life in a renewed and empowering way.

Throughout the conversation we were interrupted several times by people passing scones and offering tea refills. But this did not detract from the thread of ideas, and nor was the type of conversation in any way incongruous in that setting. Nothing she was saying was of a sensitive nature that should be said only behind closed doors. After half an hour I thanked her for what was for me an enriching conversation, and moved on. The next Sunday after church she thanked me warmly, saying she had found it an uplifting conversation.

From the pastor's point of view this was not just a casual chat about the past. It was a considered effort by me to co-author with her some new, enriching stories about her life, based firmly in her actual experience. As a pastor I believe I have a general permission to engage people in enriching conversations, so I do not find anything unethical in conversing with people in this way.

Narrative pastoring in the last stage of life

Renata died at the age of 99. In the last weeks of her life I visited her frequently. She was weak and had difficulty breathing, so I seldom stayed longer than 20 minutes. I encouraged her to talk about her distant past, using narrative 'landscape of action' and 'landscape of consciousness' questions (White, 1991; see chapter one). It was hardly necessary to bias these in a positive way, as Renata had a remarkably consistent positive attitude. I learned a great deal about Renata's childhood in a small village in Germany, how she learned to make bread and assist her father with farm work, how she got to school, etc. One interesting question was 'You've lived nearly a hundred years on this earth. What was it about your childhood that set you up for such a good, long life?' She

immediately and cheerfully replied, 'It was the vegetables. We ate so many vegetables. We were poor, so we grew our own. We had meat just once a week, and only a small portion. And in summer we had the wild fruits and berries. And I do love vegetables. Oh I do so very much.' After we had reflected on that for a while she added, 'And it was that we learnt to do without. We didn't have much so we learnt to do without, and enjoy the simple things.'

I visited Renata for the last time a few hours before she died. She had slipped out of consciousness. Her daughters and a few other family members were with her. I did not know whether she could hear me (a person in a coma can often hear, though not respond to, what is going on around them), but I held her hand and, speaking close to her ear, began to tell her how much I had enjoyed the stories she had told me of her life. I repeated some of these stories back to her, then prayed with her and said goodbye for the last time.

In meeting with relatives in preparation for the funeral I found that most of the stories were known to others or were of a public nature, so I was able to repeat them in the funeral eulogy. But I was also able to put a fresh slant on them, as Renata had spent her last days gathering them into herself and identifying with these joyful and valued aspects of herself from her distant past. I was confident that she had died full of happiness.

Long term bereavement

People grieve for years. Pastors meet and work with many widows and a lesser number of widowers of years or decades standing. Many of these people have experiences of their deceased partner similar to Rosemary's, but do not quite know how to view them. I often find myself affirming with these people the positive value of these experiences, and also assuring them that this does not represent some kind of madness. While taking time to acknowledge and validate their ongoing grief, I also frequently ask widows and widowers about the 'many great years you must have enjoyed together,' encouraging them to express the

memorable aspects of the relationship, to tell stories of particular incidents that stood out as special, and to draw these into their own ongoing identity as stories which are part of themselves. These people frequently express pleasure and relief at finding a meaningful framework for understanding and valuing these experiences, while also appreciating the pastor's understanding in validating their ongoing sense of loss. With regard to the problematic or sorrowful aspects of their marriage, I encourage exploration of these, validating the person's sense of regret or anger, but also asking what qualities the person now sees himself as having displayed in coping with and coming through these difficult times.

Other losses

We experience grief in response to many different losses, not merely the loss of a loved one through death. A narrative approach is equally helpful with these other losses. These can include the loss of a spouse through divorce, the loss of a meaningful task through its accomplishment, the loss of a career or hobby. The pastor can help a person retell the positive stories of the lost person or object, so that the person may identify with these stories, drawing them into herself.

Allan was mourning the 'loss' of his children. They had not died, but merely become teenagers. He no longer knew how to relate to them. The playful, innocent youngsters he had romped with and taken on afternoon hikes and to Walt Disney films hardly seemed to want to know him any more. They appeared to have almost totally rejected all child-like characteristics in themselves, and seemed pouting, serious and over-influenced by peer pressure. The relationship between father and offspring seemed to have broken down.

When Allan came for counselling we looked first at his sense of grief at the loss of his children. So I invited him to tell me about the children they once were. He told me many details of their early lives, and how he had found meaning and enjoyment in these events. Along the way I suggested to him that everybody 'loses' their children in this way, as all children must grow up. But, I

commented, those events were real, as are our memories of them. He could, if he wished, gather these memories into himself in the form of the stories he was telling, take them gratefully on board his life, and allow himself to be permanently enriched by them. He could also include thanksgiving for these things in his prayers. His identity would now include such narratives as, 'I am the man whose children did these wonderful things and gave me such joy.'

Allan found this a helpful approach and began looking through old family photo albums, recalling the stories around the photos, and allowing himself to be filled up and enriched by them. Allan and I then both got a surprise. As he did this, he found his attitude to his teenage children changing. He found himself complimenting them for displaying the positive characteristics he was recalling from their childhood - their curiosity, their sense of humour, their harmless mischief, their caring about the feelings of others - as if these things were actually happening in the present. He then noticed a remarkable change in his children. They began to relate to him once again in a positive way. They confided in him. They asked his advice regarding clothing. They asked his opinion of the latest pop songs. Meal times became less tense, and there were jokes and stories again. The difficult aspects of teenagehood remained, but a more positive side was also present, and Allan found he had the basis of a new relationship with his children.

I did not expect this to happen. But it seems the new stories Allan began telling himself about his children created a new reality in the family. Previously the teenage children had been picking up Allan's story of them as difficult, untrustworthy, bad company. Now they were detecting a more positive story. No doubt this story began to rub off on their own self-storying processes, and they consequently began to live it out. Of course this did not bring about a complete, absolute change in his relationship with his children. The toxic behaviours still persisted at times. But there was now a new, contrary 'story' being lived out between them, running alongside the older story. A window had

been opened for Allan into a new way of relating to his children, and he could work on developing this as time went on.

Concluding

A Christian narrative therapy can be a very great resource for pastoral work with the dying, the bereaved, and those who have suffered any significant loss. From both Christian and pagan religion we uncover the repressed knowledge that personality is socially distributed and therefore lives on after death, in the lived experience of the bereaved. Using this knowledge we can help the bereaved find meaning and empowerment in their experience of the continued presence of the deceased in their lives. This can function in a similar way for other types of personal loss such as that caused by a geographical move or the growing up of children. A more general storying can help old people - and not so old people - as they engage in the task of reminiscing. While the events they recall from their past are not necessarily 'unique outcomes,' they are nevertheless special, often definitive, events whose landscapes of action can be explored and whose landscape of consciousness can be structured into a new, meaningful story. This story is now available as a new perspective which the person might prefer, through which he or she can re-interpret much of his or her life and find new meaning in the whole.

Chapter Seven

Depression, oppression and the blues

In my counselling and pastoral work I have long been concerned to find better ways of helping people who present as ‘depressed.’ A form of narrative therapy is showing great promise in helping some people, particularly when combined with a linguistic transformation (cf. de Shazer, 1991) which dissolves the notion of ‘depression’ and substitutes that of ‘the blues.’

The word ‘depression’ is very old, but, according to the Shorter Oxford Dictionary, its meaning as a psychological condition or disorder dates only from the early 20th century.⁸ Until then it was not a commonly used term for an emotional state. People used other words to describe feelings of extreme sorrow accompanied by physical effects such as poor sleep, low motivation and physical inactivity. The word ‘depression’ was coined by the psychiatric profession as part of the general tendency to label and categorise human mental states along medical lines (Parker, et.al., 1996). As we have seen, this movement has been extremely influential in western society and culture. Together with other words such as ‘anxiety,’ ‘neurotic,’ etc., the word ‘depression’ as a descriptor of a mental and physical condition has gained unquestioned acceptance in the medical and helping professions. Further, our culture has adopted it as if it were ‘true.’ People diagnose themselves and others as ‘suffering from depression.’ It is part of our literature, our everyday conversation, our way of thinking.

⁸. As far back as the late 18th century there are incidences of the word ‘depression’ being used as a general term for lowered levels of functioning or powers, for example the slowing down of the body caused by influenza or sea-sickness, or any negative feeling including ‘excessive fear, grief, anger, religious melancholy, or any of the depressing passions.’ (W. Buchan, *Dom.Med.* 1790,: 467, quoted in *The Oxford Dictionary.*)

A social constructionist approach enables us to see that the clinical notion of 'depression' is a socially constructed reality (Gergen, 1985; Gergen, 1994: 222 ff). The word was originally coined as a metaphor. The literal meaning of depression - a recess in a flat surface - seemed an appropriate analogy to describe the recess in a person's feelings, energy levels, motivation, etc. However, the clinical notion of 'depression' has now solidified into a very concrete-sounding, clearly definable illness. The people who define the terms of this 'illness' are the world wide community of psychiatric and psychological professionals (Parker, et.al., 1996).

In itself this sounds harmless enough. However, five consequent developments have arisen out of this.

1. Professionalisation. Firstly, it has given the professionals enormous power over people's lives, as their professional language operates as a 'practice of power' (Foucault, 1963). If I am feeling rock bottom, have low energy levels and little motivation to do anything, I may be 'diagnosed' as suffering from 'depression.' This means I am not quite a 'normal' or 'healthy' person, and am subtly divested of my otherwise full social standing.

2. Popularisation. Secondly, society as a whole has embraced this usage of the word 'depression.' People now diagnose themselves and others as 'depressed' or 'suffering from depression,' as if the medical profession had proved its existence in much the same way as it has proven the existence of the HIV virus. Our culture assumes that 'depression' is an actual, knowable entity, which the medical and psychological professions have 'discovered' and 'investigated.' It is assumed that this disease or disturbance is the same thing which our ancestors in the sixteenth century spoke of as 'melancholy' or 'acedia,' on the basis of which they excused themselves from work or social obligations (Gergen, 1994: 223. See also Burton, 1624/1989). So, in popular discourse, people are now less likely

to be described as ‘heartbroken,’ ‘melancholic,’ or ‘full of sorrow,’ and instead give each other the medical label, ‘depressed.’

3. Marginalisation. Thirdly, the connotations of the word ‘depression’ have become sterile, negative and socially isolating. A person who is suffering from ‘depression’ is seen as something of a loser, an outcast, not fully part of the healthy, ‘normal’ majority. There is nothing noble or poetic about suffering from ‘depression.’ The word carries no connotations of heroism or greatness. There is no great tradition of poetry or lyric around the words ‘depression’ and ‘depressed’ as there is around others such as ‘heartbreak,’ ‘the blues,’ and ‘feeling down.’ Those who see themselves as suffering from ‘depression’ carry an extra burden, at least as heavy as the ‘depression’ itself - they are identified as losers, outcasts, people who do not belong in our cool, successful, health-obsessed society.

People are thus deprived of the communal and healing connotations of other words for abject misery. The field of meaning of the word ‘depression’ is very different from that of other culturally saturated descriptors of our sorrows. The connotations of disease, dysfunction, inadequacy and mental illness associated with the word ‘depression’ have their own secondary effect on the person labelled ‘depressed.’ Being forced to identify with this label leads to further marginalisation.⁹ ‘Depression ... is not the same as melancholia was’ (Parker, 1996: 58).

4. Internalisation. Fourthly, ‘depression’ is seen as something that lives right inside the person - indeed as part of the person herself. The metaphor ‘depression’ has become grafted on to a mechanistic or biomedical model of human functioning¹⁰, so as to be seen as inherent in the sufferer, like a faulty part

⁹. For a fuller treatment of the subject of emotions as socially constructed, see Gergen (1994: 210-234).

¹⁰. For a description of the effects of such models see Epston & White, 1989

of a machine or a biological lesion. A client recently said to me, 'In 1985 I got depression,' and then proceeded to tell his story as if 'depression' were part of his very makeup. Since 'depression' is regarded and spoken of as a disease, it seems to follow that it exists entirely inside the 'depressed' person.

5. Individualisation. Fifthly, 'depression' is seen as an individual, rather than a social-political, affliction. If a person is suffering from 'depression,' the reasons must reside within the individual. It is a malfunction in their brain (psychiatry) or mind (psychoanalysis), a failure to adjust to the realities of life (behaviourism), a faulty perception of the world (cognitive psychology), a hiccup in the learning process (educational theory), or a natural but unfortunate consequence of aging (developmental psychology); it has little or nothing to do with the negative, oppressive forces of society and culture.

I am not going to argue against the considerable weight of evidence that chemical states in the brain are associated with what is termed 'depression.' It would seem intuitively obvious that deeply unhappy feelings and a lack of physical vitality should have their biochemical correlates. However, I will be suggesting that the culture of 'depression,' which is held in place by the medical and helping professions, can be a stumbling block to healing rather than a help. In doing this I will describe how an alternative culture - that of 'the blues' - could liberate us from all these difficulties. First, however, it is interesting to look at some Biblical material in relation to this theme.

In the New International Version of the Bible, a typical recent translation, the word 'depression' occurs only once. This is at I Kings 21:5, where the Queen Jezebel says to her husband Ahab, 'Why are you so depressed that you will not eat?' However, this is a rather free translation of the original, which may be better rendered, 'Why is your spirit so vexed that you do not eat?'

Aside from this reference, the Bible has nothing to say about ‘depression.’ It does talk about sorrow, broken hearts and weeping, but the concept of ‘depression’ as an illness or psychological state was unknown in Biblical times. Instead, the Biblical writers have a great deal to say about *oppression*.

When Jesus began his ministry, in his home town of Nazareth, he stood up in the synagogue and quoted these words from the prophet Isaiah:

The spirit of the Lord is upon me,
because he has anointed me to preach good news to the poor.
He has sent me to proclaim liberty to the captives,
and recovery of sight to the blind,
to set free the oppressed,
and to announce that the time has come when the Lord will save his people.
(Luke 4: 18-19)

These words have been called ‘Jesus' manifesto’ - a simple statement of his aims and intentions. After quoting them he said to the people, ‘This passage of scripture has come true today, as you heard it being read.’ (Luke 4:21)

So Jesus' aims and intentions focused on ‘setting the oppressed free.’ The Bible is very concerned to set people free from oppression. The Israelites' religion grew out of their experience of oppression as slaves in Egypt, when Moses led them to freedom. The most frequent theme of the Old Testament prophets was their call to free the people from oppression. A typical example is Jeremiah 7:6: ‘... do not oppress the alien, the orphan, and the widow, or shed innocent blood in this place ...’ In the Book of Proverbs we are exhorted not to oppress others. For example, Proverbs 14:31 reads: ‘Those who oppress the poor insult their Maker, but those who are kind to the needy honour God.’ The Psalms contain many cries of woe to God from people who were oppressed. Typical is Psalm 56:1 ‘Be

gracious to me, O God, for people trample on me; all day long foes oppress me...’

My concordance lists 135 references to oppression in the Bible and Apocrypha. It is a consistent theme in the Jewish and Christian scriptures.

Jesus was concerned to set people free from oppression. He wanted to lift away from them the heavy burdens, painful thorns and crippling weights that pushed them down and made them sorrowful.

In his ministry he did just that. He healed lepers, the most socially oppressed people in the community. He confronted religious leaders who laid impossible burdens on the people. He honoured and respected women, giving them the dignity of being equals before God. He took children in his arms and blessed them. He threw the money changers out of the Temple so that ordinary people could worship God without incurring a huge financial burden.

Jesus set people free from oppression, just as Moses set the children of Israel free from the oppression of slavery in Egypt. I believe it is fair to say Jesus wants to set people free from oppression today. He wants to lift away from us the loads and burdens and terrors that push us down and oppress us.

However, most people today do not speak of themselves as being ‘oppressed.’ Instead they use word, ‘depressed.’ Depression is the big word today, not oppression. Many, many people in our society today claim to ‘suffer from depression’ - some rather mild, some very severe. Tens of thousands are taking anti-depressant tablets, and in my own country general practitioners are now permitted to prescribe Prozac. It is surely extraordinary that so many people today claim to be depressed. What a reversal this is from the Biblical period, when oppression, not depression was seen as the ever threatening scourge.

Why do we get ‘depressed,’ while they felt forever ‘oppressed?’ I believe it has a great deal to do with the way the psychological word ‘depression’ has come to dominate our language about misery and its causes today. We will explore this issue further by looking at another term for sorrow, ‘the blues.’

The blues

During the shameful period of slavery in the United States, and beyond this into the continuing social injustices of its aftermath, Afro-Americans coined the term ‘the blues’ to express and describe the extreme sorrow and despair they were experiencing. The earliest recorded use of the word ‘blue’ to designate an anxious or troubled state of mind dates to the 1500s. In the 1600s the term ‘blue devils’ was commonly used in England to refer to evil spirits that brought on feelings of misery and despair. In the early 1800s there is evidence of the term ‘blues’ in the United States being used interchangeably with ‘blue devils’ to describe a mood of low spirits and emotional stress (Murray, 1976; Oliver, 1963).

Hence, ‘the blues’ were certain evils spirits that invaded one and caused one to feel utterly miserable, despairing and without hope.

We tend to use the phrase ‘the blues’ rather lightly today, as if this is merely a mild form of sadness in contrast to the terrors of ‘depression.’ But ‘the blues’ represented the utmost limits of despair and heartache for the Afro-Americans who coined the phrase.

These people were forcibly taken from their peoples and homelands in Africa, cruelly separated from their communities, partners and families. They were stacked in slave ships like cheap cargo, chained in rows without food, water or sanitation, and shipped in the most appalling, disease-ridden conditions across the ocean to a strange and oppressive land. Those who survived were auctioned like cattle, and forced to work at the whim and fancy of their ‘owners.’ When

they formed new relationships or had children, they were frequently torn away from these and moved to wherever their labour was seen as most profitable. In the preface to his moving collection of the narratives of former Afro-American slaves, James Mellon sums up the depraved cruelty which often characterised the slave's life:

...the former bondsmen describe the feeling of being sold away from one's wife and children in a public auction, of being rented out, borrowed, traded for a mule or cow, insured for loss, willed to the master's relatives, put up for collateral in loans, or simply lost by one's owner in a card game. We hear how some slaves were whipped for 'fun,' raped, or made to fight one another like gladiators; how runaways were hunted by their masters and treed by a pack of hounds; how a few bondsmen were rolled down bumpy hillsides in barrels that had nails driven through the sides, while others were boxed up in wooden crates and shipped to neighbouring states (Mellon, 1988, xiv).

When the slaves got their freedom after the Civil War they were still subject to racial violence, lynchings, abject economic insecurity, and imprisonment in horrendous labour camps for such trivial offences as debt or vagrancy.¹¹ Their history of temporary and broken relationships often deprived them of the social stability in which supportive, lasting partnerships could be formed and sustained.

We can hardly imagine the oppression these people suffered.

It would be safe to assume the depths of sorrow and heartache they felt were at least as terrible as that which we call 'depression.' But they called it 'the blues' - an invasion of devils. This was their word, part of their emerging discourse to verbalise the inner experience of their outward oppression. In this respect, then,

¹¹. For accounts of conditions in such southern prisons, see Barlow (1989) pp. 56 ff, and Lomax & Lomax, (1936), p. 58 ff.

it would be a foolish professional who claimed that ‘the blues’ were not as serious as ‘depression.’

A slave woman known as Dink wrote of the sorrow she and her sisters felt when the freight train came to town and took a random selection of their men away to some distant field of work:

Je' as soon as de freight train make up in de yard,

Some poor woman got an achin' heart. (All blues quotations from Lomax & Lomax, 1934, 191-211)

Her sorrow led to thoughts of suicide:

I'm gwine to de river, set down on de ground',

Ef de blues overtake me, I'll jump overboard and drown.

She describes the intensity of her sorrow with this vivid metaphor:

Ef trouble was money, I'd be a millionaire,

Ef trouble was money, I'd be a millionaire.

Unlike our more mechanistic concept of ‘depression,’ Afro-Americans saw the blues as separate from themselves, moving into and out of their lives (since they were, after all, ‘blue devils.’) An 18 year old black girl in prison for murder dreams of happier times:

De sun gwine shine in my back do' some day,

De sun gwine shine in my back do' some day,

De win' gwine rise, baby, an' blow my blues away.

For another Afro-American, the blues are more tenacious, but are still seen as separate from the person:

Takes a long freight train wid a red caboose to carry my blues away.

This way of thinking parallels the ‘externalising of the problem’ which is central to narrative therapy. The problem is not seen as part of the person but as an unwelcome visitor.

Further, unlike the victims of ‘depression,’ who tend to be pushed to the margins of our society, Afro-Americans were drawn together and to the centre of their society by their experience of the blues. There was no shame in confessing the blues had come upon you. It could almost be seen as a badge of belonging.

One of the remedies for the blues was to sing about them.

But good Lawd, I got de blues, can't be satisfied, got to sing...
sings slow blues, don't know what I'm singin' don't know what they mean.
Still they has this singin' feeling, an' I puts all sorts an kinds together...

It was often assumed by the wider white populace that the constant singing of Afro-Americans indicated they were contented with their lot as slaves. Frederick Douglass, commenting on these attitudes in 1855, notes:

I have often been utterly astonished, since I came north, to find persons who could speak of the singing among slaves as evidence of their contentment and happiness. It is impossible to conceive of a greater mistake. Slaves sing most when they are most unhappy. The songs of the slaves represent the sorrows of his life; and he is relieved by them only as an aching heart is relieved by tears. (Douglass, 1855; quoted in Barlow, 1989, 14).

Afro-Americans developed a way of singing about the blues which had its roots in West African musical forms. It involved a steady, beating rhythm, with counter-rhythmic unison lines of song interspersed with the spontaneous offerings of individuals (Lomax & Lomax, 1934, 58). The basic rhythm would often be kept by the unison strokes of work implements in a chain gang, leaving voices free to play with and embellish the timing. Voices would bend notes to

express the depths of grief, something akin to moaning. This provided the basis of what later became the popular musical form, ‘the blues.’

As Barlow points out, singing the blues was not merely a way of expressing grief but, more important, a medium of resistance to oppression. The songs contained their expressions of rage at the injustice and humiliation they were suffering. The medium of the (musical) blues was the vehicle of resistance and hope. To sing the blues was to rebel. It was to protest against the regime of the white devils whose cruelty brought on the blue devils.

With the advent of radio and the phonograph, blues singing was more widely popularised around the beginning of this century by some of the great founding figures of the recorded blues - Mississippi John Hart (1893-1966), Bessie Smith (1894-1937), Muddy Waters (1915-1983), B.B. King (b.1925), Buddy Guy (b.1936) and others. The (musical) blues have fostered the tradition of song about sorrow, together with the moaning, bending notes of the originators of the blues.

The blues in counselling

In what ways, then, can ‘the blues’ bring light and life to our counselling of ‘depressed’ people?

1. Firstly, it gives us a linguistic advantage. Using the phrase ‘the blues’ can shift the meaning of the client's sorrow out of the domain of psychological discourse, into an entirely different and more dynamic domain. The client is no longer a sick person, suffering a disease that makes him or her a ‘loser’ or an outsider. Rather, he or she is identified with a large sisterhood and brotherhood who have a noble, dignified and heroic history. Having the blues is a badge of respect and belonging to a great people, not the mark of an outcast.

2. Secondly, it brings alive the political dimension of the person's sufferings. Afro-Americans got the blues because they were politically, socially and culturally oppressed, and they sang the blues as a first step in resistance to and rebellion against this oppression. What kinds of political, social or cultural oppression have contributed to our clients getting the blues? It is interesting how quickly clients pick up on this theme when they begin identifying with the people of the blues. Without prompting, they often begin to name aspects of social, political or cultural oppression which they see as contributing to their sorrows. The psychological discourse of 'depression' has denied them this opportunity, as it individualises, internalises and pathologises their problem. But by re-naming their problem 'the blues,' the door is opened for a wider exploration of the role of societal and cultural oppression in engendering their misery. It also provides a model of resistance and rebellion.

3. In the culture that persists today around 'the blues,' there are connotations of elegance, admiration and poise. The notion of 'the blues' has generated its own discourse and positive images. Far from being a sub-culture of losers and outcasts, the people of the blues are 'OK,' if not even a little groovy and cool. A huge musical subculture has grown up around the blues, indeed the traditional blues of B.B. King and his contemporaries have deeply influenced many forms of popular music. This is a culture of welcoming and belonging on the basis of your failures and sorrows, rather than of marginalising.

Counselling James

In our first meeting, James claimed to have had 'depression' since 1985. It had started when he and his girlfriend broke up, about the same time as he found himself performing poorly in his job. This had led to feelings of misery, physical inactivity and lack of motivation for living. He had then gone to England, where the grey weather and another unsuccessful relationship led to an even more severe period of 'depression.' It was during this period that he first named his

affliction ‘depression,’ having read some psychological books and attended a weekend course on relationship problems.

When he returned to New Zealand his life never got back into full swing, as he was beset with continued episodes of ‘depression,’ though not as severe as those in England. Now he was seeing a psychiatrist regularly and was taking Prozac, though depression was still a large part of his life. He had come to me because he had heard about the narrative approach from his (part time) employer and wanted to try it.

In our first meeting we conversed so as to externalise the ‘depression,’ and looked for evidence that he was now a depression-beater rather than a passive victim of its attacks. I did not at this point introduce language about the blues. The approach of this meeting is summed up in the letter I then wrote to him:

Dear James,

It was good to meet you this morning and discuss with you some of the ways you're learning to beat depression. I got the impression you're doing well. I was impressed with your courage and determination to get on top of it. Here's a brief account (from my point of view, I admit) of some of the significant things we talked about.

Depression first came into your life in 1985, and it's been harassing you on and off ever since. It's not nearly as bad as it was at first, and certainly not as fierce as it got in England, but it's still a big nuisance and you'd like to get better at keeping it out. It invades you like those enzyme you described, which are all mouth, eating up everything in their path.

We talked about two of the ways you're learning to beat it.

1. By working. When you do regular work, with a good routine in your life, the depression gets less chance to attack you. So, even though sometimes you don't feel like working, you get yourself up out of bed anyway. Ron's a good boss, and that helps, because you're a loyal worker and you want to work hard for him.

2. You've got a strategy for blunting the attacks of depression. When you see it coming, you say to yourself, ‘Oh, I think I'm going down.’ You don't deny it's coming; you bravely admit to yourself that it is. Then you think to yourself, ‘I know I've been like this before.’ i.e. you remind yourself that it's well-known territory, nothing to panic about. Then you say, ‘The lower I go, the harder it'll be to get back.’ So you try to limit the depth of the depression, by making up your mind to be

kind to yourself (not expect too much of yourself for the next few days) and to be patient. When you do this, you find you can handle it much better. You acknowledge that it's just an attack of depression, and that you don't need to get depressed about being depressed.

This is a great strategy. Depression is the enemy attacking you, and you've developed this strategy to blunt it's attack. You know it's only got a limited amount of ammunition and it's going to run out in a few days at the longest. So you just batten down the hatches and wait for it to pass.

I admire your courage in this. Courage is one of the most important qualities we need in life - and you've got lots of it.

Then there's the a third strategy we discussed:

3. Remind yourself that depression has no right to invade your life. It has no right, because you're a fine, valuable, worthwhile person. Here are some of the reasons you told me you know this:

- You try hard to get on with your mother.
- You try and do a good day's work for Ron, even if you're feeling bad.
- You're trying to become a worthy citizen by getting on top of your problem.
- You have good values, such as honesty.
- You can be a good hard worker, on the good side rather than the fair to bad side.
- You have a very good way of putting things - a good grasp of the language.
- You're an educated man, with a Bachelors degree.
- You want to be helped, and can be because you express yourself so well.
- You think all human beings are worthy.
- You're growing in humility (no longer stuck up).
- You have a reasonably playful spirit; you're a fun person.
- You're a sociable person.
- One teacher said you were 'The most conscientious person she'd ever taught.'
- You're very loyal to people you respect and trust.
- You pull your weight, and more.

This is some of the evidence that you're a good, worthy person. So depression has no right to intrude on your life. I suggested you might like to tell it that, when it tries to invade you. You might need to read out the entire list of virtues (above) to make sure it takes the point.

I'd be very interested to hear how you get on in applying strategies 2 and 3 over the next few weeks.

Best wishes for the next 2 weeks. The story I'm telling myself about you is that you are no longer James the victim of depression, but James the depression-beater. Looking forward to our next meeting. Regards,

Ray Galvin

In our second meeting we reflected on the letter and his progress during the two week interval. James reported that he had found the approach very helpful and novel, and that he had been looking forward to our second meeting. He had not had any major attacks of 'depression' in the last two weeks but had been feeling mildly 'depressed' all week, as his boss was sick and he had been temporarily put off work. Up to this point I had accepted the language of the helping professions in retaining the term 'depression,' though I had spoken of it not as an internal illness but an external intruder on James' life. This had addressed the professionalisation and internalisation of 'depression' discourse noted above, but had not challenged its popularisation, individualisation and tendency to marginalise.

So in this second meeting I took matters one step further, introducing James to the notion of the blues.

At an appropriate point in the conversation I asked him what he knew about the blues. He said he knew this as a musical genre and a popular expression for a mild form of depression. I then told him my story of the origin and history of the blues as an expression coined by Afro-Americans to describe their feelings of utter, abject misery in the context of their oppression. He said it struck him that these blues would have been every bit as severe as his 'depression,' if not worse.

I then asked him whether he would rather think of himself as having 'depression' or of having the blues. He replied immediately, 'Definitely the blues' (all James' quotes are verbatim from my notes). I asked him why: what are the advantages of the blues over 'depression?' He gave me six reasons:

1. 'At least they're singing. They've got enough get up and go to make a song.'
2. 'They're in good company. They congregate together when they've got the blues.'

3. 'With the blues, maybe there could be an improvement in the future; there's more hope.'
4. 'It's a cooler image.'
5. 'It doesn't sound like a mental illness at all - rather a victim of past generations, being slaves and that.'
6. 'There are political things in it.'

After discussing each of these ideas in turn, James then said, 'There's a parallel with what I've been going through' I asked him to elaborate.

Firstly, he said his family was 'pretty spread out,' and he'd been separated from his family, like the Blacks were. James was brought up entirely by his mother, while his half siblings, nephews, nieces and uncle, whose company he very much enjoys, live in the south. He said he felt that circumstances had kept him in Auckland, cut off from his people, and so he could identify with the Afro-Americans in their forced separations. I was surprised he made this connection, as I had not noticed any comment from James connecting his 'depression' with isolation from his family. But the energy with which he expressed this convinced me it was a very significant factor which he had never expressed in the psychological milieu in which the causes of 'depression' tend to be seen largely in the individual.

Secondly, like the Afro-Americans, he had been made to do things he did not want to do. In particular, he had been sent to boarding school for much of his childhood, where he found the bullying oppressive and deeply distressing, akin to slavery.

He said he had the advantage over the Afro-Americans that he could now take more control of his life. He had been thinking of going and visiting his relatives with a view to seeing whether he would prefer to live in the south. He found Auckland an oppressive city in any case, with its traffic congestion and

impersonal character, and it had always been hard not having family around him. So we discussed this more fully and he said he would visit his family during a one month holiday coming up in five weeks, with a view to seeing whether to live nearer to them.

We concluded our meeting by talking again about the blues. I asked him how it would feel to say 'I've had the blues this week.' He responded, smiling, 'It feels quite groovy.'

In this second meeting, then, we began to experience a freeing from the three shackles of 'depression' discourse which were not addressed by the simple externalising conversation of the first session: its popularisation, its marginalisation, and its individualisation.

With regard to the *popularisation* of 'depression' discourse, we simply by-passed this by James' identifying with the blues rather than depression. He no longer has to identify with the popular definition of himself as having 'depression,' as he finds the notion of the blues fits his experience better.

Nor is he locked into a *marginalising* discourse. His new discourse is 'groovy.' He is a member of a noble brotherhood whom he naturally admires. Through knowing the blues, he is an initiate of a society which has only positive and energising connotations.

Finally, he was freed from the *individualising* pressure of 'depression' discourse. He saw (and he showed me) that the blues were coming upon him largely because of his social and familial isolation and his long experiences of oppression at boarding school. His suffering had clear social-cultural determinants. He was a man deprived of his extended family and forced into a kind of slavery. He was beginning to plan strategies of resistance.

For me this raises a significant challenge to the purveyors of 'depression' discourse. This discourse individualises our misery and thereby unhooks it from the social, cultural and political forces which contribute to it. 'Depression' discourse serves to protect the injustices in our culture from a backlash which would challenge them. If we can define the victims of our cultural oppression as 'depressed,' or even worse, as 'suffering from depression,' we lay responsibility for their problem entirely upon them, and do not look at the societal determinants.

Parker, et.al. (1996) refer to Brown and Harris' classic study which argued that working class women had higher rates of 'depression,' not for any reason in their internal makeup but because they had higher rates of severe life events and major social difficulties. (Brown & Harris, 1978). Parker, et.al. comment:

Wiener and Marcus (1994) have argued that the concept of 'depression' individualises a social transaction: 'helplessness, powerlessness, and worthlessness do not occur in social vacua.' (1994: 225). Allwood (1995) has also noted how 'depression' serves a number of societal functions: urging people to see the events of life as a matter of the psyche rather than the public domain, encouraging internal self-regulation, specifically of women, and as a potentially damaging form of liberal humanistic therapeutic theory emphasising personal responsibility rather than a need for social change. (1996: 47)

The increasing use of anti-depressant drugs could simply serve to entrench this oppression. If people are drugged into coping with the effects of oppression, they will have less impetus to resist it and overthrow it. One is reminded of the use of drugs as a form of social control in Ira Levin's novel, *This Perfect Day*. One is led to ask, would the medical profession have handed out Prozac to the Afro-American slaves when they were beset with the blues? Or would medics

have seen the social-political causes of their misery and worked to overturn the system?

As a metaphor based on the picture of a recess in a flat surface, the term 'depression' is a misnomer from the start, as it denotes a recess that is held in place by its own internal causes. As we have seen, however, the recesses in people's feelings and energy levels which characterise the blues usually have causes that go way beyond the individual. They are often brought on by pressures and vacuums from outside. Hence, would it not be more accurate, even from a purely semantic point of view, to use the term 'oppression' rather than 'depression?'

The society I belong to - Aotearoa-New Zealand - is riddled with many forms of oppression which lead people to be beset by the blues. Families are dispersed; our suburban housing culture isolates people; the sexes are suspicious of each other and do not mix very well together; there is institutionalised unemployment (to keep the macro-economic indicators 'right'); the culture of Maori people has been severely damaged: there is no decent public transport in our largest city; we sanction the break-up of marriage while marginalising single parents; we demand higher and higher educational standards while charging a larger and larger fortune to undertake the study to achieve them.

The other society I have lived in and frequently visit, Austria and Germany, also has its oppressive elements. There is widespread fear of unemployment, the financial cost of raising children is becoming prohibitive, racism is rife, housing is cruelly expensive, there is a competitive spirit to the extent that Germans speak of the '*Elbogengesellschaft*' - elbow society. In this society I frequently counsel people who suffer from 'Depression,' and they almost inevitably find language about the blues very liberating, despite the fact that '*der Blues*' refers in German only to the music and not to the emotion of the blues. They very quickly take on board the emotional meaning of *der Blues* when it is explained in terms of the

suffering of Afro-Americans, and usually start to identify sources of oppression which are contributing to their misery.

There are also other expressions in their language and dialects for the oppression which causes misery, and recovering these can also be helpful. One example is *'Die Trud sitzt auf mir'* - a very ancient expression meaning that a hostile force, from outside, is sitting heavily upon me.

By continuing in the discourse of 'depression' we nullify much of the energy of resistance to forms of oppression that afflict our society. We force individuals to bear the burden of the oppression and rob them of the impetus to turn outwards and resist it. We deprive them of a positive image of sister-brotherhood among those who suffer the blues. We lead them to think there is something abnormal about themselves, rather than simply that the many subtle and not so subtle forms of cultural oppression in our society are opening them up to attacks of the Trud and the blue devils.

In counselling people who have the blues, we also need to be open to hearing the creative language they themselves use to describe their feelings. Maria, an Austrian who had been under psychiatric care for 'depression' on and off for nearly a decade, mentioned several times early in our meeting that she had fallen into a 'black hole' many years ago. I was attentive to this very vivid imagery, and when she used it again I asked her to tell me more about the influence of this black hole on her life. She described how it was always lurking beside her and sometimes broke into her life with devastating force, and that her great hope was that it would get smaller and smaller and block out the light less and less. She expressed surprise that I was so interested in the black hole, as none of her psychoanalysts had shown very much interest, focusing almost entirely on her childhood history and early traumas in her life. However, it appeared to me the imagery of the black hole was a perfectly natural focus for Maria to talk about

her struggle, and we had a very fruitful discussion about the ways she was learning to be master over it.

If we are attentive to images such as this, we may find our clients already have the germ of a vocabulary which could empower them in their struggle against sorrow and misery.

Many things in our society and culture today oppress people. It is no wonder so many folk get the blues or are beset by black holes or the Trud. My suggestion is that we should move away from the language of 'depression' to that of 'oppression,' take the natural language of sorrow more seriously, and help our sorrowful clients draw strength and inspiration from such sources as that oppressed yet noble culture that gave us the term, the discourse and the music of the blues.

Chapter Eight

Further applications and issues

Narrative therapy is turning out to be a very adaptable vehicle for the many-faceted endeavour of pastoral care. This is due to its emphasis on stories and storying, its use of externalisation, and the potency of deconstruction as a tool for critiquing the subtle social, cultural and political influences upon people's lives. This chapter is an attempt to fill out the picture of this pastoral approach to narrative therapy as it has emerged so far, touching briefly on some of the wider and further issues that concern narrative therapy in general.

Simplifying with stories

Some of the problems and personal difficulties that people bring to pastors are extremely complex. The pastor - or any counsellor - can feel bewildered by the staggering array of components that comprise the person's perception of the problem.

Franz had initiated divorce proceedings with his wife in Graz, Austria, after seven years of what for him was an unhappy and stultifying marriage. Now living in Vienna eight years later, he had established a new, very satisfying relationship, had fathered a child, and was perplexed as to why he could not commit himself to remarriage. For more than an hour Franz explained the complex and interweaving threads of his life situation. It seemed to become exponentially more complex as he spoke. The one thing that was clear was that neither of us could hope to deal with all this material in a balanced way that did justice to all its twists and nuances.

It then occurred to me that the sheer complexity might itself be part of the problem, so I asked myself, as Franz spoke, whether it could be simplified in some approximate way in terms of a terse, manageable story. It struck me then that there were two competing stories running through Franz's explanations. One was the story that he had acted with integrity in his marriage, opted for divorce for noble reasons, gone through a subsequent period of self-examination and growth, and eventually and cautiously established a positive new relationship with a close friend of some years standing. The other story was that he had been cruel to his wife by not accepting her shortcomings, callously rejected her pleas for a second chance, and left her for another woman.

I outlined the two stories to him, and he said he thoroughly identified with both. We were then able to deal with the question of his feelings about remarriage in terms of the pull and tug of each of these stories on him. He saw that both stories were 'true,' in that either could be supported by the events of his adult life, and that it was not so much a matter of deciding which one was right, as to how to cope with the continued existence of the less preferred one while identifying with that which he preferred.

The question naturally arises as to what happens to the less preferred, previously dominant narrative. As Franz was a Lutheran,¹² he was led to think of Martin Luther's view of the double nature of human beings as simultaneously sinful and noble, together with God's unconditional forgiveness of our sinful side. This gave him a very strong sense of the inevitability of moral dilemmas such as that in his life - so that he was able to see his dilemma as simply a sub-set of the human condition with which we all have to live - and the complete and utter forgiveness of sin as we put our hand in the hand of Christ.

¹². Lutheranism is the second largest religion in Austria (10%), by far the largest being Catholicism (80%).

As our counselling proceeded we externalised the negative story as a ‘flaming dart’ (Ephesians 6) that harassed him and that he would learn to keep at bay. His ‘armour’ was the promise of forgiveness and re-creation in Christ. This is not to claim that Franz will ever be completely free from the influence of the negative story. It was for him a valid interpretation of some of the events of his life. But Franz could accept that even the best of us commit sin, and that God wants us to accept the forgiveness promised in the cross of Christ.

This counselling of Franz illustrates that storying can be used to simplify a complex problem to a manageable level on which the therapist and client can deal with it. I have frequently found that really effective counselling begins from the moment the client and I have a straightforward story to deal with. It is possible that the story, being simple, might not do full justice to every twist of the problem. But most clients do not have the time nor the money to pay for long term in-depth analysis designed to ‘understand’ the problem perfectly. Robert Norton comments:

... where much of psychiatry spends time trying to unravel the correct, clear cause of the problem with a crystalline analysis devoid of inconsistencies and pure in its structural flow, the brief therapist will settle for a dirty solution that works (Norton, 1981, 307).

It would probably not be justified to call the solution Franz and I worked out for his problem ‘dirty,’ but it certainly did involve a simplification of the issues - into two elegant, competing stories.

Simplifying with characters

Another way of simplifying a complex story and getting relatively quickly to points of crucial importance is to look for characters in a person’s narrative whose influence lives on strong. Charles was a middle aged American living and working in Europe, married with adult children, who spoke with me about his gradual acceptance of the fact that he was gay. He said he had been raised in a

strict fundamentalist family and church, and had denied his homosexual feelings while a young man, marrying and raising a family so as to be as normal as possible. Now, he said, his values had broadened and he was longing to live a life that was more natural to him. But he was tortured by feelings of guilt about this and could not work out why.

It occurred to me, as we talked, that feelings of guilt or innocence are not held in a social vacuum, but are performances of meaning around narratives, and that these narratives are socially constructed - they are formed in our conversational interactions between people. So I asked him the simple question, 'Whose permission to you feel you need, to be gay?'

He went quiet and began to weep. After a time he said quietly, 'My wife's.' Woven through his entire story was the presence of his wife, who had loved him for 30 years and whom he also loved, though not as he would have wished to. The complicated abstractions and moral complexities of his problem were more simply and directly dealt with when we identified the key person in his narrative to whom he felt he had moral responsibility.

This 'permission' question can be useful in many situations. We could ask a person like Roger (above), for example, 'Whose permission do you feel you need, to stay single for the next five years?' Or, of a single parent who frequently feels humiliated and distressed to have to go alone to school parents' social functions, we could ask, 'Whose permission do you feel you need, to go to one of these functions alone?' Problems such as these live in the narratives we perform, and these narratives have been formed in a social setting, through the linguistic interactions of people. Hence, many of our feelings of guilt or shame are directly connected to some person or persons who are significant to us.

Deconstructing the practices of power

Many of the problems that bedevil people are worsened if not caused by the 'practices of power' - the destructive, culturally determined discourse which intrudes into the self-storying of the person. Of course, not all culturally determined discourse is destructive. We live in such discourse as a fish lives in water. But the pastor needs to be alert to where this discourse is destructive and disempowering.

Roger, in his early 30s, was referred by another counsellor who said he had been suicidally depressed for some time. One feature of Roger's story was his claim that he was proven to be failure in that he had not yet got into a committed relationship with a woman. This was one aspect of a number of features in his story which were leading him to be depressed. My instinct when he said that was to respond immediately with the question, 'Who said singleness is a sign of failure?' However, I kept silent as I felt such a comment could be interpreted, at this early point in our conversations, as an indication that I did not take his plight seriously.

By the middle of our second session we were already co-authoring a new story about Roger in which he was discovering many strengths and areas of his present and past life which he admired and valued. It was at this point that I suggested to him the idea of trying to stay single for as long as he could, as he was successful at establishing platonic friendships with women. This would give him a chance to build up his self esteem by doing something he was good at, while leaving the more challenging task of forming an intimate relationship until he had worked through some of the issues that sabotaged him in that regard. When it was clear that the idea had caught his interest, I *then* challenged his earlier comment that singleness is a sign of failure. This involved a conversation about history and society, including the role of discourse. We identified elements in society and culture that press upon people the notion that one must be in an intimate relationship in order to be counted as successful, and we noted that this notion was not 'true,' but simply a prevailing, strongly held cultural discourse. In our

ongoing counselling over a period of weeks, this discussion, which we frequently referred back to, helped Roger form a new perspective on the meaning of his current life and goals. The practices of power were deconstructed in the course of our counselling conversations.

It is interesting to note the similarity between this aspect of counselling, and the use of Rational-Emotive Therapy (RET). Using Albert Ellis's terminology (Ellis, 1989) Roger had been under the impression that the 'activating event at point A' (his not ever having been in an intimate relationship) was directly causing the 'emotional consequence at point C' (his feelings of depression). RET counselling would have pointed out to him that the event by itself was not causing the emotional consequence but was being interpreted through his 'irrational belief at point B,' namely, that men of his age who have never had an intimate relationship are abject failures.

A difference with narrative therapy compared to RET is that in a narrative therapy mindset the counsellor is thinking constantly of how people's background beliefs are the consequences of discourse from society and culture. Hence, it was not merely that Roger had to challenge this belief of his about men and relationships. Rather, he was able to see how this belief circulates in our society and was being constantly reinforced in him by that society and culture's discourse. We were then able to externalise the belief, through deconstructing it, so that he was able to gain elbow room to move against it.

Pastors need to be aware of the many negative discourses that invade people's self-storying and disempower them. In our culture there are certain 'categories' of people whose life situation is frequently seen negatively and spoken of negatively in the discourse of the prevailing culture - the unemployed, sickness beneficiaries, single parents, certain racial groups, homosexuals, people who are very thin or very fat, people who have never been in a stable sexual/intimate relationship. These people often take on the prevailing discourse and put

themselves under its withering gaze. The pastor needs to learn to recognise fragments of such discourse when they appear in the person's self-story. She can then help the client recognise how this discourse is influencing him, combining with his own self-storying and disempowering him.

Another medium through which the practices of power can be deconstructed is the Sunday sermon, where prevailing cultural discourses can be directly critiqued. One example is the sermon, 'On Being a Transformed Nonconformist' (see Appendix), which is based on Romans 12:2a: 'Do not be conformed to this world, but be transformed by the renewal of your mind.' Most of the other sermons contain at least one reference to social/cultural discourse.

Social justice and the narrative therapist - the limits of a constructivist and constructionist perspective

One of the values of a postmodern approach is that it unhooks us from preoccupation with what is 'true and false.' It enables us to see that a lot of what we perceive ourselves and our world to be is not an accurate, comprehensive or balanced view of reality. There are other ways of interpreting our lives. This insight enables us to work through the implications of our having constructed our world and constituted ourselves through stories and the perspectives they set up.

Nevertheless, there are definite limits to the applicability of a constructivist and constructionist approach in counselling. As I have suggested in chapter two, many of the more recently published narrative therapists take this postmodern outlook further than I regard as necessary, helpful or justified. Certainly, on the level of a person interpreting his own life and history, the view he emerges with will depend very much on the stories or perspectives through which he sees his life. But much of the data of life is publicly accessible. If, for example, a woman is beaten black and blue by her husband, it is obvious to all who care to look that this has happened and that it is bad. There are times when it is vital to consider what is simply true and simply false, and what is simply good and bad.

This is so even when the abuse is more subtle. The abuser's perspective may not acknowledge it as abuse. From the abuser's point of view, his actions may appear to be a form of positive and necessary discipline or well deserved punishment. Yet it would clearly be unjust to ask the abused to acknowledge the abuser's perspective as of equal value to hers.

So there are practical limits to the value of a postmodernist perspective, both in the area of facts and of values. With regard to facts, the pastor needs to have a clear idea of what constitutes abuse, so as to recognise it when it is alluded to. There needs to be simple, rational, true-false testing of a situation to find out whether abuse is occurring. Does the man hit his wife? Does the ex-wife make threatening phone calls to her ex husband? Does one partner use economic blackmail to coerce the other partner to submit to his or her will? These simple, rationally-based questions must not be absorbed into the relativism of postmodernist thinking.

With regard to values, in the Christian endeavour - in which my pastoral work is anchored - there are widely accepted ethical bases for human relationships, based on justice and the equal valuing of the sexes. Within this endeavour pastors need their own critically worked out, internalised, *essentialist* systems of ethics - i.e. ethics which can be supported rationally, grounded on foundational principles which can be debated within the (Christian) community. This is essentialism, not post-modernism. Without it, we are lost in a sea of relativism in which, in the end, one person's moral (or immoral) claim is as good as the next person's

When psychological labels are valuable

Another limitation of postmodernism in pastoral - and indeed in secular - narrative therapy is the totality of its rejection of psychological and psychiatric diagnoses. To be sure, this rejection is in part one of its greatest strengths. Drawing from Foucault's (1963, 1966, 1975) observations on surveillance and

confession, Epston and White (1989) moved the spotlight from the individual person onto the system of concepts that holds the person's problems in place, and holds the person in his distress. This enabled Epston and White to counsel persons who had been given psychiatric labels - such as schizophrenic or psychotic - from the perspective that these persons' difficulties were now lifted out of them (externalised) and put into the realm of cultural discourse, of which psychiatric labels and the privileged jargon of professionals are a part. This shift is seen by some as heralding the birth of a genuinely 'postmodern' therapy (Parker, et.al., 1996, 108). It is the turning point that sets narrative therapy apart as unique. It is also what gives it its energy and appeal, and the central reason its advocates find it so valuable and effective. The implications of this shift are likely to be felt in the counselling world for a long time yet.

But a difficulty associated with this postmodern perception of human problems is that it may deny some persons the *necessary* benefits they require in wearing a psychiatric label. For example, during the First World War many soldiers were court-martialled and executed for refusing to advance on the enemy from the relative security of their trenches. Some of these soldiers claimed at their trials that they could not make themselves function properly, after long periods of intense anxiety. The psychiatric community later recognised this as a disorder and gave it the name 'shell-shock', or 'war neurosis' (Grinker & Spiegel, 1945; Appel, 1945). From a postmodern perspective 'shell-shock' may be nothing more than a social construct, invented by a particular professional group whom society permits to speak authoritatively on the subject of human psychological functioning. But it is a label that saved thousands of soldiers' lives in the Second World War and in other subsequent wars, not to mention the social welfare benefits these soldiers received after their military service. Stouffer, et.al. (1949) record that attitudes in the United States military toward soldiers who reacted in this way in battle in World War II were very liberal, as the military had officially recognised war neurosis as an illness.

Of course, for an ex-soldier struggling to adjust to peaceful, post-war society and to become free from the influence of 'shell-shock,' a narrative approach to counselling may be very effective. 'Shell-shock' could be externalised and placed within the realm of cultural discourse, unique outcomes could be located where the person had reacted differently to stress, the landscape of consciousness associated with these could be explored, and new stories could be constructed through which the ex-soldier could seek to rebuild his life. In this process it might be very helpful for the ex-soldier to believe that 'shell-shock' was not a psychological disease wired into him like a faulty component in a radio, but simply a construct of society and the medical profession. But in terms of excusing the soldier for his inability to function in combat and qualifying him to receive resources for rehabilitation rather than to face a firing squad, the modernist label of 'shell-shock' serves an entirely positive function.

Other psychiatric and psychological labels can also serve positive social functions. People diagnosed as schizophrenic, depressive, suffering from post-traumatic stress syndrome and other difficulties are these days entitled to social and economic support, including sickness benefits, free counselling and state-paid hospital stays. Such people are no longer thrown into confinement of the sort Michel Foucault (1961, 1963) was concerned to critique.

What, then, is an appropriate balance between modernist and postmodernist perceptions of human difficulties? On the one hand, a psychiatric 'diagnosis' from a 'professional' can serve the positive role of liberating a person from self-blame (or even a firing squad!), and entitling him or her to social and economic assistance. On the other hand, as Parker, et.al. (1996, 108) point out, the labelling and categorising language of the psychiatric professional, thoroughly legitimised by society, can define a person's experience in such a way as to lock the person into that definition and its associated expectations and perspectives - whereas the postmodernist language of narrative therapy can free a person them

from this bind. White's (1987) work with people who have been diagnosed as 'schizophrenic' is a vivid illustration of this.

This points to the need for more serious dialogue between narrative therapists and the psychiatric profession on the question of the role and function of psychiatric labels. Note that narrative therapists such as Michael White do make *use* of these labels - though transforming them into names for externalised problems rather than as diagnoses of mental disorder. White (1987) asks his clients such questions as, 'In what ways have you felt pushed into a corner by schizophrenia?' and 'How do you think such steps could weaken schizophrenia's influence on your life?' While narrative therapists and the psychiatric profession use these labels in quite different and philosophically opposed ways, the fact that narrative therapists find the labels useful represents a point of contact which could be the starting point for dialogue. To some extent this dialogue has already begun, as for example in the work of Glenn Simblett, a psychiatrist who uses narrative therapy (Simblett, 1996).

TRAINING FOR PASTORAL NARRATIVE THERAPY

Narrative therapy is relatively new, and offers unique insights and approaches in the field of counselling. However, it is not *totally* new. It emerged out of established traditions and schools of counselling, which themselves emerged out of older traditions and schools. To some extent this is made explicit in the works of White, Epston, Freedman and Combs (Epston and White, 1989; Freedman and Combs, 1996), who introduce narrative therapy by way of describing their own personal journeys, as counsellors, toward a postmodern, narrative approach. Hence, those who counsel in a narrative mode are not *only* working in narrative. They are also bringing to their counselling all their previous learnings and skills in the counselling field.

This point is essential for thinking about future training in narrative therapy. If we are to train people as narrative therapists or narrative pastors- especially those who have never counselled before - we need to be cognisant of the full range of skills and issues in which they need to be conversant. What follows is a very general outline of some of the more important counselling skills and modalities which it would be good for a narrative therapist or pastor to be familiar with.

A person centred basis

As was pointed out in chapter one, narrative therapy is *phenomenological* in that it seeks to see the world through the eyes of the client. The client centred approach, pioneered and developed by Carl Rogers, is a foundational stage in the learning of narrative therapy because it trains the counsellor to see and appreciate the client's world from the client's own internal frame of reference (Rogers, 1951). Narrative therapists would fully agree with Rogers' proposition that a person's 'perceptual field is, for the individual, 'reality'' (Corsini & Wedding, 1989, 164). The narrative therapist is deeply concerned to comprehend the client's perceptual field.

Basic training in and appreciation of the person centred approach is essential. A person centred therapist is trained to affirm, to empathise, to give the client unconditional positive regard. The client is affirmed and respected; her utterances are empathetically heard and reflected. Destructive or unrealistic percepts are gently challenged.

However, the narrative therapist must also be trained to couch her responses to the client in language that externalises the problems which trouble him. These responses are affirming of the client, taking the reality of his problem seriously, but assume from the start that the problem is alien and external to the person with whom the counsellor is engaging.

This subtle shift depends upon the counsellor's belief that problems are social and personal constructions which affect people but are not identified with them. It also requires that the counsellor be conversant with the philosophical outlook of a social constructionist world view, including the notion that there is no such thing as a neutral question. All our questions influence the client in some way. Further, the narrative therapist will not only seek to understand the client's perceptual field, but to co-create new, alternative perceptual fields with the client, based on the notion that our realities are not given but are constructed by us in community.

In all this the narrative therapist is approaching the client along phenomenological lines, in that it is the client's world which needs to be entered into, whole-heartedly, for counselling to be effective. Hence, a grounding in the personal qualities, skills and reflective self-questioning of person centred therapy is essential for the narrative pastoral counsellor.

Learning from cognitive therapy

Cognitive therapy puts great weight on the priority of the client's belief systems in shaping their feelings and behaviour (Beck and Weishaar, 1989). The cognitive therapist seeks to discover the client's beliefs and cognitive interpretations of life, and challenge these where they appear illogical, or subject them to empirical testing to confirm or dis-confirm them. 'Cognitive therapy and rational emotive therapy (RET) share emphases on the primary importance of cognition in psychological dysfunction, seeing the task of therapy as changing maladaptive assumptions and the stance of the therapist as active and directive' (Beck and Weishaar, 1989, 287).

In one respect Narrative therapy emerged out of cognitive therapy. Its view, that people constitute their lives through narratives, was a development of 'cognitive constructivism,' drawing on insights from leading cognitive psychologists such as Jerome Bruner. However, the social constructionism in narrative therapy

challenges cognitive psychology, along with behaviourism and psychoanalysis, for their 'essentialist' view of the human 'psyche.' Some social constructionists, such as Kenneth Gergen, see the development of cognitive psychology as a healthy but untenable reaction to the dominance of behaviourism in psychology throughout this century (Gergen, 1989). For Gergen and other social constructionists, the difficulty with cognitive psychology is its assumption that we have a 'mind' (similar to the 'psyche' or 'unconscious' in psychoanalysis), a non-spatial entity operating according to laws of cause and effect. Cognitive psychologists then claim to 'know' things about the 'minds' of all of us, quite independently of the culture, time or situation we live in. This alleged 'knowledge' functions as a 'practice of power,' pushing people into roles and positions that accord with what is alleged to be 'normal.'

As we saw in chapter two, narrative therapy has an uneasy relationship with the constructivist, essentialist side of its roots. While it is important for trainee narrative therapists to understand the cognitive roots of narrative constructivism, they need also be aware of its limitations.

Insights from family therapy

White, Epston, Freedman and Combs all came to narrative therapy through issues raised for them in their work as family therapists. It is interesting to ask why this was so. Parker, et.al. (1996) see a three stage process from 'First Order Cybernetics,' through 'Second Order Cybernetics,' to the postmodernist approach of narrative therapy. In First Order Cybernetics, the therapist sees the family as a system which produces pathology in a member, who is identified as the patient. In Second Order Cybernetics, the family is seen as constructing its problem within the family system (even though the problem may appear to focus on one person) and the therapist comes to be included in the system and seeks to solve the problem from the inside, by changing the way the system operates. In a postmodernist approach the problem becomes even further removed from the

person or persons, as it is seen as existing in toxic discourse in the society and culture in which the persons are immersed.

Conceptually, this is a neat and simple way to explain to trainees the shift toward postmodernism in narrative therapy. Some experience in Second Order Cybernetic family therapy can also prepare them for the shift to postmodernism, as it gives them experience in conceiving of the problem as detached from the troubled (or troublesome) person.

Another helpful, though much simplified, perspective on the development of narrative therapy is offered by Bill O'Hanlon. O'Hanlon speaks of three 'waves' of therapy. The First Wave, which began with Freud, was pathology-focused and dominated by psychodynamic theory. It represented a major advance because it no longer viewed troubled people as morally culpable. However, it tended to focus on pathology to such an extent that it led many people to identify with their 'pathology' and so increase their troubles. The Second Wave, which emerged in the 1950s, consisted of the problem-focused therapies, such as behavioural therapy, cognitive approaches and family therapy. It worked alongside the First Wave, and was at times critical of it but did not entirely supplant it. O'Hanlon continues:

While the First Wave conceived of troubling forces as located within individual troubled personalities, and the Second Wave concentrated on small interactive systems like the family, the Third Wave draws attention to far larger systems, such as the daunting cultural sea we swim in - the messages from television advertisements, schools, newspaper 'experts,' bosses, grandmothers and friends - that tell us how to think and who to be (O'Hanlon, 1994, 23).

O'Hanlon's and Parker's, et.al., accounts of how narrative therapy emerged are neat and tidy conceptually, and in that sense helpful for teaching. However, there is danger here of oversimplifying things. The actual history of ideas

surrounding the shift from cybernetic and other 'Second Wave' therapies to postmodern therapy, and the interconnections and dependencies between these, is much more complex. Bruce Hart (1995) criticises Michael White's expositions of narrative therapy for failing to make explicit some of the strands of counselling upon which White's insights and methods are dependent, and for being so concerned to distinguish narrative therapy from other therapies that he ignores or plays down some of the similarities. Hart points out, for example, that many of the styles of questioning in White's therapy are similar to, if not logically derivative of, other innovative branches of family therapy. Hart comments:

The emphasis on meaning and beliefs, as they are expressed in narrative form, have brought White into closer proximity to the Milan and Post Milan approaches. His use of landscape of action and landscape of consciousness questions (White 1991) parallels circular questioning as used by Milan therapists, such as that by Campbell, et.al. (1989), where they follow the recursive link between belief (consciousness) and behaviour (action) within the context of relationships. White then tracks the development of the unique outcome between past, present and future in a similar way to Penn's (1989) Feed Forward, Future Question and Boscolo and Bertrando's (1992) Reflexive Loop of Past, Present and Future (Hart, 1995, 6-7).

So in training pastors in narrative therapy it would be prudent for them to be familiar with the complex and varied history and development of family therapy. This would put them in touch with a broader tradition of creative questioning and conceptualisation, and lessen the risk of their approach becoming too narrowly focused.

With regard to narrative's postmodernism, there are parallels and similarities between narrative therapy and the solution focused, language oriented therapy of Steve de Shazer (de Shazer 1991). De Shazer's exposition of Foucault, Derrida and their deconstructive method is penetrating, and the implications he draws

from this for therapy are creative, though for de Shazer deconstruction leads to somewhat different therapeutic implications from those embraced by the narrative therapists. For example, de Shazer is concerned with the way a therapist's subtle use of language can itself re-frame the reality through which a person sees their problem, while White is more concerned to shift the entire problem, conceptually, out into the realm of societal discourse. De Shazer's insights are important, and could enrich a narrative pastor/counsellor's approach by adding to his or her understanding and skills. It is a pity the debate between de Shazer (1993) and White (1993) emphasises the differences between them in such a way as to appear to deny the value of each's insights as an enhancement of the other's.

In short, training in narrative therapy needs to include familiarity with a broad range of therapies, approaches and modalities. Hart (1995) suggests that narrative therapists need to take a dose of their own medicine. If the narrative approach is their own dominant story with respect to counselling, they need to look for unique outcomes in their lives and actions which show evidence of them working in *other* modalities. No therapist counsels *only* in terms of his or her chosen modality. Each of us brings to our counselling a lifetime of experiences, learnings and skills. We may well have forgotten where these skills came from or even that we have them, but they do emerge as we face the challenges of the counselling session. Hart pleads for narrative therapists to acknowledge this. In training others to become narrative therapists or narrative pastors we need to give them the full range of what we use in counselling, not just the several skills and insights that represent the uniqueness of narrative therapy.

Learning from anthropology

David Epston, who co-founded narrative therapy with Michael White, had trained and worked as an anthropologist. This had brought Epston into contact, not only with the range of stories used by cultures other than our own, but also with world views that are very different from that of the dominant western

culture. This is a point of crucial importance for narrative therapy. The hegemony of modernist, psychodynamic views of the human 'psyche' has tended to repress, or push to the margins, other understandings of human beings which circulate in our culture. It is difficult to recover these when they are officially regarded as second rate and relegated to the cultural dustbin. However, when we look at other cultures or read anthropologists' accounts of them, we are immediately confronted with radically different world views and understandings of what people are and how they function.

Most peoples on this earth do not think of themselves as having a 'self,' a 'mind' and an 'individual identity' that is somehow made up of solid realities that interact according to laws of cause and effect and drive us to behave the way we do. They do not see their problems as living 'deep down' in the 'psyche.' Maori people, for example, tend to be much more focused on the togetherness, the belonging, of people together as a social whole, and find it absurd to think of an individual as somehow surviving and being a real person without his or her social group. Many people do not see the most valued reality as that which 'exists' in the abstract realm of theories and psychological categories. The Apache people, for example, value story telling very highly. As they walk alone in their lands, they can be heard reciting place names in great detail, so as to be able to incorporate these accurately into the stories they tell their social group about their day (E. Bruner, 1984).

Studying anthropology can get us used to the idea of cultural differences such that we can then look 'anthropologically' at our own western modernist culture. For example, I enjoy collecting old expressions in English and German which reflect a view of life more compatible with social constructionist approach. As we have seen in earlier chapters, these expressions include 'the blues,' 'the blue devils,' *'Führ dich nicht so auf,'* *'Ein Mensch ist kein Mensch'* and *'Die Trud sitzt auf Mich.'*

I am also interested in the way our culture uses metaphors. The dominant metaphors in psychoanalytic language are *vertical* - we talk of ‘deep’ problems, and feelings ‘buried beneath’ years of hurt. This conveys the impression that these difficulties are hard to reach, and even harder to control or get rid of. These metaphors have thoroughly penetrated our culture, so that people talk in these terms as if this was scientific truth. I often challenge the use of such language and use, instead, *horizontal* metaphors to talk about our troubles. We need not think of our problems as lodged deep down, but as sitting alongside us, waiting for the opportunity to get in. Many clients find this a liberating way to look at life.

Some psychologists challenge this approach, saying that problems like depression and self blame *are* ‘deeply rooted’ in our psyches. But the word ‘deep’ is *only a metaphor*. I do not see a big cavity in my client with problems buried deep down inside it. I see a physical person with a physical brain, and hear the language she speaks. A metaphor is just a metaphor, and nothing more. John Shotter (1993: 85-87) argues very forcefully that, time and again, psychology has coined a metaphor to describe some psychological ‘condition’ - such as ‘depression’ (very much a metaphor!), for example, then allowed this metaphor to take on a very substantive meaning, as if it were as really locatable as the HIV virus. Wittgenstein (1953: No. 308 ff) showed how metaphorical language can run out of control and then pose as absolute reality.

On the other hand, locally derived metaphors can be very helpful to clients, as we saw with Maria’s ‘black hole’ in chapter six. As therapists we need to be sensitive to the metaphors our clients are using, checking whether these are helping or hindering them.

So the training of narrative therapist should include a familiarity with anthropological issues, and the way metaphorical language can function in society so as to free us or bind us. As Christians we have yet another stake in

anthropology, in that the cultures of the people who wrote the Bible are very different from our own. This can be a source of enrichment, as we find in the Bible alternative ways of seeing life from that which pervades our own culture.

Learning to think and act ‘postmodernly’

It is essential for narrative trainees to grasp the postmodernist core of narrative therapy, both conceptually and in their practice. Wally McKenzie and Gerald Monk (1996) outline a series of teaching exercises for this, in which trainees begin by thinking about their own self-descriptions and the events in their lives that contradict or stand against these self-descriptions. This kind of exercise can lead a trainee to experience the constructionist and constructivist nature of our perceptive frameworks, the way these are constructed through narratives, and the ever-present possibility of new, alternative narratives being created out of meanings afforded to unique outcomes. McKenzie and Monk then describe further exercises in which trainees work in pairs, practising deconstructive questioning, expanding this into full-blown externalising conversations, identifying unique outcomes and developing changes in self-description. McKenzie's and Monk's teaching outline - a product of some years of development at Waikato University, New Zealand, - is simple but creative, and could form the basis of an introductory course for pastors.

John Neal (Neal 1996) is concerned to help trainees identify within themselves modernist assumptions about personality which would impede narrative counselling by subtly re-introducing ‘the practices of power’ into the counselling relationship. He describes a training method in which trainees (and supervisees) are continually put under the Foucauldian ‘gaze’ of their colleagues and their clients, so as to identify these tendencies as they occur. For example, clients are invited to observe the trainee counsellors through one way glass as the latter discuss their impressions of the counselling sessions they have just had with those clients. The focus of concern in these exercises is to help the counsellors learn to address their clients as free, empowered agents with a relationship to

their problems, rather than as objectified beings who consist of problems which an 'expert' counsellor claims privileged knowledge about.

Essentialists, constructionists and deconstruction - the intellectual journey

Those who aspire to practice narrative therapy need a good understanding of the intellectual concepts of essentialism, constructivism, deconstruction and the basic concepts of the Cartesian world view (rationalism, empiricism, the subject-object dichotomy, foundationalism, etc.) which deconstruction is in revolt against. They also need an overall 'meta-perspective' for assessing for themselves what they think is the proper relationship between and priority of these concepts. There are two main reasons for this.

Firstly, narrative therapy is intellectually anchored to the enterprise of deconstruction. While it has much in common with other therapies, its uniqueness is in its social constructionist approach to human problems and its deconstructionist approach to their solutions. While continuing to identify and acknowledge its similarity to other counselling modalities, it must also continually explicate its unique contribution. Hence, without a clear grasp of the concepts and principles of social constructionism and deconstruction, narrative therapy cannot continue to dialogue with the century old tradition of psychotherapy which it arose out of. To avoid simply becoming an uncritical narrative 'clone,' each therapist needs to engage in this dialogue and develop his or her own critical understanding of the role of postmodernism and deconstruction in the general field of counselling.

Secondly, any therapist, working in any modality, needs a sound critical, intellectual grasp of the assumptions and means of her trade, the validity of these assumptions, and the ways in which they influence her work. A therapist who does not have such a grasp cannot critique her own profession, and is in danger of becoming merely a product of a movement. The movement itself would then be in danger of training up therapists to be uncritical clones, going through the

motions of accepted practices of therapy but not really knowing whether the underlying theories and meta-theories on which these practices are based are tenable. If we are offering professional service to clients whom we invite to trust us, we must be aware of the limitations and intellectual difficulties of our profession, and of what we do not know.

Believing in the person

A further, and absolutely essential, quality of the narrative pastoral counsellor is an unshakeable belief in the nobility, value and goodness of the client. If we are externalising a client's problems we are effectively rejecting a part of their life as unworthy and unwelcome. We simply should not do this unless we counterbalance it with a transparent belief in the person himself as absolutely worthy and wanted (we can begin to learn this in person-centred therapy). Further, in narrative therapy we challenge persons to choose between competing stories, each of which has the potential to constitute themselves and their identities. We are offering a profound challenge which goes to the core of what a person is. One wonders whether we have a right to do this if we do not think the very best of the person and their chances of success.

As O'Hanlon (1994) has pointed out, it is the hope and optimism for the client which the narrative therapist radiates in the midst of therapy that makes the cure possible. Such hope and optimism is always therapeutic in counselling, no matter what the modality.

Christian pastors are already called to love persons and to believe and hope for the very best for them. 'Love bears all things, believes all things, hopes all things, endures all things' (I Corinthians 13:7). Pastors already believe the person has been made whole in Christ, separated from their sins and loved absolutely by God. This belief needs to become a transparent attitude in the therapy room.

A future for narrative therapy?

Finally, narrative therapy must take pains to avoid all tendencies to ossify into a fixed, established system of professional practice which passes on techniques to students who accept it as a given modality, a form of 'truth.' As Jaques Ellul warned, in an age where technique in itself is seen to offer salvation from our woes, the temptation to reduce everything to an easily learned technology is very strong (Ellul, 1964). This would be quite out of step with the roots and rationale of narrative therapy, and would lead to the same practices of power this therapy set out to disarm. For the deconstruction upon which narrative therapy is based abhors all fixed, accepted structures of thought which purport to be timeless truth. It is often the effects of these structures upon persons that narrative therapy sets out to free them from. If narrative therapy becomes yet another structure of thought with techniques that can be learned off pat, it will be in danger of causing the very problems it set out to solve.

The future for narrative therapy lies not in the teaching of method but in the radical application of the tool of deconstruction to itself and all other practices of therapy.

Chapter Nine

Concluding remarks

Narrative therapy can be brought into the endeavour of Christian pastoral ministry, enhancing and enriching this ministry and re-connecting it to knowledges and roots of the Christian tradition which have been somewhat neglected, if not repressed, in recent centuries. The storying focus of narrative therapy fits well with the great tradition of story-telling in the Christian religion, a tradition which has been undergoing a revival over the last few decades through the vehicle of narrative theology. The narrative emphasis on the externalising of problems accords well with the ancient Christian (and even more ancient Jewish) notion of persons being separated from their sins. While this notion is not currently proclaimed with any prominence in the Christian Church, it is, nevertheless, a Christian idea which can be recovered as one would a repressed knowledge in the Foucauldian sense.

The narrative therapist's belief in the person - her value, worth and capabilities - is reflected in the Christian commitment to honour and value every person as supremely special, made in the image of God and redeemed by the love of Christ. Narrative therapy's stated commitment to social justice, unfortunately problematic intellectually in an extreme social constructionist context, finds a firm basis in a Christian context by way of Christianity's historic ethical basis.

The main point of conflict many Christians often find with narrative therapy is the ontological and ethical relativism that follow from its thoroughgoing rejection of essentialist, foundational thinking, this being part and parcel of the more radical form of social constructionism with which it is most frequently allied. However, I have attempted to show in chapter three that there are other forms of social constructionism which value a foundationalist approach, albeit from quite a different angle from those approaches traditionally associated with

the Enlightenment. Borrowing from John Shotter's (1993) insight that the primary human psychological reality is the making of meaning in community, and that this is empirically observable, we can begin to establish an ontological foundation for psychology which avoids the crass essentialism of traditional psychoanalytical and psychological models. In short, if we found our psychology on the realities of human relationships rather than the notion of the individual psyche, we are standing on firmer ground. And is this not, in any case, a more Christian starting point?

With regard to ethics, we can still draw upon the moral foundations to be found in Christian tradition, provided we acknowledge that these ideas function as 'practices of power.' Social constructionism does not prove moral foundations are illogical or in some definitive way untenable. Rather, it tracks the social effect of the discourse generated by moral claims, showing how destructive this can be as it reverberates through society. Our moral discourse can circulate in church and society in such a way as to privilege some people and marginalise others. Foucault's critique of discourse makes us aware of this, and we must always be willing to subject our moral claims to the critique of deconstruction.

The special contribution which the postmodernism of narrative therapy brings to counselling is a redressing of balance. Since the Enlightenment the leading voices of the west have been concerned to 'discover' more and more of the 'reality' which 'lies behind' the world and drives it according to cause and effect laws. The social sciences attempted to transfer this enterprise into the realm of the study of humanity, based on the assumption that an 'individual' human being was a complete entity in himself and was centred on a further entity called the 'psyche,' which operated according to its own cause and effect principles. Social constructionism holds this notion in question, and focuses its attention on the many-faceted reality that is constructed by us in our ordinary social interactions. It celebrates the diversity that follows from there being many cultures and human

situations, and therefore many different realities constructed in accordance with a vast range of needs and aspirations - rather than just the one, totalising reality which is the concern of Enlightenment thinking.

This is not to suggest psychotherapy was wrong to establish itself initially within an essentialist framework. Freud's work was liberating for the mentally ill of his day. It freed our culture from the notion that insane people are criminally deviant. By postulating that their behaviour was driven by cause and effect forces in the human psyche, psychoanalysis gave us a view of mental illness as simply one extreme of the entrapment we all feel to some extent in inner worlds which do not function just how we would wish them to. This was a liberating step for our society.

But now this deterministic outlook has taken far too strong a hold on our culture. Not only has it bred popular misconceptions of human beings as determined and limited by a fixed, structured entity called the psyche, it has also spawned a style of professionalism which privileges those who claim to have this special, essential 'knowledge' about how the rest of us function.

As Freudianism liberated the mentally troubled from the 'blaming' discourse of his day, so narrative therapy, along with social constructionism in general, seeks to liberate us from the deleterious effects of deterministic essentialism which persist in counselling. In a sense, narrative therapy is a therapy for this day and age. It is not *the* 'true' therapy, but one whose time has come.

Liberation is the central, social-ethical concern of the Christian religion. Therefore the Church has a stake in the progress and development of narrative therapy in society at large. Further, because the Church is itself thoroughly influenced by modernist world views, it too needs to feel the reforming winds of

postmodernism. And inasmuch as our people have been educated and inculcated into the modernist world view, with all its attendant psychological traps, Christian pastoral work will speak better to these people in their troubles if it develops a narrative, social constructionist approach to pastoral care.

But there remain areas of debate and uncertainty. Can we found a psychology entirely on the phenomena of social relationships, or must there also be elements which describe the 'psyche' of the 'individual'? Can all human problems be reasonably re-cast as social constructions, or are some of our troubles genuinely internal? Will the traditional Christian ethical basis, from which we derive our notions of social justice and compassion, survive the withering blasts of a thoroughgoing deconstructive critique? These are big questions which require ongoing debate and discussion. They will need to be addressed along the way, as the young movement of narrative therapy matures in the community and takes hold within the Church.

Appendix 1.

Sermons incorporating insights from narrative therapy

The following is a selection of a larger series of sermons which incorporate insights from narrative therapy and postmodernism in general. These were preached in the church in which most of my pastoral work and counselling takes place, and also on occasions in other churches.

Copies of the sermons are made available for a small charge to those who wish to read them more carefully.

The sermons are presented here because they represent an aspect of ‘primary health care’ or ‘preventive medicine,’ where listeners may apply some of the insights of therapy at any stage in their lives, whether or not they feel they have problems that would warrant counselling.

The sermons were preached during a period of rapid development of my own ideas regarding narrative therapy. For this reason, some of the views expressed are more extreme than I would now own, and there are occasional factual errors or unjustifiable assertions. However, I have left the sermons intact in their original form in this appendix, as they realistically reflect not only ways of applying narrative therapy in pastoral ministry, but also the raw, imperfect way these ideas have developed.

Beating Back the Bogies

Birkenhead/Birkdale 18th August, 1996. Isaiah 38:16-20; Colossians 2:8-15

Ray Galvin

Today I've set myself the rather daunting task of trying to explain how to 'leave the rubbish behind' and 'get onto the good stuff.' We finished last week with that question. How can we shake off the destructive, debilitating, depressing inner burdens that drag our lives down, and be free and empowered to live with happiness and fulfilment and love?

I've entitled this sermon 'Beating Back the Bogies.' By 'bogies' I mean things like sins, bad habits, crushing fears, irrational worries, helplessness in the face of mean family members, bad temper, low self esteem, cowardice. How can we beat these things back, shake free of them, and live after the manner of Christ?

I'm assuming, in asking this question, that you do want to do this. Somebody once said, 'The reason we sin is that we enjoy it so much.' You could extend this to suggest, for example, that the reason we get taken over by the same old worries and fears, again and again and again, is that we feel familiar and comfortable with them; we don't believe we're cut out to be a hero. The reason we let our bad temper take us over at regular intervals is that on one level we *like* blowing people up.

Well, this sermon is aimed at the part of you that *does* want to change - the heroic part, the adventurous part, the hopeful part, the part that really cares about goodness and love. That's the part of you I'm speaking to today - the Christian part, the golden part, the part where you're identified with Christ - *the part that I believe is the real you.*

I invite you to switch the other part off for 20 minutes. It may already be rearing its ugly head and saying to you, 'Don't listen to this. It'll challenge you to stop being a comfortable coward and start being a brave adventurer. It'll challenge you to give up that filthy habit which you love - which you *need.*'

I invite you to shut that side down for a moment. I'm talking to the *real you* today, made in the image of God, transformed into the likeness of Christ, the new creation, which God sees you as.

1. To begin with, I want to tell you how intrigued I am with what the Bible has to say about bogies. Of course it doesn't *call* them bogies. It calls them sins and evils and transgressions and demons and 'principalities and powers.' But I don't want to use those words too much because people get upset about them, and if you're upset you won't hear what I'm trying to say. so I'll call them bogies instead.

What does the Bible say about bogies? Well it says, quite simply, that **we have been separated from them.** It talks about a miracle of separation that happens the moment we put our hand in the hand of Christ. We've been separated from all our bogies!

For example, in the Book of Isaiah, King Hezekiah says to God 'You have put my sins behind your back. (Isaiah 38:17) That's a radical separation! I'm over here; God's standing in front of me, and he's put my sins behind his back! You couldn't get a greater separation than that!

Again, in Psalm 103:12 we read, 'As far as the east is from the west, so far he removes our transgressions from us.' As far as the east is from the west! That's a *very* big separation.

Then I turn to the writings of St Paul. Paul says, in Colossians 2:14 that God has taken the record of our wrongs and *nailed it to the cross*. He's nailed it to the cross! That's a pretty big separation too! Here I am, in Auckland in the 20th century, and my wrongs are nailed to a piece of wood in Palestine 2,000 years ago.

Perhaps my favourite 'separation' image in the Bible is 2 Corinthians 5:17, which we looked at last week 'Therefore, if anyone is in Christ, there is a new creation! The old has passed away; behold, all things are made new.' The old has 'passed away.' Everything is made new.

So there's a sense in which we're *already separated* from the bogies that harass us, from the moment we put our hand in the hand of Christ. They are no longer part of us. We don't have to identify with them. They're alien.

Now there are yet more 'separation' images in the Bible, images of an *ongoing* separation from these things. In the Letter to the Hebrews, the writer talks about life as a great race in a sports stadium. She says in 12:1, 'Let us also lay aside every weight and the sin that clings so closely, and let us run with perseverance the race that is set before us, looking to Jesus...' *Let us lay aside every weight and sin that clings so closely*. She's exhorting us to separate ourselves from our bogies - to lay them aside and move on without them - because they don't help us one bit, they just burden us and slow us down.

Returning to the writings of Paul, in Colossians 3, he talks about 'putting all the bogies to death.' Putting them to death! Taking our worry, our greed, our self righteousness, our low self esteem, our irrational fear, marching it up to the gallows and throttling it!. What an image! A vivid image, of ongoing separation from the bogies.

We could look at many more passages in the Bible that treat the issue this way. Again and again and again there's this image of you and me being separated from the bogies that drag us down.

So let me tell you one conclusion so far: **The bogies are not part of the real you.** The real you is that Christ-like creature who aspires to love, compassion, kindness, justice, peace, adventure, faith, hope. That's who you really are. That's what you can identify with as your real self. You're Christ's man, you're Christ's woman, you're Christ's boy or girl. He sees you as that wonderfully transformed being. The bogies don't belong to you. You don't have to identify with them.

2. The second point I want to make is that, although we need no longer identify with the bogies that beset us (indeed we *must* not identify with them because they don't belong to us), **we still have to take responsibility for allowing them to mess up our lives and the lives of others.**

For example, supposing from time to time I slip up and allow myself to be invaded by the bogey of irrational fear. It catches me unawares, and before I know what's happened, it's taken me over. It's filled me up with its negative outlook. Suddenly I find I've given in to

it, and I'm cowering before some aspect of life. My adventurous spirit has evaporated; life looks like a monster with big teeth. I've lost the battle.

Although this bogy of fear is something that doesn't belong to me (i.e. to a servant of Christ!), and although I really don't want it in my life, *I'm still responsible* if I let it in that day and letting it take control for that moment. I'm culpable. I can't blame anybody or anything else. I can't blame the government, or my upbringing, or the education system, or my genes. I am responsible.

So then, if one day I find myself threatened by one of the bogies that tend to hang around me (different bogies tend to hang around different people), I begin by saying two things to myself. First, I remind myself that this bogy is not part of who I really am. I don't identify with it. It's alien. It's an invader. Secondly, I remind myself that if I let it in on this occasion, I've got nobody to blame but myself. I am responsible.

Now this leads on to a third issue: *how can we defend ourselves against an invasion of one of these bogies?* How can we best beat back the bogies? But before I look at that I want to take a moment to **contrast this description with a very popular misconception of people and their functioning.**

Remember I said the bogies do not belong to me, but nevertheless I am responsible if I let them in. If you think this sounds a bit screwball, that's probably because of the immense influence on our culture of certain kinds of popular psychology. Much popular psychology actually says the opposite of what I'm saying. It says, 'These bogies *are* part of you (you've got to accept and celebrate yourself as you are). In fact, they're so deeply part of you, that you can't really be blamed for acting them out.' 'If you worry a lot at night, that's because you have an 'anxiety disorder.' You can't expect someone with an anxiety disorder to have a peaceful night! Here, take a sleeping pill to help get you through.'

'Or if you have trouble concentrating in class, that's because you have Attention Deficit Disorder (*so many kids have it, you know!*). You can't be expected to sit in a maths class for 50 minutes if you've got ADD.'

This is exactly the opposite of the view I'm putting forward. Let me explain why I think this way.

200 years ago there was the beginning of a change in the way medical doctors treated their patients. Up to about 1790, if you went to the doctor, he (sic) would say to you, 'How are you feeling?' And you'd have a conversation about all kinds of things in your life: your faith, your dreams, your aches and pains, your living conditions, your work, your family life. In modern medical terms, the doctor hardly knew the first thing about disease and cures, but you did have a good chat, one human being to another. Then the doctor would probably prescribe some stringent regime which would at least take your mind off your aches and pains, if it didn't make you feel worse than you did before.

But about 200 years ago there was a sudden change. Doctors started treating the patient as a kind of scientifically observable piece of matter - a mechanism made up of pumps, levers and tissues. Instead of just having a conversation *with* you, the doctor would put

you under the microscope, as it were, and get you talking *about yourself* as if you were an object being studied.

This change brought amazing benefits. Diseases were isolated, conditions were classified and labeled, the pumps and levers and tissues of the body were treated, and many patients actually started to get better. Many of us here are alive today, only because medicine made this shift and became objective and analytical.

But about 90 years ago another big change occurred. A medical doctor named Sigmund Freud got the bright idea of applying this medical, objective model to the *psychological* sphere of *human behaviour*. Within a few decades, a huge, culturally powerful, new profession had grown up, which approached our inner, personal problems in the same manner as the medical model.

People were analysed. Their problems were given high-sounding medical labels (psychotic, neurotic, anxiety syndrome, oedipus complex, inferiority complex, attention deficit disorder, etc.)

Now of course, this new approach brought with it some great benefits. In particular, people who'd been locked up like criminals because they had mental disorders were now seen as ill, rather than criminally deviant. Freud's approach was wonderfully liberating for such people.

The burgeoning discipline of psychotherapy moved in many directions, some Freudian, some very anti-Freud. But what stuck was *this idea that you can approach a person's psyche in the same way as you can approach their body* - that you can analyse it, categorise its woes and label them.

The cultural and social influence of this way of thinking in the 'developed' world has been simply enormous. Millions of people today think of themselves as trapped in destructive patterns of behaviour. They see themselves as having a psychological condition, like a disease. I'm not just talking about people with extreme behaviour problems. Almost everybody today thinks of themselves to some extent in this way. They may not use the fancy psychojargon labels but they see themselves as *having* a problem, as if the problem is *part* of them and that's a *fixed*, unchangeable reality.

Compare this with pre-Freudian ways of seeing personal problems - such as the *external* threats of 'hobgoblins and foul fiends' in a hymn from the seventeenth century (John Bunyan's 'Who would true valour see').

In other words, *people today tend to identify very strongly with their bogies*. If you ask a 20th century person to answer the question, 'Who am I?' chances are they'll write down a list of characteristics which will include some good, noble stuff but also some pretty negative psychological labels - some bogies with fancy names.

But I have reservations about that approach. I think it can be a blind alley. I think the world needs to be rescued from its hegemony. And I'm deeply interested in some new ways of looking at persons and their problems, which seem to me to be a better way of looking at who we are and what we need.

3. So we come back to our third issue today: **How can we defend ourselves against the invasion of these bogies?**

I want to suggest a simple process.

1. Remind yourself every day that *you're a child of God*. You're made in God's image. You're being transformed into the character of Christ. You're a new creation. That's the real you. That's what you identify with.

2. Remind yourself that the particular bogy that's bothering you at the moment *is not the real you*. It's alien. It's an unwanted intruder. It's got no business harassing you. It doesn't belong in your world. Of course you're responsible if you let it in and give in to it. But you don't have to let it in because it doesn't belong to you. How can it belong, if you're Christ's person?

Now I'd better warn you that some bogies are pretty smart. They come with all sorts of clever excuses. They try to fill our heads with lies. They love the Freudian-type approach because it makes them feel so legitimate, so necessary, so welcome, so much part of the scene.

Kick them out. Tell them to go back to the abyss where they belong.

3. There are some spiritual exercises you can do, to strengthen you against each particular bogy as it tries to press its way into you. One of the best ones is to *think back over your life to the times when you have stood up to this bogy*. Think about it. I bet there were days when this bogy tapped on your shoulder, but for some reason that particular day you didn't give in to it. You shrugged it off. You told it to go packing.

Ask yourself how you did that. Think back to the details. What was it that strengthened you that day? Was it an impulse that came from inside yourself? Was it the support of a friend? Was it the memory of something your grandfather used to say? Was it a verse in the Bible?

Think about what it was, and *tell yourself the story of that little victory*. Tell the story of how you beat back the bogy that day. Then, think of other times you've beaten that bogy and ask yourself the same questions. You might find (to your surprise) that you've beaten it three or four times.

Now, string these little victory stories together into one larger story. In this story, you're the hero and the bogy is the villain. It's a great story because *you beat him every time!* Give thanks to God for that string of victories - and tell the bogy its days are numbered because now you've realised how to beat it.

This is the new you. This is Christ's new creation. It's the *real* you, the person you really are, the person you identify with as truly you.

4. One final point. If you can't think of any times in your life when you've beaten that bogy, then please come and see me. We can work on it together. We can make up strategies to try out different battle plans. I have great confidence in the power of Christ

working in you to give you a few small victories to start with. And once you've got the small victories, the bigger victories come fast and strong.

And now I'd like to invite your questions and comments from the floor.

The Whole Armour of God

Birkenhead/Birkdale 8 September 1996. Ephesians 6: 10-17;
Ray Galvin

In Ephesians Chapter 6 Paul gives us this vivid, colourful image of a Christian as a Roman soldier in full battle dress. He tells us to put on the whole armour of God, so as to stand against all the wiles of the devil. He says put on the belt of truth, the breastplate of righteousness, the shoes of peace, and the helmet of salvation. He says take in one hand the great shield of faith, and in the other the sword of the Spirit.

This is a very military image. It's about fighting, waging war. Paul and his friends knew what Roman soldiers were there for. He knew how fearful they could be, how potent and at times invincible they were, with their armour and their weaponry.

So what's an aggressive, military image like this doing at the heart and climax of a magnificent letter about love and compassion?

As you probably know, the early Christians were by and large pacifists. They took Jesus' command literally, to turn the other cheek and never pay back wrong for wrong. In the 1980s when I was doing research for a book on peace and the Gospel, I noticed that for about the first 400 years of Christianity, not one Christian writer ever sanctioned Christian involvement in warfare. (I'm not saying we have to agree with the early Christians on this, but it's at least an aspect of Church history that's worth noting.)

So Paul and his friends were in no way supporters of the Roman military machine. However, they were very quick to see the *symbolic* value of the image of soldiers and battles as a *metaphor*, or *analogy* of life. This powerful, potent image could be transferred from the physical, flesh and blood battlefield, *to the battlefield of the human soul*.

They also re-cast many of the Old Testament battle scenes like that. Passages like Psalm 3 are packed with vivid battle imagery. It may be quite distasteful if taken literally, but as an analogy for the spiritual battle that goes on around daily life, it's very powerful.

So Paul says in Ephesians 6, 'For we are not contending against flesh and blood, but against the principalities, against the powers, against the world rulers of this present darkness, against the spiritual hosts of wickedness in the heavenly places.' (6:12)

To Paul and his friends, day to day life fits the imagery of battle. It's about advancing and defending, rallying your forces, and standing firm against horrible odds. It's about putting on your armour and holding out your shield and moving forward with cut and thrust.

Ask someone who's fought their way out of the pattern of getting into abusive relationships - ask them if life's a battle. Ask someone who's been through chemotherapy. Ask someone who's given up smoking. Ask someone who's brought up teenagers. Ask someone who suffers a lot of depression. Ask someone like Paul, who spread the Word year in, year out, in cultures hostile and indifferent. The image of the Roman soldier in battle is very apt and powerful.

So I want to talk about this image today, and how it might help us in *our* battles - how it might help us defeat the spiritual enemies that try to drag us down. But to keep it simple, I want to relate it to just three of the enemies we face from time to time: **the worries, the blues, and the grumps**. I've picked on these enemies because they seem to be the most common ones. (r) If we start with the most common ones then I'm sure you'll be able to relate it to other enemies you've faced in your own battles.

Some of you may have faced horrendous enemies in your personal battle. Perhaps you've faced the temptation to suicide; or the temptation to do someone grievous bodily harm, or perhaps you've fought depression so bleak it was as if the world fell away under your feet. The soldier image in this passage applies to those enemies too.

The only enemies it *doesn't* relate to are the ones we devise out of our fears and prejudices. For example if you see feminism as an enemy, or immigration, or the changes of modern life, it won't tell you how to keep those at bay. It *will* tell you how to keep your *fear* at bay, and how to defend your soul against attacks of prejudice and timidity.

But as I said, to keep it simple I'm going to relate it to three common enemies: **the worries, the blues, and the grumps**.

By **the worries** I mean that unnecessary worry and anxiety we go through when we really don't have to. Perhaps our daughter is facing a big exam and we don't believe she's done the work for it and we start fretting about what might happen if she fails. Perhaps our spouse is terminally ill and we lay awake at night fretting about how we'll cope on our own. The worries that assail us.

Then there are **the blues**. Perhaps as Christmas approaches you start getting depressed because once again the absence of your children overseas will be so hard to bear. Perhaps the grey, wet weather of winter gets to your soul and when you wake up in the morning one day and it's grey and miserable outside that's just one grey day too many. The blues that creep into our lives.

And if you don't get the blues or the worries, you probably get **the grumps**. You're not sad and you're not worried but you're grumpy and irritable. You mutter. You jump down people's throats. You say things that hurt, rather than that build up. Or you complain and moan. Or you snap at people tartly that you never complain and moan. The grumps that invade you.

The worries, the blues, and the grumps. These are the kind of enemies Paul's thinking of when he talks about the 'flaming darts of the evil one.' (6:16) These are the enemies that invade us and try to influence us to behave in a negative, unchristian way. These are the enemies we need to deflect with our 'shield of faith' and cut to pieces with our 'sword of the spirit.'

Let me look at this process now in more detail. There are four underlying assumptions in Paul's use of this picture. I want to go through them one by one.

1. Sin and evil live outside of us, not in us.

The picture here is of evil coming at us from the outside, like flaming arrows. It's not about us being evil and therefore doing evil things. The Roman soldier in the passage is the good guy. The bad guys are the arrows and whatever else is 'incoming' from the camp of the enemy. Sin and evil live outside of us, not in us. They attack, us, they harass us, they hammer away at our defences, but they're not essentially us; they're outsiders.

Think what this means in terms of enemies like the worries, the blues, and the grumps. It means quite simply that *these things do not belong to you*. They're not part of the real you; they're an enemy who belongs outside of you. You don't have to identify with them. You don't have to say, 'I'm a grump; I'm a misery guts; I'm a worry-wart.' Rather, you can say, 'The enemy of the grumps is trying to capture me again. (But I will resist!)' 'The enemy of worry is bearing down on me again. (But I'll hold up my shield and ward it off!)' 'The enemy of depression - the blues - is harassing me again. (So I'll take my sword and chop it off at the knees!)

You see the point? In Paul's image of you and me as Roman soldiers, *the evil is coming from the outside*. It's not part of you and me. It doesn't belong in us and we don't have to see it as part of us.

A few weeks ago I talked about images of **separation** in the Bible. I mentioned some of the vivid pictures the Biblical writers use, to indicate how they see us as separated from our sins. From the moment of baptism, for example, our sin is 'buried with Christ', and we are risen up away from it. In another image Paul says our sins have been 'nailed to the cross.' The cross is in Palestine 2000 years ago, and you are in Auckland in the 1990's. That's a huge separation of you from your sins.

The picture of the Roman soldier in Ephesians 6 simply carries on this idea of you and me being separated from evil. You don't have to identify with those evil impulses any more. They are not part of the real you. They are alien. They come at you from the outside.

2. The second assumption of this picture in Ephesians 6 is that **you yourself are magnificent**.

The image of the Christian as a Roman soldier is entirely positive. There is not a hint, not a trace, of bad or even of grey, in that picture. The soldier is entirely the good guy.

This is really just the conclusion of the Book of Ephesians. From start to finish in that book, Paul tells the Christians over and over again, using a great array of pictures and images, *that they are 100 percent superb*. In his very first sentence he calls them saints. In his next sentence he tells them God has given them every spiritual blessing in the heavenly places. He says God chose them before the foundation of the world, 'that they would be holy and blameless before him.' He says they are God's sons and daughters, that they have redemption through his blood, and so on and so on.

If you read the book of Ephesians through, and allow yourself to identify with the people Paul's talking to, it can only make you see yourself as a 100 percent magnificent, worthy, honourable, valuable person.

Let's explore this a little. If you look back on your life, and call to mind all the things you've done and said and thought, I'm sure you'll find there's heaps of good there and heaps of bad as well. You've probably done some wonderful things and some rotten things. If you now ask the question, 'Who am I?' and you answer that question by adding up all the things you've ever done and said and thought, the answer you'll get is, 'Well I'm a mixture of good and bad.' 'I'm happy but I'm also a bit of a grump. I'm brave but I'm also a bit of a worrier. I'm joyful but I'm also a bit of a depressive personality.' A mixture of good and bad.

I think most people see themselves like that. They carry around with them a picture of themselves as this contradictory mixture of goodness and badness. And often when challenges come upon them, they just keep repeating the bad behaviour (doing it over again), because, well that's who they think they are.

Paul doesn't see it like that. To Paul, **you** are *not* this mixture of good and bad that makes up your life history. When you put your hand in the hand of Christ, **you** were made into something else. You were *re-created*. You were *re-deemed*. You were *re-made* in the likeness of Christ. Your entire past and all your bad deeds have been wiped out, nailed to the cross, and God sees you now as an entirely new person.

Now if you ask 'Who am I?', you have to answer, 'I am Christ's man; I am Christ's woman. I aspire to the great virtues of love, patience, peace, longsuffering, tolerance, compassion, kindness, mercy, courage, humility.' That's who I *really* am. That's what I *identify* with. I may be tempted from time to time to give in to the grumps, the worries or the blues, but those evils are not part of the real me. I don't identify with evil. It comes at me from outside.

That's why I can see myself (symbolically) as a Roman soldier with armour on, defending myself against the evil which comes at me from outside and tries to intrude on my life and recruit me into co-operating with it.

3. The third assumption of this passage is that **it's our responsibility to keep this evil out.**

The Roman soldier does not cave in under pressure and let the enemy capture him and take him over. The Roman soldier does not let the enemy recruit him to the enemy's side. The Roman soldier knows how much depends on his standing firm. The Roman soldier knows he is totally responsible for holding the line against the foe.

What this means in practical terms is that you and I are responsible to stand firm against the enemies that try to take us over. When the grumps, the worries or the blues press in on you and try to take control of your behaviour, it's up to you to kick them out. You've got your sword, your shield, your armour; use it! If you don't, you've got nobody to blame but yourself.

You can't blame your upbringing. You can't blame the government. You can't blame your church or your minister. If you let the grumps take you over, you can't blame your in-laws or your teenage kids, or your dog or your partner or the traffic. It's entirely between you and the grumps. If you let the grumps ruin your day, and poison the atmosphere in your family, it's your doing and nobody else's. Your job in this battle is to hold the line. 'Stand firm,' says Paul. Be a soldier.

4. Remember what weapons you fight with.

God has not sent us into this battle empty handed. Roman soldiers were formidable in battle because they were so well equipped. To begin with, says Paul, you've got the belt of truth. Truth is a powerful weapon in the battle against evils like worry, the blues and the grumps. These enemies are very clever and try to tell us lies. They tell us it's somebody else's fault, or they scare us with spook stories about 'what somebody might think,' or they tell us we're weak, or that it's good for us to explode and bite someone's head off from time to time. They're *full* of lies. Fasten on the belt of truth! Let the belt of truth speak back to these lying evils!

Then there's the breastplate of righteousness - that's Paul's shorthand word for our being redeemed and recreated in the likeness of Christ. It's the reminder that we don't have to *identify* with these evil arrows, but must see ourselves as the noble new creation of Christ.

Then there are the shoes of peace, the helmet of salvation, the shield of faith 'with which you can quench all the flaming darts of the evil one,' and the sword of the Spirit 'which is the word of God.'

We don't have time right now to look at all of these. I want to invite you to take them home and meditate on them, think about them.

Think of yourself in this image of the Roman soldier going into battle against the forces of evil. The evil is coming at you from the outside. It may be an attack of the grumps, or an assault of the worries, or maybe the blues are pressing in on you. It may be less serious than that: it could be an attack of laziness, or of impatience or selfishness. It could be a very serious assault - of deep depression or paralysing fear.

Remind yourself these evils come from outside. They're not the real you. The real you is made in the image of God. The real you is a saint. The real you is the totally forgiven, re-created person whose hand is in the hand of Christ. Evil may assail you and tempt you, but you don't have to let it in.

Remind yourself that as a soldier of Christ you're fully equipped with armour, a shield and a sword. Fight back against the enemy. Send it packing. Pray at all times, and stand firm.

The Power of Stories

Birkenhead/Birkdale 15 September, 1996. Acts22:1-16

Ray Galvin

I want to talk to you today about **the power of stories**. I first got interested in this subject when reflecting on the 150 or so funerals I've taken over the last 20 years. In at least half of these I've hardly known the person being buried - or I haven't known them at all. So I've been dependent on their family and friends to tell me things about their life, which I can then say at the funeral as a tribute to them. Or in many cases now, the family and friends do the tribute themselves, and I just listen attentively and then do a kind of Christian reflection on that.

Now it often happens that after the funeral, someone comes up to me and says something like, 'You know, I knew John Smith reasonably well, but I'd never seen his life in that light before. I hadn't realised what a good bloke he was.'

At a person's funeral, we tend to say the very best about him or her. Everything we say is true, *but it's selective*. We recall the noble moments of their lives, where they acted with courage, strength and dignity, and we just keep quiet about the rest. That's why it's called a 'eulogy' - which is Greek for a 'good word.'

I sometimes think it's a real pity you have to wait till your funeral to hear these things said about you. Maybe we'd all benefit from a kind of mid-life eulogy, where our family and friends call to mind all the best things we've ever done and been, and have a celebration service in our honour, with us sitting there taking it all in.

You see the sad thing is that many of us go through life telling ourselves stories about ourselves that are not very complimentary. We often forget the very best and noblest things we did - as a child, a teenager and an adult - and construct the story of our life around the headaches and the disasters.

Let me state one of my fundamental beliefs: *the stories you tell yourself about yourself largely determine who you are*. If you ask the question 'Who am I?' you can answer that to a large extent simply by telling stories about yourself. 'I am the man who rose up out of childhood poverty to become a world class neurosurgeon.' 'I am the woman who fought against polio and became an athlete.' Or (as today is the anniversary of the Battle of Britain) 'I am one of the small band of men who held the line against the Luftwaffe.'

You see how powerful these stories are? You see how deeply they determine how we see ourselves?

And what if the dominant story of your life is a negative one? - for example: 'I am the dumb girl who failed School Cert and never settled in a job and couldn't hold my marriage together and can't control my kids.' That's a pretty powerful story too. If a person walks around telling stories like that about themselves, they'll be miserable; they'll expect to fail. And yet if that woman died today, I bet they'd tell a different story of her at her funeral. They'd talk about her qualities - 'Even though she wasn't an academic, she still had a series of interesting jobs. She held a marriage together for ten

years against impossible odds. She gave those three lively children all the love they could possibly need.'

An Australian counsellor named Daphne Hewson says people tend to be *revisionist historians*. They look back over the history of their life and revise it in the light of the main thing they think about themselves. If the main thing they think is that they're unattractive and inept, it comes out as a pretty discouraging story. The story they tell themselves about their life has the power to make them or break them.

Another thing that's got me interested in the power of stories is **the way they're used in the Bible**. St Paul, for example, is constantly telling stories about himself. In the Book of Acts, he tells the story of his conversion and then his work among the Gentiles. He tells this story more than once, to different audiences, so they can understand who he is and where he's coming from. In his second letter to the Corinthians he tells the story of all the hardships he's overcome and the dangers he's survived. In his letters to Timothy he looks back over his life and tells a little story about his successes.

It's interesting that Paul told a very *positive* story of his life. It was a story of *achievement* rather than *failure*, of *learning* from mistakes rather than simply *making* mistakes, of *overcoming* hardship rather than just *suffering* hardship, of *rescues* from danger, of goals *achieved*. The linchpin of his story was his conversion to Christ on the Damascus Road. He never forgot that life-changing event, and he tells it with vivid detail every time. It was the sparkling moment in his early life that set the tone for his later years.

I guess if Paul died today and had a funeral in 20th century New Zealand, his funeral eulogy wouldn't be that much different from the stories he himself told about himself. It would be more glowing and extravagant, of course, because Paul was a humble man who didn't like to blow his own trumpet. But the *genre* of Paul's eulogy would be that same, positive genre you see when you read his own stories about himself.

I've learned a lot from the way Paul tells his stories about himself. I've learned how important it is to recall the events of our lives with a positive and hopeful spirit - to recall how we *survived* hardship, rather than how unjust the hardship was; to recall how we *found a new path*, rather than how badly defeated we were by the old path; to recall how we *saw the light* rather than how the darkness had overcome us.

When I was 12 years old I failed a maths test. It was what they used to call 'ballard' - pages and pages of adding and subtraction against the clock. I hated that kind of maths, and I'd decided I was no good at it. After that test, my teacher said to me, 'Ray, I'm surprised at your marks. I'd have thought you were the most intelligent and thoughtful boy there was.' Well, I thought, that's a new story! When the next ballard test came around, I remembered that new story, rather than the story I used to tell about myself and ballard. I told myself, 'I am the most intelligent and thoughtful boy there is.' And I came top of the class in the test. The power of a good story!

When I was 14, my science teacher asked me what I wanted to be when I left school. I replied, 'I don't know. Probably a radio and television technician.' My teacher straightened his back, stood at attention before me as if I was special, and said, 'Galvin, you should aim for nothing less than a degree in engineering!' (I can remember his

exact words, as if he spoke them yesterday) And against all odds, I went and did a degree in engineering. The power of a good story!

Another thing that's got me interested in the power of stories is **Pontius Pilate's question, 'What is truth?'** If you went to John Smith's funeral and heard that glowing eulogy about him, you might think to yourself, 'Well that's all true, but Smithy was also a bit of a ratbag, and at times a misery-guts. Which of these stories is the true story? What is truth?' If you listened to St Paul's enemies, you'd hear all their evidence that Paul was a dangerous radical; that he was opinionated and argumentative; that he twisted the Jewish Law to suit his own ends. Which story is true?

In terms of story telling, truth is actually a very flexible concept. Both stories about John Smith are true - the positive one, and the negative one. There's truth all over the place. The trouble is, we often deprive ourselves of a positive, empowered outlook on life, by identifying with the negative story rather than the positive story.

Another thing that's got me interested in the power of stories is **the resurgence of Maori culture.** When I was a boy, there was a dominant story that was told about the Maori people. I don't mean people stood up on platforms and told this story; it was more a general story that circulated throughout the community. The story went something like this: 'The Maori are a primitive people who don't have the skills to adapt to modern life. Their culture is dying; they're dependent on charity; their only hope is to become absorbed into European culture.'

As you can imagine, this story was very disempowering for Maori. Many of them accepted it themselves, so it became doubly disempowering.

However, for the last 150 years there's been another story about Maori people, told by many Maori and others. This alternative story has not been dominant, but it's always been there in the background, and over the last few decades it's become much more dominant. It goes like this: 'The Maori are a noble people with a rich cultural and linguistic heritage. Many aspects of their culture are superior to European culture. They were oppressed and exploited by the Europeans and have suffered unjustly. But their culture will reassert itself and they will be restored to dignity and power.'

That story has got enormous power. Both the stories have truth in them. You can look at the history of Maoridom since the Europeans arrived, and find plenty of evidence to support both stories. But the second story is now becoming the dominant story, and it's breathing new life into Maoridom. Never underestimate the power of stories!

Here's another story about stories. Three or four hundred years ago, hundreds of thousands of African people were brought to North America as slaves. The slave owners were happy to give them the Bible, because they thought, the Gospel story would make them submissive and obedient. However, the slaves found other parts of the Bible more interesting - in particular, the story of the children of Israel being freed from slavery in Egypt. You know the story - how the Israelites laboured and sweated under cruel masters, and then Moses rose up among them, and God inspired him to shake the foundations of the kingdom of Egypt, and lead the children of Israel to freedom.

The African-American slaves *identified* with the Israelites in that story. It soon became the *dominant* story among them - the story of who *they* were. They were the children of Israel, in captivity, waiting on God to set them free.

They wrote that story into their songs (Songs like, 'Let my people go'); they held it close to them, and they've never forgotten it. What great power a story can have, when you identify with it as your own!

And so we come to the question of **our own personal stories**. What stories do you tell yourself about yourself? When you look back on your past and ask yourself the question, 'Who am I?', what stories do you select out, to define who you are? What is the effect of these stories on your life?

I am absolutely sure that God would want us to tell only the most noble, positive stories about ourselves - that God would want us to be very selective in the stories we choose out of our history, to identify with and which define who we are.

The Gospel takes great pains to tell us that the sins of our past have been blotted out, by the work of Christ on the cross. He took our sin. It's nailed to the cross; it's buried; it's gone. *Any story from your past that has sin or evil or failure in it no longer belongs to you.* It may be in your *history* but it's not in *you*. It may be something you can learn from, but it doesn't define who you are. You don't have to identify with it.

The stories from the past that God wants you to take into the present are the good stories. They are stories about your *resistance* to evil; about your *refusal to give up* in the face of horrible odds - stories about the image of God in you.

I was once talking to a woman from out of town, who had extremely low self esteem. She was convinced this resulted from that fact that as a child she'd been sexually abused many times by her grandfather. She'd seen counsellors about this for years. They'd been very comforting, but that didn't solve her problem. In fact, she noticed, the more she talked about the terror and guilt and isolation she'd felt as a child, the more overpowering her problems seemed to become.

I noticed, while we talked, that despite her crippling lack of self esteem, she'd still achieved a great deal in her career and in some friendships. But the dominant story that she told herself about herself was, 'I am the shameful creature who went through the hell of sexual abuse. I am worthless.'

So at an appropriate point in our conversation I said this to her: 'Supposing there'd been a fly on the wall, silently watching, during that terrible period in your childhood. What would the fly have noticed about your character that would have led him to say, 'Aha! This girl is a survivor. She will not be broken by this wicked abuse. At the very least she'll do well in her career and have good friends.' What of the image of God would the fly have seen in you?

The woman thought for a moment. Then suddenly she looked as though she'd been hit by a small bolt of lightning. She sat up and said, 'I can see it. I had a will to live, that would never be crushed. I had the sense that God's protective hand was on me despite

everything. And there was a cheekiness about me - I refused to accept that older people were always right.'

That was the beginning, for this woman, of a new story being told about her life. It was the beginning of a new identity, that would in time stand against the low self esteem that intruded on her life, and replace it with a sense of worth and dignity. Who was she now? She was the woman with a will to live that could never be crushed. She was the woman on whom God had his protective hand. She was the cheeky one, who would never bow down to unworthy authority. The power of the story we tell about ourselves!

The stories you identify with have the power to shape you. God wants you to identify with only the best in your history. So I want to invite you to think about this over the next week. Perhaps you might like to do a writing exercise. Look back over your life and write down all the examples you can think of, of the image of God being manifest in your life - times when you resisted evil; when you survived hardship; when you did wonders; when you showed courage; when you acted with kindness and compassion; when you did something creative; when you acted humbly; when you see the hand of God on your life. Go right back to your childhood and have a good delve around.

Studiosly avoid dwelling on your mistakes and failures. We all know you made them! God has wiped them out, by the blood of Christ. They don't belong to you any more.

Write all this up into a little story - the new story of you; the story that defines who you really are, as a pilgrim walking hand in hand with Christ. I bet that story will be one of the most powerful and empowering you've ever read.

Death, Loss and Grieving

Birkenhead/Birkdale 29 September, 1996. Hebrews 12: 1-2; Romans 8:31; 35-39

Ray Galvin

Today I want to talk on the subject of death, loss and grieving. I often think about this because of course I deal with it so much in ministry. This year we've had a bad winter and I find myself almost running from funeral to funeral. I meet people who are bereaved, and try to comfort them. When the deceased is someone I knew personally, I feel a bit bereaved myself.

Most of us will be bereaved many times before our own death comes. Our grandparents die, then our parents; sometimes we lose a brother or sister or friend, or more tragically a child. Half the people who are married lose their spouse through death - and that can be a very bitter blow.

As I was preparing this sermon I thought back on some of the deaths that have impinged on my own life. I'm not sure if I'm typical, but I find I'm well acquainted with death and loss. When I was born my paternal grandfather had already died. My two grandmothers died when I was about 5. My maternal grandfather, whom I loved dearly and who got me interested in music, died when I was about 11. In my early teens one of the neighbours died in a road accident, and in my late teens one of my colleagues at work, in the Post Office Engineers, was killed in a skiing mishap. One of my best friends died of leukaemia when I was 18, and my father died the same year. And that covers just my first two decades!

Because bereavement is such a regular part of life, *is it not important that we have some idea of what death is?* When we lose someone, is that a *total* loss? Is the person absolutely 'lost and gone forever,' like Clementine in the old folk song? Or is death merely a transition from one phase of life to another - and if so, how can that help those who are left behind?

Or let me put it another way. God's world is arranged in such a way that people die. The death of loved ones is part of life. *What is the best way for us to orient ourselves toward these losses?* How can we think about the subject of death, in such a way as to fully accept that the person has died, yet feel at peace within ourselves and carry on living with genuine happiness?

I'm sure these questions apply to other losses as well, losses that don't involve death. People suffer grief when their children leave home. Some suffer grief when they retire. You can suffer grief when you shift house after living in the family home for 60 years.

I remember going to a weekend seminar on grief when I lived in Austria. Some of those attending had been bereaved of a child or a spouse. Others had lost their marriages. There was a catholic priest there, who'd been forced to give up the priesthood some 10 years before, because he'd chosen to marry. His marriage was wonderful, but he was aching with grief that he could never celebrate communion. He deeply missed standing with a congregation and leading them in the breaking of the bread.

So there are many different causes of grief. Although I'm focusing today on bereavement through death, much of this should also apply to other losses.

I want to share with you a view of death, bereavement and loss that I personally find extremely helpful. This is something I've worked my way towards with some effort of mind, and which I believe fits with the New Testament and with my best experience of life.

The basis of what I want to say is that I find it helpful to understand death through the metaphor of *separation*. Death is the separation of the **body** from the **soul** and the **personality**. (r) When we are alive, these three aspects of us are fully melded together. Our body, our soul and our personality are all in one being. You can't separate them. I *am* my body; I *am* my soul; I *am* my personality.

But when we die, we are divided, as it were, into three. Our *bodies* go to the earth. Our *souls* go to heaven to be with God. But our *personality* - as I'll attempt to explain in a moment - remains behind and continues to influence the world. Let's take these one by one.

1. Our souls go to be with God.

It's deeply reassuring to be able to affirm our Christian hope that the deceased themselves are now in the fellowship of God. When you die, your soul goes to be with God.

Incidentally, when I talk about the 'soul' I mean that core of you which is aware of life - your consciousness, your awareness of being alive, that free, unshackled focus of your being. And as Paul says in Romans 8, nothing can ever separate you from the love of God, nothing in life or in death. The Gospel gives us this iron-clad assurance: We go to be with God. As Jesus rose from the dead, so we are risen too.

So when a friend or loved one dies, we can at the very least be at peace about what's happening to them now. There's no worry about torment or annihilation. What they are experiencing now is all good and joyful.

2. Our bodies go to the earth.

While the deceased's soul goes to heaven, their body returns to be remade into earth. From dust we were made, and to dust we return. The person's physical presence is taken from us.

For those of us who are left, this is the most painful thing about death. It's especially painful if you were close to the deceased. If your spouse dies, and you're in the habit of reaching out and hugging them at night, they're no longer there to hug. If you're used to telling them about your day when you come home from work, there's a big emptiness where once they stood in the kitchen. If a child's mother dies, and he's used to getting lots of hugs from her, he's going to feel a great nagging pain.

If your best friend dies, and you used to go fishing together and share a drink on Sunday afternoons, that's a big hole in your life.

When their body goes to the earth, you lose their physical presence in your life. The closer you were to them on a day to day basis, the harder that will be to adjust to. This can be *very* painful for a person who had an intensely physical relationship with their spouse or partner. It feels like an amputation, like part of their own body has been lopped off. So many of their habits have been formed around their partner. They roll over in bed at night to embrace them and there's just cold sheets.

We need to be very understanding towards people who've suffered this loss. Their whole body is aching from the loss of their mate, and they need loads of sympathy and support.

It is also true, however, that they can adjust to this physical loss in time. Habits do actually get broken, and new habits arise in their place. A person who thought they'd wither up and die without their partner, finds two years later they're living quite contentedly without them. Human beings are far more flexible than we often give ourselves credit for.

So the body and the soul are separated at death, and both depart from us - the soul to heaven, the body to the earth. I used to think that was all there was to it. A kind of total wrenching from us. But now I realise there's much more. And so we come to:

3. The deceased's personality and influence remain alive in the world.

When a person dies, I do not believe their total being departs from us. I believe their influence, and the force of their personality, remain in us, among us, and with us. Let me explain what I mean.

Supposing you and I are good friends. Suppose we meet for lunch every Thursday. We go to a few movies and shows together. We have great conversations and discuss the burning issues of life. Our knowing each other actually modifies the kind of person each of us is. I've become a slightly different person, since getting to know you, than I was before. Your ideas and way of thinking and talking have made a permanent impression on me. At times when I'm not with you, I can easily imagine what you'd say about certain things that crop up. Sometimes I can almost hear your voice in my mind, holding forth about some social evil or some crazy politician. (That seems to me to be fairly typical human experience.)

Now supposing I go away on an overseas trip for a few months. Of course I miss those Thursday lunches. But it doesn't matter too much, because in a sense I take you with me. Your personality is imprinted upon me, just as are the personalities of all my friends and family. If I'm all alone in some strange foreign city in a cheap hotel and I don't know a soul within 500 miles, I can get out my pen and paper, and write a letter to you about my travels. As I write, it's almost as if you're present with me. In fact, the letter I write to you will be very different from what I write to my nephew or some other friend, because as I write each letter a different person is present in my mind.

To put this in more formal language, what I'm saying is that *our personalities are socially distributed*. Your personality does not live just in you. It lives in everybody who's ever known you, everybody you've ever influenced, everybody whose life you've touched. Every time you communicate, it's with other people. Every time another

person is addressed by you, they are influenced by you. They are changed. Something of you rubs off on them.

Or let me put it another way: Your soul belongs to you and you alone. Your body belongs to you and you alone. *But your personality is public property.* Not only does it belong in the world around you, it actually *exists* in the world around you.

If you weren't part of a community, would you even *have* a personality? You were born into community. You learnt to speak by being enmeshed in a community. You were educated in community. Your personality exists and is kept alive in the social web of the community around you.

Therefore, when you die, your personality remains in the community. The jokes you told me are still in my head. The wisdom you imparted to me is still there. I'm still inspired by your courage. Your voice still speaks through me when I use the ideas you taught me. You've made a permanent impact on the community around you. That impact is very personal, and it remains whether you come or go, whether you live or die.

In fact, you could say our entire society is inhabited by the personalities of people who've gone before. The personalities of people hundreds of years ago got imprinted on the lives of others around them, and their personalities were imprinted on others, and so on. That's why in the Church we talk about the 'Communion of Saints.' The Communion of Saints is all the followers of Christ who are alive now *and who've ever lived.* It's like a vast web of interacting, interconnected personalities stretching way back in time and all around the world, each influencing their contemporaries and those who come after them - and, hopefully, drawing and encouraging each other to follow Christ.

How can this help us to cope with bereavement? Well, when someone close to you dies, you lose their body and you lose their soul. *But you don't lose their personality.* That of them which is in you remains in you. It's part of you. That of them which is in the wider community remains in the wider community. It's part of what that community is.

People tell pastors some wonderful things. Many widows tell me they still talk to their husbands - sometimes decades after their husbands have died. They ask his advice, or they tell him what a great day they've had. This is not crazy and it's not unhealthy. It doesn't indicate some glitch in the grieving process. It's the height of wisdom. The old man's soul is in heaven and his body's in the earth, but his personality remains imprinted on everybody who knew him. It remains very deeply imprinted on the woman who knew him most closely.

This way of thinking was quite natural to the New Testament people. In the letter to the Hebrews, the writer gives a long list of some of the great heroes of faith in God. All these people were long dead at the time the letter was written. But the writer says, 'Therefore, since we are surrounded by so great a cloud of witnesses, let us run the race of faith with perseverance.' The people who've died are 'witnesses,' watching us run the race of faith, and cheering us on. Their personalities have become imprinted on the Christian community, and they survive, as it were, within that community.

So what can we do to benefit from this? I believe one of the most important things we can do is to *cherish the memory of these who were close to us and who have died*. When you look through the old photo albums, don't keep flailing yourself with the tragedy of his death. Rather, fill yourself up with the joy of the precious memories. Retell the stories behind the photos. Ask yourself, 'What was it about that smile of his that did so much for me; how has it changed me; how have I become a better person because of it? It's mine now forever. How can I best benefit from it?' 'In what ways am I carrying his personality in me after all these years, and how has that contributed to the person I admire in myself?'

In a sense you need to draw the magic of the deceased's personality into you. Breathe it in and claim it as yours.

It's exactly the same for other losses, apart from death. Many parents, for example, feel a deep sense of loss and grief when their children grow out of the innocence of childhood and become teenagers. This can be like a bereavement because you've lost those tiny, innocent, dependent little children forever. (They've been replaced by larger, less innocent, more *independent* teenagers.)

Once again, we need to cherish the memories. Look at the photos and re-tell the stories. When your kids were young, their little personalities did something special for you. They imprinted their innocent little personalities upon you. Hang on to that. It's yours forever.

Death, bereavement and loss come at us from many quarters in our journey through life. I would never want to deny the tragedy that a death can be. Loss is painful. It takes time to work through. Nobody can expect a bereaved person to 'come right' overnight or even in a year or two.

But there are also some great consolations. Though the body and the soul depart from us, the personality remains. It remains because it belonged to the wider world anyway. It's a gift of God, which we can be enriched by till *our* dying day.

On Being a Transformed Nonconformist

Birkenhead/Birkdale 13 October, 1996. Romans 12:1-21

Ray Galvin

Today I want to look at Romans 12:2: 'Do not be conformed to this world, but be transformed by the renewing of your minds, so that you may discern what is the will of God - what is good and acceptable and perfect.'

'Do not be conformed to this world.' J.B. Philips translates that, 'Don't let the world squeeze you into its mould.' When Paul wrote his letter to the Christians at Rome, he knew the values of the Christian faith were often in stark contrast to those of Roman culture and society. Christians were people who'd been transformed by Christ; they'd become a new creation. They no longer identified with destructive, evil, sloppy, selfish ways, but identified instead with Christ and his love. How were they to hold fast to that new way, living right in the midst of a culture shot through with degenerate values? How could they keep the candle of goodness glowing, amidst the raging storms of destructive values?

Of course this is not to say everything in the world is bad. It's not as simple as that. The world is God's creation and it's bristling with goodness. God *loved* the world so much that he gave his only son. The Psalms are full of praise to God for the world. There's a hymn where we praise God for the beauty of the earth and the joy of human love. God himself came and lived in the world, in the person of Jesus. Jesus belonged to a culture and society which had all the strengths *and* failings of any human culture.

I know there are branches of the Christian faith where people barricade themselves against the big bad evil world. But Paul wasn't asking his readers to do that.

Besides, our culture and society today has been influenced and enriched by the Christian faith for two millenia. We can expect to find many Christian values firmly entrenched in the world around us. At some points we probably need to be *more* conformed to the prevailing values of the world and less stuck in our own churchy ruts.

There are, for example, some feminists who say the liberation of women could only have happened in a society that had been deeply influenced by Christian values over a long period of time - values like social justice and 'loving our neighbour as ourself.' These values were preached by Christians for centuries; they became entrenched in our culture, and provided the basis upon which the liberation of women arose. But then some churches found the liberation of women a bit hard to take, because they'd never made the connection between their theoretical values and the real situation of women.

So we have to be cautious in how we apply this notion today. But it's still an important notion. There are many trends and values in our culture, existing or newly arising, which are in direct opposition to the values of Christ. Some of these are devastating in their effects on persons. Some are glaringly obvious but others are very subtle. They go unnoticed for decades. They cling so close to us that we don't even see they're there. So I'll outline a few of these today, starting from the most obvious and moving to the more subtle.

But first a word from Martin Luther King. In one of his sermons, King said this:

Today, psychologists have a favourite word, and that word is 'maladjusted.' I tell you today, there are some things in our social system to which I am proud to be maladjusted. I shall never be adjusted to lynch mobs, segregation, economic inequalities, the 'madness of militarism,' and self-defeating physical violence. The salvation of the world lies in the maladjusted.

I like that last saying: 'The salvation of the world lies in the maladjusted.' Let's not be too 'adjusted' to the culture we live in and are part of. Let's rejoice in being misfits where appropriate. The London preacher John Stott puts it another way. He says let's be 'transformed nonconformists.' If we're transformed by Christ, then we can't conform to everything our culture expects of us.

So let's look now at some particular areas where we might refuse to conform, where we might be pleased to be maladjusted.

1. Poverty in New Zealand

Some very loving people in this congregation have been working for years to provide practical help for families in the district which face a form of poverty. I find I always learn something when talking directly with people who help the poor. I learn that poverty does exist in this land, and that it's fed by four main things: low income, the cost of housing, the cost of education and the inadequacy of the public health system.

My colleague Rev John McKinlay is currently looking after a church in South Auckland. He says he's discovered in that district a huge caravan park. Hundreds of families are living permanently in cramped, rickety, cold caravans. They've got nowhere else to go and no means to get there.

Now I'm not a lefty or a state socialist or any other economic label. But I will never adjust to poverty in my country. It's unnecessary and it's destructive and it's unchristian. I'm a non-conformist when it comes to the idea that we have to have some poverty to scare people into working harder.

A friend of mine is a geography lecturer at Auckland University. His specialist area is the geography of health. One of his favourite seminars is the one he gives on Hikurangi's public health system. In Hikurangi, in the far north, the Crown Health Enterprise has structured itself so that all medical care is absolutely free. Every doctor's visit is free. Every operation is free. If you're a tourist in the area and you break your leg, they treat you free. The Hikurangi medical people say that by treating people for free they save so much money that would have been spent on accountants, they can afford to treat people for nothing. They also say that when people go to the doctor early, as soon as they get sick, they get better quicker and need less expensive treatment later on.

My friend says it goes even deeper. He says there's a strong Christian, socially minded sentiment up there, among the Maori people and the Europeans, and they just don't believe poverty should cut people out of health care.

So you might say, the people of Hikurangi refuse to be conformed to the world. They refuse to reduce everything to the language of the market. They're maladjusted to poverty. They're transformed non-conformists.

2. The family

For me one of the most painful aspects of the election campaign was the rhetoric about 'the family.' I noted that the Christian Coalition's definition of a family was a married mum and dad with their kids all living under one roof. To stand for Parliament for that party you had to belong to one of those. I was amazed to note that St Paul wouldn't qualify to be a Christian Coalition MP because he didn't live with a wife. Nor even would Jesus.

This view of the family is touted by liberals and conservatives alike, to score political points. It's fed by the culturally dominant view that that's what a real family is - mum and dad and the kids living under one roof. This rhetoric - it seems to me - is very worldly because its intention is to privilege those who do live that way, and marginalise those who don't. You wouldn't believe how much people suffer because they're constantly told they don't live in a real family. They even suffer from the simple fact that most houses today are designed for such a family - so if you want your uncles and grandparents to live in, you get accused of overcrowding or lowering the tone.

Another colleague of mine, Rev Dr Murray Rae, recently did some research on 'the family.' He found that the nuclear family of mum, dad and the kids under one roof is a peculiarly modern, western development. For most of human history, and in most cultures, people have lived in either much larger, or much smaller households. Dr Rae says the modern nuclear family arose as the west industrialised. It arose because it enabled one adult to go out to work, and all other family members to be consumers. He says it's unfortunate that many churches have allowed themselves to be so conformed to the world that they've sanctified this type of family as if it were the Christian ideal.

Of course it has got some great advantages - especially if it's a happy family - but it can do terrible things to the relationships between parents and children. It tends to isolate the father from his children, and put all the parenting load on the mother. It limits the children's day to day contact with adults to just two - whereas, as the African saying goes, 'It takes a whole village to bring up a child.' And it also shuts out the people whom the Bible says families should go out of their way to look after - the stranger, the widowed and the orphan.

Dr Rae says *any* family configuration can be Christian, provided the family is open to others in need, provided it functions so as to teach its members how to love others, provided it exposes children to a wide range of adult role models, and provided it doesn't exploit any of its members.

So we don't have to be conformed to this cultural stereotype of the nuclear family. It's OK to live in a different configuration. Let's not sanctify the world's stereotypes as if they were the Christian ideal. Let's be transformed by Christ and get the broader picture.

3. Sexuality

We live today in a culture which is very strongly and overtly sexualised. There's a story that circulates in our culture, to the effect that it's always been this way and it always has to be this way. I think it was Freud who said, 'We live in sex as a fish lives in water.' This popular story says that last century the Victorians repressed the sexual urge, and most of our sexual hangups result from that legacy of repression. It says thank goodness we're now getting over that Victorian repression, and recognising and celebrating and expressing our sexuality freely, as people did before the Victorians came along.

Hence, we see sex everywhere we look today. It's in the advertisements, in the movies, in teenage fashion and pop songs. Young people growing up today are bombarded with sexual images in every sphere of life.

Now in the 1970s a brilliant French intellectual named Michel Foucault got suspicious about this prevailing story of the up-tight Victorians and the glories of sex. So over a period of years he examined thousands of writings from the last thousand years, to see just what attitudes people *did* have toward sex in former times. He came to some amazing conclusions. Firstly, he found that before the Victorian era, people hardly ever talked about sex at all. For thousands of years in our culture, sex was not actually a popular topic. People were modest. Sex happened between men and women - of course! - but it wasn't plastered all over the culture.

In fact, says Michel Foucault, if you look at what the Church says about *sin* in the middle ages, you find they hardly ever mention sex. The deadly sin they were concerned about then was *overeating*. In those days the culture worshipped food and the church tried to control people's gluttonous appetites.

In the middle ages, in fact, celibacy was far more highly prized than sexuality. The cultural heroes who were most admired in those days were not the great lovers like Marlin Brando and Robert Redford. They were the bishops and monks and scholars who enjoyed the privileges and freedoms of the celibate life. To be in a couple in those days was a bit second class. Isn't it interesting how cultural values change?

And what about the Victorians? According to Michel Foucault, the Victorians didn't *repress* sexuality, they were the ones who *started off* the modern preoccupation with it. Foucault concluded that the modern preoccupation with sex, with its plastering of sexual images all over the place, *began* in Victorian times, and has continued to flourish and expand to this day. It was given respectability by Freudian psychology and became the main driving force in many areas of our culture.

Foucault's books on the history of sexuality were translated into English in the 1980s. To my knowledge, nobody has ever been able to disprove his theory. So all this hype about sex, this cultural fixation on sex, is not a necessary part of being human. It's not something we should conform to. It's not a balanced reflection of what God made human beings to be like. Don't be conformed to it, be transformed by the renewing of your mind in Christ Jesus. Let's promote modesty, and sex-free dating, and pop music that explores *other* themes. Let's leave sex for the private expression of real love between committed adults - if they want to. And let's give equal respect and admiration to those who prefer the freedoms of celibacy to the responsibilities of partnership.

4. The notion of normality

One of the most subtle, and yet dis-empowering, of all modern cultural affectations is the preoccupation with what is 'normal.' People put each other and themselves under the most severe surveillance to make sure they are normal. There is in our culture a vast array of very subtle rules and standards by which we judge what is normal and what is abnormal.

This is because over the last 200 years, virtually every sphere of human life has been studied in a pseudo scientific way - the so called 'human sciences.' True scientists of course are very modest about their findings. But when these findings are picked up by the culture they get treated as truth. So our culture now claims to know virtually everything about the so-called 'normal human being,' and what represents a deviation from it. We claim to know: what ideal shape a human body should be; what housing conditions are ideal for human beings; what hours a person should work, rest, play and sleep per day; how much a person should cry or not cry; how long it should take someone to get over a bereavement; how important it is to have a sexual partner; what the best parenting arrangements are for children; how hard young people can be allowed to study before getting psychologically damaged; how important it is to let your emotions out and not repress them; when the right retirement age is; how quickly workers deteriorate past the age of 40; how healthy or unhealthy it is to be psychic.

We claim to know so much! Some of it can be helpful - especially if you can use it to persuade the government to shorten the working week or increase the minimum wage. But most of it acts as a yoke around people's necks. It leads people to judge each other, evaluate each other, and ostracise those who seem 'abnormal.'

Well I revel in the abnormal. I think each of us should ask God to help us discover who we *really* are - what we're like when we're being the person God created us to be. Forget about what's normal and abnormal. Find out who you are and be that. So what if it's abnormal! The world will die of boredom if we don't get a bit more abnormality into it!

I thank God that Christ was an abnormal man. The life Christ calls us to is abnormal in any culture, because it's all about turning away from sin and embracing compassion and love.

We should not be conformed to the dictates of our culture. We should examine our culture critically. Don't let it squeeze you into its mould - it's a very mouldy, restrictive, deadly mould. Instead, let's be transformed by the renewing of our minds. Let our minds be full of the character and values of Christ, and let that vision control our lives.

How to Start a War or Create a Saint

Birkenhead/Birkdale 20 October, 1996. 1 Chronicles 19:1-19; Matthew 4: 18-22

Ray Galvin

In our Old Testament lesson today we heard the story of a fierce and bloody war. It was a war that humiliated one nation, ruined another, and led a third to become too big for its boots. It caused the deaths of thousands of people, possibly tens of thousands. Like all wars, it left grief, sorrow and disruption in its wake.

But the most tragic thing about this war was that *it never had to happen*. It was caused *entirely* by misunderstanding, misreading, misjudgement and mistakes. I'm not saying all wars are caused that way or that all military engagement is unnecessary. But *this* war was unnecessary. It was a catastrophe from start to finish.

But this is not just a story about war. It's about people - you and me - and the things that can go wrong in our relationships with others. It's about a basic mistake human beings make again and again, a mistake that causes unhappiness, that disempowers us, that spoils the quality of our lives.

Let me go over the events in the story.

David had become the undisputed king of Israel. Over to the east of Israel was the land of Ammon, ruled over by a king named Nahash. One day, Nahash died and his son Hanun became king. Nahash had been a good neighbour to David, so David decided to send ambassadors to the land of Ammon, to bring his condolences to the new King Hanun on the death of his father.

When the Israelite ambassadors arrived at King Hanun's palace, Hanun's advisers said to him, 'Don't be fooled by this apparent good will and sympathy. It's a trick. These men are spies. David has sent them to check out the land, so he can attack us and conquer us.'

So King Hanun seized the ambassadors, shaved off their beards, cut off their clothes at the waist, and expelled them from the land.

Well you can get new clothes anywhere but you can't grow a beard overnight. And in that day and age, if a man didn't have a beard he wasn't a real man. So the poor, beardless ambassadors were ashamed to return home. David heard of their plight, and sent word to them to wait in Jericho until their beards grew back. That solved that part of the problem.

But David was hopping mad about how his ambassadors had been treated. How *dare* Hanun down-troop them and cut off their beards! But David no doubt had other matters to attend to so he didn't take it any further.

Meanwhile, back in the land of Ammon, the young King Hanun heard tell of David's anger. 'Oh no,' he said, 'I've made David into an enemy. I'd better raise a huge army to defend Rabbath, my capital city, just in case he invades.' Hanun had plenty of money, so he paid tonnes of silver to some neighbouring states to the north - Syria in particular

- and hired thousands of mercenaries with chariots and the latest weaponry. He also called up all the men of fighting age in all the cities of Ammon, to come and join the army defending the capital.

When David heard about this, you can imagine what he thought: 'Ammon is putting together an army to invade us. That's obviously been his intention all along. No wonder he humiliated my ambassadors! My only hope now is to smash his army to pieces before it gets ready to invade.'

Now unlike Hanun and the Ammonites, David had a very experienced standing army, under the command of his brilliant generals Joab and Abishai. So he quickly sent them off to attack the Ammonites at their capital city, Rabbath.

David's generals - being cool professionals - routed the disorganised troops of the Ammonites. But then things escalated yet another notch. When the king of Syria heard about the rout, he got nervous and thought, 'Oh no! They'll attack me next, for hiring out my charioteers to the Ammonites.' So the king of Syria raised yet another army and put it in place to defend his own land against any possible invasion.

Now Syria was a long way from Jerusalem, and the king of Syria had no intention of marching his troops down there. But when David heard the Syrians had raised an army, he thought, 'Oh no! Now the Syrians are preparing to invade!' So David quickly raised a volunteer army from all the cities of Israel, marched it all the way up north to the land of Syria, and routed the Syrian forces.

At the end of the day there were tens of thousands of corpses, hosts of wounded, exhausted soldiers, and nobody was really any better off. Syria had had its nose bloodied, Ammon had lost its independence, and David's kingdom got over-extended because he now had to control the rebellious vassal state of Ammon. - which caused problems for him further down the line.

What went wrong? How did a gesture of good will lead to such a disaster?

I want to look at this story from the point of view of **how people's perspectives shape their realities**. Our perspectives - that is, the filters or frameworks through which we look at the world - control almost totally what we see *in* the world. If our perspective is that somebody is a bad person who can do no good, then we'll only ever see the bad in them. We'll filter out the good or reinterpret it as bad. But if our perspective is that so-and-so is a wonderful, noble, Christ-like person, then that's exactly what we'll see in them.

This is one way of looking at this story. To begin with, before the story began, David had already established a reputation for himself as a ruthless, expansionist leader. His army had cleaned up pockets of Philistines, Edomites, Moabites and Amalekites who were settled too close for comfort to his own people. From David's point of view, he was just protecting his people from local threats. But from the perspective of the states away to the north and east, he was the Joseph Stalin of the ancient near east, relentlessly expanding his kingdom for no reason but power.

So when David sent his condolences to Hanun on the death of his father, Hanun's advisers were not able to see this as a good act. *We* know it was a good act; it was kind and thoughtful and positive. But the Ammonites' perspective on David was that he was a ruthless conqueror. Therefore, this ambassadorial visit *must* be part of a plan to invade. The safest thing to do would be to give the ambassadors a nasty fright and send them home before they could do any surreptitious spying.

The Ammonites compounded this mistake when they heard that David was angry. If David was angry with them, then he *must* be planning an invasion. From their perspective he was a power hungry conqueror, ruthless, bent on expansion.

Now up to this point David himself has been acting quite reasonable. But now *he* starts to get fooled by *his* perspectives. Because the Ammonites did such a humiliating thing as to cut off his ambassadors' beards, they must be hostile. So, now that they're raising an army, it can mean only one thing: they're planning to invade. David's own perspectives lead him to make this catastrophic mistake about the Ammonite's intentions.

As the story unfolds, the Syrians make the same mistake. Finally David makes the same mistake again in his interpretation of the Syrians actions. *Everybody's seeing everybody else through the perspective of fear and hostility.* So everybody's interpreting everyone else's actions as fearful and bad.

During the 1960s a researcher named **Gregory Bateson** looked closely at the mechanics of human perception. He asked, why is it that we perceive certain things in certain ways? Why, for example, does one person perceive a particular political leader as a saviour who can do no wrong, while another perceives him as an opportunist ego-tripper bent on personal power? Why do two people interpret the same actions by this politician in completely opposite ways?

Or alternatively, why does one person who makes a clumsy faux pas at a formal dinner, perceive it as a bit of a joke, drawing all the guests into a round of hearty laughter, while another person making the same faux-pas perceives it as a deeply embarrassing disaster and is depressed for the rest of the evening? Why does the King of Ammon perceive a sympathy visit as an act of hostility, while the King of Israel perceives it as an act of kindness?

Gregory Bateson suggested that each of us looks at life through a kind of **perceptual filter**, which determines to a large degree how we're going to *see* life. Bateson said, that filter is so powerful, it can actually blind us to things in our lives which would contradict it. It tends to make us see only that which fits with it. Anything that doesn't fit is either not seen, or is reinterpreted as if it's something else that *does* fit.

You can see this happening, for example, with a person who thinks they're not attractive. When you ask them why they think they're not attractive, they'll give you a hundred reasons. They can remember stories from every phase of their life that prove they're not attractive. Now if you happen to have known them quite well, for a long time, you might be able to remember many incidents in their life that prove they *are* attractive. But try telling them that and you'll have a job and a half on your hands! A

person's perceptual framework can be so powerful, it actually *determines* what is recalled, what is significant, and what counts.

The same can happen with our perceptual frameworks about other people. If I like Jo Bloggs I can recall all the wonderful things about him that make him such a great guy - and it's hard for me to even think of things that are bad about him. If he does something bad or foolish, I probably won't even notice it - or else I'll give him lots of excuses. But if I *dislike* Jo Bloggs, the whole thing can work in reverse. It can be quite difficult for him to do anything I really appreciate.

People who've taken Bateson's findings further have come to an amazing conclusion: The perspectives through which we look at life not only filter our world to reinforce what we think about it. They also create our world for us. They make our world *into* what we think it is.

So in our Old Testament story, King Hanun of Ammon *made David into* an enemy by thinking about him as an enemy. David was not his enemy to start with. Hanun *created* an enemy in his mind, and it became reality. Likewise, David *created* a war in *his* mind. He believed the Ammonites were intending to wage war, so he *got* a war. He did the same with the Syrians, who themselves had done it to him. *Our perspectives create our world for us.*

This can be very tragic, as we've seen in I Chronicles 19. But it can also be absolutely wonderful. If we can create evil just by the perspectives through which we look at ourselves and at others, *then we can also create good.* If we can create enemies, then we can also create friends. If we can create wars, we can also create peace - just by getting the right perspective on life.

Listen to what Paul says about love: 'Love does not keep a record of wrongs... Love bears all things, believes all things, hopes all things, endures all things.' (from I Corinthians 13: 5-6) To love someone means training yourself not to remember the wrong they do. It means believing in them that they will do good always. It means hoping for them, enduring and not noticing when they hurt you. In other words, look at the person through entirely positive eyes. Adopt a new perspective with respect to them, a perspective which filters out the bad, and allows you to see only the good.

Of course I know there are exceptions to this - such as when someone's abusing their partner or children. Then it's not just a question of perspectives; it's an issue of social justice. But for the most part, what Paul says holds true.

This is creative love. This is how you create new people.

Look at the way Jesus created new people. He created new worlds for them, just by looking at them through his perspective of divine love. The archetype of this is the story of the woman at the well, in John 4. This woman was an inferior, despised being in the eyes of the male-dominated Jewish community. All they could see of her was that she was a Samaritan and an adulteress. That was their perspective on her, and whatever she did would be interpreted by them to reinforce that perspective.

But Jesus treated her as if she was an honoured colleague. He engaged in theological conversation with her as he would with a top rabbi. He sent her out to spread the Gospel as he would an apostle. *He recreated her, just by the way he saw her.* He did the same for Peter, James, John, Matthew and the others. He looked at people only through the perspective of divine love. He looked at them as valuable, worthwhile, capable - and so they *became* valuable, worthwhile and capable. He created saints just by looking at people as if they *were* saints!

What can we do about all this? Firstly, may I suggest we need to **check out our perspectives on others.** How do we see others? Do we look at them with caution, or even fear, according to their 'faults' and inadequacies? Is our perspective on them defensive, judgemental? Or do we look at them through the eyes of divine love? Do we see only their nobility, their divine spark, their value, their positive qualities, their worth?

Because sure as eggs you will create what you see. If you want your children, your friends, your partner to become noble and good, then look at them as if they are. Love does not keep a record of wrongs. Love believes all things, endures all things, hopes all things.

And what about **your perspective on yourself?** Do you sit in judgement on yourself? Do you keep a record of your mistakes, your faux pas, your failures? Do you look at yourself through a perspective that says, 'Not quite good enough'?

Jesus doesn't look at you like that. He looks at you as infinitely valuable, lovable, high quality, loaded with potential. He's taken your sin and failure and inadequacy away, and sees you as just so wonderful. When he looks back over your life, he recalls only those things about you that fit with his perspective. He can't see the rest, he's blind to it. He can only see your moments of courage, of kindness, of creativity, of strength, of likeableness.

He invites us to look at ourselves through that same perspective. When we learn to do that, we begin to share in God's re-creation of ourselves.

The Art of Creative Reminiscing

Birkenhead/Birkdale 27 October, 1996. 2 Timothy 4:6-18

Ray Galvin

Today I want to talk about the art of reminiscing. Recalling the events of your past. Looking back over your life and filling yourself up with your memories.

In our New Testament reading today, an aging St Paul looks back over his life. He says, 'I have done my best in the race, I have run the full distance, and I have kept the faith.' (2 Tim 4:7) He talks about some of his disappointments and let-downs, and concludes, 'But the Lord stayed with me and gave me strength...' (4:17a)

When Moses was old and soon to die, he called the Israelites together and reviewed the past with them. He went over with them how the Lord had rescued them from slavery in Egypt, kept them safe in the wilderness, and brought them to the threshold of a new life in the Land of Canaan. (Deuteronomy 32-33) At one point in his speech he says to the people, 'Think of the past, of the time long ago; ask your fathers to tell you what happened, ask the old men to tell you of the past.' (32:7)

It's very important for us to talk about the past, to recall the great moments of our lives and think about their meaning.

It's long been known that old people like to reminisce. They like to cast their minds back and talk of how it was in the old days. Ministers and nurses who work with elderly, terminally ill people find out first hand how much these people benefit from talking about the past and 'how it was.' It's long been recognised that as people come face to face with death, they have a need to get in touch once again with the course of their life and its significance. When I'm with elderly people I enjoy very much hearing about their past life and what they think of it as they prepare for their next life. I love hearing about the trams that used to rattle up Queen Street in the days when Auckland had a pleasant city centre and a decent public transport system. I love hearing about the huge crowds who flocked to hear John A. Lee in the Domain. I sit in amazement as I hear about the terrible flu epidemic of 1919, and the deprivations of the Great Depression.

But lately I've come to see that reminiscing is not just meant to be for old people. I believe all of us would live better in the present if we were more in touch with the past. Unfortunately, western culture is very 'now-oriented,' and very 'future-oriented.' We treat the most recent things as the most significant. We go for the fads and the trends, and make predictions and projections about the future. In German they have the word 'aktuell,' which means absolutely up to date, hot off the press, the very latest. I notice this word being used more and more in their advertising slogans. If it's 'aktuell,' it must be good.

A Maori minister told me once that Maori people find this western attitude rather peculiar and illogical. He said in Maori culture, you picture yourself walking *backwards* into the future. The past is laid out in front of you; you can see it clearly. But the future hasn't happened yet; you can't see it, so it must be behind your back. In fact, the Maori expression for 'the old days' is 'nga ra o mua' - the days in front.

I think we'd all be better off if we were more in touch with our past. I mentioned once before how Paul often talks about his past when he gives speeches and sermons in the Book of Acts. The early Christians were very concerned to preserve the past in their collective memory, so they told and retold the stories of Jesus and eventually wrote them down. Then they made copies of these writings (all by hand!) and passed them round all over the ancient world. One of the reasons we have such reliable New Testaments today is that the early Christians were so concerned to preserve their accounts of the past that they copied them so prolifically. Archaeologists are constantly amazed at the thousands and thousands of ancient copies of the New Testament, or fragments of it, that have been unearthed.

The Jewish people, too, were deeply concerned to stay rooted in their past. The Old Testament was the record of their past, which they preserved and handed down through the generations. It was only by knowing their past as a people, as a religion, that they could know who they were in the present.

And I believe the same is true of us as individuals. If you want to know who you are, what sort of person you are, what your life means, you've got to get in touch with your past. You've got to learn how to walk backwards into the future for a while, so as to spend time refocusing on your past life from birth up to now.

It's the same with the question of God in your life. To find out who and how God is in your life, you need to look at how God *has been* in your life. When did you first start thinking about God? When did God become more than just a word to you? When did you first feel God's forgiveness? What were the moments when the cross of Christ was most real to you? *Where* did God become real to you? What were the holy places where God revealed himself to you? And when? And how? And what did it do for you? We need to turn around, walk backwards into the future for a while, and start to focus on the events where God was in our past.

So I'm suggesting reminiscing is an art we all need to develop, no matter how old or young we are. Through the right kind of reminiscing, we become richer, stronger people. We don't just reminisce in order to die well; we also reminisce in order to *live* well.

So we need to learn to sit quietly and think about the past. We need to jog those memories and unlock the old stories. It can be good to do this in pairs, with one person listening attentively, and the other recalling their past. Or we can sit and write it down. It's amazing how our memories flood back to us when we put pen to paper.

Another way of jogging our memories is to go and visit the *places* where we lived or spent time in the past. Some years ago I went to the 125th anniversary of my old primary school. The school had shifted to a new site, but the buildings and grounds of the old school were preserved as an historic place. What a flood of memories that all evoked! I was talking to a former classmate who said, 'Remember 'the log' we all used to play on?' 'The log' was a huge old twisted macrocarpa trunk lying on its side down by a bushy hedge at side of the playground. We used to spend hours sitting on it, looking at life from high up, using our childhood imagination. It was a section of my

life I'd completely forgotten about, but it rushed back to me as my former classmate spoke.

So there are all sorts of ways we can jog our memories and recall those powerful experiences from the past.

But reminiscing is not just about recalling events. The important thing is the *meaning* of those events for you *now*. In a moment I'm going to outline two different frameworks for helping us find meaning and enrichment as we recall our past. But first a word of caution:

The purpose of reminiscing is not to make us nostalgic about the past or hyper-critical of the present. Sometimes we slip into thinking wistfully of the past, as if we wish it would come back. We use the glories of the past to throw brickbats at the corrupt, degenerate present. We criticise the young people of today as not as tough as we were, not as thrifty, not as righteous, not as stable. We throw back our heads in despair and cry out, 'What's the world coming to!'

That kind of reminiscing is not helpful to anybody. It just makes us grumpy and negative, quite unhelpful to young people today. The past is not meant to be a weapon to throw at the present. Rather, it's a treasure chest of memories that can help us to live more fully and richly today and tomorrow.

Some let's talk about some **models of reminiscing**. What are we doing, when we look back over the past? What are we hoping to achieve?

You see the problem is, our past is so huge. If you were to recall every event and process every memory, you'd be recalling and processing forever. On the other hand, if you just recall and process at random, you might end up with something a bit lop-sided. So I want to introduce you to two models or methods of reminiscing. The first one is called the **Gestalt** (or 'life-balance') model, which is well known in America and Germany. The second one is the **Narrative** model, which was developed quite recently here in NZ and Australia, and which I think is absolutely magnificent.

But let's begin with the **Gestalt** model. In this approach, the person who reminisces seeks to get a *balanced perspective* on their life. They look at their past in such a way as to gather up memories that represent all the different sides of their life. They look back and see, for example, that they have a big heart, but they've also got irritable very quickly; that they've always had low self esteem, but nevertheless they've achieved some goals quite well. When they fought in the war they did some horrible things, but it was in a good cause.

They seek to find this balance, or this completeness, enjoying the good memories but facing up to the bad with a kind of stoic resignation. The Gestalt model says you mustn't avoid recalling painful or traumatic memories; you've got to face up to them, and hold them in balance with the good.

This model may suit some people but it certainly doesn't suit those who live with very bad memories. The *last* thing they want to do is open up those old wounds. In fact, I

suspect the reason many people don't get into reminiscing is that it's just too painful. Let bygones be bygones.

So we turn to the **narrative** model of reminiscing. This is quite different. With this method, you don't even attempt to get a balanced view of your life. Instead you ask only about the *strengths and nobility and goodness* that is evidenced in your past. You seek to recall the happy times; the moments of wonder; the times when you made winning decisions; the great holidays; the wonderful friendships; the achievements and successes. You ask yourself, *what are the good things in my past that I can be thankful for?* And that's what you recall.

So I often ask people about their childhood - the games they used to play, the holidays they had, the tricks they got up to. I ask about their achievements in their work and the joys of bringing up their children. I ask them about all those great moments which lead us to realise how rich and full our life has been.

And what about the bad memories? The failures, the beatings, the trauma? Yes, we do recall these, but we ask a different set of questions about them. We say, 'When I went through that terrible, terrible crisis, *what were the strengths that surfaced in me, that enabled me to come through it?*' How come I wasn't crushed by it? What qualities did that painful episode bring forth in me, that saw me through?

Some people have suffered a terrible past. They might have been sexually abused as a child. They might have been tortured in a POW camp. They might have lost a child in an accident. They might have failed the most important exam of their life. They might have been rejected by their husband of 20 years. They might have been uprooted and made a refugee. We don't benefit from recalling the gory details of these tragedies. That only makes us miserable.

We *do* benefit, however, from asking what strengths we showed, that enabled us to survive those times. If you ask those questions of yourself, then reminiscing could be the start of a wonderful new life for you. You're realising you have strengths, which you'd never noticed before. You're discovering graces in your character which you've been exhibiting for years but never saw. You're getting in touch with a positive side of yourself which has escaped your notice for all these years. You can now use those graces, those strengths, that new sense of self-worth, as you deal with the issues in your life today.

Oh sure, there may be some un-confessed sin in our past that needs to be acknowledged. But again let's not dwell on it. Confess it, accept that God has not only forgiven you for it but taken it away and buried it, and look again at the strengths that enabled you to pull through.

While I was on study leave in Austria I visited an elderly man in hospital, who was renowned for his grumpiness. The Viennese call it 'Krantig.' As soon as I introduced myself as a pastor he let forth a torrent of complaints - about the hospital, about his deteriorating health, about his family. At an opportune moment I said to him, 'Gosh, you're nearly 90 years old. You must have some amazing memories.' He softened a bit, and started talking about his life. But he kept slipping into grumpiness because every story had a negative side to it. So I said to him, 'What strength you must have, to

survive all that. What were the strengths in you that enabled you to come through that particular crisis?' He went quiet for a moment, as if he'd been hit by a new reality. Then he started telling me about his unquenchable hope, the support of some close friends, his determination to survive illness. By the end of our conversation he was in a buoyant, positive mood. When I went to leave, he started grumping again, but checked himself, smiled, and said, 'Oh but I do have a lot to be thankful for, don't I?'

I guess this was his first experience of narrative reminiscing, the model from down under.

But you don't have to be old to benefit from this. You can do it at any age - and what a difference it can make to your life.

My final comment is that this is really just the Gospel. You see God doesn't look at us in a balanced way; God is very biased in how he sees us. He's taken our sins away; he's washed us clean in Christ's blood; he's put our sins behind his back where even he can't see them. When he looks at us and our past, God can see only what's good and noble and valuable and precious in us. When God looks at the blunders we've made and the traumas and pains we've known, God sees only the strengths we showed which brought us through. God can't see the rest; he's blind to it.

So why don't *we* learn to look at our lives the way God looks at them? And why don't we look at ourselves *more often* in that way? Let's make reminiscing - in this Gospel way - a regular part of our lives. There's nothing but strength in it for all of us.

References

- Allwood, R. (1995) The social construction of depression. Paper presented at 'Understanding the Social World' conference, Huddersfield, July.
- American Psychiatric Association (1994) *Diagnostic and Statistical Manual of Mental Disorders (DSM IV)*. 4th edn. Washington, DC: American Psychiatric Association.
- Altizer, T.T. (ed.) (1982) *Deconstruction and theology*. New York: Crossroad.
- Anderson, H. & Goolishian, H. (1990) *Changing thoughts on self agency, questions, narrative and therapy*. Paper read at the 'Reflecting Process, Reflecting Team' Conference, Salzburg, Austria. Cited in J. Freedman & G. Combs (1996). *Narrative therapy. The social construction of preferred realities*. New York, Norton. pp 116-117.
- Anderson, R. & Picher, J. (1978) Recall of previously unrecallable information following a shift in perspective. *Journal of Verbal Learning and Verbal Memory*, 17:1-7.
- Appel, K. (1945) *Psychiatry in modern warfare*. New York: McMillan.
- Barlow, W. (1989) *Looking up at down: the emergence of the blues culture*. Philadelphia, Temple University Press.
- Barlow, D., Hayes, S. & Nelson, R. (1984) *The scientist practitioner*. New York: Pergamon Press.
- Bateson, G. (1972) *Steps to an ecology of mind*. New York: Ballantine.
- Bateson, G. (1980) *Mind and nature; a necessary unity*. New York: Bantam.
- Beck, A. T. & Weishaar, M. E. (1989) Cognitive therapy. In R.J. Corsini, and D. Wedding, *Current psychotherapies (Fourth edition)*. Itasca, Ill: Peacock. pp 285-322.
- Belsky, J. K. (1990) *The psychology of aging: theory, research and interventions*. Belmont, Calif: Wadsworth.
- Berger, P. & Luckmann, T. (1966) *The social construction of reality*. Garden City, NY: Doubleday.
- Berne, E. (1964) *Games people play: the psychology of human relationships*. London: Penguin.
- Bhaskar, R. (1989) *Reclaiming reality: a critical introduction to contemporary philosophy*. London: Verso.
- Bietman, B. (1987) *The structure of individual psychotherapy*. New York: Guildford.

- Boscolo, L. (1992) The reflexive loop of past, present and future in systemic therapy and consultation. *Family Process*, 31: 119-133.
- Brister, C.W. (1992) *Pastoral Care in the Church*. (Third edition). San Francisco: Harper.
- Brown, G. & Harris, T. (1978) *Social origins of depression*. London: Tavistock.
- Bruner, E. (1986) Ethnography as narrative. In V. Turner & E. Bruner (Eds). *The anthropology of experience*. Chicago: University of Illinois Press.
- Bruner, E. (1986b) 'Experience and its expressions.' in V. Turner & E. Bruner (eds.) *The anthropology of experience*. Chicago: University of Illinois Press.
- Bruner, E. (1984) *Text, play and story: the reconstruction of self and society*. 1983 Proceedings of the American Ethnological Society, Washington, DC: American Ethnological Society.
- Bruner, J. (1986) *Actual minds, possible worlds*. Harvard, MA: Harvard University Press.
- Bruner, J. (1987) *Life as narrative*. *Social Research*, 54: 11-32.
- Burman, E. (1990) Differing with deconstruction: a feminist critique. in I. Parker & J. Shotter (Eds.) *Deconstructing social psychology*. London: Routledge.
- Burton, R. (1624/1989) *The anatomy of melancholy*. Oxford: Clarendon Press. Originally published in 1624.
- Campbell, D. Draper, R. & Huffington, C. (1989) *Second thoughts on the theory and practice of the Milan approach to family therapy*. London: DC Associates.
- Chomsky, N. (1974) and Foucault, M. (1974) Human nature: justice versus power cited in P. Rabinow (Ed.) (1984) *The Foucault reader: an introduction to Foucault's thought*. London: Penguin.
- Cohen, L., Sargent, N. & Sechrest, L. (1986) Use of psychotherapy research by professional psychologists. *American Psychologist*, 41: 198-206. Cohen, L., Sargent, N. & Sechrest, L. (1986) Use of psychotherapy research by professional psychologists. *American Psychologist*, 41: 198-206.
- Combs, G. & Freedman, J (1990) *Symbol, story and Ceremony: using metaphor in individual and family therapy*. New York: Norton.
- Corey, G. , Schneider Corey, M. & Callanan, P. (1993) *Issues and ethics in the helping professions*. Pacific Grove, Calif: Brooks/Cole.
- Corsini, R. J. & Wedding, D. (Eds.) (1989) *Current psychotherapies* (Fourth edition). Itasca, Ill: Peacock.

- Cowley, G. & Springen, K. (1995) Rewriting life stories. *Newsweek* April 17, 1995.
- Cross, F. & Livingstone, E. (Eds.) (1974) *The Oxford dictionary of the Christian church*. London: Oxford University Press.
- Davies, P. (1984) *God and the new physics*. London: Penguin.
- de Bono, E. (1990a) *Lateral thinking*. London: Penguin.
- de Bono, E. (1990b) *I am Right, You are Wrong*. London: Penguin.
- de Bono, E. (1993) *Water Logic*. London: Penguin.
- de Shazer, S. (1993) Commentary: de Shazer and White: Viva la difference. In Gilligan, S. and Price, R. (Eds.) *Therapeutic conversations* New York: Norton.
- de Shazer, S. (1991) *Putting Difference to Work*. New York: Norton.
- Derrida, J. (1973) *La Voix et le phénomène*. (Speech and Phenomena)
- Derrida, J. (1978) *L'Écriture et la différence*. (Writing and Difference)
- Derrida, J. (1976) *De la grammatologie*. (Of Grammatology)
- Dickerson, V. C. & Zimmerman, J. L. (1996) Myths, misconceptions, and a word or two about politics. *Journal of Systemic Therapies* 15, 1, 79-88.
- Douglass, F. (1855) *My bondage and my freedom*. New York: Miller, Orton & Mulligan.
- Drewery, W. & Winslade, J. (1996) The theoretical story of narrative therapy. In G. Monk, J. Winslade, K. Crockett & D. Epston (Eds.) *Narrative therapy in practice: the archaeology of hope*. San Francisco: Jossey-Bass. pp 32-52.
- Durrant, M. & Kowalski, K. (1990) Overcoming the effects of sexual abuse. Developing a self-perception of confidence. In M. Durrant & C. White (Eds.) *Ideas for therapy with sexual abuse*. Adelaide: Dulwich Centre.
- Duvall, N. S. (1994) Contemporary psychoanalysis and postmodernism, *Journal of Psychology and Theology* 22.1, 53-56.
- Ellis, A. (1989) Rational-Emotive Therapy In R. J. Corsini & D. Wedding (Eds.), *Current Psychotherapies* (Fourth edition). Itasca (Ill.): Peacock, 197-240.
- Ellul, J. (1964) *The technological society*. New York: Random House. Translated by Alfred A. Kopf from the original *La Technique ou l'enjeu du siècle*, (1954).
- Epston, D. (1984a) Guest Address, 4th Australian Family Therapy Conference, *Australian Journal of Family Therapy*, 5:1, 11-16.

- Epston, D. (1984b) A story in a story. *Australian Journal of Family Therapy*, 5:2, 146-150.
- Epston, D. (1986) Writing your own biography. *Family therapy case studies*, 1:1, 13-18.
- Epston, D. (1989) *Collected Papers*. Adelaide: Dulwich Centre.
- Epston, D. (1996) Seminar on Narrative Therapy at Auckland University (unpublished). 17 July 1996.
- Epston, D. & White, M. (1992) *Experience, contradiction, narrative and Imagination: selected papers*. Adelaide: Dulwich Centre.
- Epston, D. and White, M. (1989) *Literate means to therapeutic ends*. Adelaide: Dulwich Centre.
- Feyerabend, P. (1991) *Against method*. Revised 2nd impression, London: Verso.
- Fish, V. (1993) Poststructuralism in family therapy: Interrogating the narrative/conversational mode. *Journal of Marital and Family Therapy*. 19, 3, 221-232.
- Foucault, M. (1971) Nietzsche, genealogy, history. In P. Rabinow (Ed.) (1986) *The Foucault Reader: an introduction to Foucault's thought*. London: Penguin. pp 76-100.
- Foucault, M. (1969) *L'Archéologie du savoir*. (The archaeology of knowledge.1972)
- Foucault, M. (1961) *L'Histoire de la folie a l'age classique*. (Madness and Civilization. A History of Insanity in the Age of Reason) (R. Howard, Trans, 1965). New York: Random House.
- Foucault, M. (1963) *Naissance de la clinique*. (The birth of the clinic: an archaeology of medical perception) (A.M. Sheridan Smith, Trans, 1975). New York: Random House.
- Foucault, M. (1966) *Les Mots et les choses* (The order of things.1970).
- Foucault, M. (1975) *Surveiller et punir*. (Discipline and punish: the birth of the prison. A. Sheridan, Trans, 1977) New York: Pantheon.
- Foucault, M. (1976/84) *La Volonté de savoir, 1976; L'Usage des plaisirs, 1984; Le Souci de soi, 1984*. (The history of sexuality. R. Hurley, Trans, 1984). New York: Pantheon.
- Foucault, M. (1982) The subject and power. In H. Dreyfus and P. Rabinow (1982) *Michel Foucault: beyond structuralism and hermeneutics*. Chicago: University of Chicago Press. pp 18 ff.
- Foucault, M. (1980) 'Howison Lectures,' Berkeley, 20 October 1980.

- Fraser, N. & Nicholson, L. (1990) Social criticism without philosophy: an encounter between feminism and postmodernism. In L. Nicholson (Ed.) (1990). Feminism/Postmodernism. New York: Routledge)
- Freedman, J. & Combs, G. (1996) *Narrative therapy: the social construction of preferred realities*. New York: Norton.
- Freud, S. (1901) *The psychopathology of everyday life*. Cited in R. J. Corsini, & D. Wedding, (Eds.) (1989) *Current psychotherapies* (Fourth Edition). Itasca, Ill: Peacock. pp 19-21.
- Galvin, R. (1983) *The peace of Christ in a nuclear age*. Auckland: G.W. Moore.
- Galvin, R. (1986) *Coping with moral issues: a biblical perspective*. Auckland: Belmont.
- Galvin, R. (1993) *Christ and the good earth: an introduction to ecological theology*. Auckland: Colcom/Maclaurin Chaplaincy.
- Garfield, S. (1989) *The practice of brief psychotherapy*. New York: Pergamon Press.
- Gergen, K. (1985) The social constructionist movement in modern psychology. *American Psychologist*, 40: 266-275.
- Gergen, K. (1989) Social psychology and the wrong revolution. *European Journal of Social Psychology*. 19: 463-484.
- Gergen, K. (1994) *Realities and relationships: soundings in social construction*. Cambridge, MA: Harvard University Press.
- Goffman, E. (1974) *Frame analysis*. New York: Harper.
- Goldberg, M. (1982) *Theology and narrative: a critical introduction*. Nashville: Abingdon.
- Goldenberg, I. & Goldenber, H. (1991) *Family therapy: an overview*. Pacific Grove, Calif: Brooks/Cole.
- Grinker, R. & Spiegel, J. (1945) *War neuroses*. Philadelphia: Blackiston.
- Guilherne, J. (1991) *Foucault*. London: Merquior.
- Harker, T. (1996) Therapy with male sexual abuse survivors: Contesting oppressive life stories. In G. Monk, J. Winslade, K. Crocket & D. Epston (Eds.) *Narrative therapy in practice: the archaeology of hope*. San Francisco: Jossey-Bass. pp. 193-214.
- Harré, R. (1987) *Social construction of selves*. In K. Yardley and T. Honess (eds.), *Self and Identity*. Chichester: Wiley: 41-52.

Hart, B. (1995) Re-authoring the stories we work by: Situating the narrative approach in the presence of the family of therapists. *Australian and New Zealand Journal of Family Therapy*, 16, 4: 181-189

Hauerwas, S. and Jones, L. G. (Eds.) (1989) *Why narrative? readings in narrative theology*. Grand Rapids, Mich: Eerdmans.

Held, B. (1995) *Back to reality: a critique of postmodern theory in psychotherapy*. New York: Norton.

Hewson, D. (1991) From laboratory to therapy room: Prediction questions for reconstructing the 'New-Old' story. *Postmodernism, deconstruction and therapy; Dulwich Centre Newsletter*. 3, 5-12.

Inbody, T. (1995) Postmodernism: intellectual velcro dragged across culture? *Theology Today*, 51.4, 524-539.

Kuhn, T. (1970) *The structure of scientific revolution* (Second revised edition). Chicago: University of Illinois Press.

Kvale, S. (ed.) (1992) *Psychology and postmodernism*. London: Sage.

Lendrum, S. and Syme, G. (1992) *Gift of tears: a practical approach to loss and bereavement counselling*. London: Routledge.

Lewis, C.S. (1942) *The Screwtape letters*. London: The Centenary Press.

Littlewood, J. (1992) *Aspects of grief: bereavement in adult life*. London: Routledge.

Lomax, J. & Lomax, A. (1934) *American ballads and folk songs*. New York: McMillan.

Lowe, R. (1991) Postmodern themes and therapeutic practices: Notes toward the definition of 'Family Therapy: Part 2'. *Postmodernism, deconstruction and therapy; Dulwich Centre Newsletter*. 3, 41-52.

Lückel, K. (1994) *Begegnung mit Sterbenden. 'Gestaltseelsorge' in der Begegnung sterbender Menschen*. Gütersloh, Germany: Kaiser.

McKenzie, W. & Monk, G. (1996) Learning and teaching narrative ideas. In G. Monk, J. Winslade, K. Crockett & D. Epston (Eds.) *Narrative therapy in practice: the archaeology of hope*. San Francisco: Jossey-Bass. pp. 82-117.

Madigan, S. (1991) Discursive restraints in therapist practice: Situating therapist questions in the presence of the family. *Postmodernism, deconstruction and therapy; Dulwich Centre Newsletter*. 3, 13-20

Marshall, C. (1994) 'The use of the Bible in ethics. Scripture, ethics and the social justice statement.' In J. Botson & A. Cameron (Eds) (1994) *Voices for justice: church, law and state in New Zealand*. Dunedin: Dunmore.

- Mellon, J. (ed.) (1988) *Bullwhip days; the Ssaves remember*. An Oral History. New York: Weidenfield & Nicholson.
- Michell, S.A. (1993) *Hope and dread in psychoanalysis*. New York: Basic Books.
- Monk, G. (1996) How narrative therapy works. In G. Monk, J. Winslade, K. Crocket & D. Epston (Eds.) *Narrative therapy in practice: the archaeology of hope*. San Francisco: Jossey-Bass. pp 3-31.
- Monk, G., Winslade, J., Crocket, K & Epston, D. (1996) *Narrative therapy in Ppractice: the arcahelology of hope*. San Francisco: Jossey-Bass.
- Morrow-Bradley, C. & Elliot, R. (1986) Utilization of psychotherapy research by practising psychotherapists. *American Psychologist*, 41: 188-206.
- Murray, A. (1976) *Stomping the blues*. New York: McGraw-Hill.
- Muscia-Lees, F., Sharpe, P. and Cohen, C. (1998) The postmodernist turn in anthropology: cautions from a feminist perspective. *Signs: Journal of Women in Culture and Society*, 15:1, 7-33.
- Murcoch, I. (1992) *Metaphysics as a guide to morals*. London: Penguin.
- Neal, J. H. (1996) Narrative therapy supervision and training. *Journal of Systemic Therapies*, 15, 1, 63-89.
- Niebuhr, H. R. (1941) 'The story of our life.' In H. R. Niebuhr (1941) *The meaning of revelation*. New York, Macmillan.
- Norton, R. (1981) 'Soft magic.' In C.Wilder and J.H.Weakland (Eds.) *Rigor and imagination: essays from the legacy of Gregory Bateson*. New York: Praeger.
- O'Hanlon, B. (1994) The third wave: The promise of narrative. *Networker*, 6: 19 - 29.
- Oliver, P. (1963) *The meaning of the blues*. New York: Collier.
- Penn, P. (1985) Feed-Forward: Future Questions, Future Maps. *Family Process*, 24, 3: 299-310.
- Parker, I., Georgaca, E., Harper, D., McLaughlin, T., & Stowell-Smith, M. (1996) *Deconstructing psychopathology*. London: Sage.
- Parkes, C.M. (1972) *Bereavement*. New York: International Universities Press.
- Patterson, S. (1994) Theological geography. In D.B. Hamil, & M. Rae (Eds.) *Theological fragments; essays in honour of Alan Torrance*. Dunedin: Lada.
- Perls, F. (1974) *Gestalt-Therapie in Aktion*. Stuttgart, Kaiser.

- Polkinhorne, D. (1992) 'Postmodern epistemology of practice.' In S. Kvale (ed.) *Psychology and postmodernism*. London: Sage: 146-165.
- Poster, M. (1989) *Critical theory and poststructuralism: in search of a context*. Ithaca, N.Y: Cornell University Press.
- Rasschke, C. A. (1982) 'The deconstruction of God.' In T.T. Altizer (Ed.) *Deconstruction and theology*. New York: Crossroad.
- Rabinow, P. (Ed.) (1984) *The Foucault reader; an introduction to Foucault's thought*. London: Penguin.
- Rogers, C. (1951) *Client-centred therapy*. Boston: Houghton Mifflin.
- Rorty, R. (1980) *Philosophy and the mirror of nature*. Oxford: Basil Blackwell.
- Rosenhan, D. (1973) On being sane in insane places. *Science*, 179: 250-258.
- Rowland, C. (1988) *Radical Christianity: a reading of recovery*. Cambridge, Polity Press.
- Shotter, J. (1993) *Conversational realities: constructing life through language*. London: Sage.
- Shumway, D. R. (1989) *Michel Foucault*. Boston,Mass: Twayne Publishers.
- Simblett, G. (1996) Leila and the tiger: narrative approaches to psychiatry. In G. Monk, J. Winslade, K. Crocket & D. Epston (Eds.) *Narrative therapy in practice: the archaeology of hope*. San Francisco: Jossey-Bass. pp 121-157.
- Stouffer, S., Lumsdaine, A., Lumsdale, M., Williams, R., Smith, M., Janis, I., Star, S., & Cotterell, L. (1949) *The American soldier, Volume II: combat and its aftermath*. Princeton, NJ: Princeton University Press.
- Stroup, G. W. (1981) *The promise of narrative theology*. London: S.C.M. Press.
- Tomm, K. (1989) Externalising the problem and internalising personal agency. *Journal of Strategic and Systemic Therapies*, 8: 1, 54-59.
- Tournier, P. (1957) *The meaning of persons: reflections on a psychiatrist's casebook*. London: S.C.M. Press.
- Vygotsky, L. (1986) *Thought and language*. (Translation. newly revised by A. Kozulin) Cambridge, MA: Massachusetts Institute of Technology Press.
- Waldegrave, C. (1990) Just therapy. *Dulwich Centre Newsletter*, 1: 5-46.
- Wallbank, S. (1991) *Facing grief: bereavement and the young adult*. Cambridge: Lutterworth Press.

White, L. Jr. (1967) The historical roots of our ecologic crisis. *Science* 155:3767, 1203-1207.

White, M. (1984) Pseudo-encopresis: From avalanche to victory, from vicious to virtuous cycles. *Family Systems Medicine*, 2, 2: 150 -160.

White, M. (1986) Negative explanation, restraint and double description: a template for family therapy. *Family Process*, 25:2.

White, M. (1987) 'Family therapy and schizophrenia: addressing the 'in-the-corner' lifestyle.' Reprinted in M. White (1989) *Selected papers*. Adelaide: Dulwich Centre Publications, 47-57.

White, M. (1989) *Selected papers*. Adelaide: Dulwich Centre.

White, M. (1991) Deconstruction and therapy. *Postmodernism, deconstruction and therapy; Dulwich Centre Newsletter*, 3, 21-40

White, M. (1993) Commentary: the histories of the present. In Gilligan, S. and Price, R. (Eds.) *Therapeutic conversations*. New York: Norton.

White, M. (1995) *Re-authoring lives: interviews and essays*. Adelaide: Dulwich Centre.

White, M. and Epston, D. (1990) *Narrative means to therapeutic ends*. New York: Norton.

White, M. and Epston, D. (1991) *A conversation about Aids and dying*. *Dulwich Centre Newsletter*, 2, 1991.

Wiener, M. & Marcus, D. (1994) 'A sociocultural construction of 'depressions'' In T.R. Sarbin & J.I. Kitsuse (eds.), *Constructing the social*. London: Sage.

Winslade, J. & Smith, L. (1996) Countering alcoholic narratives. In G. Monk, J. Winslade, K. Crocket & D. Epston (Eds.) *Narrative therapy in practice: the archaeology of hope*. San Francisco: Jossey-Bass. pp. 158-192.

Wittgenstein, L. (1953) *Philosophical investigations*. (G. Anscombe, trans.) New York: McMillan.

World health Organization (1992) *The ICD-10 Classification of Mental and Behavioural Disorders*. Geneva: World Health Organization.

Wright, N.T. (1991) How can the Bible be authoritative? *Vox Evangelica* 21; 2-32