

# Narrative Poetics of Resistance: Towards An Aesthetics of Engagement

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## Abstract

My dissertation describes the multiple philosophical, theological and theoretical influences, relationships, and enchantments which ultimately inspired the co-creation of innovative, non-traditional, practices within a residential program for young persons' struggling with substance use dilemmas in Vancouver, British Columbia, Canada, known as Peak House. These influences, relationships and enchantments additionally, over the course of about forty-five years, generalize and migrate into all of my therapeutic and pedagogical, collaborative and relational practices.

Over time, I came to refer to my practice as a *poetics of resistance* (Sanders, 1999, 2007) and have referred to the overall aesthetics of such a practice as being a *narrative poetics*, largely in recognition of the considerable influence of ideas flowing from Michael White and David Epston, beginning with their first publications (White & Epston, 1989, 1990), and continuing to this day.

*Keywords:* Harlene Anderson; Gregory Bateson; David Epston; Michel Foucault; Emmanuel Levinas; Sheila McNamee; Michael White; narrative therapy, collaborative practices; relational practices; youth residential substance use programs; narrative poetics; poetics of resistance; social construction; the sacred; social justice.

## Dedication

This dissertation is dedicated first of all to Gail Marie Boivin, for love. We have been together almost 25 years, rocking and rolling, dancing to the Grateful Dead, travelling and exploring the world, two beings together. I very much admire and appreciate your intuition and insight, your clarity, patience and commitment. As Neil Young sings, “when you dance, I can really love”! Now that the dissertation is completed we can go to the beach!

To my mother, Noreen Shirley Farrell, and father, Ronald John, “Rocky”, Sanders, (1931-2002) for immense love and early encouragement to think critically, resist oppression, and revel in Irish music, poetry and literature, and to celebrate and honour family, regardless of differences.

To my siblings, Liam, Fiona, Sheila, Maura, Kieran (d. 2004), Ian, Kevin and Shauna, for all we have come through and continue to overcome, over all the years

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In memory of dear, departed comrades, Bill Hansen, David Moir, Garth Thomson, and my brother, Kieran Gerard Sanders.

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And acknowledgement to all the young persons, families, and communities, whose lives and relationships intersected with my own, as they passed through Peak House. Fight the power!

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## INTRODUCTION: NARRATIVE POETICS OF RESISTANCE

*Je est un autre ...* (I is another) – Arthur Rimbaud.

*Poetry celebrates that the world exists; philosophy asks why the world exists.*

Stanislas Breton (1995, p. 257).

### **Intentions in writing this dissertation**

A primary thread woven throughout my dissertation involves an engagement with narrative imagination, an idea that, as Bateson (1972) noted, was brought forward by visionary poet William Blake, eventually migrating into the narrative therapy ideas and practices co-created by Michael White and David Epston (White & Epston, 1990), and others (Sanders, 1995a). As theologian Stanislas Breton remarked in conversation with Irish philosopher Richard Kearney (1995), "...a poetics of imagination is an indispensable dimension of genuine thinking" (p. 248). Breton (1995) continues, drawing attention to the influence of philosopher Emmanuel Levinas in his own thinking, proposing that Levinas brought into play a "...language of relations..." (p. 248), a proposal I return to in Chapter Six of my dissertation.

Another thread woven throughout my dissertation describes ideas and concepts espoused by a community of thinkers and practitioners often associated with collaborative, social constructionist, narrative, and social justice theory within the domain of therapeutic practice (Andersen, 1996; Anderson, 2012; Anderson & Goolishian, 1988; Bateson, 1973, 1979; Bateson & Bateson, 1988; Gergen, 2009; Lock & Strong, 2010; Maturana, 1988; McNamee & Gergen, 1992; Shotter, 2010; Waldegrave, 1990; Waldegrave, Tamasese, Tuhaka, & Campbell, 2003; White, 2007; White & Epston, 1990).

One intention in composing this particular dissertation is certainly to situate those persons whose thinking, writing, and practice have most influenced me, and whose concepts, ideas, philosophies and practices inform my own *praxis*, as described especially within Chapter Two and in Chapter Six.

Another intention relating to my dissertation is to underscore the inter-connections and convergences existing between concepts, ideas and practices affiliated with various theoretical perspectives. Especially in academic writing, I often find making these inter-connections is paid less attention than trying to highlight differences and distinctions between perspectives. My interest is with the aesthetics of how we choose to engage with others in the practices of therapy, education, and also in community development work (Sanders, 2010, 2012).

Chapter Seven illustrates a narrative poetics of resistance (Sanders, 1999, 2007) in practice, as exemplified by the work I initiated in Vancouver, British Columbia, Canada, at a residential program for 13-18 years old who were struggling with substance use, called Peak House.



## Praxis

My dissertation is not intended to be merely an academic representation of theoretical ideas and concepts, although a considerable amount of literature is described. To reiterate, one practical intention in writing this dissertation is to describe and delineate certain theoretical ideas and concepts, and, using the illustration of Peak House, point out the ways in which a narrative poetics, and a poetics of resistance, can be applied in creative, practical, efficient, and beneficial ways.

I believe that describing the evolution of Peak House in its shift away from what I considered to be pathologizing practices to a more collaborative, non-pathologizing program, may provide hope to others working within normative, prescriptive, institutional structures. Over the years, many people have asked how I was able to transform Peak House from a 12 Step program into a collaborative, narrative informed, and social justice focused program. I generally respond that in order for this transformation to occur, appreciative leadership (Whitney, Trosten-Bloom & Rader, 2010) was necessary, commitment to the evolving vision, along with patience and compassion. Unfortunately, I have encountered too many practitioners who, at times, have experienced despair at ever co-creating alternatives to pathologizing, normative, prescriptive ways of engaging with others within agencies, programs, and institutions.

Again, most unfortunately, many of these practitioners become captured by cynicism and sarcasm in their work, increasingly disenchanted with their work, and affect qualities that often lead to negativity and restraint amongst relationships with colleagues. The literature on such experiences is often known by the misnomer, “burnout”, though there are alternative ways of understanding these experiences, and alternative ways of contending with systemic and structural intransigence and restraint (cf. McNamee, 1996a; Fruggeri & McNamee, 1991; Reynolds, 2010).

At the outset, I would add the *proviso* that the program we co-evolved at Peak House does not represent *the* true or only way to construct a residential program for young person’s struggling with substance use, but stands as an illustration and example of what is possible and representative of an alternative to traditional, normative, and prescriptive residential communities.

## Theoretical Promiscuity

To reiterate, it remains my hope that others reading this work, especially perhaps graduate level students, may become more informed of the threads of connection across theories, and the shared attention paid to practice, especially between narrative, social constructionist, and collaborative therapy practices<sup>1</sup>. Here I am appreciative of McNamee’s (2004, 2012) invitation to explore “promiscuity” within and between theoretical perspectives. McNamee (2004) explains what she intends by use of the word promiscuity in this way,

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<sup>1</sup> For dialogues highlighting convergences amongst theoretical perspectives in the domain of therapy, see the conversations between Tom Andersen, Harlene Anderson and Michael White (in, Malinen, Cooper & Thomas, 2012).

In this article I would like to propose what I consider to be a more promiscuous attitude for family therapy in an attempt to generate inclusiveness in our theory and practice. I am purposively using the term *promiscuous* here to underscore the ease with which a dominant discourse can eclipse a richly descriptive term and render it one-dimensional.

In the present case, promiscuous simply refers to the act of mixing up. However, culturally, we have come to understand promiscuous as associated with immoral sexuality, seediness and unseemliness. By electing to use such a morally charged term in its original form (i.e., in reference to mixing), I hope to symbolically summarize my argument: dialogue requires us to be present in the moment, thereby opening up the space for the generative use of a wide array of methods and models in family therapy. (p. 224)

By intentionally using the word promiscuity, McNamee (2012) explains,

I would like to propose that we become promiscuous in our practice and in our theorizing and beware of our tendencies toward purity. I think this goal can help us focus on relational innovation by creating inclusiveness in theory and practice. When I speak of inclusion, I am speaking from the stance of social construction where the coordination of multiple voices, multiple modes of practice, and multiple worldviews is embraced.

McNamee (2004) further suggests that, “Promiscuity might well be described as *intellectual poaching* to the extent that we might employ accepted ideas and techniques in new ways, therefore ‘borrowing’ them from their original context” (p. 225). This concept very much approximates my own approach, as I have been reading/writing across disciplines for a long while now.

In making such a proposal, McNamee (2012) is not positioning herself as being nihilistic going on to write, “...this is not an ‘anything goes’ stance. The ethics of relational practice require that we both acknowledge multiplicity and recognize that not all voices, not all therapeutic resources have the same effects”.

Regarding the ethics of a poststructuralist practice, McNamee’s position is shared by one of the co-founders of narrative therapy, the late Michael White (2000), who believed that narrative therapy was not a therapy in which anything goes; rather, for White, nothing goes in narrative therapy without being questioned and critiqued (p. 114).

Others who have identified themselves as being a part of the discursive community adhering to a social constructionist<sup>2</sup> perspective on the co-creation of shared knowledge, notably Kenneth Gergen and Dian Marie Hosking (2007), also note that:

...the critique that ‘anything goes’ suggests that social constructionism has foolishly rejected ‘external reality’ as a real-world source of constraints. But, in my view, the social constructionist orientation ‘emphasizes the historical-cultural rather than the natural-scientific’ (Hosking, 2005). This means a focus on processes of social

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<sup>2</sup> For a thorough exegesis regarding the history of social constructionist ideas, see Burr (2003), and Lock & Strong (2010).

construction and the ways these simultaneously resource and constrain action within whatever it is we call reality. Central to these processes of social construction is language – now viewed as a vehicle for reality construction rather than reality mapping (p. 30).

As a preface of what is to follow, I would say that my dissertation is illustrative of and in support of the sort of theoretical promiscuity proposed by McNamee, and I certainly have discovered this very intellectual poaching present within the narrative therapy of Michael White and David Epston (1990).

In the following section, I provide a description of the focus of each chapter in my dissertation.

### **Introducing the Chapters**

Chapter One introduces what is entailed by a narrative poetics. Throughout my dissertation, I will tack in and out of my own lived experience, my autobiography, my reading and experiences, making my dissertation partly memoir. I will also relate how my own lived experience, in addition to my history of reading/thinking, contributed to the co-evolution of therapeutic practices within the residential program of Peak House, and the lived experiences that continue to inspire my work.

In this chapter, I account for and describe the influences and inspirations that have come to me from decades of reading/thinking/writing across disciplines, and how such reading/thinking/writing has led to a particular *praxis*, namely, a narrative poetics of resistance.

Threads of autobiography are woven throughout my dissertation. Mark Freeman (1999) writes, “What autobiographers often do, in turn, is *rewrite the self*, which is to say, they seek, through the narrative imagination, to refigure those dimensions of past experience made available, so to speak, through the vantage point of the present” (p. 105). As a younger person, how could I have known precisely how the activities, relationships, and engagements of my own experience would play out and evolve? Writing this dissertation allowed for the creation of some narrative coherence providing form and shape to my past decades.

In Chapter Two I present an inquiry into ideas, concepts, and perspectives regarding the importance of evoking narrative imagination in bringing forth and articulating what transpires for persons engaged within therapeutic conversation practices.

In Chapter Three, I describe what I mean in talking of a narrative poetics within my practice, and in terms of what I refer to as an aesthetics of engagement with struggling, or suffering, others’.

In Chapter Four, I offer a critique of modernist, reductionist, thinking in terms of human experience, as illustrated by diagnosis and diagnostic categories. I also take the position that while we need to comprehend DSM-5 technology, for example, we do not need to believe in that sort of thinking. As we know, especially in North America, a diagnosis opens avenues towards resources; we live and work within these structures and these systems, and I believe it is possible to critique, while simultaneously working with. As such, I take a both/and perspective on diagnosis.

In Chapter Five, I present an appreciative critique of narrative therapy, in which I propose that the narrative therapy ideas and practices of Michael White and David Epston (1989, 1990) represent an innovative and important contribution to the theorizing of therapeutic practices. I found the work of White and Epston significant for its contribution and courage<sup>3</sup> in addressing power differentials within therapeutic practice, and exploring practices to make these differences transparent. In this exploration, the thinking of Michel Foucault (1980, 2006) is integral, and not to be ignored.

In Chapter Six I describe the unique ways in which certain practitioners, theologians, philosophers, cultural anthropologists and others who inspired my own practice wove sacred ideas within the tapestry of their therapeutic and community development practices. Within this chapter, I situate a narrative poetics within the context of the sacred, discussing the aesthetics and particularly the ethics, involved within such a perspective, and the ways in which such an *ethos* invites a particular manner of engagement with suffering others.

Specifically, the ideas and practices of New Zealand's The Family Centre (Waldegrave, 1990; Waldegrave & Tamasese, 1993; Waldegrave, Tamasese, Tuhaka & Campbell, 2003), Dublin's The Fifth Province Associates (Byrne & McCarthy, 1998, Byrne & McCarthy 2007; McCarthy, 2004) and Michael White (White, 1997, 2000, 2004) are described in terms of their attention to sacred ideas.

In Chapter Six, I introduce the philosophy of Lithuanian born, Emmanuel Levinas (1985, 2001) and the implications of his thinking within a narrative poetics, especially regarding how the application of his thinking figures for me within the fine art and craft of engaging within a therapeutic conversation, one with an-other.

Another intention in writing this dissertation is to describe and discuss the thinking of others' within the field of therapeutic practice, specifically those others who have chosen to conceive of their therapeutic work as a form of participation within a sacred encounter. I describe ways of comprehending the craft and the fine art of being an "architect of dialogue" (Anderson & Goolishian, 1988) in relation to suffering others, struggling others, locating therapeutic conversation, and "conversational reality" (Shotter, 2008) within a realm of the *imaginal*, of the co-creation, co-authoring of shared stories of relationship, of poetics, of sacredness.

Chapter Seven describes the theory and practice of a narrative poetics of resitance evolving between the years 1989-2002 in a program I co-created called Peak House<sup>4</sup> in Vancouver, British Columbia, Canada.

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<sup>3</sup> I am grateful to Karl Tomm for his insightful essay regarding White's ideas, "The Courage To Protest: A Commentary on Michael White's Work" (Tomm, 1993).

<sup>4</sup> Two friends of mine, Vikki Reynolds and Christine Dennstedt, have written Taos/Tilburg dissertations, and related articles, some of which describe their own experience at Peak House (Reynolds, 2002, 2010; Dennstedt, 2010a, 2010b; Dennstedt & Grieves, 2004). For other descriptions of the non-traditional practices that evolved at Peak House, see Radke, Kitchen & Reynolds (2000), and Saville (1998).

I came to Peak House six months after its inception. When I arrived, the program was modeled along traditional, behaviour modification and 12 Step philosophy and structures. I initiated a shift towards more collaborative ways of engaging with young persons and families struggling with substance use, and other factors. We began to work much more collaboratively towards transforming the structures guiding the program, paying more attention to the relational, social contexts within which young persons were recruited into substance use. In this work, the narrative therapy ideas and counter-practices associated with Michael White and David Epston (White & Epston, 1990) held special significance, along with the work of New Zealand's The Family Centre (Waldegrave, Tamasese, Tuhaka, & Campbell, 2003).

At some point in the mid-1990's I began to refer to this work as representing a poetics of resistance (Sanders, 1999), and in the spring of 1999 I presented a paper on poetics of resistance at a workshop entitled, "New Narratives"<sup>5</sup>, sponsored by The Vancouver School of Narrative Therapy.

In Chapter Seven I describe my work within a poetics of resistance, and discuss the importance of language in describing and ascribing identity, and counter-practices (White & Epston, 1990) that may facilitate personal agency and preferred identities.

In Chapter Eight, I reflect upon, and summarise, highlights from the preceding chapters, pertinent to what I am referring to as a practice informed by narrative poetics, and by a poetics of resistance. In this final chapter, I also reflect upon some further ideological considerations regarding therapeutic and community work, relevant to my own practice and interests over time.

In Chapter Eight I also discuss some of the tasks and challenges faced by practitioners who maintain a global awareness while engaging locally with dilemmas. Additionally, I describe ways in which my work in education (i.e., as Director of the Master's of Counselling Program for City University of Seattle, in Vancouver, Canada) continues to allow me to encourage novice therapists, and others, to resist normative and prescriptive concepts promoting individualism, and encourage students to think relationally, and critically, regarding ideologically embedded notions of private suffering (McCarthy, 1995) and pain, divorcing these experiences from their relational, social, cultural, and political contexts.

Finally, in Chapter Eight, I describe some areas for further inquiry in regards to the ideas and concepts I have discussed within my dissertation.

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<sup>5</sup> The Vancouver School of Narrative Therapy was created in 1993 by Stephen Patrick Madigan. Stephen co-presented his own ideas on "new narratives" with me at the workshop in 1999.

## CHAPTER ONE

### NARRATIVE POETICS: THE OPENING OF THE FIELD<sup>6</sup>

*The limits of my language mean the limits of my world*

Wittgenstein, *Tractatus Logico-Philosophicus*, #5.6).

*Poetics as well as narrative renders language a medium for experiencing experience*  
David Epston (2011, p. xxvi).

*The psychologists do not know everything. Poets have other insights into man [sic]*  
Gaston Bachelard (1969 p. 125).

#### Introduction

As indicated above, one intention I have in composing this particular dissertation is to situate historically the ideas, concepts, and perspectives that have been particularly evocative and inspiring within my *praxis*, especially as described in Chapter Seven. Accordingly, and in the spirit of what McNamee (2004, 2012) has referred to above as theoretical promiscuity, my dissertation traces a history of my reading across a range of disciplines, ever mindful of the ways in which my reading and reflecting informed my therapeutic practice, especially as my practices co-evolved and became realized at Peak House.

Gregory Bateson along with his daughter, Mary Catherine Bateson (1987) wrote, "...today in America it is almost heresy to believe that the roots of thought have any importance..." (p. 23). In this dissertation I trace the "roots of thought" influencing my own being and becoming (Andersen, 2007), and the practices with which I most identify.

As indicated above, a third intention in writing this dissertation relates to the teaching and training of persons interested in becoming practitioners in the domain of therapy, or, as Anderson and Goolishian (1988) poetically proposed, becoming "architects of dialogue."

McLeod (1997) notes:

*There are no new therapies. It is inconceivable that anyone could now devise, or be trained in, a supposedly 'new' therapy without being aware of the multiplicity of therapeutic concepts and practices already in existence [emphasis added].* Even ideas that may seem novel in the context of the therapy literature are in fact drawn from broader and richer cultural traditions. Claims to originality in the therapy field can only be made through ignorance of sources. (p. ix)

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<sup>6</sup> *The Opening of the Field* is the name of a book of poems by the San Francisco Renaissance poet, Robert Duncan (1960), whose poetry and poetics, have been informing and sustaining me for decades (Sanders, 2010, 2012).

As Director of a Master's in Counselling Program<sup>7</sup>, I consider it imperative that students and novices to the vocation of therapy have a sense of the affinities, similarities, and convergences existing amongst perspectives.

An illustration of the adage, “there is nothing new beneath the therapeutic sun” may be seen in today's current fascination in some circles with Buddhist philosophy and the integration of so-called mindfulness practices within therapy. An example of this would be Marsha Linehan's (1993a, 1993b, 2006) concept and practice of Dialectical Behavioural Therapy (DBT) pushing beyond traditional Cognitive Behavioural Therapy (CBT) practices, and the writings collected in Kwee, Gergen and Koshkawa (2006), and Kwee (2010), seeking to incorporate Buddhist philosophy with social constructionist perspectives; the writing of Daniel J. Siegel<sup>8</sup> (1999, 2007, 2010) on neurology, consciousness, and the importance of social relationship in the development of mind (cf. Vygotsky 1962, 1978), and many others.

It is most often news to students (and to many practitioners) that D.T. Suzuki, Erich Fromm, and Richard De Martino wrote *Zen Buddhism and Psychoanalysis* in 1960, while philosopher Alan Watts wrote *The Spirit of Zen* in 1936, and *Psychotherapy: East and West* in 1961. In the early years of the last century, philosopher William James (1961/1902) in his Gifford Lectures in Edinburgh, entitled *The Varieties of Religious Experience*, described the notion of “cosmic consciousness”, amongst other concepts relating to the sacred. It is also not widely known that Gregory Bateson was, as Douglas Flemons (1991, p. 4) notes, “picking the brains” of Alan Watts in the 1950's. Even family therapist and theorist Jay Haley (1992) wrote on “Zen and the Art of Therapy”.

### **Privileging Relationship in an Aesthetics of Engagement**

Boscolo, Cecchin, Hoffman and Penn (1987), continuing with this notion there is nothing new beneath the therapeutic sun, wrote that Italy's Milan team adopted a “...clearly Batesonian

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<sup>7</sup> Beginning in 2010, I became Director of the Master of Counselling Programs for City University of Seattle, in Vancouver, British Columbia, Canada, and, in January of 2014, was appointed to Director of Canadian Counselling Programs. City University has four Master's of Counselling programs in Canada, one in Victoria (coordinated by Allan Wade, 1997, 1999), one in Calgary and another in Edmonton (Alberta), directed by Dr. Deena Martin. The Principal for the Canadian Programs is Dr. Arden Henley (1995, 2011; Henley & Miller, 2010), located in Vancouver. I have taught courses with City University in Vancouver since 1998 (the first Canadian program was founded in 1997 in Vancouver by Arden Henley), and I have also coordinated, and been consultant to, interns for the past ten years in our free community based clinic, in partnership with Pacific Community Resources (PCR). Our clinic is now in its fourteenth year of operation.

<sup>8</sup> I was very much intrigued by the collaboration between Dan Siegel and Irish mystic and poet, John O'Donohue, (O'Donohue, 1997, 2004). O'Donohue had been friends with another Irish poet with hermetic interests, John Moriarty, who had been a friend of my parents when he taught English at the University of Manitoba in the 1960's.

world view” (p. 10), while being mindful and aware of “...the radical new positions in biology and physics that were coming to the attention of the family therapy field” (p. 10), concluding, “One final observation is that this approach, identified as it is with Bateson’s fascination with events on the frontiers of the scientific imagination, challenges its adherents to translate the emphasis on epistemology of the New Biology into the down-to-earth-language of clinical work” (p.28).

While McLeod, (1997) claims, “There are no new therapies” (p. ix) that does not infer there can not be unique, innovative, novel ways of applying perspectives, ideas, and concepts in practical ways with persons who are struggling with a wide range of dilemmas. McLeod (1997) goes on to write:

But at the same time every therapy is a new therapy...[In that] Each therapist brings to his or her work a repertoire of personal experiences and values. Therapy models are integrated into a personal world-view and style, and the contact with the client is in the end a ‘personal’ one (Lomas, 1981). (p. ix)

I believe the point made by Lomas concerning the manner of engagement between therapist and client is “personal”, as noted above by McLeod, is worth considering within the relational poetics of our ways of being and engaging with our local environments and ecologies, and within our inter-relationships with one another. This is also a point highlighted by clients in surveys where they are asked to describe what has been most beneficial regarding their therapeutic experiences. A majority of clients respond that it is the therapeutic relationship itself that appears to have been most important in providing hope for a preferred life and preferred relationships, regardless of the theoretical perspective(s) used to articulate the practice (Duncan, Miller, Wampold & Hubble, 2009).

In regards to how it is that all “Therapy models are integrated into a personal world-view and style, and the contact with the client is in the end a ‘personal’ one” (Lomas, cited in McLeod, 1997, p. ix), Szasz (1970) much earlier wrote, “Can anyone really believe that a psychotherapist’s ideas on religion, politics, and related issues play no role in his [sic] practical work?” (p. 18). Some years later, finding agreement with this connection, Gregory Bateson (1984), in conversation with his daughter, Mary Catherine Bateson, remarked, “You can’t work with human beings without allowing for your own involvement” (p. 213).

## **Understanding pre-understandings**

The late Norwegian psychiatrist and professor, and creator of the reflecting process concept in therapy, Tom Andersen (1995) pointed out that philosophers Martin Heidegger and Hans-Georg Gadamer agreed that “...what we come to understand is much determined by the life we already have lived” (p. 12), and these “pre-understandings” arising from lived experience migrate along with us, becoming a part of what is negotiated in relational contexts. “Gadamer says that we are inevitably prejudiced when we meet with a person we are to understand; we have started to understand the person even before we meet him/her. Gadamer used the word ‘prejudice’ and Heidegger used the word ‘preunderstanding’ for this” (Andersen, 1995, p.12). As discussed further in Chapter Seven of my dissertation, any such pre-understandings and prejudices become even more pronounced when we read a psychiatric/psychological file



regarding a person (Harre, 1984). Harre (1984) is explicit in this regard, distinguishing as he does between a “real-self” and a “file-self” (p.70).

Additionally, one’s so-called “personal world-view and style” will always come forth from one’s relations and inter-relations with a myriad of others, as it is within these linguistic communities that meaning and understanding becomes shared. Sheila McNamee (in press) writes, “...we all inhabit multiple discursive communities”, and it would prove impossible to not bring into our being and relationship with others’ discourses from such diverse and “discursive communities”. Speaking of relational research, McNamee (in press) points out that, “Without our participation, the world of research and the inevitable version of reality they produce would not endure. We are ones who maintain these realities, these standards. These communities continue to be, because of our interests in maintaining them”.

In his challenge to the cultural activity known as psychotherapy, *Doing good? Psychotherapy out of its depth*, the late Peter Lomas (1999), in a chapter entitled, “The poverty of technique” wrote:

Many family therapists are now recognizing the limitations of technique and developing an approach which is more obviously based on attitudes that are part of everyday living. *My own experience of gifted family therapists leaves me with the impression that they rely on a substantial amount of common sense and ordinary wisdom* [emphasis added]. (p. 71)

Lomas’ appreciation for “common sense and ordinary wisdom”, the abiding respect for, and honouring of, the person’s (client) unique wisdom and knowledge, their story, is perhaps what best allows us to co-evolve, co-exist, and, to paraphrase Wittgenstein, to “go on together” (Wittgenstein, 2009, p.66, no. 154). This concern to avoid viewing the practice of therapeutic conversation as technique, remaining as creative and imaginative as possible in always moving beyond normative, prescriptive, practices and traditions, was evident early on in the work of Italy’s Milan Team. “We believe that the Milan method is different from a set of procedures, to be passed along like recipes. It has programmed into it the ability to evolve in new and different forms. It is a ‘learning to learn’ approach in Bateson’s sense” (Boscolo, Cecchin, Hoffman, & Penn, 1987, p. 28).

I would suggest further that “learning to learn” is what we, as practitioners, but also simply as human beings in relationship with one another, continuously are performing.

### **Narrative Inquiry**

Of course, narrative does not merely refer to, nor relate to, narrative therapy (White & Epston, 1990). There exists a rich tradition and literature pertaining to narration, the storying of one’s life and relationships, and meaning making over time.<sup>9</sup> The narrative therapy theory and

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<sup>9</sup> See D.J. Clandinin (Ed.) (2007), *The handbook of narrative inquiry*, G. Genette (1988), *Narrative discourse revisited*, and J. Gubrium & J. Holstein (2009), *Analysing narrative reality*.

practices of White and Epston (1990) arose and became woven into a theory of practice deriving from their reading widely in philosophy, anthropology, sociology, and the history of ideas.

Oral literary traditions, too, have long utilized story and narration to shape and create shared meaning (cf. Brighurst, 2011, 2<sup>nd</sup> edition). Kearney (2002) writes, “Telling stories is as basic to human beings as eating. More so, in fact, for while food makes us live, stories are what make our lives worth living. They are what make our condition *human*” (p. 3).

Robert Brighurst (2006), poet, linguist, and translator of Pacific Northwest indigenous oral poetry traditions, reflects, “...every indigenous language in Canada has a word that means something like *history* – a word that is used for stories that do take place in human time” (p. 306). Such oral histories, more often than not in the form of stories and poems, have traditionally been passed along, one generation to the next, co-creating a continual lineage of kinship and community. This narrative passage over time has, in effect, provided a connection to the land, to environment, and to local ecology.

Brighurst (2006) in his essay, “Poetry and Thinking”, citing Paramenides’, observes, “To be and to have meaning are the same” (p. 139). Our being *is* meaning, within the relationships and the communities of which we are a part. Paramenides’ dictum appears to me to succinctly encapsulate the experience and process that most often occurs within therapeutic conversation (but not exclusive of other, every day conversations, dialogues and discourses). As human beings, sentient beings, how can one “be” without “meaning”, without being in relationship to others’. Such being, such meaning, occurs within language.

Psychologist Jerome Bruner (1986), writing on Lev Vygotsky’s (1978) work, observes, “Language is (in Vygotsky’s sense as in Dewey’s) a way of sorting out one’s thoughts about things. Thought is a mode of organizing perception and action” (p. 72). Mary Catherine Bateson (1988), in dialogue with her father Gregory Bateson, remarked, “So human beings think in stories” (p.34), while Gregory Bateson (1988) pointed out the relational significance of story, saying, “...it’s also true that since we’re all mammals, whatever word games we play we are talking about relationships” (pp.33-34).

Ricoeur (1995), in conversation with Richard Kearney, remarked:

I would say, borrowing Wittgenstein’s term, that the ‘language-game’ of narration ultimately reveals that the meaning of human existence is itself narrative. The implications of narration as a retelling of history are considerable. For history is not only the story (*histoire*) of triumphant kings and heroes, of the powerful; it is also the story of the powerless and dispossessed. The history of the vanquished dead crying out for justice demands to be told. As Hannah Arendt points out, the meaning of human existence is not just the power to change or master the world, but also the ability to be remembered and recollected in narrative discourse, to be *memorable* (p. 218).

Ricoeur’s words, “The meaning of human existence is itself narrative” have always been significant to me. Our existence as human beings, *beings in language*, becomes shaped and distinguished by story. Language, being fluid and malleable, offers us opportunities to challenge stories regarding our identity and relationships, allowing for, as White and Epston (1990)

propose, re-storied, and re-authored identities. Accordingly, through such narration, our sense of identity can become transformed and restored, as we make sense of the pieces, the fragments, and the vicissitudes existing within our lives and relationships. Such is the creativity, fluidity, and the resourcefulness of narration, of storying, and of re-storying.

### **Summary**

Thus far, I have chosen to highlight the notion that theoretical promiscuity (McNamee, 2004, 2012) is to be promoted within our work as practitioners, in order that we not become too attached to any one theoretical perspective. As well, I have insisted upon not taking the view that an aesthetics of engagement with others' should be about technique over relationship and dialogue; rather, invoking Lomas (1999), I propose that adhering to "common sense and ordinary wisdom" opens space allowing for human beings to "go on together"(Wittgenstein, 2006).

I have also highlighted the significance of Ricoeur's (1995) notion that "The meaning of human existence is itself narrative" (p.218) in relation to an aesthetics of engagement, and the importance of narrative imagination in the practice of a narrative poetics of resistance.

In the following section, I describe some ideas and perspectives, and the persons most often associated with these ideas and perspectives, imperative for an understanding of a narrative poetics of resistance.

## CHAPTER TWO

### TOWARDS A NARRATIVE POETICS OF RESISTANCE: A SELECTED LITERATURE REVIEW

#### Introduction

This chapter consists of two sections. In the first section, I offer an overview and brief narrative regarding the history of my reading, and how this reading history, and lived experiences surrounding this reading, came to inform my narrative poetics and aesthetics of engagement with others.

My thinking and identity were profoundly shaped by counter-cultural influences associated with the poetry, poetics and political writings of “the Beats”, and progressive, left-leaning, anti-war (Vietnam) Catholic journals and writers, and the existential phenomenology and critique of psychiatric practices promulgated by Scottish psychiatrist, R.D. Laing, and associates.

My sense of socially just practices occurred early on within my life. As a very young person, I was active in demonstrations protesting the U.S. invasion of and war in Vietnam, and Canadian complicity in that war. Environmentally, I was also involved from an early age in demonstrations against pulp and paper companies contaminating river systems providing water to First Nations communities and villages in two Canadian provinces, Ontario and Manitoba.

In the field of education, I was forever going against the established grain, as it were, challenging practices I experienced as stifling of creativity and curiosity, or, pathologizing or discriminating against others. Following many years of suffering through the vagaries of largely monotonous institutions, I eventually finished high school in Winnipeg, Manitoba’s first alternative high school, initially known as Youth Re-entry, now known as Argyle. I had the honour of being the first graduate of this alternative program. As such, I have often found myself relating to an observation attributed to novelist Mark Twain, “I have never let my schooling interfere with my education”.

In the second section of this chapter, I more specifically trace the philosophy of a narrative poetics within the thinking/writing of a “train of forebears” (Hoffman, 2007, p.64). Accordingly, in section two, I describe and engage with the considerable influence in the (family) therapy field of Gregory Bateson (1972, 1979), in addition to the innovative philosophical ideas and practice contributions and challenges to field provided through the work of Tom Andersen, Harlene Anderson and Harry Goolishian, Lynn Hoffman, Humberto Maturana, Imelda McCarthy and Noillage Byrne, Sheila McNamee and Kenneth Gergen, Karl Tonn, Michael White and David Epston, amongst others.

#### Early Inspirations

I was born in 1954, and by the late 1960’s, was reading and wandering in a range of poetic, literary, philosophical and theological domains. As with many others’ who related to the

counter-cultural shifts of the day, I had come under the influence of poet Allen Ginsberg<sup>10</sup> (2006), poet and anthropologist Gary Snyder (1968, 1969, 1974, 2005, 2007), Jack Kerouac, and novelist and Harvard graduate William Burroughs (1959, 1963, 1982), amongst others. Burroughs' early ethnological search for, and personal experimentation with, psychoactive substances and narcotics, especially intrigued me.

Interested in psychedelic drugs, I was reading Aldous Huxley, including his *Brave New World* (1932) in addition to his reflections upon his own experience with mescaline, *The Doors of Perception* (1954). I was also reading Alan Watts'<sup>11</sup> *The Joyous Cosmology*, and his *Psychotherapy East and West* (1961), which continues to be inspiring to this day.

Watts and Snyder led me to D.T. Suzuki (1956, 1964). I was familiar with Trappist monk, poet, essayist, and activist, Thomas Merton (1960, 1961, 1965, 1968, 1973), a prominent resister of the U.S. invasion of Vietnam, and a convert to Catholicism who was considerably interested in convergences between Eastern spiritual traditions and Western spiritual traditions (Merton, 1968).<sup>12</sup> I also discovered in my father's library the writing of Teilhard de Chardin, the Jesuit and paleontologist (whose collected writings comprise thirteen volumes) whose thinking on the sacred also challenged and influenced Gregory Bateson (1979, p. 93).

My father introduced me as well to the writing of Laing (1967), and to Che Guevara's<sup>13</sup> Bolivian diary, published by *Ramparts Magazine* (July 27, 1968), with an introduction by Fidel Castro. *Ramparts Magazine*, published in San Francisco, had started as a progressive, left-leaning, Catholic journal, and my father also subscribed to *Commonweal*, another progressive

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<sup>10</sup> In April of 1985, I was honoured to be one of six persons' who spent one week with Ginsberg at Hollyhock Farm, Cortez Island, British Columbia, for a workshop on poetics.

<sup>11</sup> I met Watts a year or so before he died, at a talk he gave in Winnipeg at the University of Manitoba. Watts sat cross-legged upon a desk, wearing a cape, talking about poetry, philosophy, theology, and psychedelics. I approached him following the talk, and asked of poets Gary Snyder and Phillip Whalen, his friends. Watts was gracious with his time. In 1979, I visited the houseboat in Sausalito, California, where he had lived and worked. It was a peaceful, quiet morning, and I felt his presence. Many years later, I was pleasantly surprised to read Kenneth Gergen (Gergen and Hosking, 2007) acknowledging that Suzuki and Watts' Buddhist ideas had influenced him in moving towards a constructionist perspective.

<sup>12</sup> When I was about 12 years old, before well before dawn one Sunday morning my father took me to the Trappist monastery that existed, in those days, on the outskirts of Winnipeg, Manitoba, in a village known as St Norbert. Together, we climbed over the gate, and went into the chapel where hooded monks sang Gregorian chants and Mass was performed in Latin. Afterwards, we went for pancakes!

<sup>13</sup> In 2007 I was invited by David Epston to present my work on a poetics of resistance regarding substance use at the first narrative therapy conference in Havana, Cuba. While in Cuba, my partner Gail and I visited the mausoleum commemorating and celebrating Che Guevara.

Catholic journal, in addition to Dorothy Day's *The Catholic Worker* newspaper<sup>14</sup>. We also received *The New Yorker* (where I first read about Allen Ginsberg in two essays later published as a book, *Allen Ginsberg in America* (Kramer, 1969), and the *Sunday New York Times*, which continues to this day to be a Sunday reading ritual!

My early experience and thinking involved "acts of informing and forming" (Andersen, 1995, p. 11) situated within my reading of left-leaning, progressive, Catholic journals and persons committed to social change and social justice. In this context I include the following: Stanislas Breton, Daniel Berrigan, Phillip Berrigan, Ignacio Martin-Baro, Thomas Merton, Camilo Torres, amongst others. The commitment to working towards social change and social justice of these thinkers brings to mind a quote of the Dalai Lama's that I have on a postcard above my desk, "Compassion is not enough; one must also act".

Within the context of my lived experience, I was aware from a young age that the world did not merely consist of white, middle-class, persons and so-called nuclear families. My parents took in international university students over the course of several years, and my siblings and I were exposed to Sikhs, black Africans, and persons' from France often conversing in a language I did not comprehend, introducing into our household cuisine I had never tasted, and rituals with which I was unaccustomed.

### **The Politics of Experience**

Laing had a particular influence upon my thinking in regards to ways of engaging with struggling, suffering, others, and with perspectives relating to the deconstruction of individualism and the conceptualization of so-called mental illness. Laing had been one of the organizers of The Dialectics of Liberation, a conference held in London, England, in 1968. Speaking at this conference and performing their work were counter-cultural figures including Allen Ginsberg, Gregory Bateson, Vietnamese monk and writer Thich Nhat Hanh, black power activist Stokely Carmichael, Marxist economist Paul Sweezy, Paul Goodman<sup>15</sup>, whose book, *Growing Up Absurd* (1956) became a template for me in questioning educational practices and exploring alternatives (I was in Grade 7 at the time), and a founder of San Francisco's "Diggers" community, Emmet Grogan (1972), amongst many others. I would be surprised to learn if a gathering of this sort has ever been re-created.

Laing, whom I met once after he gave a talk on a bitterly cold winter's night in Winnipeg, Canada, in 1973, had referred to Bateson's double bind theory (Bateson, Jackson, Haley, & Weakland, 1956) in his own work regarding the experience we know as "schizophrenia". Laing, writing from an existentialist and phenomenological perspective,

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<sup>14</sup> My mother, now 79, continues to volunteer at Winnipeg's Catholic Worker inspired House of Peace.

<sup>15</sup> Goodman had also co-authored the seminal text, *Gestalt Therapy: Excitement and Growth in the Human Potential* (1951), along with Fritz Perls and Ralph Hefferline, and, with his brother, Percival Goodman, wrote the instructive, *Communitas: Means of Livelihood & Ways of Life* (1973).

contributed a refreshing thoughtfulness and critique to the medicalized, psychiatrized, practices and discourses of the time. His influence would show up in a significant way in the re-visioning of residential practices I initiated in Vancouver at Peak House (Chapter Seven of my dissertation).

Interestingly, regarding convergences amongst theoretical perspectives, Karl Tomm (1993), in an appreciative critique of Australian co-founder of narrative therapy, Michael White's work, observed connections between Laing and White's methods of asking therapeutic questions. Tomm (1993) wrote,

The syntactic structure of Michael's experience-of-experience questions ("What do you think he thinks about you?" and "What do you think I think about you?") are analogous to the 'interpersonal perception questions' that were popularized by R.D. Laing (1961) some years ago. (p. 77)

Tomm goes on to point out that these sorts of questions influenced his own "internalized other" questioning practice, a practice he had in common with David Epston (1993). This way of utilizing questions within therapeutic conversation is purposeful and intentional (Tomm and Lannamann, 1988).

### **Reflections on Poetics**

*William Carlos Williams says mind and poem "are all apiece."* Douglas G. Flemons (1991, p.2).

I am certainly not alone in referring to the aesthetics of therapeutic engagement as being illustrative of a particular poetics, a narrative poetics, and subsumed within this, a poetics of resistance (Sanders, 2007). Both descriptions hold particular meanings for me. Several others have also referred to the concept of poetics in descriptions pertaining to their own theory and practices. In fact, literature pertaining to therapeutic practices, social work and community work practices, and philosophical theorizing regarding therapeutic practice is rife with allusions to poetics.

David Epston (2011), co-founder of the narrative therapy perspective along with Michael White (White & Epston, 1990), in introducing White's (2011) posthumous collection of essays, expressed his hope that narrative therapy theory would catch up with contemporary times and developments, and posed the question, "Michael, don't you think we have to turn to poetics for this?" Specifically, Epston was considering that narrative therapy needed to move beyond the influence of Foucault. As Epston once remarked to me, "Foucault never lived to send an email!" (D. Epston, personal communication, April, 2011).

I believe describing one's own practice or the practice of others, in terms of poetry and poetics provides an element of enchantment, and an acknowledgement that such practices are evocative. I would also add that by invoking such a description, the aesthetics of the practice becomes pronounced, supporting the idea mentioned above that these practices are a craft and an art, not a science and not simply a technique.

Bruner (1986) equates "The language of poetry...[with]...the language of evocation" (p. 24), while Jeff Conant (2010), speaking of poetic resistance in the face of political oppression,

proposes that "...*poesis* – creation, or creating – is the first front in the war against oblivion" (p. 37). Conant continues, writing, "Poetic resistance – the resistance of language against the oblivion of silence – has been a part of indigenous survival for the last five hundred years – the fiery blooming of flowers from the hardened soil" (p.37).

In therapeutic conversation, the notion of a poetics of resistance makes sense for me relative to the imagining of preferred identities, and challenging the "oblivion of silence" that problems and dilemmas can foment and contribute to.

Mark Freeman's (1999) thinking on "poetic creation" and relationship resonate strongly for me:

Poetic creation, among other forms of imaginative labor, has relationship – or, maybe more appropriately, relatedness – at its very heart. I say "relatedness" here in order to emphasize the significance not just of others, but of the Other, whose presence commands a kind of attention and care that surpasses the condition of "being-" or "being-with" implicit in the ideas of relationship or dialogue as ordinarily conceived. Some of Levinas's work (e.g., 1985, 1996) is especially instructive in this context. (p. 105)

### **Narrative Poetics as Ethnography**

Stephen A. Tyler was one of many anthropologists who, throughout the 1970's and 1980's, sought to describe their fieldwork in cultures other than own in ways that were more inclusive of the voices of indigenous persons. This kind of ethnography was disinterested in making ethnocentric assumptions regarding others' understanding of cultural meaning. Tyler himself spoke of a post-modern ethnography (Tyler, 1986), writing:

A post-modern ethnography is a cooperatively evolved text consisting of fragments of discourse intended to evoke in the minds of both reader and writer an emergent fantasy of a possible world of commonsense reality, and thus to provoke an aesthetic integration that will have a therapeutic effect. It is, in a word, poetry – not in its textual form, but in its return to the original context and function of poetry, which, by means of its performative break with everyday speech, evoked memories of the *ethos* of the community and thereby provoked hearers to act ethically. (pp. 125-126)

I realized Tyler's understanding of a post-modern ethnography could contribute to the overall therapeutic practice I was initiating at Peak House and the beginnings of a more inclusive, collaborative, non-pathologizing, non-expert, de-centered practice. Peak House was imagined as the field, and the participants as those with indigenous knowledge. I imagined Peak House as a context in which "insider research" (Smith, 1999, p. 137) could take place, and the knowledge, wisdom, meaning making, and storying of experience of young persons' could be brought forth as a counter-story to deficit and pathologized identities.

As Smith (1999) indicates, "The critical issue with insider research is the constant need for reflexivity. At a general level insider researchers have to have ways of thinking critically about their processes..." (p. 137). Smith was focusing her work on ways in which indigenous peoples may re-claim and re- create their own narratives and stories of their cultural knowledges and histories, in restorative ways, and ways that countered colonial narratives and histories. As



Patti Lather (2006) notes, Tuhiwai Smith's project is "...designed not just to voice the voiceless but to prevent the dying – of people, of culture, of eco-systems" (p. 44).

My academic background had been in cultural anthropology, as had David Epston's. I perceived the community development work, and the therapeutic work I was engaged in as being an adventure within unique cultures. From an ethnological perspective, I was present within this adventure as one wishing to become informed by others. Lynn Hoffman points out Michael White had a "...preference for anthropological rather than psychological language..." (Hoffman, 2007, p.67).

Regarding David Epston's own anthropological vocation and interests, White (White & Epston, 1990) wrote:

Without doubt, David's fascinating childhood experiences...and his former career as an anthropologist ideally equip him to traffic in storytelling. In fact, upon reflecting on his unique location in the therapy world, I see that he hasn't departed from anthropology at all. An anthropological degree has been defined as an "intellectual poaching license" – an apt description of the sort of credential that David would take most seriously. He collects ideas for stories from all over and displays a profound disrespect for "disciplinary" boundaries in his search for helpful metaphors to interpret events in social systems (White & Epston, p. xvi).

Chris Beels (2009), reflecting back upon one of many shifts emerging within the field of (family) therapy observed,

And from within the social sciences, the model of anthropology has become increasingly "centrifugal" rather than unitary. That is to say, it seeks explanations in terms of diverse local experiences, "local knowledge," of groups, and relies on the subjects themselves to do the interpreting. Anthropologists lead with their own transparency as stranger-visitors, and in reporting that focuses on effects rather than causes e.g. (Garrison, 1982; Myerhoff, 1992). In this climate, Great Systems of the kind personified by Freud have for many become anathema. (p. 376)

Personally, I initially encountered the wide inter-disciplinary range of Gregory Bateson's thinking/writing when studying towards an M.A. in cultural anthropology (completed 1979). At one point in that particular academic endeavor, I remember reading Bateson's *Naven: A Survey of the Problems Suggested by a Composite Picture of the Culture of a New Guinea Tribe Drawn From Three Points of View* (1936) for a discussion in a graduate seminar, and being struck now, more than then, with the "three points of view" perspective being considered. It seemed to me of extreme importance to be considerate of the social context within which cultural relationships were being informed and experienced, and not to take for granted what appearances may suggest. Such evolving ethnographic practices would become more and more distanced from ethnocentric, colonizing, expert perspectives (cf. Clifford & Marcus, 1986), and would challenge assumptions associated with unifying theoretical perspectives. I saw this as the opening of the field towards situating knowledge and ways of knowing within local contexts, being an "ecology of mind" as it were (Bateson, 1972).

Foucault (1980) advocated in support of the "...insurrection of subjugated knowledges" (p. 81), the "disqualified knowledges (such as that of the psychiatric patient, of the ill person, of the nurse, the doctor..." (p. 82), and of "...a popular knowledge...a particular, local, regional knowledge..." (p. 82). Cultural anthropologist Clifford Geertz (1983, 1992) also wrote of his own ethnological sense of local knowledge.

Theodor Adorno, associated with The Frankfurt School and The Institute of Social Research (cf. Jay, 1973), wrote of "lay knowledge", declaring that lay knowledge offers "the privilege of experience" (Adorno, 1973, p. 40). I see convergences between Adorno's lay knowledge and the privilege of experience in narrative therapist David Epston's thinking of local knowledge, often being a subjugated knowledge (Foucault, 1980), as a form of "insider knowledge" (Hancock & Epston, 2008, pp. 485-486). Linda Tuhiwai Smith (1999) would come to refer to "insider" versus "outsider" ethnographic research practices (pp. 137-140).

### **The Wisdom of the Elders: Shifting Perspectives**

In this section, I describe some of the more pertinent elders within the field of (family) therapy, and what it was regarding their thinking that challenged me within the evolution, and co-evolution, of my own aesthetics of engagement with others and narrative poetics.

First of all, to contextualize some of what follows, I describe and discuss shifting perspectives emerging within the field of therapy, as these shifts relate to a narrative poetics.

Within the history of paradigm shifts (Kuhn, 1962) occurring in (family) therapy, and the history of the metaphors utilized to speak and to write of human experience and relationships, Bateson's (1972) original cybernetic metaphor would be replaced with a succession of other metaphors; for instance, the narrative metaphor of White and Epston (1990), The Fifth Province metaphor of McCarthy and Byrnnne (McCarthy, 2004, 2010), the 'just therapy' metaphor of New Zealand's The Family Centre (Waldegrave, Tamasese, Tuhaka, & Campbell, 2003), the metaphor of social construction (Gergen, 1985, 1999, 2001, 2009), (Gergen & Shotter, 1989), (McNamee, 1996b, 1999), McNamee & Gergen (1992), notable amongst others.

Harlene Anderson (2007) recounts her own experience moving through the history of these discursive practices, noting, "In the early 1980's, we began to have an interest in contemporary hermeneutics. Somewhat simultaneously, largely influenced by hermeneutics, we became uncomfortable with the cybernetic systems theories – the bedrock of family systems that had guided our work for years" (p. 13). Anderson recalls that cybernetics "...brought in the observer as part of the description, overall, cybernetic theories offered a mechanical-oriented metaphor, not a people-oriented one" (p. 13).

Michael White's early publications, referred to and discussed below in Chapter Five, followed from his own enthusiasm with Gregory Bateson's thinking (White & Epston, 1990; Madigan, 2011), also utilized the cybernetic metaphor (White, 1979, 1984, 1986). I think that the turning point that began to appear within the literature on theory associated with therapeutic practice would not have evolved without building upon the basis provided by a cybernetic metaphor of human relationship and interaction.

Lynn Hoffman (2007) writes that regarding the various shifts and turns that occurred within the field of (family) therapy from the late 1950's into the 1970's, Bateson "was the genius who started it all", so that's where I will begin.

## **Gregory Bateson**

Given the counter-cultural<sup>16</sup> *milieu* of the 70's, a culture within which I was immersed, the Gregory Bateson I encountered was not only Bateson the cultural anthropologist, but the Bateson<sup>17</sup> who had become influential as a mentor and elder within the counter-cultural community, and had an association with Steward Brand, publisher of *The Whole Earth Catalogue* and the journal, *Co-Evolution Quarterly*. Brand (1972), commenting upon Bateson (1972), wrote, "In this invaluable book, systemic intellectual clarity and moral clarity convene and evoke a convincing ethic of what is sacred, what is right for life".

I encountered, and was intellectually challenged, by the Bateson who appeared at the 1968 London conference partially organized in part by R.D. Laing, *The Dialectics of Liberation*, as noted above. The Bateson whose work I was interested in reading in the 1970's was the Bateson who had given one of the first seminars at Big Sur's Esalen Institute in 1961, and who would, when struggling with cancer, would spend his final years residing at Esalen (Kripal, 2007, pp. 307-308). Bateson died on July 4, 1980, after spending his final days living in the San Francisco Zen Center (M.C. Bateson, 1984, p. 276). Bateson's ashes were scattered in a ceremony at Esalen, Big Sur (Kripal, 2007, p. 308).

Bateson's daughter, Mary Catherine Bateson (1984), in her memoir of her father, writes, "...one of the things that changed and helped Gregory to become involved was the nascence of the counterculture. The political engagement of the early sixties was not appealing to him, but the culture of disengagement was. Particularly on the West Coast, Gregory was becoming known and admired as someone who might provide alternative and intellectual approaches" (p. 220).

Bateson's reluctance to enter into the arena of the 1960's political engagement notwithstanding, his thinking and attention to the interrelationships and connections between "mind and nature" (Bateson, 1979) and to ecology, were an enormous contribution, and his ideas continue to have influence within the field of therapy, and other disciplines and domains (cf. Flemons, 1991; Herzogenrath, 2009; Hoffman, 1998; Kearney, 1984; Kinman, 2011a, 2011b, 2011c).

At the *Dialectics of Liberation* conference referred to above, Bateson presented an important paper, "Conscious Purpose versus Nature", subsequently collected in his book, *Steps to an ecology of mind* (Bateson, 1972). In this paper, Bateson proposed a systemic perspective

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<sup>16</sup> It was likely not coincidence that Michael White and David Epston (1990) referred to "counter documents" in their own co-evolving practices moving away from viewing struggling others' in terms of deficit identities and diagnostic categories.

on human inter-relationships, observing, “Dr. Laing noted that the obvious can be very difficult for people to see,” (p. 429), while going on to say:

That is because people are self-corrective systems. They are self-corrective against disturbance, and if the obvious is not of a kind that they can easily assimilate without internal disturbance, their self-corrective mechanisms work to sidetrack it, to hide it, even to the extent of shutting the eyes if necessary, or shutting off various parts of the process of perception. Disturbing information can be framed like a pearl so that it doesn’t make a nuisance of itself; and this will be done, according to the understanding of the system itself of what would be a nuisance. (p. 435)

Towards the end of his paper, Bateson’s cybernetic conceptualization, in some sense begins to anticipate developments by philosophers Gilles Deleuze and Felix Guattari (1987) regarding their concept of *rhizome*, as when Bateson (1972) writes, “We do not live in the sort of universe in which simple lineal control is possible. Life is not like that”, (p. 438), continuing:

Similarly, in the field of psychiatry, the family is a cybernetic system of the sort which I am discussing and usually when systemic pathology occurs, the members blame each other, or sometimes themselves. But the truth of the matter is that both these alternatives are fundamentally arrogant. Either alternative assumes that the individual human being has total power over the system of which he or she is a part (Bateson, 1973, p. 444).

Such arrogance ignores the imperative of relationship within the construction, and deconstruction, of all manner of shared meaning and discourse within social contexts and systems. Bateson was requesting that we pay attention to the connections, inter-connections, and the patterns existing between all sentient beings and the environments within which co-habit and co-exist. I read this focus as a deliberate shift and movement away from the privileging of the prevailing post-WW2 ideology of individualism over community and relationship, “the pattern that connects” (Bateson, 1980; cf. Lasch, 1979, for a critique of the supremacy of individualism as a neoliberal ideology leading to what he refers to as “a culture of narcissism”; for an overtly political analysis of individualism and neoliberalism, see Harvey (2007).

## **Wittgenstein and Bateson**

With Bateson, context was everything, and was representative of “*pattern through time*” (Bateson, 1979, p. 15), thus, patterns of relationship, of communication, patterns of being. For Bateson (1979), whose thinking at times reminds me of Wittgenstein’s, “‘context’ is linked to another undefined notion called ‘meaning.’ Without context, words and actions have no meaning at all” (p.15). Wittgenstein (2009, 4<sup>th</sup> edition), in his *Philosophical Investigations* #116, wrote,

When philosophers use a word – “knowledge”, “being”, “object”, “I”, “propositions/sentence”, “name” – and try to grasp the essence of the thing, one must always ask oneself: is the word ever actually used in this way in the language in which it is at home? – [W]hat we do is to bring words back from their metaphysical to their everyday use. (p.53)

Wittgenstein (2009) wrote that, "...language itself is the vehicle of thought" (p. 113), and "Thinking is surrounded by a nimbus..." (p. 49). Thought becomes articulated, performed, in language. A narrative poetics is just such a performance.

Bateson (1972), in a paper originally read by Jay Haley at the American Psychiatric Association Conference in Mexico City in 1954, wrote, "...language bears to the objects which it denotes a relationship comparable to that which a map bears to a territory" (p. 180), referencing A. Korzybski's (1941) *Science and Sanity*, and the reference to the concept proposing, "the map is not the territory" (p. 449). This idea that "the map is not the territory" that would remain consistent in Bateson's writing and thinking; and was a concept often invoked and elaborated upon by narrative therapist Michael White, in different respects (White, 2007; White & Epston 1990).

### **Identity, Co-evolution, Language**

Regarding relational theorizing, I have always considered Bateson's notion of co-evolution, of co-evolving, to be a reminder of the necessity of comprehending, and engaging, within the imperative of human inter-relationship and connection. Where Martin Buber (1965) spoke of the interhuman, Thich Nhat Hanh (1999) of inter-being, and Emmanuel Levinas (1985, 2001) of the other, Gregory Bateson (1972, 1979) often spoke in terms of co-evolving.

Such co-evolving was not exclusive nor confined to human inter-relationship; for Bateson highlighted that co-evolution also occurs between our relationship to local environment, as well as occurring along with other species (Bateson, 1972, 1979; Bateson & Bateson, 1987). In this regard Bateson (1979) wrote, "we are beginning to play with the ideas of ecology, and although we immediately trivialize these ideas into commerce or politics, there is at least an impulse still in the human breast to unify and thereby sanctify the total natural world, of which we are" (p.18). That Bateson relates this ecological relationship to the sacred is significant, and Bateson's (1987) posthumous book (co-authored with his daughter Mary Catherine Bateson) entitled, *Angels Fear: Towards an epistemology of the sacred*, further developed these interconnections.

Bateson (1979) wrote, "*Learning the contexts of life* is a matter that has to be discussed, not internally, but as a matter of the external relationship between two creatures. And *relationship is always a product of double description*" (p. 132). Michael White would in turn become influenced by Bateson's ideas here, utilizing Bateson's notions of negative explanation, restraint and double description (White, 1986), to frame his own early, evolving, therapeutic practice.

Bateson (1979) continues, explaining, "It is correct (and a great improvement) to begin to think of the two parties to the interaction as two eyes, each giving a monocular view of what goes on and, together, giving a binocular view in depth. This double view *is* the relationship" (p. 133).

Bateson (1979) considered "mind" to be social, relational; writing, "Relationship is not internal to the single person. It is nonsense to talk about 'dependency' or 'aggressiveness' or

‘pride,’ and so on. *All such words have their roots in what happens between persons, not in some something-or-other inside a person [emphasis added]*” (p. 133).

As Wittgenstein (2009) stated, “An ‘inner process’ stands in need of outward criteria”, (p. 161); a “some thing” does neither arrive nor arise from “no thing”, *ex nihilo*. Bateson (1979) proposed that, “Mind is empty; it is no-thing. It exists only in its ideas, and these again are no-things. Only the ideas are immanent, embodied in their examples. And the examples are, again, no-things” (p. 11). What is crucial for arriving at shared meaning inter-relationally, between persons, is “context”; “Without context, words and actions have no meaning at all” (Bateson, 1979, p. 15), and context entails relationship. The relational is integral to a practice of narrative poetics, as it is within narration that thought and meaning becomes articulated and focused, and, in the storying, meaning becomes related to and thus shared. Discourse communities share in, and relate to, a meaning-ful language.

Again, as Wittgenstein (2009) attempted to articulate his position: “One wonders, ‘What does “I’m afraid” really mean; what do I aim at when I say it? And, of course, no answer is forthcoming, or only an inadequate one. [T]he question is: ‘In what sort of context does it occur?’” (p. 197). Wittgenstein (2009) goes on to write, “Describing my state of mind (of fear, say) is something I do in a particular context. (Just as it is only in a particular context that a certain activity is an experiment.)” (p. 197). “All experience is subjective” Bateson (1979, p.31) thought, and, “The mind contains no things, no pigs, no people, no midwife toads, or what have you, only ideas (i.e., new of difference), information about ‘things’ in quotes, always in quotes. Similarly, the mind contains no time and no space, only ideas of ‘time’ and ‘space’” (p.130).

Bateson’s concept of co-evolution<sup>18</sup> continues to be a word I consider the meaning(s) of and utilize daily in my relations with others. When teaching students and others’, and in the context of meeting with colleagues, I intentionally employ this word to describe the interrelationships existing between myself and students, and myself and colleagues. Co-evolution invites a collaboration of others’, and most always generates a multiplicity of thoughts, reflections, connections, and new learning of one sort or another.

It was becoming clear to me that Bateson, amongst others, was interested in dissolving the rigid boundaries and concrete categorizations existing between disciplines; Bateson, along with others, seemed more interested in the patterns and affinities between disciplines, the connections. Geertz (2000) refers to “...the coevolution of body and culture...” (p. 205) without referencing Bateson, suggesting that the concept is now taken-for-granted within particular social science and therapeutic discourse communities. This interest and curiosity relating to reading outside the boundaries of one specific body of knowledge interested me deeply.

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<sup>18</sup> Steward Brand, published the first *Whole Earth Catalogue* forty-five years ago, and, inspired by Bateson, also published the journal, *The Co-evolution Quarterly*. No doubt inspired by Bateson’s own autodidactic example, *The Guardian* published a tribute to Brand, noting that his “...career is as extraordinary and eclectic as they come” (Cadwalladr, 2013, p.31). Brand wrote of Bateson in *Harper’s* (1973, November).

In the practice of, and thinking about, therapeutic conversation, Bateson's influence persists. Recently, Rocio Chaveste and Papusa Molina (2013), writing together in a wonderful article, "Of crabs and starfish: Ancestral knowledge and collaborative practices", pay *homage* to Gregory Bateson, as they offer reflections on contemporary applications of ancient Mayan sacred ideas in relation to local practices. Chaveste and Molina (2013) write:

Gregory Bateson in "Mind and Nature" asks us "What pattern connects the crab to the lobster and the orchid to the primrose and all four of them to me? And me to you?" (1980:8). And even if the answer to Bateson['s] question might seem obvious at the end of the first decade of the XXI century, we would like to take this opportunity to invite all of you to reflect, not just on the interconnectedness of all living and non-living creatures of this planet, but also about the connections of our daily practices and those of our ancestors. In specific, we will like to reflect on the connections between collaborative practices and ancestral/indigenous/local knowledges. (p. 20)

Bateson's thinking permeated and influenced many of the prime movers within the field of therapeutic theory and of practice. In the following section, I touch on aspects of Karl Tomm's thinking that have been important for me, and briefly describe contributions Tomm has made within the field, as his thinking relates to a narrative poetics.

### **Karl Tomm: Interactional patterns, therapeutic love and therapeutic violence**

Cheryl White (2009), Director of the Dulwich Centre and founder of Dulwich Centre Publications, has said of Karl Tomm:<sup>19</sup>

From the time Michael and David met Karl Tomm in the mid 80's they all became firm friends and Karl's influence was significant. Karl introduced their work internationally as well as consistently raising questions and challenges that added to the development of Michael's and David's thinking. They all took every opportunity available to them to meet up, especially in Calgary [Canada], and work together. (p. 60)

In May of 2012, Stephen Madigan and I interviewed Karl regarding his years of practice and innovative ideas, before a large audience at the conference Therapeutic Conversations X in Vancouver, Canada.

Karl informed us of something neither Stephen nor I had previously been aware of, namely, of his own personal encounter with Gregory Bateson at a conference in the 1970's, and how this encounter had been encouraging and influential. Tomm informed me more recently that he had met privately with Bateson at a conference, and had reviewed his Circular Patterns Diagramming concept with Bateson. Tomm (Collins & Tomm, 2009) has described this concept in the following way: "My understanding was summarized in the 'circular pattern diagramming model' that I developed where I tried to integrate psychodynamic ideas, cognitive ideas, and behavioral ideas, by connecting them through a cybernetic feedback loop" (pp.6-7). As Tomm

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<sup>19</sup> See further a book in celebration of Tomm's contributions, *Patterns in Interpersonal Interactions* (2014) by Karl Tomm, Sally St George, Dan Wulff and Tom Strong.

recalled, “[Bateson] was very affirming of what he understood about my diagrams at the time and his affirmation inspired me to go further with that work” (Tomm, personal communication, February 18, 2014).

This encounter established a co-evolving lineage between Bateson, Tomm, and others’ whom Tomm became instrumental in bringing into a North American audience. I refer to the Milan Team (Boscolo, Cecchin, Hoffman & Penn, 1987), Humberto Maturana and Francis Varela (1992), Imelda McCarthy and Noillag Byrne, Michael White and David Epstein, and others Tomm brought from their own respective countries of origin to a Canada audience.

In this regard, Boscolo *et al.* (1987) wrote:

Milan teams have been slow to ‘take’ in the United States, partly because the Italian group has had easy access to European countries, but also because by the time the method hit North American shores, American family therapy had already stabilized around native gurus” (p.27). That said, Boscolo *et al* note that “The approach has taken root in North America only in the Department of Psychiatry directed by Karl Tomm at the University of Calgary, the Ackerman Institute for Family Therapy in New York, and a few small newcomer institutes. (p. 27)

Perhaps the most relevant connection that evolved through Tomm for my sense of a narrative poetics was Tomm meeting Michael White and David Epstein, co-founders of narrative therapy, as Cheryl White indicates above, in the mid 1980’s. Tomm, ever open-minded to new developments within the field of therapeutic practice, distinguished his own work from narrative therapy, while acknowledging aspects of narrative therapy’s innovative and even radical practices, in what I consider to be one of the more profound appreciative critiques in regards to the ideas and practices initiated by White (Tomm, 1993; cf. Chapter Five of this dissertation).

Tomm (1990) influenced by Bateson’s attention to interactional patterns within mammalian communication, began to consider healing interactional patterns (HIPS) and pathological interactional patterns (PIPS), as an alternative to utilizing diagnostic categories in describing the dilemmas and struggles persons’ may encounter (Tomm 1990a, 1990b, 1991). Tomm’s innovative contribution has been useful in talking with others’ in non-pathologizing ways, and for thinking and conceptualizing human behaviours and interrelationships in terms of patterns that open space for connection and belonging, versus patterns that close space and foment discord, conflict, even violation and violence (Tomm et al, 1992; Combs & Freedman, 1999 <sup>20</sup>).

## **Lynn Hoffman**

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<sup>20</sup> I asked Karl Tomm if he had ever published specifically on this distinction of therapeutic love and therapeutic violence, a distinction involving “ethical postures” Tomm developed from Maturana and Varela’s thinking/writing; Karl said he had not written specifically regarding these notions, and to see the description offered by Combs and Freedman (1999).



Lynn Hoffman became another important influence in challenging my thinking in regards to therapeutic practice in particular. I had read much in regards to Hoffman and her place within the history of family therapy, and I was introduced to her in 1993 through our mutual friend Chris Kinman.

The morning she was departing from Vancouver back to her home in New England, we had tea at The Sylvia Hotel in Vancouver, looking out at the waves upon the beach of English Bay. Lynn autographed her book of collected essays, *Exchanging Voices*, for me. I would go on to write a review of the book (Sanders, 1995). I continue to stand by what I wrote in appreciation of *Exchanging Voices*, at the time:

For the purpose of this brief appreciation, I wish to highlight what I consider to represent some of the predominant streams of thought meandering through the text. Lynn makes a distinction between what she considers therapies that seek to create “change by design” (p.6) and alternate therapeutic practices that are “more subservient to chance” (ibid). In this she follows Bateson’s admonition against therapists who seek to direct sessions with a surplus of “human conscious purpose” in mind as to strategies they might utilize to make families change. Lynn critiques the “managerial, adversarial, and secrecy-laden characteristics” (p.147) of some therapies, while promoting a therapy utilizing “ideals of connectedness and collaboration” (p.7). This latter form of therapy de-emphasizes hierarchy and dissolves the “expert” position of the therapist. This alternative therapy recognizes that “symbols, dreams, stories, trance, are all important linking elements in the meaning systems that humans take part in collectively” (p.51). This way of being with clients and families emphasizes the “meanings” that persons give to the narratives that have shaped their lives and relations. (pp. 18-19)

In March of 2013, I facilitated a dialogue regarding the feminist critique of (family) therapy with a female cohort of graduate students. At the outset, I informed them of the irony involved in having a white, heterosexual, male, Director of their academic program conversing with them regarding the feminist contributions, and the feminist critiques pertaining to theory and practice in therapy. However, in this conversation, I found I could not say enough regarding Lynn Hoffman’s contributions to the field(s) of theory/practice over the decades.

I also pointed out a distinction that Hoffman herself made, when she wrote that she preferred to describe herself as being a “gender sensitive” practitioner, as opposed to a so-called feminist practitioner. In one sense, I consider this distinction to be a response to the possible totalizing implications of positioning one’s self as a “feminist” practitioner, given the multiplicity and range of feminist perspectives and theories (cf. Flax, 1990). Rather, being gender sensitive accords more with being a compassionate human being, paying attention to “common sense and ordinary wisdom” (Lomas, 1999, p. 71). From reading Hoffman, and listening to her in conversation (Kinman, 2012), I have continued to develop an appreciation for the importance of situating the history of ideas, practices, and shifts occurring within the domain of therapy and therapeutic practices; in thinking along these lines, Hoffman’s (2002) book, *Family therapy: An intimate history* has been instructive.

### **“The Art of Lenses”**

One of the more illuminating essays of Hoffman's for me, and one I encourage students to read over and over, as I myself do, is Hoffman's (1993) essay pertaining to "The Art of Lenses". This essay has proved invaluable in continuing to remind me that the perspective to which one is particularly attached will influence one's experience and meaning making in relations with others.

Hoffman (2007) notes the shift that occurred between "conversational" and "dialogical" therapeutic practices, and the more directed, question oriented, therapies, such as narrative and brief solution focused ones (p. 64), noting Lowe's (2005) article that first made this distinction. Hoffman, following Lowe, notes that Shotter and Katz (1998) with their attention to "striking moments"<sup>21</sup> epitomize this conversational and dialogical way of engaging with others. Hoffman then observes that Shotter and Katz et al (1998) have some "distinguished ancestors", writing, "The work of these forebears was foreshadowed by Gregory Bateson (1972) who, at the end of his life, emphasized the preverbal communication styles of what he called the "Creatura," or the world of the living" (Hoffman, 2007, p. 64). Bateson took this distinction, *creatura*, as distinct from *pleroma*, from Carl Jung, who, in turn, had discovered this distinction in writings of the Gnostics (Bateson, 1972).

### **Witness Thinking and Being**

Hoffman refers to the prolific John Shotter (2007) as "our in-house philosopher" (p. 68). Hoffman highlights the distinction Shotter (2010) makes between "*witness (dialogic)- thinking*, and "*aboutness (monologic)-thinking*" (Shotter, 2007, p. 192). Witness thinking resonates for me, in what I am referring to as a practice of narrative poetics.<sup>22</sup> Again, where a narrative poetics is concerned, witness/dialogic thinking, being, becoming, resonates for me as comprising an aesthetics of engagement that makes sense if one intends to inflict no harm upon an-other. Witness/dialogical being opens space, and does not close space, in Tomm's interrelational sense.

Shotter (2007), whose deep appreciation for the writing/thinking of Wittgenstein, Gaston Bachelard, Mikhail Bakhtin and Henri Bergson is evident throughout his work, describes the distinction between these postures in this way: witness (dialogic)-thinking "...is a form of reflective interaction that involves coming into living contact with an other's living being, with their utterances, their bodily expressions, their words, their 'works'" (p. 192). Shotter, citing Bakhtin, suggests that with a practice of aboutness (monological)-thinking "(in its extreme pure form) another person remains wholly and merely an object of consciousness, and not another consciousness... Monologue is finalized and deaf to the other's response, does not expect it and does not acknowledge in it any *decisive* force" (Bakhtin, 1984, p. 293, cited by Shotter, 2007, p.192).

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<sup>21</sup> White and Epston (White more so), spoke of "sparkling facts" (1990, p.76), and, later, of "sparkling moments".

<sup>22</sup> Shotter and Katz (in Shotter, 2007, p.44), alluding to Tom Andersen's way of engaging with others, write, "We shall call this way of talking *relational-poetic*...it is an important aspect of Tom Andersen's psychotherapeutic practice".

The following section describes my own interpretation of the significance and influence of Michael White and David Epston's (1990) introduction of the narrative metaphor into the field.

### **Michael White and David Epston: The Narrative Metaphor**

Lynn Hoffman (1995) exclaimed,

A third break with systems concepts and the modernist methods of therapy that derived from them came with the extraordinary innovations of Michael White and David Epston in Australia and New Zealand. White and Epston's book *Narrative Means to Therapeutic Ends* broke upon the shores of family therapy in 1990, and the field has not been the same since (p. xi-xii).

My introduction to the narrative metaphor in family therapy theory, as co-conceived by Michael White and David Epston, came in 1991.<sup>23</sup> At the time, I was taking a lead in directing theoretical and practice shifts at Vancouver's Peak House. As I describe below in Chapter Seven, I was interested in deconstructing traditional ways of engaging with young persons and their families suffering from substance use, and constructing alternative residential practices of a more collaborative, relational, non-pathologizing type (Sanders, 1994a, 1994b, 1995, 1997, 1998, 2007; Sanders and Thomson, 1994).

My colleague of the time, Garth Thomson (1994), who was to become a dear friend, had attended the University of British Columbia School of Social Work M.S.W. program with Stephen Madigan (2011), (who also became a close and dear friend, but whom I did not meet until 1992, at a David Epston workshop). Garth, having heard of White's work in particular through Stephen, attended a series of workshops sponsored by The Orca Society in Duncan, on Vancouver Island, British Columbia, Canada. The Orca Society had been instrumental in bringing to Vancouver Island two members of the original Milan group (Boscolo and Cecchin), as well as Imelda McCarthy and Noillag Byrne, and members of New Zealand's The Family Centre.

Returning from the workshop, Garth gave me White and Epston's (1990) book, saying, "Colin, you need to read these guys; they talk about all those people in your bookshelves," meaning Foucault, and cultural anthropologists, Clifford Geertz and Victor Turner, amongst others. (G. Thomson, personal communication, June, 1992)<sup>24</sup>. I read their book, and immediately began to consider ways to apply narrative therapy ideas and concepts in practice within the work we were engaging in at Peak House. In particular, I was intrigued by Epston's practices relating

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<sup>23</sup> For a thoughtful, personal, heartfelt, description and exegesis upon the work of White and Epston's narrative therapy from an insider's perspective, see Madigan (2011); for a review of Madigan's text, see Dickerson (2011).

<sup>24</sup> See Harlene Anderson (2003), as Anderson traces the influences from postmodern literary criticism and philosophy within the conception and development of a narrative therapy.

to the creation and co-creation of counter-documents, certificates, and therapeutic letter writing (White & Epston, 1990).

### **Resisting psychiatric diagnoses: Foucault's influence**

Counter-documents, as conceived by White and Epston (1990) were documents intended, among other purposes, to counter "...psychiatry's practice of 'file-speak,'" (Harre, 1985, p. 179, in White and Epston, 1990, p. 188). Harre, described the file as possessing a life of its own, writing, "'A file has an existence and a trajectory through the social world, which soon takes it far outside the reach of its subject'" (Harre, in White & Epston, 1990, p.188-189).

White and Epston (1990) continue, pointing out, "Psychiatry is by no means the only discipline that employs the file for the redescription of persons and for the presentation of the moral worth of the author" (p. 190), noting:

All of the disciplines have requirements of self-presentation and, according to Foucault (1979), the rise and spectacular success of all the disciplines have been entirely facilitated by those practices of evaluation (normalizing judgement) and documentation that enable the subjugation of persons (p. 190).

Foucault critiqued what he referred to as the dividing practices instituted by medical and especially psychiatric practitioners and institutions, most specifically in regards to ways in which suffering human beings became further subjected to demoralizing and dehumanizing medical and penal practices (Foucault, 1979, 1994).

Foucault (2006), in lectures presented during the years 1973-1974 at the College de France, spoke of what he referred to as a "...disciplinary network which rushes in where the family is failing and which, as a result, constitutes the advance of a State controlled power where there is no longer a family" (p. 85). Foucault referred to such a "disciplinary mechanism" as a "Psy-function", saying, "What I will call the Psy-function, that is to say, the psychiatric, psychopathological, psycho-sociological, psycho-criminological, and psychoanalytic function, makes its appearance in this organization of disciplinary substitutes for the family with a familial reference" (p. 85).

Early on in my own life, I had recognized the social in-justice most often associated with medical, psychiatric, practices, especially in North America (Breggin, 1991; Illich, 1975; Peele, 1985, 1989, Whitaker, 2022). Blaming the victim, blaming survivors, casting aspersions on the ways in which suffering others' attempted to resist and find meaning within their lives and relationships, was not at all a practice I could countenance and accept.

### **Further critiques of the medicalization of experience**

Reading Ivan Illich's, book, *Limits to Medicine* (1975), offered a particularly poignant critique of the encroachment upon social existence of a pronounced tendency to medicalize all experience. "Society has become a clinic, and all citizens have become patients whose blood pressure is constantly being watched regulated to fall 'within' normal limits" (p.166). Illich continues his critique, writing that within the context of this pre-dominant cultural insistence

upon normalacy, “The psychiatrist acts as the agent of a social, ethical, and political milieu” (p. 167).

As early as 1975, Illich was critiquing what he termed “the medicalization of life”, (pp. 39-124), and the “pharmaceutical invasion” (p. 63) associated with such a medicalization, which Illich goes so far as to call a form of “diagnostic imperialism” (p.76). Illich, too, drew attention to the social construction of deficit identity, writing, “All disease is a socially created reality” (p. 166).

### **Narrative counter-practices to psychiatric categories**

White’s counter-documents were intended to challenge “thin” (Geertz, 1973) descriptions and medicalized, psychiatric, descriptions and versions of personhood; to challenge practices involving labels and terminology, and to highlight the agency inherent within emerging counter narratives that “thickened” the description of a person’s identity.

Illustrations of such counter-documents appear in White and Epston (1990). These examples include a Monster-Tamer and Fear-Catcher Certificate, certifying that “Mary”

...has undergone a Complete Training programme in Monster-Taming and Fear-Catching, [and] is now a fully qualified Monster-Tamer and Fear-Catcher, and is available to offer help to other children who are bugged by fears” (p. 193).

Also included is a “Certificate of Concentration” declaring,

This certificate is awarded to [Mark] for taking charge of, and strengthening, his concentration. In achieving this, he has noticed that he has become more popular with himself. [Mark] did so well at strengthening his concentration that he even surprised himself. When other people also get surprised at how much [Mark] can now do for himself, reading this certificate will help them understand what has happened. (White & Epston, 1990, p. 196)

Further illustrations of counter-documents pertaining to practices at Peak House are included in Chapter Seven of this dissertation.

White and Epston’s (1989) first self-published book *Literate Means to Therapeutic End* appealed to me, in terms of the notion there could be co-authored and co-created documents highlighting of strengths and performances of personal agency, captured and documented as acts of resistance against deficit identities. Bruner (1986) wrote,

*Stories of literary merit* [emphasis added], to be sure, are about events in the “real” world, but they render that world newly strange, rescue it from obviousness, fill it with gaps that call upon the reader, in Barthes’s sense, to become a writer, a composer of a virtual text in response to the actual (p. 24).

### **Narrative and externalizing practices**

White and Epston's "externalizing" practices began to influence much of the work I was initiating at Peak House<sup>25</sup> in the early 1990's (Madigan, 2011; Tomm, 1989; White, 1988, 1989, 2007; White & Epston, 1990).

As described by White and Epston (1990), an externalizing practice represented "an approach to therapy that encourages persons to objectify and, at times, to personify the problems that they experience as oppressive" (p. 38). Already by the late 80's, White noted he had been using this practice for about ten years, especially in his work with families where a child had become identified with a particular problem (White, 1984, 1985, 1986a, 1986b).

White (1990) wrote that this practice of externalizing problems "Opens up new possibilities for persons to take action to retrieve their lives and relationships from the problem and its influence" (p. 39). White created what he referred to as relative influence questions (White & Epston, 1990, pp. 42-48) to map out specifically the problem's influence in the person's life, and, map the person's influence in regards to the problem. These latter questions, White (1990) found, "...bring forth information that contradicts the problem-saturated description of family life and assist persons in identifying their competence and resourcefulness in the face of adversity" (p. 45).

Karl Tomm (1993) expressed his appreciation for White's unique and radical practice of externalizing problems, explaining that:

By introducing a clear separation between the problem and the person...[White] not only averts the reactionary response that inevitably results from a protest directed against a person, but also opens up space for that same person to join him in the protest against the problem" (Tomm, p.63).

Tomm (1993) goes on to say that he finds White's externalizing conversation practice to be "...a major innovation in the field of psychotherapy" (p. 64). Such an innovation led to others beginning to make distinctions, for example, between assessing the problem as opposed to assessing the person, and creating assessment protocols from such a perspective (Madsen, 1999).

In our evolving practice at Peak House, I realized that externalizing substance use (e.g., "What sort of life does Heroin envisage for you?"; "What has Crack taken from your life?"; "Do you think Pot has stolen valuable time from you?") could be extremely beneficial in terms of re-

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<sup>25</sup> In the early 90's, I became friends with Vickey Dickerson and Jeff Zimmerman, co-directors at the time of the Bay Area Family Therapy Association (BAFTA). Their co-authored book, *If Problems Talked* (1996) provides many practical illustrations of how externalizing practices can be applied with a variety of therapeutic dilemmas. I also met Alan Jenkins (1990, 2009), of Adelaide, Australia, and his book, *Invitation To Responsibility* (1990) provided the groundwork for much of the re-authoring conversation regarding interpersonal violence exercised by young men, and the predominant, patriarchal, discourses in music and popular culture supporting violence. Jenkins work was influential as a framework to engage in such conversations with young men at Peak House.

moving pathological connotations associated with substance use away from the person, and creating an opportunity to comprehend substance use within a relational, social, context.

### **Narrative and Bateson's and Foucault's influence**

Foucault profoundly influenced Michael White. In what may have been the final interview of his life, White remarked, "...you know I must say Foucault has been the most powerful academic influence in my work" (Duvall and Young, 2009, p. 14), while Tomm (1993), wrote, "...Michael has drawn heavily from Foucault in developing a protest against the use of knowledge as power" (p. 64)<sup>26</sup>. Epston (2011) wrote,

But Michael, it was in Foucault's intellectual company that you found a vantage point from which to reflect on and critique the cultural history of the psychotherapies and their very practices. Didn't this allow you to 'think otherwise' than how you previously 'thought otherwise'? (p. xxvii)

Yet before Foucault, there was Bateson. Bateson, as noted above, was, for so many in the field of (family) therapy, initially also an enormous inspiration for White. In particular, Bateson's thinking regarding the concept of cybernetics<sup>27</sup> would provide a theoretical structure for several of White's early articles (White, 1984, 1986; cf. Madigan, 2011), as White himself moved his reading and practices beyond structural and strategic approaches (White, 1979).

Madigan (2011) reflects, "Throughout my apprenticeship in narrative therapy, I found that to move toward a fuller understanding of Michael White's therapeutic thinking, it was important for me to first figure out his relationship to Gregory Bateson..." (p. 15), and, as Madigan too realized, "...White organized his early conceptual and practice work of externalizing conversations through Bateson's notions of restraint, difference, and double-description..." (p. 15).

The history of the influence and challenges presented by White and Epston's thinking is well documented (Brown & Augusta-Scott, 2007; Chang, Combs, Dolan, Freedman, Mitchel, Trepper, 2012, 2013; Chang & Nylund, 2013; Freedman & Combs, 1996; Madigan, 2011; Zimmerman & Dickerson, 1996), for persons interested in further reading. Below, in Chapter Five, I will have more to say in regards especially to Michael White's contribution and thinking in the field of therapeutic ideas and practices.

In the following section I introduce the work of Dublin's Imelda McCarthy and Noillag Byrne, especially in regards to their therapeutic application and use of the Celtic literary metaphor of an ancient Fifth Province in which warring clans came together for the purpose of dialogue and discussion, aimed at finding ways to co-exist.

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<sup>26</sup> Tomm (1993) goes on to note how White's reading of Foucault also "...energized my critique of the *DSM* (Tomm, 1990) and my exploration of an alternative approach to psychiatric assessment (Tomm, 1991) (p.64)".

<sup>27</sup> White, of course, as with many therapists at the time, was not alone in taking up the cybernetic metaphor; see Tomm (1983); Tomm and Sanders, (1989).

## **Imelda McCarthy and Noillag Byrne: The Fifth Province Metaphor.**

I encountered Imelda McCarthy's and Noillag Byrnes' work through Chris Kinman<sup>28</sup>, who, in turn, was introduced to their work by psychiatrist, therapist and professor, Karl Tomm, with whom Chris had studied at the University of Calgary. I met Imelda and Noillag<sup>29</sup> in the early 90's, at Stephen Madigan's first or second international Narrative Ideas and Therapeutic Practices conference in Vancouver, British Columbia, Canada.

Imelda and Noillag's work immediately enchanted me. I was drawn into their work due to the poetic ways in which they described their practice, incorporating Celtic myth and other literary influences that resonated for them, particularly "the indigenous metaphor" of the Irish "fifth province" (McCarthy, 2004, p. 3), described below. Additionally, their notion of "marginal illuminations" (Kearney, McCarthy, Byrne, 1989) struck me as a particularly poetic way in which to reflect or comment upon experiences one may have within a therapeutic context.

Apart from their poetics, there was an ethical, ideological positioning evident within their work that also drew me in. As McCarthy (1995) writes, "The personal is always political in clinical work with those who are marginalized in society" (p. 148). At the time I first read this, approximately one-third of the young persons' with whom I was collaborating at Peak House were from First Nations cultures (Sanders, 2007). This ethical position spoke to me of the multiple and diverse ways in which young persons, regardless of ethnicity and cultural origin, resisted and survived debilitating, oppressive, exploitative, racist, relationships and encounters within their lives.

McCarthy (1995) in writing of the "privatizing of dilemmas", proposes:

By the privatizing of dilemmas is meant that problems, which have a large component of their origin within the social environment of the client, are localized within the personal and private domains of family life. This localizing of problems within the person or family usually implicates the individual client...in the generation of the presented problems. This removes a focus from the larger social contexts which are important in any systemic understanding of the generation of problems in situations of poverty. Privatizing the issues also further risks containing and maintaining the dilemmas within the domain of therapy and thus marginalizing clients and their concerns further. (p. 162)

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<sup>28</sup> In the early 90's, Chris had moved to Abbotsford, British Columbia, from Calgary, Alberta. Chris came by my office at Peak House one day, and we immediately made a connection, going on to co-present workshops, and to publish with one another. Chris recently told me (personal communication, April, 2013), that at the time we first met, I was talking to him about Deleuze and Guattari's concept of rhizome, while he was talking to me about the Fifth Province.

<sup>29</sup> Noillag, in her commentary upon a workshop I had just given at the "Therapeutic Conversations Conference" in Toronto, 1998, responded, "Colin, you should have been a priest"!



McCarthy's way of thinking about practices of therapy that were accountable to the person and to their relationships, practices that were mindful of the ways in which persons were made to feel individually responsible for the suffering, in-justices, and mis-treatment they experienced, called out to me.

In Chapter Six, I further describe aspects of McCarthy's re-visioning of the place of the sacred within therapeutic and community work, and her involvement with mindfulness practices (McCarthy & Vasudeva, 2002).

In the following section I describe some of the key ideas and concepts deriving from social constructionist theorists, Sheila McNamee and Kenneth Gergen; ideas and concepts that have influenced my sense of relational engagement, both in therapeutic contexts and educational ones.

### **Sheila McNamee and Kenneth Gergen**

*The past is always a story.* Sheila McNamee (2008).

Kenneth Gergen, in dialogue with Dian Marie Hosking (2007), commented:

There are many variants of the constructionist story but one that I have tried to articulate in previous writings (Gergen, 1994, 1999) involves a particular orientation to knowledge. This orientation assumes that all we take to exist, to be real, to be the subject of scientific or spiritual consciousness is constructed in relations with others...For constructionists, however, whatever there is becomes meaningful to us primarily as a result of our relationships with others. (p. 300)

When I first became interested in reading more thoroughly in regards to post-modern and post-structuralist ways of engaging with others in therapeutic conversation, one of the first books I read was *Therapy as Social Construction*, edited by Sheila McNamee<sup>30</sup> and Kenneth Gergen (1992). Several chapters in that book provided a guiding light onto other books to read, as I was particularly challenged by Lynn Hoffman's chapter ("A Reflexive Stance for Family Therapy") and William Lax's chapter ("Postmodern Thinking in a Clinical Practice"), and Harlene Anderson and Harry Goolishian's chapter ("The Client is the Expert: a Not-Knowing Approach to Therapy"). This text led me to read more by the above mentioned authors, and to read those persons whom they themselves referenced in their work.

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<sup>30</sup> In 2010, I accepted the current position I hold as Director of the Masters of Counselling Programs with City University of Seattle in Vancouver, Canada. A requirement for this position was that the candidate be enrolled within a doctoral program. Based upon the experiences of several friends and acquaintances who all received their doctorates from Tilburg University and Taos Institute, and based upon encouragement from Christine Dennstedt, Vicky Reynolds, David Epston and Stephen Madigan, I applied to Taos, and was both pleased and encouraged to have Sheila McNamee express an interest in working with me as doctoral advisor. Sheila and I finally met in Merida, Yucatan, in March of 2012, and I immediately experienced a connection.

## Relational Being, Relational Consciousness<sup>31</sup>

Social construction proposes that human beings are relational beings (Gergen, 2009), and that what constitutes human knowledge is arrived at through being in relationship, one with another. Gergen refers to the production of knowledge arising from such inter-relationship as being a “communal construction” (p. 202). Such aspects of thinking associated with social constructionist ideas returned me to Martin Buber’s I-Thou philosophy; Buber<sup>32</sup> (1958) wrote, “In the beginning is relation” (p. 18), and it is within “relation” that we come to know who we are, and are not, and through our being in relation with others we ascribe particular meanings to our actions, intentions, and purposes with one another. Again, Buber (1958) writes, “A person makes his [sic] appearance by entering into relation with other persons” (p. 62). There can exist no being, no self, without another, no “appearance” without relation, without connection, within community. In the words of poet Arthur Rimbaud, “I is another”.

In a conversation with therapist Carl Rogers at the University of Michigan, April 18, 1957, organized by Maurice Friedman, Martin Buber (1965), spoke of what he intended by “dialogue”, remarking, “...what interests me more than anything: human effective dialogue. Meaning by dialogue not just a talking. Dialogue can be silence... We could sit together, or rather walk together in silence, and that would be a dialogue” (p. 175).

McNamee (in press) proposes that: “The focus on relational processes is the hallmark of a constructionist orientation where there is a shift from examining entities (whether they be individuals, groups, organizations or matter) to attending to what we refer to as language or language processes”.

For those who adhere to a social constructionist orientation or perspective, “...language is not simply a tool or vehicle used to transmit or exchange information about reality... Rather, language is seen as constructing reality. What we do together actually *makes* our social worlds” (McNamee, in press).

Reality is not a something to be discovered “out there;” what becomes real follows from what is shared, one with another. Lather (2006) writes, that a deconstructivist perspective on reality proposes, “Reality is ultimately unknowable...[While] ‘Truths’ are socially constructed systems of signs which contain the seeds of their own contradiction” (p. 38). Being mindful of such seeds of contradiction is what inspired Jacques Derrida’s (1976) practice of deconstruction, with his unique method of reading canonical and established texts.

McNamee (2010) writes,

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<sup>31</sup> *Relational Being* is the title of a book by Kenneth Gergen (2009), while *In Talk That Sings* (2004) Johnella Bird articulates her thinking in regards to a relational consciousness.

<sup>32</sup> I am grateful to my colleague Charles Scott (2011) whose dissertation on Martin Buber I found instructive. I am also grateful for our constructive and always lively, conversations. I am indebted to Charles for alerting me to the existence of a transcript of an extremely interesting, historic conversation between Martin Buber and therapist Carl Rogers in 1957 (Buber, 1965).

The themes of social construction have long histories and are found in many literatures including feminist and other radical critiques of science, communication studies, social psychology, sociology, family therapy, critical social anthropology...and some areas of “postmodernism” and “post structuralism”. The common thread among these themes is a concern with discovering phenomenon in the “real world.” The assumption is that in our daily interactions with others, we construct the relational realities within which we live. Thus, the focus for the constructionist is on *joint action*, or *what people do together and what their doing makes* (p. 11).

Terry Eagleton (2007)<sup>33</sup>, not always a fan of post-structuralism (Eagleton, 1996) writes, “All meanings are human performances...” (2007, p. 123), continuing, “The meaning of life is not a solution to a problem, but a matter of living in a certain way. It is not metaphysical, but ethical. It is not something separate from life, but what makes it worth living – which is to say, a certain quality, depth, abundance, and intensity of life” (p. 164). Throughout this dissertation, I will return to the notion of ethics, and the idea of the meaning of life being “a matter of living in a certain way”, and of one’s ability to account for, and be accountable to, such an ethic and way of being and becoming, one with another.

McNamee (2008) writes, “Moral orders arise out of our interaction with others. They are *made not found* “. It is within our relationships with one another, in the multiplicity of domains and communities within which we live, act, perform, that moral orders take shape, and ethics emerges.

### **Johnella Bird**

Another influence for me in taking on a more relational way of understanding human meaning making and therapeutic practice came through my encounter with Johnella Bird (1994)<sup>34</sup>, a feminist and post-structuralist informed therapist from Auckland, New Zealand<sup>35</sup>. Bird writes that, in the late 1980’s, she became “...particularly assisted by a knowledge of ‘externalising the problem’ and relative influence questions...”, concepts and practices created by Michael White (Bird, 1994, p. 89).

Bird writes, “ ‘Externalising the problem’ enabled me to use a different way of talking and relative influence questions assisted me to keep listening and enquiring for instances that countered what was then called the ‘problem’ description” (p.89). Bird (1994) goes on to reflect:

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<sup>33</sup> The prolific Eagleton (1993) wrote the screenplay for the film *Wittgenstein*, directed by the late Derek Jarman.

<sup>34</sup> For an excellent description and discussion of Bird’s theory/practice, Ness (2013) and Ness & Strong (2014).

<sup>35</sup> Bird, along with David Epston, is co-founder and co-director of the Family Therapy Centre in Auckland, New Zealand. I had the honour of meeting and speaking with Johnella several times in Vancouver, where she presented at the Narrative Ideas and Therapeutic Practices, and Therapeutic Conversations conferences, over many years.

It was while immersed in clinical work that I stopped reading clinical texts. I turned my attention to what had initially attracted me to the Milan group in 1980 – the idea of engaging relationally. Throughout the next ten years I experienced the significance of the therapeutic relationship as a venue for relational experiences and for the negotiation of the meanings made of life events and experiences. (p. 89)

Ness and Strong (2014) have recently closely examined Bird's theoretical concepts, as illustrated within her therapeutic practice, paying particular attention to Bird's thinking about "relational consciousness" (p. 4)<sup>36</sup>. Ness and Strong write, "Relational consciousness is not so much about putting shared meaning to particular words as it is about recognizing that the meaning of words can be seen as outcomes of ongoing human negotiations" (p.4).

As Wittgenstein (2009) wrote, "Language is a labyrinth of paths. You approach from *one* side and know your way about; you approach from the same place from another side and no longer know your way about" (p. 88, no. 203). As Wittgenstein proposes, language, words, make sense and have meaning only in the way(s) in which they are used in everyday communication.

In therapeutic conversation with a couple, for example,

...such negotiations can break down, stabilize into meanings worth extending (or not) or become conflictual and paralyzed by partners' notions of correct meanings – their own meanings, at the expense of those taken up by their partner. Meanwhile, beyond either partner's intentions, undesired consequences can develop for their relationship. (Ness & Strong, 2011, p. 4)

I find Bird's ideas regarding therapeutic practice both relate to, and further expand upon, the ideas, concepts, and therapeutic practices of others' whose own "going against the grain" has challenged therapeutic practice as exemplified by an often oppressive, one-way, monological and expert advice giving exercise, to a more dialogical, meaningful, performance. Writing of what she refers to as "therapeutic relationship understanding" Bird (1994, p. 93) invites us to consider that, "Connection provides us with an enquiry resource beyond the language used by people to represent experience. Connection assists us to listen for intonation, emotions, body sensations, visions, dreams, the imagination and for what is partially said" (p. 93).

Bird (1994), reflecting upon her own social class position, reflects, "Privilege carries an obligation to make ourselves available to that which we don't know" (p.257), and what we don't know is legion.

I have found that by remaining attentive to and being mindful of the suffering and struggles of others and framing all the practices within which I am involved from an *ethos* of social justice is both a pragmatic and beneficial way to proceed. As a partner, father and grandfather, therapist, consultant, professor, and university department program director, I can compassionately and pragmatically, "fight the power" of the taken-for-granted, normative,

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<sup>36</sup> Shotter (2012), continuing with the "relational" imperative, writes in terms of "relational-seeing" (p.50) in his collection of essays investigating Wittgenstein.

prescriptive, beliefs, values, behaviours and teachings within the academy by continuing to offer up alternative practices and ideas.

A practice of this sort requires ongoing reflection and critical thinking. As Bird (2004) writes:

If we are interested in a living practice informed by poststructuralism, it is also probable that we are interested in ethics, justice and equality. This interest requires that we continually re-view, reinterpret and challenge our understandings. We defy the stasis that comfort generates by re-viewing the taken-for-granted and actively seeking to include those people's voices/ideas that are made invisible by processes of exclusion (p. 275).

This practice Bird is describing speaks to me of praxis, of critically reflecting upon and examining the ways in which our perspectives may be applied within our engagement with others, our "going on together".

This attention by Bird to qualities and nuances of connection beyond the expression of language, what is embodied as well as dis-embodied, leads me to the thinking of Tom Andersen. Andersen was attuned to both embodied and dis-embodied experience, and the nuances thereof. Not unlike Bird above, Andersen (1996) remained mindful of what lay back of the words, thinking that "words are like hands" (p.122-124) imagining how words can touch, and be touching, person-to-person.

Having encountered narrative therapy (White & Epston, 1990), social constructionist writings (Shotter & Gergen, 1989; McNamee & Gergen, 1992), the early work of Anderson and Goolishian (1988, 1992), and the work of The Family Center (Waldegrave, 1990), simultaneously proved useful in helping me become aware of the correspondences between theories and perspectives.

### **Harlene Anderson and Harry Goolishian: A "Not Knowing" Perspective**

Encountering Anderson and Goolishian's 1988 paper, "Human systems as linguistic systems: Evolving ideas about the implications for theory and practice" was an epiphany for me. Their thinking, as articulated within that early article, caused me to rethink how I considered the fine art, the craft, and practice of therapy. Anderson (2012) tracks the evolution of her own thinking beyond the ideas proposed and explored in their earlier paper. For myself, there remains so much within their early thinking, and poetic way of articulating this thinking, that I experience as important, and continue bear in mind within therapeutic and educational, relational contexts.

Anderson's thinking/writing on therapeutic practice is a thread woven throughout my dissertation; and within this section of this chapter I will highlight a few of the ideas I found provocative and refreshing within Anderson's early work with Goolishian<sup>37</sup>.

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<sup>37</sup> Goolishian's influence in opening up the field of (family) therapy was considerable; the book, *Therapy as Social Construction* (1992), edited by McNamee and Gergen is dedicated to

Anderson and Goolishian (1988) wrote, “Meaning and understanding are socially and intersubjectively constructed” (p. 372); “Therapy is a linguistic event that takes place in what we call a therapeutic conversation” (p. 372). I found this emphasis upon language within the creation of social meaning and discourse to be of importance in thinking about therapeutic practice. The thought of Anderson and Goolishian further contributed to my belief in therapy as a fine art, a craft, and not a science. Therapy as a craft involved being an architect of dialogue (Anderson & Goolishian, 1988), and involved an appreciation of narrative imagination in evoking a language of mind (Sanders, 1994).

Anderson and Goolishian (1988) sought to distinguish the art of therapeutic conversation from science, noting that Szasz<sup>38</sup> “...proposes that psychotherapy theory is not a science but, rather, ‘an ideology about human behaviour’ and ‘a cultural phenomenon like a religious philosophy.’ We would agree with this position...” (p. 373).

The not knowing perspective proposed by Anderson and Goolishian suggested a movement away from certainty and decisiveness within therapeutic practice. The not knowing perspective opened up space for beginning to give “voice to the voiceless” (Lather, 2006). Foucault (1980) had earlier referred to such voices as being indicative of “subjugated knowledges” (pp. 81-83). Kogan and Gale (1997) observed, “White and Epston (1990) see their function as ‘liberating subjugated knowledges and life stories’” (p. 102).

The not knowing perspective suggested that being in un-certainty, and being with ambiguity, was permissible and perhaps desired (cf. Amundson, Stewart, & Valentine, 1993). The not knowing perspective also resonated for many practitioners influenced by phenomenology, social construction, narrative therapy, and Buddhism (cf. Henley, 1995; Lawrance, 2013; Lax, 1996; Williams, 2013).

Several scholars and practitioners have noted the affinities between Zen Buddhism, phenomenology, social constructionist thinking, and narrative therapy, especially pertaining to how these perspectives view the co-creation of human identity (Flemons, 1991; Henley, 1995; Lawrance, 2013; Lax, 1996; Williams, 2013; Williams, in press).

Lynn Hoffman, in her own wondering about this not knowing practice of Anderson and Goolishian, reflects,

I once asked Harlene if they took it from the writings of French philosopher Gaston Bachelard (1964), who speaks of ‘non-knowing’ and defines it ‘not as a form of ignorance but a difficult transcendence of knowledge.’ However, I was wrong. Harlene told me that they began to use the phrase because their students would ask them their thoughts or hypotheses about clients: Why did the client do this or that? Didn’t they think the client should do x, y, or z? They would always

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Goolishian. The index indicates only Gregory Bateson receives more references than Goolishian within the book.

say they “didn’t know” and would suggest the best person to talk with about their curiosities was the client. Finally, they made a principle out of ‘not knowing,’ to the scorn and derision of many in the field (Hoffman, 2007, pp. 66-67).

It was becoming increasingly important, to me to view theoretical perspectives within the socio-cultural, socio-political, context within which they arose, but also to be mindful in regards to the languaging of experience, in the co-production of shared cultural meanings. Again, as noted above, viewing the practice of therapy as a “cultural phenomenon” grounded within ideological presuppositions permitted me to engage critically with theories, and not accept their often purported truth claims, and scientific, evidence based facticity.

Anderson and Goolishian (1988) begin to construct their philosophical perspective and therapeutic approach by acknowledging Maturana<sup>39</sup> and Varela’s work, writing, “Maturana and Varela...take the position that every human action takes place in language, and also that every act in language brings forth a world created *with others*” (pp. 377-378).

Anderson and Goolishian (1988), continuing along, acknowledge Gregory Bateson:

In a similar vein, Bateson...held that the mental characteristics of a system are immanent in the system as a whole. The mind (meaning) is not in someone’s head but, rather, in interaction. Thus, Bateson questioned the concept of an objective reality and the ordinary ways that therapists make sense of the world; he challenged us to keep in mind that, in our observations, it is more familiar and comfortable to select that which confirms our already existing beliefs. Bateson...called this new way of thinking about *ideas* an “ecology of minds” or “ecology of ideas. (p. 378).

Beels (2009) described the radical nature of this turn in the following way, “Today, we have a very different, de-centered, model of mind. Family therapists of my generation remember the seismic shift under our feet that came with Bateson’s re-location of mind in a system of interactions between communicating organisms rather than inside the brain”. Bateson’s re-location of mind in a system of interactions between communicating organisms rather than inside the brain was radically different from psychological and related perspectives that imagined there was some form of reality to be uncovered, or discovered, within the mind of a person, couple, family, team or organization.

The writer Gertrude Stein (1937) wrote, in another context, “...there is no there there” (p.298), and that may be a reasonable way to talk about the illusive “self”. That is to say, there is no-thing, no self, to “actualize”; identity is what transpires within relationship, between persons. By performing a not knowing perspective, the therapist could exist in a liminal space, a linguistic domain in which being with uncertainty and being with ambiguity was fine. This way of being, of practicing, went against the predominant psychological constructions suggesting that there were deeply rooted origins and histories to the struggles and dilemmas persons’ experienced.

## Architects of Dialogue

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<sup>39</sup> Maturana’s thinking is discussed below, in relation to narrative poetics.

Anderson and Goolishian (1988) describe thinking in terms of the therapist's engagement with others' in the following way: "The therapist is a master conversational artist, an architect of dialogue whose expertise is creating and maintaining a dialogical conversation" (p. 384). I have always appreciated the aesthetics of this description of the therapist as one who becomes "an architect of dialogue", just as I have been mindful of Anderson and Goolishian's (1998) notion of "therapeutic ethics":

As therapists, we all hold values, biases, and prejudices; and we all have opinions about people and about how all of us should or should not conduct our lives... We think of these prejudgments as opportunities. That is, they are the energy to spark curiosity and the drive to explore other ideas. To be able to take a multi-partial position requires that we are willing and ready to risk entertaining alternative opinions and meanings... Therapists must be able to let go of old meanings just as we expect our clients to be able to do so... [F]or us, the willingness to risk and undergo change is the essence of therapeutic ethics. (p. 385)

As with the narrative therapy perspective of White and Epston, and in particular Epston's desire that narrative therapy be continually renewing and resourcing itself (Epston, 2011), I found the challenge of Anderson and Goolishian, that "Therapists must be able to let go of old meanings...", extremely intriguing and transforming. Their words, their concepts, spoke to me of a dialectical, dialogical, meaning-making encounter that occurs within therapeutic conversation, or, within any conversation for that matter.

In the spirit of remaining open to new and evolving concepts, Anderson (2012) has incorporated Deleuze and Guattari's (1987) rhizome metaphor into the body of her own work, noting that a rhizomatic approach to one's practice(s) creates a "constant challenge to the status quo" (p. 12). Many practitioners of my acquaintance have taken up the rhizome metaphor of Deleuze and Guattari (1987); rhizome being another metaphor for perceiving of one's practice. In an essay on Deleuze, "Theatrum Philosophicum", Foucault (1998), thought, "...perhaps, one day, this century will be known as Deleuzian" (p. 343).

Anderson (2012) writes,

Relating the rhizome metaphor to the development and evolution of these therapies, as Norris (Bogue, 1989) suggests, developers and evolvers "impose no fixed and sedentary boundaries on a territory, but occupy a space to the extent of their capabilities and then move on... Gradually they become less recognizable, more sprawling... [their cumulative works] typically many years ahead of the academic disciplines and teaching disciplines that have obvious reasons of their own for preserving the *status quo*" (p.ix). The rhizome effect keeps these assumptions alive and fluid – living in our practices – as an evolving response to the demands of our changing world and the people we work with and thus a constant challenge to the status quo. (p. 12-13)

Anderson (2007) proposes that a social constructionist perspective on *meaning* understands that "Meanings are contingent. They are contingent on context: the relational, historical, and linguistic domains in which behaviors, feelings, emotions, understandings, and so forth are communal constructions" (p. 12). Meaning, the qualities, values, and nuances existing



and shared between persons within a context of relationship, are always subject to shifts and change, to transformation. As Heraclitus (2001) wrote, “The river / where you set / your foot just now / is gone - / those waters / giving way to this, / now this” (p. 27).

### **The Philosophical Stance: A Way of Being**

I particularly find kinship with Anderson’s (2007) perspective on the therapeutic encounter as a relationship involving mutual philosophical inquiry. Anderson writes:

The philosophical stance is an authentic and natural way of being that flows from the postmodern perspective of knowledge and language. The stance embodies a belief that communicates to the other through attitude, tone, body gesture, word choice, and timing, among other expressions, the special importance that they hold for you. It conveys to the other that they are valued as a unique human and not as a category of people; that they have something worthy of saying and hearing; that you meet them without prior judgement of past, present, or future; and that you do not hold a secret agenda such as investigative, tactic, directional, or otherwise. (p. 44)

Anderson (2007) hope is to “...distinguish my work as a ‘philosophy of life’ in action, as an approach and not as a theory or model of therapy” (p. 43). Anderson (1996) considers

...conversation – whether in therapy, in learning contexts, or in business consultations – is about helping people to access the courage and ability to “move around things,” to “have a clear view,” to achieve self-agency. The encouraging factors and aims are a particular kind of conversation – a *dialogue* – and a therapist’s expertise in creating a dialogical space and facilitating a dialogical process – a *philosophical stance*. (p. xviii)

To reiterate, Anderson and Goolishian’s 1988 paper, “Human Systems as Linguistic Systems”, initiated a turning point in theoretical developments within therapeutic practice. Their dialogical, conversational, collaborative, approach to the practice of therapeutic conversation<sup>40</sup> resonated for me. In theorizing their practice, there appeared to be an intentional, purposeful, shift towards the dissolution of the expert position of the therapist in a hierarchy of therapist exercising power over the person (client). In the perspective being proposed by Anderson and Goolishian (1988), the therapist was re-positioned as “an architect of dialogue”.

This way of being and engaging in a mutual, philosophical, inquiry within therapeutic engagement was considerably different and distinct from a therapy intent upon providing so-

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<sup>40</sup> Michael White’s comment on the concept of “therapeutic conversation” was this: “This description does have appeal, perhaps because, in part, the terms ‘therapy’ and ‘conversation’ are contradictory by definition, and ‘conversation’ goes some way towards challenging the realities constructed by, and the mystification introduced by, the term ‘therapy’. However, we are not entirely satisfied that the term conversation is sufficient as a description of an approach to the re-storying of experience, or that this term adequately represents the unique process we describe” (White & Epston, 1990, p. 14). However, White (2007), in what would be the last text published before his death, continued to speak in terms of “therapeutic conversation” (p. 5).

called expert advice, a therapy that tended to view struggling, suffering, others as possessing deficit identities, and containing pathology.

Anderson and Goolishian's (1988) consideration of deep listening for what they referred to as the un-said, and the not yet said<sup>41</sup>, struck me as being extremely different from theories and perspectives positioned in terms of certainty and confidence in the correlation between knowledge and power (Foucault, 1980). Anderson and Goolishian were opening up the field of family therapy to other more collaborative ways of engaging in therapeutic conversation, and this shift was enlightening for me as I was becoming disenchanted with perspectives that espoused the "truth" and the perspectives that found fault with the person.

Beels (2009) wrote, "The therapist's art is to examine and enlarge the creativity of the client's memory" (p. 371). While according to Giambattista Vico (1668-1744), one of James Joyce's principle influences, and a principle source for those who think/practice from a social constructionist perspective (cf. Lock & Strong, 2010), "Imagination is nothing but the working over of what is remembered" (Vico in Ellman, 1984, p.661), and what is imaginatively remembered often becomes a co-construction between persons, in addition to a co-evolving of past and present thoughts.

In the following section I discuss some of the thinking/writing of Tom Andersen, who created the original reflecting team process, but thought deeply and wisely in regards to the ways in which language contributed to relational embodiment.

### **Tom Andersen: Words are like hands**

Tom Andersen was Professor of Social Psychiatry at the Institute of Community Medicine, University of Tromsø, Norway before he died in 2007. In affinity with his friend Karl Tømm, Andersen shared a concern with the place of the body, of emotion, embodiment, within therapeutic processes<sup>42</sup>. Lynn Hoffman (2007) writes,

Influenced by the late Aadel Bulow Hansen and Gudrun Ovreberg, two well-know physiotherapists in Norway, Andersen has always placed the body at the center of his work. As a result, he is attentive to breathing; to posture; to tone of voice, as well as to his own inner and outer voices, and what is going on in his own body. (p.71)

Regarding a narrative poetics, I particularly appreciate Andersen's (2007) description of "language" as involving a multiplicity of "expressions", and his insistence on language as entailing more than "word":

Language is here defined as all expressions, which are regarded to be of great significance in the mentioned communal perspective. They are of many kinds, for instance to talk, write, paint, dance, sing, point, cry, laugh, scream, hit etc, are all bodily

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<sup>41</sup> Johnella Bird (1994) speaks of the "partially said".

<sup>42</sup> Amongst the narrative therapy literature, this concern was addressed by Griffith and Griffith (1994) in their book, *The Body Speaks: Therapeutic Dialogues for Mind-Body Problems*.

activities. When these expressions, which are bodily, take place in the presence of others, language becomes a social activity. Our expressions are social offerings for participating in the bonds with others. (p. 88)

Andersen (1996) poetically proposes that, “Language and words are like searching hands. One might say that language is a sense organ. But words are more. Like a hand, they grasp on to meanings. So, the words we select influence the meanings we come to reach” (122).

As mentioned above, Shotter and Katz (2007) referred to Andersen’s “...way of talking [as] *relational-poetic*” (Shotter and Katz, in Shotter, 2007, p.44). The relational-poetic was not confined to what is, or was, spoken; the relational-poetic incorporated a wider context of meaning; as Harlene Anderson (2012) observes, “I do not distinguish between the inherited psychotherapy concepts verbal or nonverbal. All forms are language” (p.12).

Andersen, not unlike Buber (1956) and Bahktin (1981), gave considerable thought to what is entailed by the word “dialogue”. Andersen (2012) wrote:

My wish is at the moment that we stop talking about therapy and research as human techniques, and rather talk of it as human art; the art to participate in the bonds with others. If we exclusively started to use the word ‘human art’ how would that bewitch our understanding and our lives? (p. 54)

Andersen (1996) incorporating concepts derived from the philosophy of Heidegger<sup>43</sup>, wrote,

Heidegger says that life, or in his words, being-in-the-world, is a constant search for meanings – meanings about how we can understand ourselves and our surroundings. What we thereby come to understand will influence how we relate to the surroundings as well as to those persons who are there. What we come to understand is related to what we see and hear. And what we see and hear are related to what we look for and listen to. We do not see what we do not look for, and we do not hear what we do not listen to (p. 119).

Andersen (1999) made important contributions to collaborative ways of engaging and being with others within therapeutic contexts, beginning with his “reflecting team” practice<sup>44</sup>

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<sup>43</sup> German philosopher Martin Heidegger’s *Being and Time (Sein und Zeit)* was first published following WW1 in Germany in 1927, with the first English translation appearing in 1962. Jacques Derrida (1999) has pointed out that philosopher Emmanuel Levinas was responsible for initially bringing an awareness of both Heidegger’s and Husserl’s writings from Germany into France. Heidegger’s political allegiance to National Socialism remains hugely controversial (cf. Wolin, 1993, Ott, 1988/1993), and this controversy has become renewed recently with the publication of Heidegger’s (2014) “black notebooks”.

<sup>44</sup> Karl Tomm (1993, p. 72) introduced Michael White to Andersen’s reflecting process. Andersen’s practice would, in turn, influence Michael White’s own increasingly collaborative, reflecting practice, initially referred to as “definitional ceremony” (White, 1995, p.172). In this definitional ceremony practice, White himself was incorporating a concept derived from the

(Andersen, 1991). Towards the end of his life, Andersen was thinking of such practices more in terms of what he referred to as “reflective processes” (1996, p. 120).

Tracing the evolution of his practices, Andersen (2012), in conversation with Harlene Anderson and Michael White and others, recalled, it was “One day in March 1985, when we asked the family, ‘Would you like to listen to us for a while?’ and they said, ‘Yes!’ there was a new change. We spoke without being prepared; we just spoke’ ” (p. 23). As Andersen (2012) recalled, for him the idea of therapists conversing, “without being prepared”, in front of families, not behind the mirror and out of sight from the family, had existed since 1981:

We worked the Milan way from 1978 to 1980. When we came down to the Milan group in 1981 to train with them, I thought, “Why do we leave the room when we should find out what to tell the family?” “Why don’t we rather stay there and speak out loud so they can hear what we say?” “Maybe it would be helpful for them to see how we worked, not the outcome that we found, but how we came to it” (p. 23)

Michael White (2000), acknowledging Andersen’s contributions, recalled,

The reflecting team proposal was first introduced to the family therapy field by Tom Andersen in his 1987 article “The reflecting team: Dialogue and meta-dialogue in clinical work”. This proposal has been hugely influential since the appearance of this article. It has been taken up into many domains in the family therapy field, and into other fields not just related to therapeutic endeavour, but also to community work and organizational management. (p. 71)

This way of working opened up innovative possibilities regarding therapeutic practice(s).<sup>45</sup> and this process began to further dispense with the authority of the therapist and practices of expert knowledge. Looking back upon the origins of the reflecting process, Andersen (1996) wrote,

...the reflecting processes became a solution to the hierarchical unpleasantness (Andersen, 1991, 1992). Letting our ideas about families come out in the open, as the families let their ideas come to the fore, made us more equal. The hierarchical either/or tendencies declined, and we shifted into the frame of both/and (p. 120).

This is certainly not to suggest that differences of power entirely disappeared, but the reflection process practice initiated a shift towards more of the “ordinary wisdom” that Lomas (1999) observed within family therapy practices.

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work of cultural anthropologist Barbara Myerhoff (1982, 1986). Later, in a re-vision of such practices, White began to speak of “outsider witness practices” (White, 2000, pp. 59-85).

<sup>45</sup> For illustrations of the therapeutic application of Andersen’s thinking, in practice, see Friedman (1995), and regarding innovations incorporating Andersen’s original thinking, see Reynolds (2002) and White (2000, 2007).

Both in Andersen's reflecting processes, and in White's () outsider-witness group design, the notion of creating structures to expand the audience witnessing stories and re-storying took on new meaning. Beels (2009) writes:

In psychoanalysis, the analyst plays all the parts, and in the transferences becomes all the possible audiences the patient might imagine or encounter. The focus on family therapy is not only on the story – it is also on the audience of family members, whose participation expands and enriches the story, often giving it multiple meanings. The family members are witnesses, auditors for one another (p. 371).<sup>46</sup>

The audience, those bearing witness to the therapeutic conversation, needn't only consist of family members. Friends and acquaintances of those who wished to consult could also be invited in to reflect on the stories being shared; the possibilities for whom to include as witnesses in the reflecting processes were open and endless.

### **Andersen and Emmanuel Levinas**

Andersen read widely and deeply across disciplines, and, not unlike within the thinking/writing of Laing (1960, 1967, 1970, 1971,) Laing and Cooper (1964), Deleuze and Guattari (1983, 1987), Shotter (2012) and others, Andersen too was informed by philosophers such as Heidegger, Gadamer, and Wittgenstein (cf. Andersen, 1995).

Regarding a narrative poetics, Andersen (2012) was also inspired by philosopher Emmanuel Levinas. I consider Andersen unique amongst practitioner-scholars for bringing Levinas' thought into the theory of his reflecting processes. Andersen (2012) wrote:

In the work mentioned here, it was important first to find out with the team and the family *how* we should collaborate *before* we started the collaboration. The thoughtfulness about the Other must come before the thought of what the other is. This is a somewhat 'Levinasian' idea... When Levinas opened a door for the Other he said: "*Après vous!*" and then he commented on that gesture by saying: "this is my philosophy". He preferred to put the philosophy of ethics before the philosophy of ontology. (p. 53)

Regarding poetics, Andersen (1996) made a unique contribution to the domain of therapeutic conversation in his appreciation of language as not only being words that are spoken but also being mindful regarding the languaging of the body, body language, and language as containing a multiplicity of "expressions":

The listener (the therapist) who follows the talker (the client), not only hearing the words but also seeing how the words are uttered, will notice that every word is part of the moving of the body. Spoken words and bodily activity come together in a unity and cannot be separated...The listener who sees as much as he or she hears will notice that the various spoken words "touch" the speaker differently. The speaker is touched by the words as they reach his or her own ears. Some words touch the speaker in such a way that

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<sup>46</sup> For innovative group practices explored at Peak House, based upon Andersen and White's group practices, see Reynolds (2002), and Raedke, Kitchen & Reynolds (2000).

the listener can see him or her be moved. Sometimes these movements are small, sometimes, big. The listener might see a shift in the face, a change in the eyes, a moving on the chair, a cough. The words that prompt these movements are the ones that particularly attract my interest. (p. 121)

Andersen's attention to our embodied being-in-the-world I think is worth underscoring. In this attention to not only words but also the person's bodily response as evoked by the words, Andersen shares a concern mentioned by Karl Tomm and a critique Tomm (1993) held in regards to the narrative metaphor, remarking:

Perhaps one difference between us [Michael White] lies in my tendency to place more emphasis on lived experience than on stories about that experience. It is partly for this reason that I am less invested in the narrative metaphor than Michael [White]. In my work, I give more priority to conversations than to stories. I regard a personal story as a concatenation of internalized conversations and find that the complexity of a full story renders it more distant from experience than a conversation that may be a component of the story. Furthermore, for me as a physician, it is going a bit too far to suggest that lives are constituted by stories and to say that "stories provide the structure of life." Such claims render our bodies passive and docile, a practice that Michael himself criticizes. (p. 75)

Andersen (1996) poetically describes how our relational engagement within language is both "informing and forming" (p. 122) of who we are within the world, and how it is that we are often many, our identities continually shifting and co-evolving, one with an-other. Andersen (1996) in acknowledging philosophers such as Hans Gadamer and Ludwig Wittgenstein, and literary theorist Mikhail Bakhtin, in addition to the writing and thought of his contemporary, John Shotter, observes, "My utterances constitute my many selves. We do not have one self but many selves as our utterances change" (p. 122). As James Joyce wrote in *Finnegan's Wake*, "I'm thousands. I'm an in-divide-you-all. I'm a no un (i.e., nun, no-un, no one)" (cited in Brown, 1966, p.160).

Regarding Bahktin, Andersen (1996) writes:

Bahktin takes this point further by saying that one's life is changing all the time; it is like small events tied together to a lifeline. Life is therefore 'composed' of small events, which each happen only once. This is very different from those who assume that we are stems from 'inner' or 'deeper' structures, as Freud purported. (p. 122)

Inherent within this perspective is the understanding there is no "self" to "actualize"; the so-called self, or identity of a person, being co-constructed within inter-personal inter-actions, thus an on going process. No self without the other; again, poet Rimbaud's "I is another".

Andersen also cautions us, writing, "Words are not innocent" (Andersen, 1996, p. 122), and in Chapter Seven I explore the real effects the language of deficit and the language of pathology has upon the lives and relationships of persons, further developing Andersen's cautionary statement that "Words are not innocent".

In the following section I describe aspects of Humberto Maturana's thinking in regards to human relationship and sociality in the origins of language, co-existence, and love.

### **Maturana and the biology of love<sup>47</sup>**

Reading the writing/thinking of Chilean biologist Humberto Maturana<sup>48</sup> engages me within a poetical, philosophical, experience. I once spent three days listening to Maturana talk about his ideas (Karl Tomm, a good friend of Maturana, and I sat together), which was an immensely poetic experience, shamanic really. Tomm (Collins & Tomm, 2009) noted that, "I still see Maturana as offering the best theoretical foundation that I've come across so far, for the kind of work I do" (p.14). Specifically, Tomm reflects, "...I abandoned Milan systemic work once I realized that Maturana was challenging functional thinking and used the notion of structure determinism instead. He helped me see how relationship patterns could more usefully be described as mutual invitations" (p. 14).

I first encountered Maturana's thinking in the 1988 special edition of *The Irish Journal of Psychology*, edited by Vincent Kenny, entitled, "Radical constructivism, autopoiesis and psychotherapy." Reading Maturana's work has (always) been a challenge, having to do with literally learning a new language (biology, neurology), yet the experience continues to be rewarding. In Tomm's (1989) words, Maturana is both a "biologist and neurophilosopher", and "Maturana offers an explanation for how the mind arises through human interaction and 'linguaging'. The 'mind is not the brain', it lies in the linguistic interaction among human actors. Thus, consciousness is fundamentally social, not biochemical, physiological, or neurological" (1989).

Maturana's (1988) article in *The Irish Journal of Psychology* issue is a long one. For the purposes of this introductory chapter of my dissertation, I recently revisited the article. The following points are ones I would underscore, relating, as I see it, to my own narrative poetics practice.

### **Being with un-certainty**

Maturana's (1988) essay, "Reality: The search for objectivity or the quest for a compelling argument" presents a challenge to the notion that there can exist an objectivity not influenced by the observer. Maturana's proposal reminded me of the challenge "objectivity" had presented to Karl Tomm (2000), who remarked in an interview that:

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<sup>47</sup> Francisco Varela, co-author with Maturana of *The Tree of Knowledge* (1992), was one of the organizers responsible for bringing together a variety of thinkers interested in neuroscience and cognitive psychology to engage in conversation regarding convergences between Buddhism and neuroscience, with the Dalai Lama, in October of 1987, in India (cf. Hayward and Varela, 1992).

<sup>48</sup> It is beyond the purview of my dissertation to engage in a critique of Maturana's thinking; however, for an intriguing, appreciative critique and discussion of Maturana's thinking juxtaposed to social constructionism, see Lannamann and Shotter (2006)

...being trained as a physician, I was more heavily invested in empirical ways of viewing things than some, but when I made the shift to a second order perspective I had to abandon this. Letting go of assumptions about objectivity was extremely difficult but important for me. From there, it has been a very exciting process that has led in all sorts of directions. (p. 28)

In regards to narrative poetics and “the praxis of living” (Maturana, 1988, p. 26), Maturana proposed several seminal ideas. “We human beings operate as observers, that is, we make distinctions in language” (p.26), and these distinctions created in language are *relational* distinctions. Maturana (1988) continues, “Indeed, everything said is said by an observer to another observer that could be him – or herself...and the observer is a human being. This condition is both our possibility and our problem, not a constraint” (p. 27).

In a section of the essay entitled “The real”, Maturana (1988) further proposes, “...the reality we live depends on the explanatory path we adopt” (p. 40), yet another distinction; writing:

...if we do not accept our interlocutor totally, or we want to assert our position, or we are certain that we are right, or we want to force the other to perform certain actions, we explicitly or implicitly claim that what we say is valid because it is objective (that is, founded on objective reality), that we know how things really are, that our argument is rational, and that the other is objectively wrong and cannot ignore it. (p. 40)

I find Maturana’s work extremely relevant to relational inquiry within the domain of therapeutic conversation, though certainly not exclusive to this domain, as his ideas are also important for me in terms of my activity as a collaborative, and appreciative leader (Whitney, Trosten-Bloom, & Rader, 2010) within a university, and my pedagogical practices in my interactions with students, and others. Maturana (1988) writes, “...the kind of reality that we live as a domain of explanatory propositions, reflects at any moment the flow of our interpersonal relations and what sort of co-ordinations of actions we expect to take place in them” (p. 41).

This concept of “...the flow of our interpersonal relations” and how intentional and purposeful these flows are, resonates for me, in all domains of my existence. This flow is what matters, and what makes sense, and what I, along with those others with whom I choose to, or have to, inter-act, would consider meaning-full. This relationship, this flow, may also approximate what the Buddhist monk Thich Nhat Hahn (1999) refers to as inter-being. Thus “meaning” is always a negotiated meaning and agreed upon understanding, an understanding distinguished and shared thoughtfully within language; even if, at the end of the conversation, we touch one another, or make other bodily gestures, depending upon the context and with whom we are engaged in conversation.

Maturana (1988) writes, “We human beings live in cognitive communities, each defined by the criterion of acceptability of what constitutes the adequate actions or behaviours of its members” (pp. 60-61). Such “cognitive communities” do not emerge in a random, or a taken-for-granted way, but rather are intentional and purposeful.

Tom Andersen writes of persons possessing a *social voice*:



What one is saying is carried by a social voice. This voice reaches out to be received, and it is crucial that it is received, responded to and returned. We think that we have many social voices to be used in relation to different persons in different contexts. These social voices that evolve early in life, are intimately connected to all the inner voices we have that participate in our inner, personal talks. These inner voices, that are developed from the outer, social voices are 'born' later in life than the social ones, [and] are constantly active in the inner talks. Inner talk is for me the same as to think. (p. 215)

## **Ethics and Love**

*I take this use of the word 'spirit' to here refer to 'ethos'.* Michael White (2000, p.168).

*Language is love.* Robin Blaser (2006, p.506)

It seems to me that in his thinking and his writing reflecting upon his thinking, Maturana was also thinking about ethics, accountability, and transparency and honesty between human beings. This thought returned me to the thinking/writing of Laing (1967), who, reflecting upon Frantz Fanon's work, wrote:

Exploitation must not be seen as such. It must be seen as benevolence. Persecution preferably should not need to be invalidated as the figment of a paranoid imagination, it should be experienced as kindness. Marx described mystification and showed its function in his day. Orwell's time is already with us. The colonists not only mystify the natives, in the ways that Fanon so clearly shows, they have to mystify themselves. We in Europe and North America are the colonists, and in order to sustain our amazing images of our selves as God's gift to the vast majority of the starving human species, we have to interiorize our violence upon ourselves and our children and to employ the rhetoric of morality to describe this process. (p. 49)

Maturana (1988) goes on to write, "We human beings happen in language, and we happen in language as the kind of living system we are. We have no way of referring to ourselves or to anything else outside of language" (p .43). Language is constitutive of, and within, relationship, and therefore "Words are not innocent..." (Anderson, 1996, p.122). Words possess intentions and and connotations. Language, being inextricably embedded and woven within a matrix of knowledge and power correlates, as Foucault's (1972, 1980a, 1980b, 2000, 2003, 2006) multiple texts describe and trace, requires close attention.

Language itself, contingent upon its articulation, can represent a form of violence or violation. In my work at Vancouver's Peak House this notion began to take on particular meaning for us, relative to how we, as practitioners, conversed with participants within the community of Peak House.

## **Summary**

In the chapter above I have described the thinking/writing of several elders within the domain of therapy whose ideas and practices I have integrated within a practice of narrative poetics, and a poetics of resistance, with the intention of moving away from the prescription and ascribing of identity as opposed to engagement within a relational aesthetics of engagement.

## CHAPTER THREE

### NARRATIVE POETICS IN EVOKING A LANGUAGE OF HEART AND MIND

*I consider poetry as one of the most important components of human existence...Poetry should be prescribed like vitamins.* Felix Guattari, (1995, p.10).

*The story that you tell and are is you but is not your own.* Robert Bringhurst, (2006, p.176).

#### Introduction

At the first international Narrative Ideas and Therapeutic Practices Conference, in Vancouver, Canada, in 1993, I presented a paper (Sanders, 1995) entitled, “Narrative imagination in evoking a language of mind”, with a commentary by Bill Lax. This chapter is a re-visioning of that paper.

In this chapter, I revisit some of the innovative ideas that inspired me in the early 1990’s. In particular, I return to ways in which narrative imagination co-evolves within human communities, and the ways in which stories of identity become co-created within the space between us. My thinking/writing in this chapter flow from my attention to, and further reflections upon, the wisdom of the elders referred to and described within Chapter Two.

In this chapter, I will also introduce and describe some key ideas and concepts relating to a narrative poetics of resistance, especially in terms of epistemology, and relational ideas associated with the construction and performance of identity.

Gregory Bateson (1972), in the text of his thought provoking presentation, “Form, Substance, and Difference”, delivered January 9<sup>th</sup>, 1970, at the Nineteenth Annual Korzybski Memorial Lecture, remarked that it was “William Blake, who knew that the Poetic imagination was the only reality. The poets have known these things all through the ages, but the rest of us have gone astray into all sorts of false reifications of the ‘self’ and separations between the ‘self’ and ‘experience’” (p. 463).

A decade previous to Bateson’s observation regarding Blake, Gaston Bachelard (1969) reflected that, “The psychologists do not know everything. Poets have other insights into man [sic]” (p. 125). While Breton (1995), in dialogue with Richard Kearney, remarked, “...a poetics of imagination is an indispensable dimension of genuine thinking” (p. 248), going on to say, “Poetry celebrates *that* the world exists; philosophy asks *why* the world exists” (p. 257).

Sheila McNamee (2000) proposes, “To talk of the poetic is to give wing to the imaginative”. McNamee continues:

Yet all of these associations with poetry or the poetic are couched in the image of inner reflections of the artist. It is the poet who plays with language, with interpretation, with imagery. It is in juxtaposition to this portrait of the poet, the poem, the poetic that I embrace the move toward a *social* poetic. Here we move rapidly from the interior of the

poet or the particular poetic moment to the relational nexus from which all meaning emerges. No longer are we strapped with a view of the lonely poet or that difficult to capture moment we call poetic. Rather, we recognize that the “genius” of the poet and the ineffability of the poetic moment reside in the discursive resources that have been generated within relationships. Our resources emerge from our communities, from our negotiated ways of coordinating our actions within local moments.

Gadamer (1995) remarked in an interview, “Without poets there is no philosophy” (p.27) while I find the philosophy of Plato, Nietzsche, Heidegger, Derrida, Agamben, Kristeva, Irigaray, reads as poetry.

Bateson and Bachelard have been particularly inspiring for me within my praxis over the decades that I have been a therapist, professor, and Director of a Master’s in Counselling program. The notion proposed by Bateson, Bachelard, and Gadamer, amongst others, suggesting that engaging around poetry and poetic, narrative, imagining is imperative when I consider therapeutic conversation, especially. The notion that a poetic, narrative imagination<sup>49</sup> has inspired, or may inspire therapeutic practices, has been enormously sustaining for me over the years, especially in regards to theorizing descriptions of how I comprehend and articulate the practices within which I engage alongside others. McNamee (2000) writes, “The world can only be ‘imagined’ in language; that is, in what we do together”.

Anderson and Goolishian (1988), described the therapist as “...a master conversational artist, an architect of dialogue whose expertise is creating and maintaining a dialogical conversation” (p. 384). For me, within the therapeutic work itself, it seems that the capacity to envisage a different future, other possibilities, alternative stories, speaks to the imaginative imperative, what I am referring to as narrative poetics. Anderson and Goolishian’s (1988) thoughts regarding listening for the “un-said”, and the “not-yet-said” also fit here, as it is imagination that allows for the un-said and the not-yet-said to become iterated within a “relational nexus” (McNamee 2000).

Again, McLeod (1997) writes:

There are no new therapies. It is inconceivable that anyone could now devise, or be trained in, a supposedly ‘new’ therapy without being aware of the multiplicity of therapeutic concepts and practices already in existence. Even ideas that may seem novel in the context of therapy literature are in fact drawn from broader and richer cultural traditions. Claims to originality in the therapy field can only be made through ignorance of sources. (p. xx)

McLeod’s intention is not to minimize “new” theoretical developments, but rather to draw attention to the continuities, and dis-continuities, and the affinities, shared amongst seemingly different theoretical perspectives. As discussed more specifically in Chapter Eight, all theoretical therapeutic perspectives are discourses embedded within specific ideological

perspectives; as such, in practice, the perspectives informing the therapist's ways of engaging with others will have real effects.

For this reason, it is worth highlighting that, as common factor (Hubble, Duncan & Miller, 1999) research demonstrates, the theoretical perspective and technique(s) employed by a therapist accounts for less than 15% of what is of benefit to the person in evolving in a preferred way, or, in creating new meaning within their lives and relationships (Asay & Lambert, 1999, p.39), while the relationship between person and therapist accounts for 30% (Asay & Lambert, p.33). This research highlights that beneficial therapeutic conversation and shifts in one's life and relations with others accrue from the relationship *between* the therapist and the other person. It is within the dialogue between the person and the therapist that dilemmas become dissolved (Anderson and Goolishian, 1988) and shifts in (new) meaning occur.

As Kenneth Gergen (1992) writes:

The challenge for the postmodern therapist is not to uncover the mysterious unknown or to apply the techniques of reason and objectivity, but to make creative and helpful use of the relationships that therapist and client bring to the session. Are there specific rules for achieving this generative conversation in therapy? Certainly not from a postmodern standpoint. Conversation is, after all, a cooperative process. Neither therapist nor client can have an effect on the other unless both allow themselves to be affected. (p. 57)

McLeod (1997) goes on to observe:

But at the same time every therapy is a new therapy...[and] each therapist brings to his or her work a repertoire of personal experience and values. Therapy models are integrated into a personal world-view and style, and the contact with the client is in the end a 'personal' one (Lomas, 1981). (p. iv)

Relationally speaking, common sense was the "difference that made a difference" (Bateson, 1972, p. 381). The "just therapist" practitioners of New Zealand's The Family Centre write:

Effective therapy, in our view, should reflect simplicity! It does not of necessity involve complex knowledges or processes, otherwise most societies before the advent of modern science would not have been able to resolve their families' problems. In essence, the therapy we offer finds its expression in the movement in meaning from problem-centered patterns, to new possibilities of resolution and hope. (Waldegrave, Tamasese, Tuhaka, & Campbell, 2003, p. 7)

In my view, a narrative poetics seeks to do just that, co-create "new possibilities of resolution and hope". Again, in the research cited above, persons' who have experienced therapeutic engagement suggest that the principle quality that they have found of utility in such therapeutic conversation is the experience of creating a sense of hope, an experience evocative of having hope instilled for the facilitation and movement towards transformation and different meanings. Important too, is the acknowledgement of those seeking therapeutic conversation in noting the human relationship and the interpersonal experiences between therapist and person

(cf. Snyder, C.R., Michael, S. T., & Cheavens, J.S., 1999). I will have more to say regarding “hope” in the final chapter of the dissertation.

### **Co-research, and Insider Knowledge**

As a practitioner, I believe it imperative to adhere with care and consideration to the words persons use to describe their experiences, and come to clarity regarding the specific meaning(s) such persons ascribe to the words they use. I believe, too, that being attentive to the etymological derivation of words in their shifting meanings, their rhizome migrations (Deleuze & Guattari, 1987) provides an opening for imagining lives and relationships free from the restraints and nets associated with dilemmas or problems that impede one’s sense of belonging with others’, and one’s sense of a preferred identity. For example, suggesting in therapeutic conversation that the word “despair” derives from the Latin, *de-spiritus*, to be without spirit, often evokes intriguing conversation.

Hillman (1975) wrote, “out of psyche-pathos-logos came the meaning of suffering of the soul, or the soul’s suffering of meaning” (p. 71). Within my own narrative poetics, narrative praxis, Anderson and Goolishian’s (1988) original idea of therapeutic conversation has proven liberating as a means of thinking about, reflecting upon, and being in an open dialogue with others, many of whom are indeed struggling with a suffering of the soul and/or mind, in relationship to others within the context of their lives. Maturana’s (1996) thoughts on the “biology of love” in the co-creation of language also enter in here.

### **Collaborative knowing in the dis-solution of cultural assumptions**

As referred to above, Stephen A. Tyler<sup>50</sup> (1986) was amongst a group of cultural anthropologists (cf. Clifford & Marcus, 1986), who, in the 70’s, began to give much thought to the ways in which ethnographic texts may become more representative of, and authentic collaborations between, the person of the anthropologist and the persons whose cultural narratives were trying to be comprehended; in other words, ways in which such texts may be less ethnocentric and less evaluative of others’ cultural values and traditions. Mutual philosophical inquiry (Anderson, 2007) requires that practitioners be committed to engaging in dialogical, not monological and hierarchical, therapeutic conversation (cf. Bahktin, 1981). To engage with others within therapeutic contexts in any other way, as Tomm (1990, 1992) has pointed out, results in the imposition of our own values and beliefs onto others’, whether advertently, or inadvertently, thus constituting a form of therapeutic violence.

Hubble and O’Hanlon (1992) referred to such an imposition as a form of “theory counter-transference”, in which the client’s perspectives and meanings do not fit with the therapists’, leading to the therapist experiencing a “hardening of the categories” (p.25).

Cultural anthropologist, daughter of Margaret Mead and Gregory Bateson, Mary Catherine Bateson (1987) noted, “We worry in anthropology about the difference between what the ethnographer perceives and what the natives perceive, about how well our descriptions *fit*

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<sup>50</sup> Tyler is also the author of *The Said and the Unsaid: Mind, Meaning, and Culture* (1978).

their reality” (p. 186). Similarly, many of us share just such ethical concerns in regards to the ways in which engagement with others’ proceeds within therapeutic practice. Accordingly, one significant movement within theory associated with therapy, has been this shift towards further recognition of the relational, social constructionist, perspective on meaning making and meaning communities. As Bakhtin observed, “Life by its very nature is dialogic” (Bakhtin cited in Gergen, 2009, p. 250). The way we engage, predominantly, is within language, through language. In the words of philosopher Charles Taylor (1989):

There is no way we could be inducted into personhood except by being initiated into a language... So I can only learn what anger, love, anxiety, the aspiration to wholeness, etc., are through my and others’ experience of these being objects for *us*, in some common space. (p. 35).

Such a perspective, by no means consigned to any single theory, imagines therapeutic practice as involving “The creating of space for, and the facilitation of a dialogical conversation” (Anderson & Goolishian, 1988, p. 385). As envisaged within a narrative poetics, this “space” engages with the notion of sacred space, a notion discussed further in Chapter Six. Taylor (1989) writes, “Perhaps the most urgent and powerful cluster of demands that we recognize as moral concern the respect for the life, integrity, and well-being, even flourishing of others” (p. 4) which certainly holds true as an ethical principle informing my therapeutic practice, leading me to Emmanuel Levinas’ reflections upon the face of the other and the ethical imperative to be hospitable.

### **Narrative poetics, fragments, and the co-construction of meaning**

*Tis all in pieces, all coherence gone.* John Donne.

Hubble, Duncan and Miller (1999) indicate, “Dating from the 1960s, the number of psychotherapy approaches and theories has grown approximately 600%... Although the actual figures vary among observers, it is estimated there are now more than 200 therapy models. Techniques associated with the various models exceed 400... (p. 6).

The abundance and variety of perspectives set me reflecting upon the patterns, relationships and inter-relationships, traversing theories. This reflection reminded me of the question posed by Gregory Bateson (1979), “What pattern connects the crab to the lobster, and the orchid to the primrose, and all four of them to me? And me to you? And all the six of us to the amoeba in one direction and to the backward schizophrenic in another? (p. 8)

It also set me thinking on the multitudes in-forming and composing our identity; as Deleuze and Guattari (1987) wrote, “The two of us wrote *Anti-Oedipus* together. Since each of us was several, there was already quite a crowd” (p. 3). Their observation further reminded me of one of James Joyce’s (1939) characters in *Finnegans Wake* who proclaims, “I’m thousands. I’m an in-divide-you-all. I’m a no un (i.e., nun, no-un, no one)” (cited in Brown, 1966, p. 160).

All of these reflections indicate the relational multiplicities informing identity, and the multiplicity of storied voices abiding within us. Some of these voices are subjugated (Foucault, 1980), some dormant, some awaiting resurrection, some suggesting that we are otherwise than who we would prefer to be. Following Bakhtin, Anderson (2007) writes, “A narrative never

represents a single voice; the narrator is a multiauthored polyphonic self” (p. 16), and Tomm (1993) put it this way, “*I regard a personal story as a concatenation of internalized conversations* [emphasis added] and find that the complexity of a full story renders it more distant from experience than a conversation that may be a component of the story (p. 75). While Gregory Bateson (1972) “...propose[d] a new way of thinking about ideas and about those aggregates of ideas which I call ‘mind’. This way of thinking I call the ‘ecology of mind,’ or the ecology of ideas” (p. xxiii).

Tomm’s description of “...a personal story as a concatenation of internalized conversations”, finds affinity with Bateson’s (1979) thought, “mind is social”, and with many of the ideas associated with Bakhtin and Vygotsky informing a social constructionist view on how meaning arises, and new meanings emerge, dialogically.

Bakhtin (1981) himself spoke of “...the openended present” (p. 7), describing the open ended present as being “...a living contact with unfinished, still evolving contemporary reality” (p. 7), of life and the narratives composing one’s life as a constantly moving and shifting of relationships and experiences, and the narrative threads and co-creation of meaning and understanding.

Vygotsky, as Kenneth Gergen (2009) has indicated, “...challenged the dominant view of isolated minds” (p. xviii), citing Vygotsky’s famous line, “‘There is nothing in mind that is not first of all in society.’ Thus, for example, what we call thinking is a private rendition of public conversation” (p. 78).

I have often been struck by Marx’s insights into the social, relational context of what we would now call human identity. In a line of thought I assume influenced Vygotsky, Marx and Engels (1970) wrote, “Consciousness is therefore from the very beginning a social product and remains so as long as men [sic] exist at al. Consciousnes is at first, of course, merely consciousness concerning the immediate sensuous environment and consciousness of the limited connection with other persons and things outside the individual” (p.51). Marx (and Engels) appear contemporary in stating, “Life is not determined by consciousness but consciousness by life” (p.47).

### Summary

In this chapter, I have introduced and described some key ideas and concepts relating to a narrative poetics of resistance, especially in terms of epistemology, and relational ideas associated with the construction and performance of identity.

In the following chapter, I introduce and describe Andersen’s (1996) notion that language is never neutral, nor “innocent”, in regards to diagnosis, deficit identity, and a narrative poetics of resistance concerned with preferred identities.

## CHAPTER FOUR

### NARRATIVE POETICS OF RESISTANCE: LANGUAGE IS NOT INNOCENT<sup>51</sup>

In this chapter, my intention is to further elaborate on Tom Andersen's (1996) proposal to consider the notion that "language is not innocent". I offer a brief critique of how diagnostic categories may contribute to the construction of deficit identities, by which I mean identities represent "thin descriptions" (Geertz, 1973) of a person; descriptions promoting of a medicalized, psychiatrized, and often pathological story of the person, a narrative often perpetuated and further shaped and informed by what Harre (1984) referred to as the "file-self" versus the "real-self" (p. 70).

No doubt, there exists a considerable literature critiquing normative, prescriptive, dividing practices and language within the domain of therapeutic practice, and thinking about this practice (cf. Frank, 1979). I am writing this chapter in order to situate some aspects of the historical antecedents critiquing the notion of psychological "normalcy" (e.g., Jackson, 1967/2010), as it is my experience that many students of the field, and experienced practitioners, remain often enough unaware of this history.

In this section, I discuss how the languaging of human dilemmas can become experienced as a rather thin description of a person's identity, and, in some ways, can create significant restraints and barriers for the person. To be clear, although I often think this is quite deliberate within medical, psychiatric, and psychological constructs, I believe that such therapeutic violence can also occur, as Tomm et al (1992) point out, both inadvertently and advertently. Tomm et al indicate that, "If therapists are not mindful of the possible effects of the distinctions they introduce, they inadvertently contribute to more pathology" (p. 122).

As noted above, Ivan Illich (1975) wrote of diagnostic imperialism and more recently Diane Cole (2010) in her review of the book, *Crazy like us: The globalization of the American psyche*, used the term "psychiatric imperialism".<sup>52</sup> Perceiving a person who is experiencing a struggle or dilemma within the context of their life and relationships in a diagnostic way can quickly lead to adopting a pathologizing position with the person.

I became especially influenced by, and found support for my own thinking on diagnostic categories, by the tri-alogue between Kenneth Gergen, Lynn Hoffman and Harlene Anderson (1996), regarding alternative discourses to psychiatric labels and practices. Further support would soon arrive with the critique of such oppressive medical and psychiatric practices by

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<sup>51</sup> See Andersen's (1996), "Language is not innocent" chapter, in Kaslow (Editor), *Handbook of Relational Diagnosis and Dysfunctional Family Patterns*, p. 122).

<sup>52</sup> Thanks to David Epston for bringing this book to my attention (cf. Epston, 2011).



Whitaker (2002). It seemed to me that most of these critiques themselves derived from the example of Foucault, particularly his *History of Madness* (2006).<sup>53</sup>

As suggested throughout this dissertation, I propose there exist more affinities and similarities than differences amongst postmodern, poststructuralist influenced and informed theories and their related, collaborative, de-centered practices. One area in which there is considerable agreement and convergence is in regards to the medicalization of social problems and human relationships, and in locating the etiology of pathology within persons, not within inter-relationships within social contexts. As noted earlier, McCarthy (1995) has written, “The personal is always political in clinical work with those who are marginalized in society”, noting:

By the privatizing of dilemmas is meant that problems, which have a large component of their origin within the social environment of the client, are localized within the personal and private domains of family life. This localizing of problems within the person or family usually implicates the individual client...in the generation of the presented problem. This removes a focus from the larger social contexts which are important in any systemic understanding of the generation of problems in situations of poverty. (p. 162)

Concern with the continually increasing medicalization of social life and relationships, as represented for example within the 5<sup>th</sup> edition of the *Diagnostic and Statistical Manual* (2013), has long been active within some communities. As indicated above within this dissertation, Ivan Illich (1975) critiqued and cautioned against “diagnostic imperialism” (p. 76). Social psychologist, Stanton Peele (1989), particularly in his book, *Diseasing of America: Addiction Treatment Out of Control*, wrote of the proliferation of diseases and disorders manufactured and constructed by professionals invested in expert knowledge, and professionals who largely chose to ignore the social context influencing human suffering.

Robert Whitaker (2002, 2010), in his books *Mad in America: Bad Science, Bad Medicine, and the Enduring Mistreatment of the Mentally Ill*, and *Anatomy of an Epidemic: Magic Bullets, Psychiatric drugs and the Astonishing Rise of Mental Illness*, has also contributed a thorough and exacting critique of the relationship between pharmaceutical companies in the search for often elusive pharmacological solutions to socio-cultural, socio-economic related human dilemmas.

Within the history of ideas informing therapeutic practice across disciplines, there have been numerous others who have also shared this perspective; practitioners and thinkers as disparate as Szasz (1961, 1970, 2007), Deleuze and Guattari (1983, 1987), Laing (1960, 1964a,

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<sup>53</sup> Regarding confluences and convergences between thinkers contributing to my narrative poetics, it is interesting to note it was Laing who was asked to review Foucault’s *History of Madness*, (2006), submitted to Tavistock Press for their series on “Existentialism and Phenomenology”. Laing wrote in his “Reader’s Report”, “This is quite an exceptional book of very high caliber – brilliantly written, intellectually rigorous, and with a thesis that thoroughly shakes the assumptions of traditional psychiatry” (in Foucault, 2006, frontispiece).

1964b, 1966, 1967), Illich (1975), Hillman (1974), and many of the founders of family therapy associated with the Mental Research Institute (MRI) at Palo Alto (Jackson, 2010, de Shazer (1982, 1984, 1985), Strong (2012), amongst others, have all offered their own critique of the tendency to medicalize all aspects of social life. These are but a few of the many practitioners sharing in the belief that labeling, diagnosis, and over reliance upon psychomarmaceutical treatments represent a flawed tradition within healing traditions.

### **Critiquing “Normalcy”**

Don Jackson was a psychiatrist, a prolific author, and a co-founder of the journal, *Family Process*. Jackson wrote (2010), “The myth of normality has an insidious influence, not only for those unfortunates who are judged insane, but on the lives and attitudes of us all” (p. 74).<sup>54</sup> Jackson laments the growing tendency of the medical perspective to classify all human behaviours, especially in regards to what is normal and what is abnormal. “We now live in an era of classification in which labels are sought for all human activities. This kind of classification is part of our attempt to simplify life and build reassuring fences around the perimeters of experience” (Jackson, 2010, pp. 74-75). Jackson (2010) refers to this tendency as “reductionist thinking” (p. 75), and continues, writing, “As a student of the family for many years, I think it is safe to say that there is no such thing as a normal family any more than there is a normal individual” (p. 77). Jackson (2010) continues, noting that:

Thomas Szasz says that mental illness is a myth, whose function is to disguise, and thus render more palatable, the bitter pill of the moral conflicts in human relations. He states that what we have are problems in living together, and not poor mental health. The problems are biological, economic, political and socio-psychological. (p.78)

Jackson (2010) concludes his reflection on “the myth of normality” by writing, “I submit that there is no such animal as the normal person” (p. 78).

Gergen and McNamee (2000) suggest “...diagnosis...invites us into patterns of stigmatizing, blaming, desecrating traditions, deteriorating relationships, and disempowering people”, and they speak of a “disordering discourse” proposing that, as with any discourse, “To participate [within the discourse] is to accede to the values of the community in question”, this being a very important point for any one interested in shifting the predominant discourse associated with so-called mental health and addictions practices, for instance. McNamee and Gergen (1992) write, “The mental health profession is not politically, morally, or valuationally neutral. Their practices typically operate to sustain certain values, political arrangements, and hierarchies of privilege” (p. 2).

Tom Andersen (1996), as noted above, wrote in regards to “language not being innocent”, and we have seen, in the work of Linda Coates (1997), Coates, Bavelas & Gibson (1994) Coates & Wade (2003), Wade (1995, 1997, 2002, 2007) and others just how, in fact, language can be utilized to render accountability for interpersonal violence invisible.

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<sup>54</sup> Jackson originally wrote this paper in 1967; the paper was published in the journal, *Medical Opinion & Review*, 3(5).

In regards to alternative ways of comprehending diagnostic categories and their implications within the relationships and identities of persons, Karl Tomm (1993) considered Michael White's practice of "externalizing the problem" to be a radical way around locating pathology within persons. As Tomm (1989) observed, "The medical model and *DSM III* also support this assumption. [That] 'The mental disorder is in the person'".

### **Summary**

In this chapter, I have briefly presented some critiques in regards to the diagnostic languaging of a person's experience. In particular, I have described how, for many, comprehending experience through diagnostic language, diagnostic categories, can represent a person's identity as one involving absence and deficit, not presence, relationships, assets and strengths.

In the following chapter, I further describe the thinking/writing of Australian therapist, Michael White, a co-founder, with David Epston, of what has come to be known as a distinctly narrative therapeutic perspective in the field (White & Epston, 1990).

White's ideas and practices are important for myself (and others') due to the attention White paid to providing not merely a challenge and critique to the pathologizing and marginalizing practices in therapeutic practice, but also due to the practices he created (or co-created) to facilitate preferred identities rather than deficit identities, and problem saturated (White & Epston, 1990) identities.

## CHAPTER FIVE

### NARRATIVE POETICS AND AN APPRECIATIVE CRITIQUE OF MICHAEL WHITE

*We have only just scratched the tip of the creative iceberg in what might be possible in narrative therapy.*

Madigan (2011, p.155).

#### Introduction

This chapter offers an appreciative critique and *homage* to Michael White and David Epston's thinking and practices, regarding narrative therapy (White & Epston, 1990). In this chapter, I emphasize that White and Epston did not wish for their ideas and practices to become, a unifying approach; both were against the notion of creating a "school" following from their thinking and practices.

In this chapter, I also introduce Epston's (2011) invitation that it is time to move narrative therapy "beyond Foucault". I describe the influence upon a few colleagues of mine who were initially influenced by the ideas of White and Epston, in regards to where they have moved within the context of their practice and theoretical thinking, these days.

These innovative developments in practice by no means dilute the ideas, concepts, and perspectives initiated and developed by White and Epston, but rather further enhance and build upon their original work. This is the sort of collaboration initiated and encouraged by White in his lifetime, and especially by Epston following White's death in 2008.

I cannot underestimate the influence their thinking has had upon my own work, especially in the early 1990's, as I came to construct and articulate practices I was initiating at Peak House in Vancouver, as a poetics of resistance. The non-pathologizing perspective of White (and Epston) was paramount within the practices associated with a poetics of resistance. As Hoffman (1995), observed, "White and Epston's book *Narrative Means to Therapeutic Ends* broke upon the shores of family therapy in 1990, and the field has not been the same since" (p. xii).

When asked in an interview, "So where did this idea of story come into being for you?" White responded, "I was initially introduced to the idea by the work of Gregory Bateson" (White, 1995, p. 13). Bateson (1979) wrote, "A story is a little knot or complex of that species of connectedness that we call relevance" (p. 13). As such, a story may represent a "difference that makes a difference" (Bateson, 1972, p. 381); however, as Waldegrave (1990) points out, not all stories we have regarding our identities are beneficial or useful.

The re-authoring ideas and practice of White and Epston continue to present a challenge within the academy, and within communities of practice, in much the same way that the relational research ideas and practices of McNamee, Gergen, Anderson and others confound academics and practitioners embedded within quantitative ways of thinking.

Never one to stop reading/thinking/writing, White himself moved beyond Bateson, locating in Michel Foucault's writing a useful analysis of power relations that had utility for the de-centering practices White thought were important in allowing for more transparency and collaboration between practitioners and the persons consulting with them.

### **Michel Foucault and Michael White**

*Maybe the target nowadays is not to discover what we are but to resist who we are.*

Foucault

Regarding Foucault, White (2000) remarked, "...I have a longstanding engagement with his ideas" (p. 164). One decade earlier, in the first paragraph of the first chapter of the first book he co-authored with David Epston (1990), White wrote:

The discussion of theory includes some of Michel Foucault's thought on power and knowledge. Michel Foucault was a French intellectual who described himself as being an 'historian of systems of thought,' and we believe his work to be of great importance (White and Epston, 1990, p.1).

Some years later, White (1997), in an essay regarding "Professional discourses" noted:

Michael Foucault's (1973b, 1979, 1980, 1984) work has always been very influential in my understandings of these technologies. This influence is evident in much of what I have written in this section on professional discourses. Foucault is best known for spirited deconstruction of the truth discourses of contemporary western culture, and of the practices of power and the technologies of self associated with these discourses (p. 126).

Such acknowledgement can leave no doubt regarding the centrality of Michel Foucault's thinking upon the theory and practice of narrative therapy for Michael White.

Following White's death in April of 2008, his friend, Christian Beels (2009) noted of White and Epston that these two "social workers from Down Under" (p. 365) "...had a theory, [that] came from a broad reading of contemporary interpretive anthropology", adding that "...their principal philosophical mentor is Michel Foucault" (p. 370).

Madigan (2011) writes that "Any attempt at learning the primary theoretical understanding of narrative therapy practice can benefit from a brief review on a few of Michel Foucault's ideas" (p. 40), noting that "Epston and White appropriated, reshaped, and mapped out many of Foucault's ideas onto the foundational practices of narrative therapy understanding..." (p. 40). In his research, Madigan (2011) notes, "The first reference I have come across of a narrative therapist highlighting the work of Michel Foucault was a keynote address David Epston gave for the Australian Family Therapy Conference on September 24, 1983, in Brisbane, Australia" (p. 40).

Following White's death, in her paper, "The legacy of Michael's reading of poststructuralist French philosophy", his colleague and friend, Maggie Carey (2010) wondered

about where Michael's reading, writing, thinking, and practices may have migrated, given his interest in the writing and thought of Gilles Deleuze, for example. Carey writes,

Gilles Deleuze was vitally interested in how we might become 'other than who we are', if 'who we are' is constrained by unhelpful ideas, by ways of thinking that are controlled by forces of dominance or practices of marginalization. From Todd May's book, *Gilles Deleuze: An introduction* (2005), we have a paraphrasing of the question that Deleuze poses:

How many of us ask ourselves, not once and for all time, but frequently and at different times, how might one live? How many of us embrace that question, not only in our stories but in our actions, our projects, our commitments? How many of us open the door to the possibility that, however we are living, we might live otherwise?

This question will be familiar to those who have heard Michael, over all the years that we knew him, saying, 'How might we invite people to become other than who they were at the beginning of our conversations?'

Years ago, I wondered where White's ideas and practice may migrate to, especially in regards to his reading of philosopher Gaston Bachelard (Sanders, 1995). Epston (2011) also noted the correspondence between Bachelard's influence upon White, extending an invitation to have narrative theory catch up with contemporary time, writing:

Michael, don't you think we have to turn to poetics for this? After all, your words were at times mesmerizing, and it was no surprise to me that you drew upon Bachelard (1958/1994) and the aesthetic metaphor of 'transport' as images for your narrative practice. (p. xxvi)

Deleuze and Guattari (1994), building upon a comment by Foucault on the qualities that distinguish a "great philosopher" from others, wrote, "It is true that we cannot imagine a great philosopher of whom it could not be said that he has changed what it means to think; he has '*thought differently*' [emphasis added]" (p. 51). I suggest that such a distinguishing quality applies to White's unique narrative therapy theory and practice; White, too, thought differently. His thinking regarding the place of problems within a person's existence was different from how others within the domain of therapy thought. His belief in the reservoir of know-how, knowledge, and wisdom possessed by a person was foundational to his further belief that the remembering and recognition of know-how could provide the agency necessary to ignite within a person the confidence and power to move forward, to act out a unique resolution to the struggles and doubts amid which they found themselves.

To be sure, in regards to polemical, academic, debate, theories and practices claiming kinship with postmodern and poststructuralist thought have experienced their share of critics and detractors (cf. Held, 1995), but I am not interested in entering into an exegesis upon this critique, and only wish to register its existence within the literature. I am more interested in being mindful of the appreciative critiques, observations, and insights of practicing therapists whose own work has been influenced and enhanced, or challenged, by the *praxis* of narrative therapy, and I am

especially interested in the practices of narrative informed therapists, as they shape the work in their own unique manner. In this chapter, it is my intention to highlight some of these appreciative critiques which others, myself included, have offered up as proposals for further dialogue and discovery (Sanders and Thomson, 1994).

### **Michael White's "Courage to Protest"**

Karl Tomm was the first person to bring White to speak to a Canadian audience regarding his practice, in the 1980's. Tomm was also responsible for introducing White to the reflecting team ideas and practices work of Tom Andersen, described above (Tomm, 1993).

In a response to White's paper, "Deconstruction and Therapy", Tomm (1993) writes, "For me, one of the most admirable things about Michael is his courage to protest that which he considers oppressive and unfair," (p. 62), going on to write, "What I find fascinating about Michael's protest is the extraordinary stamina he displays in maintaining a protest" (p. 63). Indeed, White demonstrated remarkable resilience in his adamant resistance to normative, prescriptive, therapeutic traditions that elevated the therapist over the person seeking consultation. Tomm (1993) notes the influence of Foucault within this protest, writing:

As many are aware, Michael has drawn heavily from Foucault in developing a protest against the use of knowledge as power. Among other things, Foucault (1979) discloses how professionals have been entitled by our culture to use their scientific knowledge to specify the personality or character of persons by diagnosing and classifying them. This can be extremely impoverishing for such persons because of the totalizing effects of such labeling and the exclusion practices that accompany the labels. I have found Michael's application of Foucault to protest certain professional practices quite inspiring. To some extent it energized my critique of the DSM (Tomm, 1990) and my exploration of an alternative approach to psychiatric assessment (Tomm, 1991). (p. 64)

Tomm's critique of narrative therapy consists in identifying some critical points of departure that exist for him regarding the text analogy within narrative theory, observing, "Perhaps one difference between us lies in my tendency to place more emphasis on lived experience than on stories about that experience", adding further, "...for me as a physician, it is going a bit too far to suggest that lives are constituted by stories and to say that 'stories provide the structure of life'. Such claims render our bodies passive and docile, a practice Michael himself criticizes. (p. 75)

Others have offered their own respectful appreciative critiques of narrative therapy. Interviewed by David Denborough, Imelda McCarthy (2000) remarked:

There is also a dilemma I have with narrative therapy. I love the whole thrust of this way of working, but one of the things that I see occurring is that when students begin to externalize, it is possible for them to concentrate only on the larger societal discourses and miss some of intricacies at the more local level. Problems are located as existing between the individual and the larger social situation or dominant narratives in society, and less emphasis is sometimes placed on the middle range of human networks that people live within (p. 26)

## Beyond Foucault

In the following section of this chapter, my intention is to describe some of the ways in which colleagues of my acquaintance who consider themselves narrative therapists have incorporated theory from other domains into their therapeutic and community development practices.

Jeff Zimmerman (1996), a narrative therapy inspired practitioner working at the Bay Area Family Therapy and Training Association (BAFTTA) in San Francisco, first met Michael White through Karl Tomm, in 1986. According to Jeff's recollection, at the time, White "was reinterpreting Bateson and falling out of chairs" (Personal email communication, 2013) in his enthusiasm for the stories clients were recounting to him in therapeutic conversation. What Zimmerman considered refreshing within the field of family therapy at the time, was White's application of some ideas from Foucault's writing/thinking. Zimmerman remarked, "And I was so very attracted to the politics, which underlined [White's] thinking" (Personal email communication, 2013).

Zimmerman notes that for years before encountering White and Epston's work, he had been involved with Milan style therapeutic practice, and was influenced by systemic, strategic, and structural therapeutic theory and practice. Bringing politics into the context of a therapeutic perspective offered a different perspective, one more fitting with other aspects of his life at the time. Zimmerman further observed that, "As I carried the...identity of hippie radical in the late 60's/early70's, and was involved with some of the antiwar resistance going on, Michael's emphasis on dominant cultural specifications, and the way these [specifications] shape problems, spoke to me personally, and was a refreshing change from even the family pathologizing that was going on at that time".

Barbara Baumgartner (Baumgartner, 2010; Williams & Baumgartner, 2014), now practicing social work in Brisbane, Australia, was also intrigued by ways in which the narrative therapy of White and Epston refused to engage in further alienating and marginalizing already suffering others'. Baumgartner (B. Baumgartner, personal communication, May, 2013), in response to my question, "Describe what initially enchanted you regarding narrative theory, as co-created by Michael White and David Epston (1989, 1990)", responded with the following:

What enchanted me about narrative therapy was 'the person is the expert' ethic. I had been working in the area of sexual violence and was reading trauma informed approaches to assessment and counselling; all of which stressed the importance of eliciting a person's trauma story in a precise and perfect way that did not cause them harm... When I started to read narrative ideas around 'trauma', it was a big relief, because [narrative work] didn't focus on me the counselor knowing it all.

Baumgartner (B. Baumgartner, personal email communication, May, 2013) goes on to mention that, upon reflection and having the benefit of time, she also realized the challenge presented by narrative therapy to counsellor training, and educational ideas and perspectives, writing:



In hindsight, I can see that I was also very influenced by the discourse that was circulated in my Master's program, that a counselor had to be "finished" with all their own personal growth work and their family of origin 'issues' before practicing as a counselor.

Scott Lawrance, poet, therapist, and professor, responding to the same question noted above, wrote that he considered it was "the 'story' metaphor altogether" that caught his attention when initially introduced to the narrative therapy of White and Epston. The textual metaphor resonated for Lawrance, and the "sense of living/enacting life as embodiment of multiple stories, with some (more 'preferred') lurking in the shadows cast by the dominant and dominating (more, temporarily, powerful)". Perhaps not surprisingly for a poet, "the importance of language (words, grammar, syntax) in shaping experience" was also liberating (S. Lawrance, personal communication, May, 2013). Lawrance goes on to write about the importance of questions within this process:

And further to that, that questions could be shaping of experience (that possibility richly unfolded further through Karl Tomm's [1986a, 1986b, 1987] paper(s) on interventive questioning...[with] Foucault in the background here, shaping and providing context for the discussion and practices – in particular, the options of self-surveillance as articulated by David and Michael's reflections of Foucault's use of the panopticon. (S. Lawrance, personal communication, May, 2013)

Both Lawrance and Brian Williams (Williams & Baumgartner, 2014; Williams, 2014), while continuing to identify with the ideas and practices first associated with White and Epston, have incorporated Buddhist principles within their fields of practice. Both also have an interest in the suffering not only of human beings, but of all sentient beings as well, Bateson's (1972) *creatura*.

Williams<sup>55</sup> notes that once introduced to narrative therapy,

The best way for me to describe my initial engagement is a sense of relief. I'd been involved with radical activism throughout my 20's and 30's in the areas of animal rights, anti-globalization, anti-patriarchy, and community-building work. When I got to grad school I felt like many of my values had to be backgrounded in order for me to feel safe – or at least be accepted. Many of the more individualistic/psychologically-oriented models did not feel like a fit. So when I encountered narrative therapy, with its emphasis on social justice, accounting for socio-political context, and deeply respectful, non-blaming approach, I felt like I could finally engage authentically and be myself within a therapeutic framework. (B. William, personal email communication, May, 2013)

Williams notes that within his practice these days he is paying attention to the writing of Zen teacher and ecological activist, David Loy's (2010), *The World is Made of Stories*. Lawrance informs me that he, too, is paying more attention to environment and to ecology noting, "Narrative practices [are] part of...both a resistance to the given and reclaiming of the possible, as much as anything is still possible in the face of the ongoing assault by Leviathan!"

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<sup>55</sup> I was one of Brian's professors in his Master's program, as was Vikki Reynolds.

(S. Lawrance, personal communication, May, 2013). Here, Lawrance is alluding to the imposition, coercion, and “invisible violence” (Freire, 1996) exerted by the state, highlighting the need for a radical ecotherapy (Fisher, 2002) and related community activism. As Gregory Bateson (1972) had early on observed, “The unit of survival is *organism* plus *environment*. We are learning by bitter experience that the organism which destroys its environment destroys itself” (p.483).

Regarding convergences between both narrative therapy and social constructionist ideas, similarities between Buddhist notions and narrative therapy beliefs regarding the self and identity have been commented upon by others (Henley, 1995; Lax, 1996; Williams, 2013). Kenneth Gergen (2007), in dialogue with Dian Marie Hosking, observed:

For me, it is this emphasis on the constructed world that forms an initial bridge to much Buddhist thought. I recall my initial excitement with Buddhist ideas when I encountered its deep suspicion of the taken for granted concepts through which we understood the realities of the world and self. The work of Suzuki (1973) and Watts (1957) was most inspirational to me, and *in significant ways these ideas launched me toward a constructionist conception of psychology* [emphasis added] (p. 303).

Narrative therapist Bill Lax (1989, 1991, 1992), who lives in Vermont, U.S.A., likewise reflects that, “beginning in the early 70’s I had been influenced by Eastern philosophy and religion, particularly Buddhism, and its emphasis on non-self.” Encountering narrative therapy, Lax notes, “While this has many different interpretations, narrative with its ‘storied emphasis’ mirrored these [Buddhist] beliefs. There was no specific reified person or self to be found, discovered, or gotten ‘in touch with.’” (B. Lax, personal communication, September, 2013).

Lax subscribes to a Batesonian both/and, not one or the other, perspective regarding Foucault’s ideas and his own interest in Buddhism, noting:

I still have some connections to the ideas supported by Foucault. His perspectives on social/cultural discourses continue to help me keep issues of diversity in focus and address issues of power and privilege. They allow me to maintain a focus on the influence of larger cultural discourses on the problems that we all face. However, the influence of Buddhism and Buddhist psychology and practice, and the rise of mindfulness-based practices in psychotherapy, has been a stronger influence on my current work (B. Lax, personal communication, September, 2013).

### **Open heart, open mind, in regards to theoretical perspectives**

*Narrative therapy, as I understand it, is not associated with some global proposal about how things should be.* Michael White, (2000, p.170)

Michael White and David Epston together eschewed ownership of the theory and the practices evolving in the name of narrative therapy. Collaborative in their intentions, both White and Epston warned against the inherent theoretical and political dangers of promulgating yet another theory positioning itself as holding truth claims other theories did not. Prior to *The Family Therapy Networker* (re-branded as *The Psychotherapy Networker*), article proclaiming a

“third wave” (O’Hanlon, 1994) in family therapy, White and Epston (1992) had already let it be known that:

We have been steadfast in our refusal to name our work in any consistent manner. We do not identify with any particular “school” of family therapy, and are strongly opposed to the idea of our own contribution being named as a school. We believe that such a naming would only subtract from our freedom to further explore various ideas and practices, and that it would make it difficult for others to recognize their own unique contributions to developments in this work, which we regard to be an “open book”. (pp. 8-9)

White and Epston appeared aware of the inherent danger associated with taking any one perspective too seriously, a danger associated with adopting any unifying perspective to the exclusion of all other perspectives. Such theoretical rigidity may, following Bakhtin (1981), lead to a monological, not dialogical, way of engaging with, and comprehending, others.

As Lock and Strong (2010) indicate, “monologues are non-responsive and singular ways of conveying meaning” (p. 93), while “...dialogue refers to a mode of engagement between people who are responsive to each other’s communications” (p. 93). I believe this sort of dilemma not only occurs between persons in relationship, but also can occur in the relationship a person is having with a particular theoretical perspective or ideological belief. I have also witnessed and experienced such a dilemma within organizations when ideas or practices representing change are met with monological allegiances and responses running the continuum from confusion to dissension.

White always perceived of his own practice as a project based upon a reflexive process, one involving ongoing reflection and critique. Indeed, in re-searching for this dissertation, and in re-reading White’s work in particular, I became struck by a new appreciation for this reading/thinking in terms of what he, along with David Epston’s co-influence, initiated within the dialogues regarding therapeutic ideas and their practices. Yet they remained within collaboration, and, as Epston indicates in the introduction to White’s (2011) posthumous book, only weeks following White’s death they had scheduled time together and Epston had amassed new articles and books for them to consider, in his desire to shift narrative therapy theory into a contemporary context.

As with any outstanding creative collaborative effort (think Lennon/McCartney, Jagger/Richards, Garcia/Hunter), the distinctiveness and uniqueness of each author can be traced within the landscape of the work. Michael and David were fellow travelers, yet often enough travelled off in distinctive ways, following up on their own unique domains of fascination, and enchantment. In this, it could be said they enjoyed their own “sparkling facts” (White & Epston, 1990, p.76) of discovery regarding narrative imagination.

## Narrative Therapy and an “Open Field” Poetics

Perry Anderson (1998) notes that poet Charles Olson was, after historian Arnold Toynbee, one of the first intellectuals to refer to the concept of the “post-modern”:

Charles Olson, writing to his fellow-poet Robert Creeley on return from Yucatan in the summer of 1951, started to speak of a ‘post-modern world’ that lay beyond the imperial age of the Discoveries and the Industrial revolution. ‘The first half of the twentieth century’, he wrote soon afterwards, was ‘the marshalling yard on which the modern was turned to what we have, the post-modern, or post-West. (p. 7)

I find Olson’s sense of an open field poetics analogous to the approach White and Epston crafted from their own wide-ranging reading across disciplines, and the manner by which

White and Epston continually sought to explore and expand their theory/practice. When asked to describe how he himself perceived of his practice, White (1995) responded saying:

Well, as I wouldn’t define it as an approach, it is hard for me to really talk limitations in the usual way. Is this work better defined as a world-view? Perhaps, but even then this is not enough. Perhaps it is an epistemology, a philosophy, a personal commitment, a politics, an ethics, a practice, a life and so on... (p. 37)

Anderson (1998) points out that the themes taken up by Olson “make up a *comlexio oppositorum* unlike any other”, noting that Olson was, not unlike Gregory Bateson, “A fierce critic of rationalist humanism – ‘that peculiar presumption by which western man has interposed himself between what he is as a creature of nature and those other creatures of nature which we may, with no derogation, call objects’ “ (p. 11), suggesting that:

Olson could seem close to a Heideggerian sense of being as primal integrity. Yet he treated automobiles as domestic familiars in his verse, and was the first poet to draw on Norbert Wiener’s cybernetics. He was much attracted to ancient cultures, Mayan or pre-Socratic, regarding the birth of archeology as a decisive progress in human knowledge, because it could help recover them. But he saw the future as a collective project of human self-determination – man as ‘prospective’. Anaximander lay at one end of his imagination, Rimbaud at the other. (Anderson, 1998, pp. 11-12)

Not unlike the poet Olson, Beels (2009) brings attention to both White and Epston’s desire to remain open to ongoing influences, inspirations, enchantments, ideas, and practices, within their work, given that the co-authors of narrative therapy theorized their endeavours as being an “open book”, as noted above. This willingness to position one’s self as remaining open to further shifts and transformations, in theory and in practice, is an ethic others have also highlighted.

Following White’s death, Peggy Sax (2011) wrote, “...I believe Michael increasingly sought cross-fertilization between narrative practice and constructionist approaches” (p. 102), while White’s friend and colleague, Maggie Carey (2010) recalled that White “...expressed great

excitement at reading the post-structuralist French philosophers and in the last few years of his life, drew many ideas from Gilles Deleuze into his thinking about narrative practice”.

Kenneth Gergen (2011) suggested that “...Michael White’s narrative therapy has been emblematic of the constructionist shift in therapy...[though] not all of White’s views are shared by constructionists”. Gergen (2009) wrote, “Narrative therapy is outstanding in its sensitivity to the way in which meaning is molded in relationship. Therapists understand that life narratives are born within relationships, and that such relationships may be lodged within institutions and the mass media” (p. 300). For Gergen, what matters is how the experience within therapeutic conversation is carried over into the person’s public life, life outside the therapy room (Gergen refers to this as “carry-over”).

Here narrative therapists make a significant contribution in the form of *definitional ceremonies*. The therapist and client invite a group of carefully chosen witnesses from outside. These may be, for example, family members or close friends of the client. After hearing the client tell his or her newly emerging story, the witnesses are asked to talk about what in the story they were drawn to, what images were evoked, what personal experiences resonated with the story, and how their lives were touched by it. In effect, the re-storying now enters directly into the client’s outside relationships. (Gergen, 2009, p. 300)

Michael White borrowed the notion of “definitional ceremony” from anthropologist Barbara Myerhoff (1982). As White noted, the intention of such definitional ceremonies, including alternative, counter-documents, was intended to “...signal the person’s arrival at a new status in the community, one that brings with it new responsibilities and privileges” (White & Epston, 1990, p. 191). Again, this definitional ceremony innovation and development was about fomenting a wider cultural audience for the person’s re-storying of their life and relationships<sup>56</sup>.

As anyone who has read White and Epston’s (1990) first book would realize, a distinctly narrative therapy was constructed from not only the philosophy of Foucault, the narrative psychology of Jerome Bruner and Rom Harre, the ever-questioning sociology of Goffman (1961, 1974), the ritual, symbolic, anthropology of Turner (1969, 1974, 1986), the interpretive method offered by Geertz (1983, 1986), the cybernetic and many subsequent ideas of Bateson (1972, 1979), and as described above, the definitional ceremony of Myerhoff (1982), and many other influential ideas.

The narrative therapy theory/practice of White and Epston incorporated multiple influences from multiple disciplines. Narrative therapy, eclectic in drawing from multiple sources, was conceived of as an ethically accountable practice; a practice remaining open to critique, commentary, and change. This is not to suggest “anything goes”, and White (2000) himself remarked, in response to reactions against therapies influenced by post-structuralist

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<sup>56</sup> For further elucidation tracing the development and refinement of definitional ceremonies within White’s practice, see White, (1997), pp.93-114, (2000), pp.59-85, (2007), pp.165-218.

thinking, “I don’t believe that anything should go unquestioned. I would feel highly uncomfortable if anything that I say, write or do, that has the potential to influence others, was to be considered exempt from being questioned” (p.169).

What White proposed within his work, appears to me to involve thinking, writing, and practicing in a dialectically engaged, reflective, and reflexive manner. All, and any, theoretical perspectives, regardless of the disciplines within which they arise, will always of necessity be restrained by the ideology within which their *praxis* has become formed and embedded. Theory arises within particular ideological constructs and socio-economic, socio-political, and socio-cultural structures. Cushman (1995) wrote, “Each era has a predominant configuration of the self, a particular foundational set of beliefs about what it means to be human” (p. 3). Ian Hacking (1999) writes, “Ideas do not exist in a vacuum. They inhabit a social setting. Let us call that the *matrix* within which an idea, a concept or kind, is formed” (p. 10).

### **Narrative Inquiry Revisited**

*No guru, no method, no teacher.* Van Morrisson (1986)

The narrative metaphor as a methodology inviting and celebrating of co-research between client and therapist (or, consultant and team/agency/program/institution/corporation etc) was indeed unique. Such a practice required that the practitioner place in abeyance much of their own ideas, biases, so-called foundational notions, and related taken-for-granted cultural knowledges, and ways of being, as a prelude to entering into therapeutic conversation. White (1995) conceived of the process in this way: “This [narrative] metaphor requires that the therapist challenge his/her settled certainties. S/he can’t know, in advance, what’s “right” for people – can’t even know how the family “should” look at the end of therapy. The narrative metaphor challenges totalizing practices” (p. 66). This way of inquiring, thinking, and reflecting upon about practice presents a challenge for many in the field, and for many entering the field, especially students. For myself, as for others who chose to have their practice influenced by these narrative ideas as espoused by White and Epston, it was exactly this intentional challenge to totalizing practices that intrigued me. Inherent within this view, as described above, was the work of Foucault.

In this respect, I very much view White and Epston’s work as being engaged, and remaining an open field of thinking and doing, not at all a closed structure or closed system.

Twenty years ago, following the first “Narrative Ideas and Therapeutic Practices Conference” in Vancouver, Canada in 1993, three scholar-practitioners provided the following cautionary perspective:

At the conference we were afraid that for some participants, these emerging and highly creative narrative approaches to family therapy were running the danger of taking the place of ‘the last best things’ and, placing itself in historical succession to other ideas or as over-arching concept to house previous, less than adequate modernist offerings. Instead of situating the ideas within a post-modern critique which would transcend these strivings after truth, narrative ideas seemed to be in danger of evolving into just another

‘language game,’ just another story claiming to be the whole story. (Amundson, Stewart, & Parry, 1994)

At this same conference, the Australian therapist Vanessa Swann (1993) cautioned against what she referred to as a “narrative fundamentalism”.

In re-engaging with White’s writings for the purpose of this dissertation, I have come to know him in a different respect. I was never close to White in the manner of friendship that I share with David Epston, for example. The quality friendship and connection with David for over 20 years is considerably distinct and differs from my acquaintanceship with White. I was always wary of becoming a part of a following of anyone, recalling Bob Dylan’s line, “don’t follow leaders”. I intentionally never made the journey to Adelaide to study with White, nor did I have much enthusiasm to write too much, publish widely, or go out on the travelling workshop circuit. As Vickey Dickerson once said to me, “Colin, you’re the least ambitious person I know”.

There was a period when White faced the negative accusation that he was “...a charismatic family therapy guru...” and that persons attending his workshops were “disciples” (Spellman, in White, 2000, p.169). White’s (2000) response was,

The charisma thing I don’t relate to... [A]s for ‘disciples’, ‘followers’, ‘converts’, ‘devotees’ and so on, I have heard these descriptions and have seen them in writing. I agree with you that the tenor of these descriptions is negative. They negatively construct the people who attend these workshops, and negatively construct my purposes (p.169).

To reiterate a point made above by White, “I don’t believe that anything should go unquestioned. I would feel highly uncomfortable if anything I say, write or do, that has the potential influence others, was to be considered exempt from being questioned” (p.169).

Writing this dissertation has provided an opportunity to re-read, and to re-think, much of White’s writing. This re-engagement has proven beneficial in recognizing just how innovative and unique the contribution of White, and Epston, has been within the field of therapy.

Re-engagement with White’s writing/thinking has also provided me with an invigorating and deep appreciation of his remarkable intelligence, erudition, and gracefulness.

McNamee (2012) further developed (cf. McNamee, 2004) her own cautionary thoughts regarding narrative therapy and the inherent dangers of insisting too rigidly upon the *purity* of one’s theory as opposed to being *promiscuous* within theories (McNamee, 2012). McNamee (2012) writes, “When we talk about therapy as a social construction we are not emphasizing a particular technique or method but rather a way of talking about therapeutic process”, and given this belief, “Therapy as social construction is a conversational process. Narrative is one elaboration of this and there are many other options as well”. In her keynote address, McNamee imagines that, “Narrative, solution focused – even cognitive-behavioral therapy or psychoanalytic therapy – *all* become *potentially* viable and generative ways of relationally engaging with each other as well as with our clients”.

Epston (2011) in his emotionally moving and intellectually refreshing introduction to White’s posthumous writings, written in the form of a letter to Michael, expresses the fact he had

become “interested in bilinguality...and the politics of translation” (p. xxxi)<sup>57</sup>, addressing White and wondering,

I know whenever we talked about our books being translated into other languages, we would first marvel at the wonder of it, but then we would speak more soberly about our concerns around the export of knowledge. Would narrative therapy turn out to be like any other global brand? Or was it possible to ‘acculturate’ narrative therapy practice to the culture, politics, and material circumstances of its recipients? If so, would these ‘border crossings’ lead to mutation, if not transmogrification? By the way, *transmogrification* means to transform in a magical and surprising way. And could that be one of the means by which narrative therapy continually renews itself? (p. xxxi).

For me, this concept of *transmogrification* represents a marvelous illustration of narrative therapy’s becoming re-visioned, seeking renewal, within the innovative practices of persons who, not unlike White and Epston, have read, or practiced, “outside the discipline” of therapy.

Dickerson (2011), in discussing Madigan (2011) observes,

Because of his conviction that a narrative approach is a map of understanding, not just a set of practices, Madigan devotes a major portion of his discussion to the history and theoretical assumptions of a narrative approach. Along with Madigan, I believe that to learn narrative ideas, one must become familiar and comfortable with the thinking. The poststructural understanding that informs a narrative metaphor (Dickerson, 2010), and the commitment to a political social justice approach, seem to be exactly that which draws many students to this work and thinking. (p. 562)

## SUMMARY

In the above chapter I have outlined my appreciation for the thinking/writing of Michael White, particularly highlighting the ways in which White sought to facilitate preferred identity within a relational manner, while eschewing normative and prescriptive identity constructions.

In the above chapter, I have also briefly described the practices and thinking of some of my colleagues who have moved beyond Foucault, relative to the integral influence Foucault had upon White’s initial conception of a narrative therapeutic perspective.

In the following chapter, I attend to the thinking/writing/practices of persons seeking to return notions of the sacred to the realm of therapeutic contexts and what I refer to as an aesthetics of engagement.

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<sup>57</sup> For intriguing descriptions and developments within this area, see polanco, (2010, 2011) and polanco & Epston (2009).



## CHAPTER SIX

### NARRATIVE POETICS AND RE-VISIONING THE SACRED

*Call the world if you please 'The vale of Soul-making. Then you will find the use of the world'.*

John Keats (Letter to George and Georgina Keats, April, 1819).

#### Introduction

In this chapter, Chapter Six, I introduce aspects of the thinking and practices associated with the place of the sacred in what I am referring to as narrative poetics, and, in certain contexts, as a poetics of resistance. There exist many threads within this tapestry of a narrative poetics, and particular notions of the sacred run throughout. Some of those threads will be highlighted here.

For me, this chapter is important overall, in that I consider the sacred to be the ethical groundwork from which a aesthetics of engagement proceeds. Such a form of engagement requires patience and compassion, perseverance, and commitment.

In this chapter, I describe the therapeutic perspectives of others' whose ideas/practices have inspired and influenced my own philosophy and understanding, in practice, of therapy as a sacred act, a form of bearing witness. These others' have had an enormous and significant influence upon my work, informing and forming (Andersen, 1996), practices that evolved at Peak House, described in Chapter Seven.

In his foreword to Hoyt (1998), social constructionist theorist Kenneth Gergen proposed an "expanded dialogue" on constructive therapeutic ideas and practices that had hitherto become marginalized or subjugated within the field of therapy, writing:

This expanded dialogue should also include voices otherwise marginalized by the therapeutic establishment. I think here especially of the teeming number of therapists whose practices are nourished by the discourse of spirit, love, and God, and yet who are unable to gain legitimacy in speaking of these matters. These therapists represent rich and significant traditions within the culture. (Gergen, 1998, p. xx)

Writing a decade later, Gergen (2009) remained committed to this expanded, "open dialogue", writing, "It is not enough for the scholarly community to smugly view religious traditions as havens of mythology. If scholarly work is to make a significant contribution to the culture that sustains it, open dialogue is imperative" (Gergen, 1998, p. 352). Open dialogue can lead to the mutual co-creation between persons' of transparency and an ethics of accountability, one to the other. In the following section, I describe how this ethic is conceived and furthered in the work of New Zealand's The Family Centre, an agency in which Maori, Samoan and Caucasian community workers and therapists work together.

## **The Family Centre: Belonging, the Sacred, and Liberation**

Waldegrave, Tamasese, Tuhaka and Campbell (2003) in a description of their “just therapy” practices, provide an illustration of the marginalization seeking to disappear sacred, cultural, experiences, noting:

In our experience, dreams, feelings, prayers, and ‘other-worldly’ experiences are an essential aspect of therapeutic conversation experienced with most Maori and Samoan families. This is often disregarded, considered irrelevant, or, worse still, treated as evidence of naivety and ignorance by therapists. (p. 20)

In the early 1990’s, I was delighted to come upon the work of The Family Centre, of Lower Hut, New Zealand (Waldegrave, 1990, Waldegrave, Tamasese, Tuhaka, & Campbell, 2003). In 1991 I attended a workshop The Family Centre presented in Vancouver, Canada, and was profoundly encouraged with the ways in which Kiwi, Flora, Wally and Charles framed the therapy they were doing as a “just therapy” practice, a therapy informed by social justice, but also a therapy that paid particular attention to the significance and the meanings inherent within metaphors invoked within diverse cultural traditions.

Inspiring too was the manner in which The Family Centre integrated ritual and ceremonial practices within their practices, including their training. For example, the workshop opened with a Samoan prayer, and an acknowledgement of the indigenous territory on which their workshop was taking place. A significant contribution accruing from their work was their emphasis upon the trinity of belonging, the sacred, and liberation (2003, p. 75).

The example of The Family Centre, flowing from dialogues I have enjoyed with Kiwi and Charles over the past two decades<sup>58</sup>, provided me with the impetus and courage to forge ahead with philosophical, organizational, and structural changes in practices I initiated and implemented at Peak House.

The Family Centre (2003) has described their “just therapy” practice in the following way:

We have chosen three primary concepts that characterize our Just Therapy approach. When assessing the quality of our work, we measure it against the interrelationship of these three concepts. The first is *belonging*, which refers to the essence of our identity, to

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<sup>58</sup> Upon the occasion of our second meeting together, in the early 90’s in Vancouver, I spoke at supper one evening with Charles regarding my interest in liberation theology, especially the work and example of Ignacio Martin-Baro (1994). I also told Charles of the seminar I attended in the early 70’s with Daniel Berrigan, S.J., (Paul Simon’s “radical priest” in “Me and Julio Down By The Schoolyard”) and how Berrigan’s discussion regarding the Gospels as tracts for social justice had been an enormous inspiration for me as a young person, struggling as I was with Catholicism, but reading Dorothy Day’s (REFS) *The Catholic Worker* (which my parents regularly received), and searching for what was progressive and just within the practices of some priests, nuns and so on.

who we are, our cultured and gendered histories, and our ancestry. The second is *sacredness*, which refers to the deepest respect for humanity, its qualities and the environment. The third is *liberation*, which refers to freedom, wholeness and justice. We are interested in the inter-dependence of these concepts, not one without another. (p. 75).

Relating to the sacred, The Family Centre described their understanding of spirituality within their practices in this way, writing, “Another metaphor we often use is that of spirituality. By spirituality, we are not referring to Christian institutionalism, but to something more akin to the sacredness of life or ‘soul’ as in soul music” (Waldegrave et al, 2003, p. 75).

### **Negotiating Hope and Despair: Imelda McCarthy and Noillag Byrne**

Imelda McCarthy and Noillag Byrne’s ideas and practices also provided inspiration to perceive of the practice of therapy not only as mutual philosophical inquiry, but to comprehend therapeutic engagement as representing a sacred act; as Noillag Byrne points out, as a form of “communion” (in McCarthy, 2004, p.7) and being with others.

McCarthy (2004) writes, “When we listen to the storied lives of our clients we are constantly challenged to place our ‘selves’, our stories and our constructs at risk so that we can be open to receive their gift of soul baring” (p.12). McCarthy and Byrne themselves have written extensively regarding their own influences in the formation of their work, particularly in regards to their utilization of the metaphor and myth of the Irish Fifth Province.

McCarthy (2010) has written that the legendary Irish Fifth Province

...was a pagan Druidic site where kings and leaders from the other provinces came to settle their conflicts and reconcile their disputes through conversation and talks. Arms were left aside as people came together to speak and receive counsel. It was a place of dialogue where all opposing and contrasting views could be held together, heard and voiced in a collaborative, non-violent way. (p.8)

Within therapeutic conversation, holding “hope and despair” simultaneously requires considerable diligence and a commitment to acceptance. To do so requires a belief that suffering others possess the resolve, resources, know-how and wisdom to address their struggles and dissolve the dilemmas afflicting them.

I find this craft, this art, of being capable of navigating seeming opposites to be reflected in poet John Keats’ notion of “negative capability”, the state of “...being in uncertainties, Mysteries, doubts, without any irritable reaching after fact and reason...”<sup>59</sup>. Within postmodern therapeutic perspectives, others have thought, in their own ways, about the fine art of “‘being in

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<sup>59</sup> I was first introduced to Keats’ thinking of a negative capability by poet Allen Ginsberg, in talks regarding poetry and poetics he gave over a five day period in April, 1985, at Hollyhock Farm, Cortez Island, British Columbia. Hollyhock Farm, formerly Cold Mountain Institute, had famously hosted, amongst others’, one of the co-founders of Gestalt therapy, Fritz Perls, Jungian psychotherapist Ellen Tallman, poets Robin Blaser and Gary Snyder, in addition to R.D. Laing.

uncertainties’ “; for example, this ability has been noted by some as involving a distinction between being attached to “a therapy of certainty” as opposed to cultivating a “therapy of curiosity” (Amundson, Stewart, & Valentine, 1993).

Anderson (2012) writes, “The therapy relationships and conversations that I refer to are not guided by structured maps with preformed questions or strategies that determine how the conversation should look or unfold” (p. 19), rather, “Therapy conversations from this perspective are more like everyday conversations which are spontaneous and do not follow a predetermined sequence” (p. 19), and as such, “Uncertainty is inherent in this kind of spontaneous, unplanned situation. A therapist’s ability to trust uncertainty is important and involves taking a risk and being open to the unforeseen” (p. 19).

Engaging with struggling others from this perspective necessitates a sense of confidence and faith in being in the moment, being in the mystery unfolding, and, as Noillag Byrne put it, noted above, being in communion with others. This sort of relational being (Gergen 2009) is not about “anything goes”; rather, as Michael White (2000) articulated it, “Rather than contributing to an ‘anything goes’ sentiment, poststructuralist inquiry contributes to a ‘nothing goes’ sentiment – nothing goes without question, including all of the narrative practices...” (p. 114).

### **Ethics and the Sacred: Michael White**

*I take this use of the word ‘spirit’ to here refer to ‘ethos’... Michael White (2000, p. 168).*

Michael White’s work may not often be connected to the therapy literature relating to the sacred, yet, perhaps not surprising for a person who read widely and thought relationally, a thread of reflections regarding the sacred does flow through White’s thinking, his practice, and narrative therapy ideas. As Michael himself once remarked, “I guess I’ve always been more interested in reading outside the boundaries of the profession, rather than inside” (White, 1995, p. 12). Some of the places this “reading outside the boundaries” took White included Victor Turner on rite and ritual (REF), Van Gennep on rites of passage (White and Epston, 1990), Gaston Bachelard on reverie and imagination, Gilles Deleuze, and others, many of whom were writing from a place of comprehending the place of the sacred, of ritual, of symbol, within the communities represented by other cultures.

Not surprisingly, given the attention to cultural and related connections, from an ethnological perspective, White (1997) was well aware of the inter-connections between spirituality and identity, noting, “...in joining in narrative conversations with Indigenous Australians, the categories of identity that are invariably privileged are those of kinship and spirituality” (p. 231).

White (2000), in an interview with Dave Spellman, remarked, “I am not religious...” (p. 161), going on to say, however, “...I do find some accounts of spirituality that I can join with” (p. 162), further elaborating on this connection, saying:

One of these accounts represents a spirituality that is expressed in the knowing action that we take in contributing to the regarding of life. This is a consciousness or, if you like, a spirituality that is expressed in the maintenance of curiosity, in the face of indifference, about what it is that usually passes unnoticed; in attending to what it is that exists in

people's lives that is otherwise subject to inattention; and in initiatives taken to rescue the extraordinary from the ordinary. (White, 2000, p. 162)

White (2000) continues along this thread, talking about the on-going, evolving, forms such a "consciousness or a spirituality" must take, and how this relationship is never fully arrived at.

In therapeutic practice, this is a consciousness or a spirituality that contributes to the rich-description of people's lives and identities, one that generates a range of possible actions for them in the knowing formation of their lives and relationships with others. I do not believe that this is a consciousness or spirituality that is ever arrived at, but one that requires ongoing efforts to maintain and to further develop (in a culture of unconsciousness). (p. 162)

I find White's thoughts regarding "consciousness or spirituality" splendid and intriguing, and closely approximating some of the ideas espoused by Gregory Bateson and his daughter Mary Catherine Bateson in their *Angels Fear: Towards an Epistemology of the Sacred* (1988).

In conversation with Michael Hoyt and Gene Combs, White acknowledges, "The notion of spirituality does interest me" (White, 2000, p. 131). In this conversation, White (2000) elaborated, saying he holds a belief:

...that we need to be reclaiming these sorts of terms in the interpretation of what we are doing – love, passion, compassion, reverence, respect, commitment, and so on. Not because love and passion are enough, but because these terms are emblematic of certain popular discourses; because they are associated with discursive fields that are constituted of alternative rules about what counts as legitimate knowledge, about who is authorized to speak of these knowledges, about how these knowledges might be expressed. (pp. 129-130)

White's Foucaultian proposal (i.e., "who is authorized to speak of these knowledges") fits with the idea that "local knowledges" (Geertz, 1983) and formerly subjugated knowledges (Foucault, 1980, p. 81) may become resurrected, revived, and brought forth, and can become honoured, and witnessed as being viable alternatives to normative ways of being. I would venture to add that the way in which White articulates his thought that "we need to be reclaiming these sorts of terms" also connects with Charles Taylor's (1989) sense that as human beings negotiating ways to co-exist and dissolve dilemmas that conflict all of us:

Perhaps the most urgent and powerful cluster of demands that we recognize as moral concern the respect for the life, integrity, and well-being, even flourishing, of others. These are the ones we infringe when we kill or maim others, steal their property, strike fear into them and rob them of peace, or even refrain from helping them when they are in distress. Virtually everyone feels these demands, and they have been and are acknowledged in all human societies. (p. 4)

White (1997) makes the following important point in regards to his own intention to not concretize and totalize the experience of an-other, remarking:

I have not at any time proposed that these alternative identity descriptions and practices of self and of relationship speak of the ‘truth’ of persons’ desires, needs, intentions, motives, or of any other category of identity. Nor have I proposed that these alternative descriptions refer to the real, natural, or authentic expressions of the self, or of human nature. I have always referred to these descriptions as ‘accounts’ of desire, motive, intention, and so on, never as desires, motives or intentions *per se*. It is my understanding that we are as multi-desired, as multi-motivated, and as multi-intentioned in life as our lives are multi-storied. (p. 231)

White connects his thoughts regarding spirituality to ethics, a connection and an inter-relationship that I consider quite important; important in beginning to understand how it is we engage with others within the domain of therapy, or otherwise. In an interview, White (2000) further clarifies this connection:

I take this use of the word ‘spirit’ to here refer to ‘ethos’...”, and describes the relation co-construction of “ethos”, continuing, “...and while I am prepared to acknowledge the contribution that I make to this, I am keenly aware of the extent to which this ethos is shaped by the sentiments that people bring with them into these circles. (p. 168)

For me, this explanation speaks to Bateson’s notion of co-evolving, in relationship one with another, moving towards the dissolution of discord, and the possibility of co-existence.

### **Gaston Bachelard and Michael White: the imaginal, and the spirit of reverie**

In a presentation at the first Narrative Ideas and Therapeutic Practices Conference in 1993 (Sanders, 1995), I expressed anticipation regarding where White’s reading of Gaston Bachelard may take his work in narrative therapy theory and practice. Within the body of White’s writing and descriptions of his work, the influence of Bachelard makes itself known. White (2004) wrote:

In taking our experiences of our work into this *katharsis* metaphor, our attention goes to what it is that we are most powerfully relating to in people’s expressions of their experiences of life:

- a) to what it is that strikes a chord for us,
- b) to what it is that we are drawn to,
- c) to what it is that most captures our imagination,
- d) to what it is that fires our curiosity, and
- e) to what it is that provokes our fascination. (p. 50)

Epston (2010), too, has commented upon the influence of Bachelard within White’s work, when thinking of moving narrative therapy theory into contemporary times, Epston (2010) asks:

Michael, don't you think we have to turn to poetics for this? After all, your words were at times mesmerizing, and it was no surprise to me that you drew upon Bachelard (1958/1964) and the aesthetic metaphor of 'transport' as images for your narrative practice. (p.xxvi)

White often spoke of the sparkling moments persons experienced in their lives and relationships, moments that stood outside of debilitating stories, or thin descriptions of their identities. Such sparkling moments resonate with the concept of reverie (and transport) as described by Bachelard.

White (2000), in conversation with therapists Michael Hoyt and Jeff Zimmerman offered this connection between image and imagining preferred ways of being:

So, let's talk about the meaning and role of questions within narrative therapy. We could start by considering the context of David Epston's comment that you quoted: 'Every time we ask a question we're generating a possible version of life'. I believe that here David is referring to the fact that a well-formed narrative question can be highly *evocative* of alternative images of a person's identity. But David is not referring to the sort of questions that are imposed from out of the blue. Rather, he is referring to questions that are formed by therapists in response to people's expressions. How do these questions generate a possible version of life? These images often generate *reverberations* that reach down through a person's history, reverberations that touch on historical experiences, that set off *resonances*. Suddenly the person finds themselves speaking of some of their experiences of the events of their life that line up with and support the image that was evoked by the question. At times these are experiences of events of life that the person has never previously given voice to. In regard to developing an understanding of this process, *I have found Gaston Bachelard's work on the image to be quite helpful* [emphasis added] (Bachelard, 1969). (pp. 100-101)<sup>60</sup>

In the following section I further discuss some of the thinking espoused by Emmanuel Levinas, and how I see his thinking as an embodiment of relational activity, and connecting his thinking to a narrative poetics

### **Emmanuel Levinas and Relational Engagement**

*What I love is always the unexpected in a problem, the movement of spirit, certain enlightenments on a question, a certain ambiguity in the response.* Emmanuel Levinas (2001, p.199).

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<sup>60</sup> Carey (2010) has noted that, towards the end of his life, White was reading the philosopher Gilles Deleuze whose biographer, Francois Dosse (2010) notes, "During [his] second year at the Sorbonne, Deleuze...never missed a class with Gaston Bachelard, whom [he] deeply admired" (p. 97).

Philosopher Emmanuel Levinas has had an influence upon my own work for many years. I was pleased to read of David Epston's (2011) efforts to assist in bringing forth the thinking of Levinas, and situate the relevance of Levinas' philosophy and theology within therapeutic domains, by inviting Yukich and Hoskins (2011), and Carey (2010) to write articles employing concepts proposed by Levinas.

Epston and I (D. Epston, personal communication, November, 2012) shared our enthusiasm for the work of Polish journalist Ryszard Kapuscinski, particularly dwelling upon his *The Other* (2008), an important Levinas-inspired contribution to how *the other* is perceived within global political contexts. Epston subsequently emailed me a copy of Freeman (1999), in which Freeman utilizes aspects of Levinas' philosophy considerably in his description of "...the poetic construction of selfhood" (p. 99) in relation to other.

Anderson (2012) has recently encountered Levinas' notion of *hospitality* through her reading of Derrida<sup>61</sup> commentator and collaborator, Geoffrey Bennington. Anderson (2012) writes, "The therapist is a hospitable host and guest" (p. 15), and, "Mutual inquiry entails hospitality or, as Derrida (Bennington, 2003) suggests, unconditional hospitality. Hospitality involves subtleties and nuances of greetings and meetings that shape the tone and quality of the relationship and conversation, and consequently their potential..." (p. 15).

Levinas (2001) remarked:

Should language be thought uniquely as the communication of an idea or as information, and not also – and perhaps above all – as the fact of encountering the other as other, that is to say, already as response to him? Is not the first word *bonjour*? As simple as *bonjour*. *Bonjour* as benediction and my being available for the other man [sic]. (p. 47)

Derrida (1999) in his exquisite tribute to Derrida, *Adieu to Emmanuel Levinas*: wrote,

For I wish to put before you, at the opening of this conference, a few modest and preliminary reflections on the word 'welcome' [*accueil*], as Levinas, it seems to me, has put his mark on it, having first reinvented it, in those places where he invites us – that is, gives us to think – what is called 'hospitality'. (p. 16)

Derrida (1999), as Levinas' friend and one greatly influenced by his thought, (cf. Taylor, 1989, p. 487), in his eulogy to Levinas, spoken at the cemetery at Pantin, France, December 27, 1995, reflected,

I cannot, nor would I even try to, measure in a few words the oeuvre of Emmanuel Levinas. It is so large that one can no longer glimpse its edges... We already see innumerable signs, well beyond France and Europe, in so many works and so many languages, in all the translations, courses, seminars, conferences etc., that the reverberations of this thought will have changed the course of philosophical reflection in our time, and of our reflection *on* philosophy, on what orders it according to ethics,

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<sup>61</sup> See Derrida (1999, pp.70-78) for a discussion regarding the contemporary socio-political implications of this notion.



according to another thought of ethics, responsibility, justice, the State, etc., according to another thought of the other, a thought that is newer than so many novelties because it is ordered according to the absolute anteriority of the face of the Other. (pp. 3-4)

Although I do not remember exactly at what point within my own life I became aware of Levinas, it was likely when I attended a seminar with Daniel Berrigan, S.J.<sup>62</sup>, standing room only, in the early 70's at the University of Manitoba, Winnipeg, Canada. Berrigan's seminar of three months involved situating the New Testament Gospels as tracts for social justice, for the recognition of the impoverished and marginalized as requiring compassion, love, and the necessity of taking non-violent action towards realizing a heaven on earth, and within this exegesis, Levinas' thinking in regarding the (sacred) face of the other was woven. Levinas (1987), wrote, "The Other is, for example, the weak, the poor, 'the widow and the orphan,' whereas I am the rich or the powerful" (p.83).

Levinas (2001), by his own account, made a connection with "liberation philosophy" (p. 179) as exemplified in South America, remarking on the correspondences between liberation philosophy and his own ideas regarding the other, when he said:

There is a very interesting attempt in South America to return to the spirit of the people. Moreover, there is a great influence of Heidegger in the manner – the rhythm – of developing topics, and in the radicalism of the questioning. I am very happy, very proud even, when I hear echoes of my work in this group. It is a fundamental approval. It means that other people have also seen 'the same thing'. (p. 180)

The second person to mention Levinas to me was Bill Lax, when we met for coffee the morning of the day he was to comment upon a presentation I was giving at the conference Narrative Ideas and Therapeutic Practices, Vancouver, in 1993.<sup>63</sup> Following this encounter, I revived my reading of Levinas, as a way of imagining a relational therapeutic practice, capable of bearing witness to the suffering of others.

### **Levinas' Contributions**

For those interested in the history of philosophical ideas informing and linking modernist, post-modernist, and post-structuralist therapy and associated practices, it may be of interest to know, as Derrida (1999) observes, it was Levinas, in the 1930's, who ushered into France the ideas and writing of both Husserl and Heidegger, transforming the philosophical and intellectual landscape.

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<sup>62</sup> Berrigan, author of 35 books of poetry and of essays, was born in 1921 to Irish (father) and German (mother) parents. In protest against the war in Vietnam, and the drafting of young men into the army, Daniel, along with his brother Phillip and others, was arrested in 1968 for burning over 350 files on young men about to be drafted into the war against the Vietnamese. Daniel went underground, and was eventually arrested by the FBI, and serving two years in prison, and was released in 1972.

<sup>63</sup> For Lax's own references to Levinas, see Lax (1992).

First, to say it all too quickly, beginning in 1930 with translations and interpretive readings, there was the initial introduction of Husserlian phenomenology, which would feed and fecundate so many French philosophical currents. Then – in truth, simultaneously – there was the introduction of Heideggerian thought, which was no less important in the genealogy of so many French philosophers, professors, and students (p. 10)

Apart from this debt of gratitude we owe Levinas for bringing Husserl and Heidegger into the territory, there is, of course, his own original thinking and philosophy regarding what it means to be human, to be open to listening to the other, greeting the other, especially where there exist differences, deep ideological, theological, philosophical, national differences, yet there exists the hope and possibility of co-existence and peace. As Levinas (2001) has remarked, “Justice does not give itself as definitive in a liberal State. We live in a society in which an even better justice would be necessary” (p. 51).

Justice, then, becomes an experience, a way of being, we are continually striving towards, one with another. I see this as being especially true within a therapeutic encounter, where there are in-justices that have created restraints, barriers, and obstacles, within a person’s existence. I read Levinas’ (1993) thought as moving from the local and particular, expanding out by virtue and example of individual persons, towards informing the national and global:

One’s duty regarding the other who makes appeal to one’s responsibility is an investing of one’s own freedom. In responsibility, which is, as such, irrecusable and non-transferable, I am instituted as interchangeable. I am chosen as unique and incomparable. My freedom and my rights, before manifesting themselves in my opposition to the freedom and rights of the other person, will manifest themselves precisely in the form of responsibility, in human fraternity. An inexhaustible responsibility: for with the other our accounts are never settled. (p. 125)

### Summary

Within the thinking and reflections of all of the above persons whose ideas on the sacred I have chosen to represent, I find they share in a desire “...to create as open a space as possible for the kinds of beliefs that could create alternative ways of living” (May, 2000, p. 228). McNamee and Hoskins (2012) write, “...there are ways of talking about ethics that embrace much of the relational stance we are proposing here but do not seem to take it far enough” (p. 98). McNamee and Hoskins (2012) specifically critique Levinas (1985) and Martin Buber (1971) in this regard, suggesting, “Both argue for a view of ethics that is coherent in part with a relational constructionist stance. Yet, there are significant departures” (p. 98):

Both focus on the relational nature of human interchange. Levinas talks about ethics as a “first philosophy” from which knowledge emerges (a second philosophy), thereby reversing the philosophical trend that places knowledge as the first philosophy from which ethics emerge. *The idea that knowledge emerges from relational, ethical practice is wholly consistent with our argument here* [emphasis added]. Similarly, Buber features I-Thou relations over I-It relations, thereby acknowledging the central importance of relationality (McNamee & Hoskins, 2012, p. 98).

To be sure, neither Levinas nor Buber could be called social constructionists, yet consistent with one of my intentions throughout this dissertation I think it is important to continue to further explore the continuities and correspondences between Levinas' relational thinking, his ethics, and his politics. As Levinas (2001) wrote, "My interest [is] in the intersubjective relation, my principle theme..." (p. 106), going on to propose that "...human sociality is not at all a missed coincidence, but a superior excellence," stating, "I call love peace...Peace is sociality; it is to attend to the other" (p. 113).

In the following chapter, I describe in some detail the transformation that occurred within a substance use program with which I was involved. When I first came to the Peak House it was grounded in a 12-Step philosophical structure very much influenced by contemporary "recovery" ideas and practices. I discuss how I shifted Peak House practices to a collaborative place, a place in which young persons' knowledge and wisdom were appreciated and highlighted, not marginalized and subjugated. To reiterate, transformation I initiated at Peak House was influenced and inspired by the thinking/writing/practices of all those whose work I have described above.

## CHAPTER SEVEN

### THE PRACTICE OF A POETICS OF RESISTANCE

#### *My Metaphor for Peak House*

*I know from my experience I'm always going to think of Peak House as a place where they take wounded birds who cannot fly or fend for them selves, and they feed the little bird and care for it, and nurture it, and most importantly teach it to love and respect. Slowly the bird gets stronger and healthier, until the bird feels ready to fend for itself. After a long period of caring for the bird, Peak House takes the bird and lets the bird fly away. As the bird flies away, Peak House gets smaller and smaller, until the bird can not see it anymore. For this the bird is sad because that was his home. That's where he met people so special to him that he never wanted to leave. But the bird knows that Peak house will always be in his heart, and he holds that memory, and flies off to success. Love to you all!*

Authored by a former participant at Peak House.

#### **Autobiographical Context**

Around 1970, I experienced an existential struggle within my own life. I was experimenting with LSD and other hallucinogens, had departed from involvement with institutionalized Catholicism, and had left high school. Unable to locate myself within any particular community, I became increasingly isolated and struggled with despair, *de-spiritus*.

My parents, understandably distressed, consulted with our family doctor, who was a fine person with a longstanding relationship to our family. My parents had nine children, and our physician never stopped making house calls. He always wore a colourful bow tie, and smoked cigarettes! Our doctor convinced me that spending some time on the mental health ward of the local hospital might be of benefit. Reluctantly, I went, only to discover that I was a young person, 16 years old, on a ward with older (some quite aged) adults who were considerably debilitated. There were a couple of other, younger persons present on the ward, one of whom spent most of his time singing along with country music while masturbating, and another who, in an amphetamine-induced state of mind, had injected peanut butter oil into a vein.

In those days I was reading William Burroughs' novels, which only added to my sense of nightmare. I had been prescribed the neuroleptic drug chlorpromazine prior to entering hospital, and continued with this drug for a couple of months following my hospital stay. In the following years, I often imagined if I ever had an opportunity to create a program for young persons' experiencing similar struggles the program I envisaged creating would be very different from any adult psychiatric hospital ward I had experienced or had read about.

Almost twenty years later, in the fall of 1988, an exciting opportunity to create a different residential program experience for young persons presented itself. I came upon a newspaper advertisement for a new residential program for young persons and families struggling with substance use and related challenges. The prospect of getting in on the ground floor at the beginning of such a new program was very exciting, and I applied for the clinical director position. I did not get the position, and was duly disappointed. However, approximately six months after the interview, I received a telephone call from Bill Hansen, executive director of the program. Bill asked if I was still interested in becoming part of the program, and I asked him what had happened. Bill suggested we have coffee and talk, which we did. Our conversation initiated the beginning of a professional and personal relationship lasting until Bill's death from cancer in 2012.

### **Origins of the Peak House Program**

I was initially hired as coordinator for residential services in the new program that had been named "Peak House", following upon Abraham Maslow's (1964) concept of "peak experiences", experiences, appropriately enough, having to do with the sacred and the spiritual. Peak House was conceived as a global, provincial, program of the province of British Columbia's, meaning that any alcohol and drug counselor employed in a government funded program was able to refer a young person (age 13-18). At the time, the so-called "addiction services" were subsumed within the provincial Ministry of Labour budget (years later, all services relating to substance use were moved more appropriately into the Ministry of Health).

In 1989, Peak House consisted of two separate programs. One 12 bed residential component was known as the Adolescent Assessment Program Unit, and the other 12 bed residential service was known as the Adolescent Treatment Program Unit. Both programs were located in the same building, which was leased from The Salvation Army. The physical structure was enormous, approximately 10,000 square feet over three floors, which included an elevator, with a 6-pin regulation sized bowling alley in the basement. The building had formerly housed a residential program for men struggling with alcohol, operated by The Salvation Army.

Peak House operated in this building until around 1990 (the site is now a Buddhist monastery), when we relocated to a house in a working class, residential community, on Vancouver's east side, home to a significant population of Italian, Chinese, and other immigrant families. Following a couple of years of government funding cut-backs, Peak House had gone from being a 24 bed resource to having 8 beds. In fact, between the years 1989-1991, we were able to save Peak House from being dropped entirely as a government funded program only through many pragmatic negotiations with the managers responsible for budgets and program funding.

I found the behind-the-scenes, politically motivated conversations I participated in to be challenging. Ultimately, I was pleased the core of the program was retained. As of this writing, Peak House offers an 8-bed, 10-week program (cf. [www.peakhouse.ca](http://www.peakhouse.ca)).

The Influence of a 12 Step Philosophy

Between the years 1988-1990, a majority of employees at Peak House identified with and shared a belief in a 12 Step philosophy and way of being. Much of the program structure and content had derived from a program in Seattle, Washington, called The Ryther Institute ([www.ryther.org](http://www.ryther.org)). The majority of persons first hired to work at Peak House had visited the Ryther Institute.

As recently noted by Wendy Wittmack, Program Manager for Peak House, employed at Peak House since day one, “Our program has evolved over the years from a 12-step program, then in 1990 moved to have a very strong Narrative therapy influence. To this day we continue to evolve,” (cited in Kelly, 2013).

As introduced and discussed in Chapter Three of this paper, in those early years, I was becoming increasingly disenchanted with the hegemony of 12 Step ideas, concepts, and philosophy within the domain of “addiction” studies and practices (Sanders, 1994, 1997, 1998, 1999, 2007). Identities such as alcoholic, drug addict, sex addict, workaholic, co-dependent and so on, appeared as totalizing of a person, offering a rather thin description (Geertz, 1973; White & Epston, 1990) of a person’s life and relationships. I was becoming particularly concerned and perturbed with some of these ways of thinking and practicing, given that we were engaged with children and adolescents. My concern being the notion that one was an alcoholic, an addict, for life. Such a belief appeared to represent a life sentence, as it were, leaving no space for understanding identity as continually being formed and informed in relationship with others’, and in relationship with one’s environment.

At the time, I was distinguishing between substance use, substance misuse, and substance abuse, and framing a person’s experience in terms of the multi-factorial bio-psycho-social (Donovan, 1988) conceptual framework. We had added to this framework a spiritual component, referring to bio-psycho-social-spiritual domains of a person’s life and relationships. Culturally, many of us also started thinking of a person’s experience in terms of the indigenous, First Nations, concept of medicine wheel, speaking to balance and inter-relationship between emotional, physical, mental and spiritual domains of a person’s relations with others, and with the environment, and the earth. Such a practice was congruent with the fact that an inordinate number of young persons entering Peak house were of First Nations cultural heritage.

In looking back 25 years, I would say that within the first couple of years of Peak House many employees who could not countenance the theoretical shifts we were making began to depart. On the other hand, several employees who had come into the program adhering to 12 Step beliefs began to reflect upon and question how such beliefs had shaped and constituted their identities.

The following quote from Kenneth Gergen (1992) captures the shift that was taking place at Peak House:

...we must relinquish the claim of final authority for any psychological school – psychoanalysis, Rogerian therapy, behaviorism, cognitive therapy, 12-step programs, family systems, structural-strategic models – none will give us objective knowledge,

either separately or all together. In this climate, knowledge claims (“we know”) and the authority that flows from them (“You should listen to us because we know”) lose their power of persuasion. (p. 57)

Transitioning from the 12-step model occurred rapidly at Peak House. Following an extended leave of absence in Mexico, the other director made a decision to relocate to another city, leaving me free to continue initiating program changes. By this time, I was working with others who were extremely interested in the narrative therapy of White and Epston (1990), and in the social justice ideas and practices of Waldegrave (1990), and Waldegrave, Tamasese, Tuhaka and Campbell (2003). As Bob Dylan (1963) exclaimed, “The times they are a-changin’”, and the times at Peak House most certainly were. This was an extremely exciting time personally for me at Peak House, embarking as we were upon new theoretical and practice territory, uncertain as to where we were headed, yet knowing, based upon participant response that beneficial changes were being realized by young persons’, families, and their communities of support.

### Shifting Perspectives

One Peak House practitioner, R.W. “Hoke” Holcomb (1994) made the following observation regarding the very significant shift that occurred within a two-year period at Peak House:

On average, clients respond better to counsellors who offer tentative proposals to be tried and evaluated than to counsellors who offer prescriptions that they are told will work if followed to the letter. For example, the majority of clients could not commit to a lifetime of abstinence from alcohol [or other substances]. However, almost all of them could accept abstinence as a controlled experiment for a fixed term... [F]or our own program changes, *once most of the staff accepted that there was not some single “correct” theory that was going to work for the entire program, things began to change relatively easily* [emphasis added]. The ‘theorists’ on the staff could lighten up on whichever school they were rooting for, and those whose skills were working with youth were able to see that their insights could be incorporated into the more flexible framework. (p. 46)

I acknowledge I was one of those “theorists” alluded to, but as the person taking the lead in initiating shifts in perspective, I opened space for the youth care practices and experience of others, and stressed that these practices (non-directive, non-pathologizing, respectful of youth knowledge, wisdom, their lived experience, and so on) would be supported within the overall structure of a socially just, narrative re-authoring, relational community.

Holcomb (1994), in his reflection of the shifts that were rapidly taking place at Peak House, catches some of the more collaborative practice emerging, and the inter-relationship between the young persons participating in and practitioners working within the program. By 1993, the so-called Chemical Dependency Group had already changed into what we were calling the Discovery Group, though we were not exactly sure what that was! An illustration of the increasing collaborative practice at Peak House was the way in which the modules for Discovery Group were co-created by participants and staff. Holcomb (1994) recalls:

Discovery Group material was developed over a period of about two years by bouncing content back and forth between staff and supervisors. As it was being developed, it was being used with the clients, and *they had quite a bit of influence on what was kept and what was thrown or or modified*. [I] remember that about ten minutes into my first attempt to present Jessor's [R. Jessor, 1991] concept of risk behaviour to a group, I felt that the group was starting to take control. Fortunately, I had enough youth care experience by this time to give them a little rope. *By the end of the session it was clear to me that I would do as well to listen to the adolescents as to read Jessor. I was truly within the midst of a group of experts* [emphasis added]. (p. 48)

At an earlier date, prior to the above experience described by Holcomb, I met one day with all the employees and program participants, asking and posed the question, "what was required by way of guidelines (not "rules") for community at Peak House; what sorts of guidelines would be necessary to assure and sustain a (relatively) safe, facilitative, encouraging, generative, community living space?"

Symbolically, I ripped up the six or seven pages of existing "rules", and together we engaged in a conversation intended to create guidelines for the program, based upon what the participants and employees deemed would be required for the creation of a safe space. The suggestions deriving from that meeting form the basis of the program guidelines which are still in place today.<sup>64</sup>

### **The influence of Laing**

As previously indicated above, Laing was an early influence, and I had become interested in the concept and practice of the unique therapeutic community Laing and his colleagues co-created at Kingsley Hall, in London, England. Years later, around 1980, my then partner Lynette and I, along with our children, Adrian and Maya, visited Soteria House in San Jose, California. Lynette and I interviewed the program coordinator, Voyce Hendrix, in regards to practices Soteria House was engaged in, as inspired and influenced by the therapeutic community ideas and practices established by Laing and colleagues at London's Kingsley Hall.

For example, Soteria House, as with Kingsley Hall, provided a psychiatric drug free, voluntary, non-professionally staffed, residential community experience to persons having diagnoses of so-called schizophrenia (cf. Mosher & Burti, 1999). Writing of this radically alternative residential community, Mosher and Burti (1999) reflected that Soteria House "...did not fit into the emerging scientific, descriptive, biomedical character of American psychiatry, and, in fact, called nearly every one of its tenets into question" (p. 12). I found this appealing, and, in May of 1991, at a conference in Vancouver celebrating Laing's<sup>65</sup> legacy, I was able to meet Mosher, informing him his own work with Soteria House, and Laing's courage and example, had contributed immensely to changes I was initiating at Peak House.

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<sup>64</sup> For documents associated with Peak House, refer to the Peak House website, [www.peakhouse.ca](http://www.peakhouse.ca).

<sup>65</sup> The Laing conference was co-facilitated by Vancouver's Dr. Andrew Feldmar, a psychotherapist and friend of Laing's, and occurred at The Justice Institute.



I had come across a paper written by a person named D.B. Goldblatt (1986), titled “The practical application of existential phenomenological psychotherapy in a residential setting”. Goldblatt’s thinking about alternative residential practice and humanistic, compassionate, ways of being resonated with me. I shared this paper with the Peak House staff, evoking this response from my colleague Holcomb (1994):

The element that is left out of most discussions of these perspectives, but which is essential at all levels of treatment is the presence of an empathetic, therapeutic community (Goldblatt, 1986). The community is necessary for everything: in addition to helping the residents help themselves, it is necessary to keep the staff functioning well, and to implement program development. Community refers to more than just the professional staff, or the professional staff and residents. It includes support staff, families of residents, involved professionals, and other support systems such as self-help groups and schools. And, of course, it is all made possible by the “old-fashioned” values of cooperation and communication. Once community has been established, the treatment team can begin to utilize the newer treatment perspectives. (p. 49)

Co-creating a meaningful community more and more became the focus, a community in which young persons’ could be acknowledged for their knowledges and their wisdom, and a community in which so-called expert knowledge would become increasingly minimized.

## **Youth Wisdom and Youth Knowledge**

As practices continued to evolve at Peak House, and in an effort to further understand more beneficial ways of engaging with young persons’ struggling with substance use, we were curious regarding ideas participants in the program considered important when describing effective, compassionate, understanding counsellors. Such curiosity brought forth the following responses:

- A respectful counselor will listen and won’t tell you how to feel
- A respectful counselor will realize that we are not little children but we are young adults
- A respectful counselor is someone who shows you that she/he cares, and will always listen, and will give you feedback
- A respectful counselor will be there for you at least  $\frac{3}{4}$  of the time when you need her/him
- A respectful counselor will help you work out your “problems”; instead of telling you the solution, a respectful counselor will help you find it
- A respectful counselor should know how much a teen can handle, and how to approach a teen who does not want anyone around them; a respectful counselor should know when to back off and allow a teen to straighten their own head out before trying to be of help
- A respectful counselor will learn to think like a teen so they will have a better idea of what kind of different stages youth are going through, and what we need, and what we don’t need.

Being invited by the participants at Peak House to consider their knowledge and wisdom was beneficial in moving us into more collaborative, reflexive, practices. We took such youth wisdom and knowledge seriously, beginning to practice listening in more beneficial ways, thinking of how we might become more receptive and more respectful, and open to therapeutic conversations unimpeded by evaluative, assessing, language and perception. We began to have reflective conversations, challenging our own pre-suppositions in regards to prejudicial thinking, ethno-centricism, ageism, racism, social class, sexism, and the fluidity of gender and sexuality (cf. Butler, 1990), and so on.

Michael White's (2007) thinking on ethics was instructive within this emerging awareness:

As therapists, we are responsible for the consequences of what we do, say, and think. We have a special responsibility to consider the ways in which we may have unwittingly reproduced assumptions about life and identity that are disqualifying of diversity in people's acts of living, and the ways in which we may have inadvertently colluded with the power relations of local culture. (p. 31)

White's thinking in these terms also reflected Tomm's earlier discussion(s) relating to notions of therapeutic love and therapeutic violence (cf. Combs & Freedman, 1996).

Increasingly, in terms of recruiting staff into the program, more so than ever, we became interested in hiring staff both interested and intrigued in relating in these ways, and those open to engaging in ongoing reflection and critique. In terms of competencies, I recall talking with others' working within the community of Peak House in terms of ways they could practice not rushing in simply to fill in space and silence in their conversations with participants, wondering how they may bear witness, and practice being a silent witness even in discomforting moments. Increasingly influenced by Anderson and Goolishian (1988), we practiced listening for what they themselves had started to describe as the un-said and the not yet said.

As our day-to-day practices became increasingly conversational and comfortable, we discovered that engaging dialogically with participants at Peak House allowed the young persons to realize we were not there to inform them as to how they should be; rather, we were there to be facilitative of change and transformation, and to be supportive of their re-authoring actions.

### **The Educational Component at Peak House**

Peak House continues to be in the unique position of having a longstanding partnership with the Vancouver School Board (VSB). This partnership provides funding to support a full-time teacher. Rick Pelan, who was to become a good friend, facilitated the school program for many years. Rick was an extraordinarily committed, creative, and compassionate educator, a rare being indeed!

Often enough, Rick would be attempting to facilitate a desire for new learning with young person's who, for one reason or another, had not fit at all within the traditional educational structures. Rick perceived of every new participant in the program as representing a unique challenge. At any given time at Peak House, participants could be working on developing literacy, embarking on a General Equivalency Diploma (GED), receiving assistance in researching college applications, learning to use a computer, and so on. Participants working on their education at Peak House also appreciated Rick for not only his coordination and planning of, but also his enthusiastic personal participation in cultural and recreational activities which occurred Monday through Friday. For years, Rick kept a meticulous journal with the names of each new student he collaborated with, as precise and ordered as the way in which he continues to stack the firewood in his woodshed at Roberts Creek!

If, as philosopher Francis Bacon said, "knowledge is power", hundreds of participants at Peak House used their emerging acquisition of new skills and knowledge to resist debilitating substance use, and were able to dissolve problems within their lives, renewing and reconnecting in relationship with others.

### **Externalizing Practices**

Through the practice of externalizing, (White 1989, White, 2007; White & Epston, 1990), participants within the community of Peak House were encouraged to compose documents personifying and naming dilemmas or problems that at times imposed upon them, interfering with their lives and relationships. White (2007) spoke of his externalizing practice as representing a "faithful friend" (p. 59), a way of proceeding in conversations with persons who were at risk of equating their sense of identity with notions of personal deficit as represented through diagnostic categories.

The experience of "anger" was often a common dilemma participants at Peak House spoke of as having influenced them towards actions and activities within their lives and relationships that they wished to separate from. One participant wrote the following letter to "anger":

Dear Anger

I can't stop to think what your role in my life is. You push me around, try to control my feelings, then leave me like a piece of shit because of the actions that you take. I am beginning to understand your game, and I am overcoming the powers you once had over me. Well guess what? I am fed up with all your bullshit and the violence you cause. I think you have no right to make me deal with problems and feelings the way that you do. I am not that kind of person anymore. I used to run my life around you and it made me and others believe that I didn't care about anything. I tried to hide from you by doing speed and other drugs but I have realized that I don't have to hide from you and that you are just a feeling inside that everyone experiences.

Another participant at Peak House wrote the following, to "Heroin":

Dear Heroin:

Fuck you. You messed me up in so many ways. You bring me to tears almost every night, thinking about you. I wish I could get you out of my life for ever. I am hopefully saying “goodbye” to you, and never seeing your lifestyle again. You’ve taken my dreams, my dad, friends, and family lost trust in me. I wish I never met you. But I did and I have to get over that, and change my life. I hate you so much for the things I have done because of you. You’ve made me go to jail, hurt my mom and family, rob people. That’s not me, that’s you. So stay out of my life please. I am tired of this shit and the lifestyle. I’m a nice person and I know I’ve seen my “clean” side, and I know how nice I am. So leave me alone.

Another externalizing practice evolved at Peak House consisted of participants’ creating a *collage* within a few days of entering the program describing their lived experience to that point, in regards to their struggles with substance use, and the experiences that took them into that territory. As they moved through the program, participants would create a *collage* of their vision for a preferred future, which they would juxtapose with the collage outlining where they had found themselves.

### **Culturally Accountable Practices**

Early on, I had come to realize that at Peak House we were working with an inordinate number of First Nations young persons and extended families, yet we had initially only employed one First Nations person. Bruce Alexander (2008) has indicated that in Vancouver “Today, dislocated Indians are tragically overrepresented in the drug addict, prostitute, and AIDS populations...and in the jails and alcoholism treatment centres throughout the province” (p. 16), pointing out, “Native Indians constitute at most 5% of the British Columbia population. However, they constitute more than 50% of the children in institutions or foster homes...” (p. 394).

In an essay initially published in 1990, offering a description of what was entailed by the concept of “a just therapy” practice, Waldegrave (2003) wrote:

‘Just Therapy’ is a reflective approach to therapy...It is termed ‘Just’ for a number of reasons: firstly it indicates a ‘just’ approach within the therapy to the client group, one which takes into account their gender as well as the cultural, social, and economic context. Secondly, the approach attempts to demystify therapy (and therapists) so that it can be practiced by a wider range of people including those with skills and community experience or cultural knowledge. (p. 7)

In addition to a just therapy being accountable in terms of gender, the cultural, social, and economic contexts, I would include sexuality as a domain requiring accountability. Regarding Peak House practices, “Peak House is a queer positive environment and gender group is designed to be a safe space for everyone” (“Peak House Youth Information Guide”, p. 6).

The work of Waldegrave and Tamasese (1990) was influential in moving us towards rectifying an absence of First Nations practitioners, and we were ultimately fortunate in connecting with a Dene Nation woman from New Ayanish , a village in northern British Columbia, who would become instrumental in bringing to Peak House practices a number of important rituals and ceremonies relating to indigenous cultural practices.

In time, we were able to attract other indigenous practitioners. Tonya Gomes, an indigenous woman from Brazil, came to work with us, initially as a youth counselor, and later as a therapist, having completed an M.A. in Counselling at City University, Vancouver, Canada. Tonya, during her tenure with Peak House, taught us a considerable amount in terms of her way of being with First Nations participants in the program.

Guy Bowe was another indigenous practitioner who came to work with us. Guy was, amongst other identities, a native sun dancer. In one ceremony in which he participated, Guy dedicated his sun dance of four days to Peak House.

Tonya's husband, Sysliem, was an elder within the Vancouver First Nations community. Sysliem, as with Tonya and Guy, was a cultural consultant (Waldegrave, Tamasese, Tuhaka & Campbell, 2003) to us. Sysliem enlightened us regarding Pacific Northwest indigenous cultural histories and ceremonial practices, and, on occasion, performed ceremonies at Peak House, as well as at conferences in which Peak House personnel were involved.

Many significant shifts generative of supportive, belonging (Waldegrave, 1990), and inclusive practices began to emerge. When a new participant entered the program, a current participant would be in attendance at the initial conversation and would respond to questions the incoming participant might have, or, questions the incoming participants' parent(s), grand-parent(s), or referring practitioner may have.

Based upon the response of new participants to being welcomed into the community in such a way, we quickly realized how the experience of having the current participant convey narratives of their own lived experience was immensely more collaborative, comforting, beneficial, and valuable, than engaging in the traditional ritual of an intake meeting.

New participants would become initiated into the liminal space of Peak House in a welcoming ceremony. This liminal space was conceived of as a zone in which possibility and transformation was in process, a zone in which the knowledge and wisdom of the participants could come forth and be acknowledged and highlighted.

In this welcoming ceremony, the new participant would select a stone from a basket of stones, and the stone they chose would be passed around to all other participants and practitioners present who were seated in a circle. At times, sage might be burned, a sacred drum would be drummed, a guitar or flute played, or, a song sung, or a poem read.

When a participant was preparing to depart from the community, a commencement ceremony was performed. This ritual had formerly been known as graduation, but that particular

word had negative connotations for many of the young persons' coming to Peak House, based upon their previous educational experiences.

We considered the commencement ceremony as a context in which a participant who had come to the Peak House community from an external community would celebrate their re-authoring experiences and re-connecting experiences, re-entering the world from which they came, but now having different perspectives on how to negotiate relationships and navigate within their communities of origin.

This re-entry was highlighted with the passing around of the stone the participant had chosen upon entering the community of Peak House. Each person present in the circle was invited to speak to their hopes, dreams, and desires for the person commencing. Their hopes, dreams and desires would enter into the stone, which the person would take away with them. Often, a participant would read a letter<sup>66</sup> they had written to the community, or others would read a letter or a poem, or sing a song.

The daily scheduled group, originally known as the Chemical Dependency (CD) group, then became Discovery Group, and finally became Re-authoring Group (White and Epston, 1990), and remains so today. Hitherto, the original Chemical Dependency group was conceived as a group performed and led by one of the therapists. The format was hierarchical and the content didactic. Historically, this group was very much informed by concepts associated with a 12-Step Alcoholics Anonymous perspective, and by ideas associated with John Bradshaw (1990, 1995) and the so-called "recovery movement"<sup>67</sup>.

The Chemical Dependency Group was often merely an exercise in the performance of expert knowledge, with emphasis upon individual (not communal or relational) responsibility for finding one's self facing dilemmas associated with substance use. In those early days, the concept and distinctions between substance use, substance mis-use, and substance abuse were not yet on the map; rather, if you used substances in deleterious ways you were simply considered to be an addict, alcoholic, junkie, and so on. The language at the time was totalizing and pathologizing of the person. If the context of the person's life and relationships was paid any attention, it was usually done so in a negative, deficit way. As Madsen (1999, 2011) has pointed out, in such contexts, families were perceived as being multi-problemmed, as opposed to families facing multiple stressors of socio-economic and other related barriers.

The Re-authoring group was a much more collaborative experience, now becoming a conversational, relational, and dialogical, experience, wherein anyone who wished to speak could speak. To a significant degree, hierarchy was dissolved, and we began to experiment with

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<sup>66</sup> Many of the letters written and read by practitioners at Peak House honouring the commencing person were inspired by David Epston's (1990) concept of "therapeutic letters", and by literate practices created by Penn and Frankfurt (1994).

<sup>67</sup> For a critique of these concepts and ideas, see Kaminer (1992), Kinman & Sanders (1994), Peele (1989), and Sanders (1994, 1997, 2007).

Tom Andersen's (1991) reflecting process practices, as well as with Michael White's (1995, 1997) version(s) of such reflecting practices, which White named outsider witness groups, as discussed above. What was enjoyable and even fun regarding this shift was that there were really no prescribed ways of undertaking these sorts of collaborative group experiences, and at Peak House we evolved our own ways of co-creating and of performing these group experiences.

These groups, though often simply appearing conversational to observers, were not about "anything goes". A principle intention was to bring forth the wisdom and knowledge young persons' possessed, especially in regards to the ways in which they had survived difficult times involving drugs, violence in relationships, and dis-connection from loved ones.

As practitioners with such groups, we were learning the craft of knowing when to be more, not less, present. We were learning to bear witness to the stories being told, without searching for root causes, but rather contextualizing the lived experience often leading to substance use as one involving multiple socio-economic, and socio-cultural factors. As practitioners, we were practicing taking a not-knowing (Anderson & Goolishian, 1988) stance. The work we were doing, appeared more and more to be based upon the human relationship between the participants within the community of Peak House, and the persons working at Peak House.

One of the most respected and appreciated employees at Peak House was (and remains) the chef, Yan. Yan spoke through her smile, and her smile spoke volumes! The food she prepared daily was a source of nutrition and comfort for the participants. This is an example of human relationship, often known as therapeutic alliance, and the establishment of rapport, and so on, which comprised the "difference that made a difference" (Bateson, 1972). As one of the female participants', upon commencing, read from a letter to all of us, "It's the people [of Peak House] who bring out the magic!"

### **"Fight the Power" Alumini Support Group**

At Peak House, I adopted the song and anthem "Fight the Power" from the American hip hop band Public Enemy (1989), and, in time, the alumini community support group at Peak House became known as the Fight the Power group. This group continues to evolve at Peak House. The purpose of this particular group was to provide support for young persons' following their work at Peak House. This group is committed to supporting young persons' from the influence of substances, sex trade recruitment and exploitation, homophobia, racism, and so on.

We co-created many other symbolic, ritualized, and ceremonial ways of celebrating small victories over substance use and other dilemmas. We imagined these ceremonies to be performances of new meaning (White & Epston, 1990), and used these ceremonies to confer a new status to the reauthored identities of participants. These ceremonies were the opposite of what Garfinkel (1957) called "degradation ceremony".

### **Co-research and Conversation, Not Case Conferences**

At Peak House, there came a time when I said we would no longer engage in case conferences because the people we were talking about were human beings, not cases. As much as possible, if we needed to talk about the struggles of a particular person, we would invite that person into dialogue. The evaluative, assessing language of files we found to be monological, not dialogical. For the most part, much of the time the person's voice, description of struggles, and context of their life and relationships, are not visible within these files.

We developed a practice of co-authoring accounts and descriptions of participants' experiences in the community of Peak House, thus meeting contractual and regulatory requirements. We then forwarded these documents to the agencies or persons who had first referred the participant. These thick descriptions and co-authored descriptions were much closer to the participants' experience than anything that might be reflected in so-called discharge summaries.

### **Declining the Life of the File**

Following from my reading of Harre (1984), we also stopped reading files sent to us from referring agencies or persons, having decided we would prefer to first meet the new participant face-to-face for an initial conversation, and not become influenced by file narratives and presuppositions regarding the participant. Such practices were focused upon dissolving the hierarchy between participants and practitioners within the program. We discovered that, in reading files regarding participants before actually meeting them, certain presuppositions informed our perspective regarding the person. These days, we have numerous examples of this sort of collaborative practice, yet in some domains, such practices remain suspect.

In our practices at Peak House we became increasingly interested in continually checking in with participants in regards to what was benefiting them within the context of day-to-day relationships and interactions within the community of Peak House. Their very subjective responses formed data and re-search, as far as we, and they, were concerned.

There also remains skepticism and even sarcasm regarding the integration of areas of knowledge, or, incorporating inter-disciplinary threads. Gergen (2009) writes:

There are also risks for roaming. Scholars who are curious about another discipline are often viewed as alien interlopers by the denizens of the discipline... Academic safety lies in knowing more and more about how to address an ever-smaller community of colleagues. (p. 211)

As noted above, before Epston (Hancock & Epston, 2008) began referring to insider knowledge, a primary intention in initiating and encouraging such alternative practices, and employing a new language in reflecting upon and conversing about the work, was to bring forth what Clifford Geertz (1973) had been calling local knowledge, perceiving such knowledge as no longer being subjugated knowledge, or, delinquent knowledge, as Foucault (1980, 2003) conceived of such knowledge.



The concept of local knowledge has been summarized in this way by Anderson (2012):

Local knowledge is the narratives – the wisdom, the expertise, competencies, truths, values, customs, and language – created and used within a community of persons (e.g., people in a family, classroom, board room, factory team, or neighborhood). The unique nuanced meanings and understandings of the community members’ personal experiences influence the creation of practical, relevant, customized, and sustainable knowledge for its members. Importantly, local knowledge is always context bound and developed and influenced by the background of dominant discourses and narratives in which it is embedded. (p.11)

Practice, according to the first definition in the *Oxford English Dictionary* (2001, 2002, p.655) means “the action of doing something rather than the theories about it”. Practice can be understood as theory in action, or praxis. Beginning in the early 1990’s, at Peak House, the quality of relationship existing between those working in the community of Peak House and participants within this community was shifting, and this qualitative, nuanced, shift was bringing forth and evoking a physical space in which there was less hierarchical tension, less power over, and a more comfortable space in which a generally more comforting atmosphere prevailed. Employees and participants shared meals together (a huge banner made by participants above the dining table declared a DIET FREE ZONE, as we were beginning to pay more and more attention to practices of body specification (cf. Dennstedt, 2010; Dennstedt & Grieves, 2004; Grieves, 1998).

As practitioners, we were being transformed within these evolving practices, learning to be with ambiguity, and to be with un-certainty (cf. Amundson, Stewart, & Valentine, 1993), bearing witness to the stories being told, not rushing toward foregone conclusions in regards to totalizing a person’s identity. This practice of engaging with a person from a position of not-knowing (Anderson and Goolishian, 1988) was liberating in that it allowed for us as practitioners to come to know the participant separate from any diagnostic labels previously instrumental in defining their personhood.

There existed conscious purpose in attempting to frame our practices within a particular ethos, an ethos increasingly derived from the work of The Family Centre of from New Zealand, whose ideas and practices I have described and discussed in Chapters One and Five.

From the Family Centre, we took the practice of engaging in caucuses as a means to address some of the cultural, gender, and sexuality differences existing between practitioners. An illustration of this were the caucuses we participated in regarding gender, and ways to attempt to begin addressing patriarchal influences within the program structures, and within the program leadership. Engaging within these caucuses was challenging, but led to shifts in terms of how power and privilege were acknowledged, and space for ongoing dialogue was co-created.

### **Gender practices and accountability**

For my part, facing respectful critique and challenges regarding my own engendered, internalized patriarchal views, I was challenged to think differently. I agreed with several feminist influenced therapists and community activists<sup>68</sup> at Peak House with the idea of creating separate groups, one group for young women, and one group for young men. Female therapists and youth counsellors would meet once per week with the young women, and male therapists and youth counsellors would meet with the young men.

The women's gender group would become important in creating a (relatively) safe and supportive context in which young women could have conversations regarding their lived experience, particularly relative to interpersonal violence perpetrated against them by men.

The men's gender group became an important group for young men to have older men begin to point out and unravel patriarchal and power over ideas, and tactics relating to relations with, and values regarding, women. In the young men's group, myself and the male counsellors worked with commitment towards addressing understanding and respect for differences, addressing sexism, addressing violence towards women (both physical violation and violence in language), homophobia, racism, and other areas.

### **Privileging Lay Knowledge**

We began to practice from an increasingly ethically accountable position, and reflected in conversation with one another regarding our work, and to specifically incorporate more of the ideas and suggestions of the young participants, led to what Theodor Adorno (1973) has referred to as a practice of privileging lay knowledge, whereby, "Lay knowledge is a proclamation of 'the privilege of experience'", (Williams & Popay, 1994, p. 135).

Prior to thinking in terms of what Hancock & Epston (2008) came to refer to as "insider knowledge" I was imagining ways of increasingly highlighting what Theodor Adorno (1973) had termed "lay knowledge". The idea of lay knowledge had been used in juxtaposition to notions of professional, especially medical, knowledge and truth claims (cf. Gabe, Kelleher & Williams' *Challenging Medicine*, 1994). Regarding lay knowledge, Williams and Popay (1994) wrote,

In lying outside the conventions of positivism lay knowledge challenges the search for abstract facts understood as things that exist independently of our interpretation of them. Lay knowledge, in being open to variation, difference, and local significance, has always been post-modern. The vogue of post-modernism, with its emphasis on 'the contextuality of truth-claims' (Giddens 1990), provides a neat legitimization for lay resistance to expert systems of knowledge, and a useful theoretical justification for the empirical work by

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<sup>68</sup> Amongst those taking the lead with the creation of the gender groups were Cynthia Farnsworth, Tonya Gomes, Vikki Reynolds (Reynolds, 2002; Radke, Kitchen & Reynolds, 2000), Stephanie Saville (1998), Sandra Taylor, and Wendy Wittmack.

sociologists and others in this area. Lay knowledge about health and illness thus provides an epistemological challenge to medicine. (p. 123)

Lay knowledge was an apt term to describe the youth wisdom and knowledge that we were beginning to pay close attention to, largely due to the influence of David Epston. The lay knowledge of the participants at Peak House was being incorporated in program structures and design, as participants were becoming more included in welcoming new participants into the program, and, as members of the alumni Fight The Power group, speaking to current participants of their own personal experience in terms of harm reduction practices, non-violent ways of being, and survival tactics useful in not being recruited into substance misuse or abuse.

Such knowledge and wisdom, Foucault's (1980) "subjugated knowledge", was now being highlighted and considered as a description of a preferred identity, and way of being.

### **Insider knowledge practices**

David Epston (Hancock & Epston, 2008) describes insider knowledge in this way:

Insider knowledges are local, particular and times unique as they often arise in imagination and inspiration, not the usual technologies of scientific knowledge-making...Because they are, in the first instance, the intellectual property or otherwise of the person(s) concerned, outsiders cannot rightly claim either invention or ownership of such knowledges. 'Inside knowledges' are modest and make no claims beyond the person(s) concerned. They do not seek any monopolies of 'knowing' but sponsor many kinds of and ways of knowing. 'Insider knowledges' do not provide grand schemes as they are far too humble for that...and are carried best and through stories. (pp. 485-486)

Prior to being introduced to the concept of insider knowledge, I had been thinking in terms of what Michel Foucault had been referring to as "subjugated knowledge" (1980), and more specifically, what Foucault (1980) referred to as the bringing forth and "the insurrection of subjugated knowledge" (p. 7). It was such subjugated knowledges that we were naming as illustrative stories of youth wisdom, youth knowledge; and stories of survival amidst extreme challenge, of one sort or another. In consideration of Foucault's ideas, and envisaging a poetics of resistance, I wrote that, "I see this work as representative of a form of bearing witness to clients' 'knowledges from below... unqualified or even disqualified knowledges'" (Sanders, 2007, p. 69).

One of the female participants at Peak House wrote in her commencement letter that Peak House was a "spiritual place", and her relationship with the "grownups" at Peak House had indeed changed her mind about adults, given that she experienced herself as a person, not a "delinquent".

I read Holly's (pseudonym) document as a description of her identity that she arrived at in relationship with others' at Peak House, and as a reauthoring description noting both where she had been within her life in relation to substances, in relation to "grownups", and in relation to

a “delinquent” identity. I experienced such revelations from participants as representative of Foucault’s “insurrection of subjugated knowledge”, the emergence of knowledge hitherto minimized, ignored; knowledge and know-how the participants had to keep to themselves, or, share sparingly and cautiously with accepting others’. Experiencing Peak House as a “spiritual place” had opened space for Holly, allowing her to make important decisions regarding the place of substances and exploitative relations with her life. This kind of unraveling of a deficit identity was what we were always hoping for with young participants, and were always working towards.

### **Re-authoring Deficit Identities**

A literature exists suggesting there are psychological processes and “stages” a person should move through in their development as human beings. There exists a predominant psychological discourse suggesting young persons should have achieved particular developmental milestones by a particular age within the course of their evolving lives. Such thinking is perhaps best illustrated by the theorizing of Erik Erikson (1963) in regards to what he referred to as psycho-social stages. I concur with others (Burman, 1994; Dickerson, 2004; Dickerson, Zimmerman, & Berndt, 1994; Hare-Mustin & Maracek, 1994, 1996; Gilligan, 1989, 1991; Gilligan, Rogers & Tolman, 1990; Parker et al, 1995; Weingarten, 1992) that such socio-cultural constructs, norms and prescriptions, set persons up to believe they are personal failures if they do not live up to and achieve such stages of so-called development.

A great deal of the time at Peak House, we witnessed such a sense of personal failure, within the lived experience of the young persons’ participating in the program. We also witnessed a personal sense of not measuring up, of inadequacy, plaguing mothers and fathers (with mothers being especially challenged), as parents may come to experience self-doubt in regards to their ability to provide support, nurturing, sustenance, and encouragement to their children.

At Peak House, a principle focus with utilizing externalizing language in therapeutic conversation was to dismantle the monological relationship that substance use was exerting as a power over the person. I wrote,

I often find that when a young person enters Peak house, there exists a monologic relationship between the person and the problem. That is, the problem’s voice and influence have come to dominate and oppress the person, placing severe constraints upon the person’s ability to relate to others and to access his/her own knowledge and wisdom. The problem has left no space for the possibility of alternative, barely audible voices to break through. This monologic relationship is hierarchical and imposing, and is representative of the problem’s power over the person. This way of being is both subjugating and disqualifying of the person’s courage, determination, commitment, and solution knowledges. (Sanders, 1997, pp. 403-404)

The vast majority of Peak House participants with whom I collaborated informed me that substances had tended to take advantage of them when they have been most vulnerable to such

intrusions into their lives and relationships. Participants informed us that substances most often infiltrated their lives in relation to the following areas of vulnerability and distress:

- Arising from experiences of sexual violation and other forms of inter-personal violence
- Arising from oppressive experiences relating to the impact of racism
- Arising from experiences relating to homophobia and hetero-normal, taken-for-granted, ideas and beliefs
- Ageism, and not being taken seriously because of being young
- Not measuring up to others' (family, teachers, coaches, clergy, etc) expectations
- Dis-connection, social dis-location, and an absence of a sense of belonging

The life circumstances that these young persons' found themselves within were not to find their origin or etiology within personal, individualistic, locations. Rather, these circumstances were an effect of social contexts, relational contexts, often of a socio-political, socio-economic bearing.

Some years later, I read White's (2004) essay, "Addressing personal failure" in which he addresses an increasing phenomenon he was witnessing with therapeutic conversation with others, writing, "Because the phenomenon of personal failure has grown so exponentially, I believe it appropriate to now speak of the 'modern failures'" (p. 172), going on to write of what he called " 'the resistances' ", specifying:

'the resistances'...are shaped by specific skills of living and knowledges about life that are both historical and cultural, either erudite or local, and that people knowingly and unknowingly engage with. The resistances might be identified in a broad range of actions, including those that reflect:

- a) a willful abandonment of the pursuit of adequacy;
- b) an obstinate rejection of aspirations for the achievement of superior status;
- c) an obstreperous resistance to the classification of people's lives;
- d) a perverse interest in relational forms that are challenging of the narrow legitimated forms of contemporary culture, and, more generally,
- e) a headstrong negation of the contemporary emblems of normalcy, including those of 'self-actualisation', 'wholeness', and 'authenticity'. (White, 2004, p.173)

When I came to write up aspects of this practice, I wrote the following in regards to what I intended by a poetics of resistance perspective:

A poetics of resistance will highlight actions and behavior promoting of personal agency, intention, and choice. A poetics of resistance highlights and encourages narratives other than those offered by normative descriptions, diagnoses, and labels, especially descriptions disconnected from sociopolitical, sociocultural contexts [...] pathologizing of the person. A poetics of resistance always believes a person is always more than the sum of the diagnosis (Sanders, 2007, p. 68).

In relation more specifically to the work we were doing at Peak House, I wrote:

A poetics of resistance does not participate in the perpetuation of personal pathology and disease metaphor language. A poetics of resistance insists that ideological phrases such as “my addiction” can always be reconceptualized and renegotiated in terms of “the impact addiction has on my life is such that...” or “this relationship addiction has with me...” or “my response to the direction addiction wants for me is...” or “my resistance to the intentions of addiction within my life is such that...” and so on. (Sanders, 2007, p. 68)

Due to the predominant influence within the domain of substance use of what I previously referred to as “addiction mythology” (Kinman & Sanders, 1994, Sanders, 1994), particularly in relation to the common assumption that substance use was brought forth due to genetic influences, I wrote:

[A] poetics of resistance represents a counterstory to the story of hopelessness and self-doubt associated with the restraints of a genetic fundamentalism (Schwartz, 1997). Adhering to the idea that so-called genetic disposition toward particular behaviors is directing and ultimately shaping of one’s life represents a limited worldview, a restraining perspective that needs to be respectfully questioned. From a sociobiological perspective, genetic fundamentalism represents a dangerous rationale for all sorts of violent, destructive human behaviors. I believe that imagining a Fifth Province domain within therapeutic conversation allows for resistance to the primacy of genetic predisposition in the creation of an “addictive personality.” This way of thinking needs to be resisted if space for personal agency and re-authoring possibilities is to emerge. (Sanders, 2007, p. 69)

## **Poetics of Resistance**

The concept of a poetics of resistance flowed from Foucault’s proposal, “Where there is power, there is resistance” (Foucault, 1980, p. 95). Here, I refer to the powerful medical and psychological discourses that diagnose and otherwise label human actions and behaviours, thought processes, and so on, as being outside of some imagined norm.

An illustration of this would be the medical model that posits substance mis-use and abuse as being indicative of illness, disease, and pathology. In my practice, I was encountering young persons who were entering Peak House under the impression that they were most definitely suffering from an illness, a disease called “addiction”. “In my work at Peak House, all too often I find that young persons and family members enter the program under the influence of a variety of problem discourses. In effect, their experience and relationships, and their dreams of future possibilities, have been colonized by the problems” (Sanders, 1997, p. 400).

At Peak House, in a continuing effort to begin to deconstruct medical and psychological social constructs (addictive personality; anorectic, bulimic person, alcoholic or addict person,

dysfunctional person and/or dysfunctional family, multi-problem person or multi-problem family,<sup>69</sup> and so on), externalizing questions became the questions most asked:

- Who helped you begin to think of yourself as an alcoholic and/or addict?
- What meaning is there in these words for an understanding of your life?
- Do you imagine this to be a hereditary identity, or did some members of your (extended) family refuse this identity?
- Do others in your life know you as an “alcoholic/addict,” or as someone else?
- Does this identity hold you back from certain thoughts, desires, values, and actions?
- What intentions does this identity have for your life?
- Do you have other intentions for the paths your life could take?
- Do your own intentions sometimes get clouded or overshadowed by the intentions that follow from this identity? (Sanders, 1997, p. 405)

David Epston has done much to deconstruct the often harmful and destructive thoughts that enter into young persons’ lives as they attempt to “measure up” to great socio-cultural expectations and ambitions. Questions David has asked that I find particularly useful are ones like these: “How long have you lived under the curse of perfection?” and “What effects have you suffered in life under this curse?”

Michael White (1995b) has also critiqued an idea embedded within humanistic psychologies suggesting we can always achieve more, perform more effectively, and appear more perfect: “Many of us are relatively successful at torturing ourselves into a state of ‘authenticity’ and, in so doing, reproducing the ‘individuality’ that is so venerated in this culture” (White, 1995, p.140). In our conversations with young persons at Peak House, more often especially with young women, we came to understand the power over young women that socio-cultural, patriarchal, body specifications exerted, and the inter-relationship existing between struggles with anorexia/bulimia body specification and substance use.<sup>70</sup>

As we have seen, Anderson and Goolishian (1988) spoke of therapeutic conversation as involving the therapist as an architect of dialogue. It remains imperative that, within a narrative poetics, we continue to hone our ability to engage dialogically, and, as we say, keep the conversation going elsewhere from where the problem wants the conversation to flow. We know the problem, the dilemma, has a voice of its own, and, our belief is that this voice finds support for its problematic existence within predominant social discourses. Within the context of a

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<sup>69</sup> As noted above, I am grateful for Madsen’s deconstruction of multi-problem person and dysfunctional person to multi-stressed person/family, and so on (Madsen, 1999, 2011).

<sup>70</sup> For an original exploration of these connections based upon conversations with young women who participated at Peak House, see the work of Dennstedt (2010, 2011).

therapeutic conversation, it is a fine art, a craft, in being attentive and vigilant to not allowing the problem, the dilemma, to detract and detour the conversation.

Other commonly asked questions intended to address the tactics used by substances to recruit young persons included the following:

- Have there been particular contexts or situations within your life and relations with others that substances have attempted to take advantage of?
- Would you say it is fair or not so fair that substances call out to you at moments when you are most vulnerable?
- Would you be able and willing to tell me the ways in which you have previously resisted or refused the influence of substances?
- Can you remember activities or pastimes or relationships that substances robbed you of?
- Can you begin to recall any of the plans you once had for yourself with others, or dreams and hopes you entertained, that substances interfered with or disappeared from your mind?
- Do you ever get the sense that substances are ripping you off?
- In your experience, how would you account for the fact that you started using substances socially and recreationally with others, and then substances created a life of isolation and estrangement for you from those whom you love?

For persons who chose to identify with a 12 Step philosophy and the community (fellowship) offered, I would ask the following sorts of questions:<sup>71</sup>

- Is this addiction you speak of something you wish to continue to dominate your life and relationships?
- Has this addiction become your principle relationship?
- Within the context of your life and relationships, who else has become impacted by this relationship with addiction?

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<sup>71</sup> At Peak House, and throughout my practice and my teaching, I do not take a negative position regarding a 12 Step philosophy. As I wrote, “Our program philosophy and practices do not negate the useful fit with a person’s experience of AA. As mentioned above, only when persons feel further impoverished, or restrained, by their experiences with the AA program do we pursue a line of inquiry as reflected in some questions described earlier in this chapter. For example, some clients have suggested that, for them, it is oppressive to think that they have ‘defects of character’ or that they are ‘powerless’ over certain areas of their lives. In remaining respectful and honoring of each client’s point of view in this regard, we choose to accept Erickson’s (1954) notion of ‘utilization’ – a notion that promotes listening to, and carefully attending to, an understanding of the words and worldview that make sense and provide meaning to the client.” (Sanders, 1997, p.413).



- Who supports and assists you in standing up to and resisting the cruel tactics used as power over you by addiction?
- Are you willing to describe for me some of the ideas, knowledge, and wisdom you have gathered from your sense of belonging in AA/NA, as it appears this fellowship offers you a sense of community?

Our collaborative practices focused on engaging *with*<sup>72</sup> the young persons and their families and related communities of support and care, and not being judgmental regarding their struggles and circumstances. In our practices at Peak House we were becoming increasingly interested in more relational ways of comprehending the multiple factors that may create barriers for a young person, barriers or restraints leading towards substance use, a behavior and practice that often arrived with its own set of debilitating experiences.

### **Shifting perspectives and Peak House practices**

My intention within this section is to trace the movement away from traditional perspectives and associated practices in our shift towards non-pathologizing, more collaborative, practices informed by what I began to refer to as a poetics of resistance.

The idea of resistance derived from Foucault's (1990) proposal that "Where there is power, there is resistance" (p. 95). Foucault further suggested, one must not "...misunderstand the strictly relational character of power relationships. Their existence depends on a multiplicity of points of resistance... These points of resistance are present everywhere in the power network" (p. 95).

I was also beginning to come to know the response-based theory and practice associated with Allan Wade (1995, 1996, 1997, 1999, 2002) who was also referring to "resistance knowledges", and the work of his colleague, Linda Coates (Coates, 1997; Coates and Wade (2003). At a later point in time, I would become familiar with the ideas and practices espoused by Shelly Bonnah (2008), also utilizing a response-based perspective in her practice with young persons in the care of the state.

My thinking at the time was also being influenced by Paolo Freire's (1970), philosophy regarding education, critical thinking, and bringing forth challenges to the status quo, whether in education and pedagogy or (family) therapy theory and practice. Freire (1996) wrote:

It would be horrible if we were sensible to pain, hunger, injustice, and violence without perceiving the reasons for all this negativity. It would be horrible if we could feel the oppression but could not imagine a different world. It would be horrible if we could dream about a different world as a project but not commit ourselves to the fight for its construction. (p.186)

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<sup>72</sup> Around this time, I was influenced by the work of Insoo Kim Berg and Scott Miller, and their book, *Working with the problem drinker: a solution- focused approach* (1992).

I was interested in constructing alternative structures within a community of practice that would be promoting of relationship and freedom from oppressive, prescriptive concepts and theories, having do to with individual pathology. Disinterested in reproducing and maintaining program structures that were static and impervious to transitions, I was intent upon co-creating a living community, a living practice, in line with Freire's (2007) vision that "Life implies freedom as movement and constant search" (p.186).

I have written elsewhere (Sanders & Thomson, 1994; Sanders, 1994, 1995a, 1996, 1998, 2007) of the evolution of our ongoing attempts to co-create, alongside of participants, counter practices to traditional drug and alcohol interventions within the lives of young persons and families. Significantly, the practices we engage in and utilize are practices young persons themselves have had a hand in creating. We consider these practices to be more effective than practices that omit such collaboration. Our practices are not imposed from above, but instead reflect ideas, solution knowledges, and wisdom evolving out of consultation with those seeking our services. Increasingly, this way of working has made more sense, has been less coercive, and has assisted many more clients in becoming liberated from the oppression of substance misuse and the restraints associated with particular diagnoses and labels.

In the early 1990's I became concerned in regards to the lack of alternative ways of viewing struggles associated with substance use. The predominant perspective organizing residential programs consisted of the 12-Step philosophy (Wilson, 1985), embedded within a medical, "disease", model. These perspectives and models tended to view all persons who struggled with substance use as "diseased", and "ill".

I was also concerned about the number of young persons I encountered who were operating under the belief that they were "alcoholics" and "addicts", and that this condition, and that this way of being, this identity, was for life. Mostly, I was opposed to the notion, and in protest against, the use of diagnosis and labeling to construct such deficit identities as "alcoholic" and "addict" for young persons, some as young as thirteen. A number of other possibilities began to evolve, as I, and persons with whom I worked with, became exposed to other ideas and perspectives within the field of not only "addiction" studies, but family therapy as well.

As I have previously written,

...my work has been inspired by the ways in which persons suffering from substance misuse have variously interpreted their own experiences, including ways in which they have resisted labels, diagnoses, and the discursive power of prescriptive and normative identities. Foucault (2003) referred to this sort of resistance as representative of "knowledges from below...unqualified or even disqualified knowledges" (p .7). It is this sort of knowing that is evocative of a poetics of resistance. (Sanders, 2007, p. 59)

My protest has been directed towards the construction of alternative ways of understanding the meaning of substance use within a person's life, and the socio-cultural, socio-

political, and socio-economic contexts within which such a phenomenon occurs. I disbelieve the idea that there are biological, bio-chemical, antecedents to the occurrence of such a phenomenon (Sanders, 1994, 1997, 1998).

I once heard Michael White remark that deconstructing is easy but re-constructing alternatives in place of what has been taken down is much more difficult. I will reiterate this observation towards the end of this dissertation, to remind that criticism is easy to do, transformation and meaningful, tangible, structural, relational, change is difficult work. Such work requires vision, commitment, engagement, perseverance and patience. White's point was helpful in having me realize that I could not simply nor merely be against certain practices (pharmacological practices, for example) without constructing alternatives in lieu of such practices.

In the spirit of becoming more relational, collaborative, and compassionate, and focusing less and less upon the etiology of individual problems and related pathologizing practices ("blame the victim"), in the early 90's at Peak House we co-created and evolved a number of practices and rituals opening space towards more beneficial, meaningful, and even enchanting ways of being within an alternative, non-traditional, residential substance use program.

Inspired by White and Epston's (1990) incorporation of van Gennep's (1960) ideas regarding liminality (separation; liminal period; reassimilation), and by the unique therapeutic practices being co-created between White and Epston, I began to envision the work we were doing at Peak House within the metaphor of a rite of passage (van Gennep, 1960). I perceived the experience a participant may go through as one of liminality, in that a participant entering (separation) Peak House was no longer the person they had been upon entering the program, and they were not yet the person they may become upon entering back (reassimilating) into the world of their own, unique, relationships.

One participant had described Peak House as representing "a plastic bubble", in terms of being a relatively safe space and environment in which to explore the past with an eye upon the future. This young person described Peak House as a place in which "hopes and dreams" could be imagined and explored.

## **Reflections**

### **Co-creating community**

As our practice became more collaborative and relational, we were increasingly relaxed and accepting of being open to emerging possibilities, and less inclined to being concerned about searching after any specific truths, and uncovering root causes for participants' struggles and dilemmas. In removing our inquiries from the realm of "bounded being" (Gergen, 2009, p. 206), and notions of the individual self (Sampson, 1993), and what Alan Watts referred to as the "skin-encapsulated ego" (Watts, cited in Macy, 1990, p. 37) we were opening the field to interacting differently within a residential community, of interacting in as much of a de-centered way as possible, given the context of the program, our responsibilities to the funding body, and so on.

We utilized a significant portion of our professional education budget to have practitioners at Peak House attend the early years of the Narrative Ideas and Therapeutic Practices Conferences sponsored by Stephen Madigan and Yaletown Family Therapy, where I was an Associate Director, in addition to my job of continuing to provide the theoretical and practice direction at Peak House.

Therapists at Peak House participated in the training Stephen and I offered (beginning in 1993) through what became The Vancouver School for Narrative Therapy<sup>73</sup>. The practitioners at Peak House were also encouraged and supported in attending workshops put on by others working within narrative, collaborative, response-based, and social constructionist perspectives including: David Epston, Michael White, Amanda Kamsler, Johnella Bird, Vanessa Swan, Ian Law, Noillag Byrne and Imelda McCarthy, Mathew Selekman, Allan Wade, Harlene Anderson, Sheila McNamee, Lynn Hoffman, Vickey Dickerson, Jeff Zimmerman, Karl Tomm, and others.

Internally at Peak House, I was making every effort to shift the language we used around struggles relating to substance use, and this new way of talking became more and more aligned with the program structures. We were watching tapes of Tom Andersen's work, White and Epston, and others, and were taping much of our own work, and engaging in discussions about the work.

### **Collaborative practices**

When requested to give workshops, or, when proposing workshop ideas, I had started asking participants in the community of Peak House if they felt safe enough to come with me to the workshops and conferences, and speak in their own words of their own lived experience. I provided participants who accepted, current and former, with a *honourarium* for their time, and for their words. Almost twenty years later, working on what was one of the largest research demonstration projects in the world at that time (Sanders, 2010), my colleagues and friends Barbara Baumgartner and Brian Williams, continued this tradition, having project participants co-facilitate at the last couple of Stephen Madigan's Therapeutic Conversations Conferences in Vancouver (Baumgartner and Williams, 2012, 2013), and collaborate in their publications.

### **Speaking of Community: 26 Years Later**

As of this writing, Peak House has continually offered service to young persons' going on 26 years. Peak House is currently funded by the province of British Columbia's Ministry of Health, through the regional health authority known as Vancouver Coastal Health, Adolescent Addiction Services.

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<sup>73</sup> I was a faculty member of the VSNT from 1993-2013, at which time, after 20 years, I resigned to open space for others to share their ideas/practices.

For the years 2012-2013, Peak House was home to 67 young persons (42 identifying as female, 24 as male, and 1 as transgender). The average age of first using a substance was 12; the average age for entering treatment was 16; of these 67 persons, 1 was South Asian, 2 were Asian, 3 Latin American, 3 African, 11 First Nations, and 52 Caucasian. Of these 67 young persons, 30% entered Peak House with a co-occurring mental health diagnosis. The principle substances of choice were alcohol (30%), heroin (25%) and methamphetamine (12%) (Kelly, 2013).

Interesting to note, the Manager (with Vancouver Coastal Health's Adolescent Addictions Programs) responsible for Peak House, Lorraine Grieves, shares a long history within the narrative, and collaborative, therapy community. For years, Lorraine worked with Stephen Madigan and I at Yaletown Family Therapy, where she was responsible for the challenging task of organizing the early Narrative Ideas and Therapeutic Practices Conferences, as well as the initial Therapeutic Conversations conferences. Lorraine was also a co-founder of Vancouver's "Anti-Anorexia, Anti-Bulimia League", (Grieves, 1998), and she was also, for several years, a co-director of Peak House. Lorraine is also a graduate of the Master's of Counselling Program with Vancouver's City University.

My partner, Gail Marie Boivin, herself a graduate of City University's Master's of Counselling Program, in the early 90's was an acting director at Peak House, and a youth counsellor. Over the years, Gail went on to create community clinics in single-room occupancy (SRO's) hotels on Vancouver's Down Town East Side (DTES), to meet the medical and related needs of the city's most impoverished, marginalized, and suffering others'.

Vikki Reynolds, whom I first interviewed in the early 90's for a casual youth counsellor position, also went on to become a therapist at Peak House, where she is now Clinical Supervisor. Vikki Reynolds initially studied narrative therapy ideas and practices as taught by myself, Heather Elliot, and Stephen Madigan in the early 1990's at the Vancouver School for Narrative Therapy.

Christine Dennstedt, originally a student of mine at City University, volunteered at the 10<sup>th</sup> Anniversary Celebration of Peak House (Stephen Madigan gave the keynote). Christine did an internship with Peak House, while studying towards her M.A. in Counselling Psychology at City University, Vancouver, Canada. She first became a Youth Counsellor, and eventually a therapist, at Peak House. As I write (September, 2013) Christine is the acting Clinical Supervisor, while Vikki is writing, teaching, and travelling around the world, with her partner Brian, for one year.

Current Peak House therapist, Jamie Whitehead MC, RCC, is also a graduate of City University, while Jessica Hilton, currently completing her Master's of Counselling with City University, recently became the new Intake and Assessment Counsellor with Peak House.

In April, 2013, Peak House was honoured by my professional association<sup>74</sup>, the British Columbia Association of Clinical Counsellors (BCACC), also celebrating 25 years, with their Professional Care Award. I accepted the award at the ceremony, alongside current Executive Director, James, Program Manager, Wendy, and one board member. It was a proud moment.

As Peak House Executive Director, James Kelly<sup>75</sup> (2013) acknowledged recently, "...Colin was instrumental in developing the therapeutic model still present today at Peak House". While I appreciate this acknowledgement, and the legacy entailed, I will point out that what was accomplished at Peak House would not have occurred if not for the inspiration and influences of persons whose thinking/writing/practices have been described within my dissertation, in addition to the hard work of dozens of Peak House employees over the years.

Importantly, the efficacy of a narrative poetics, and a poetics of resistance, could not have endured all these years without the literal re-authoring, and re-storying of the lives and relationships of hundreds of young persons and families. Such "sparkling facts" (White & Epston, 1990, p. 76) or "sparkling moments" are not to be forgotten, and contribute to and inform an experience I will always bear in my mind and within my heart, always to be kept alive, to be re-membered.

As the late poet Robin Blaser (2006) wrote, "I read, walk, listen, dream and write among companions. These pieces do not belong to me" (p.203).

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<sup>74</sup> This association rejected my initial application for membership in 2000 because I did not have an academic psychology history. I appealed (cf. Appendix A), writing a brief history of (family) therapy as created by cultural anthropologists, engineers, psychiatrists and others. My appeal convinced the association they needed to be mindful of the influence of other disciplines, and the professional, and lived experience of the applicant, in making their determination for membership.

<sup>75</sup> James completed a Certificate in Leadership with City University in Vancouver, British Columbia, in the summer of 2013.

## CHAPTER EIGHT

### REITERATIONS WITH REFLECTIONS FOR FURTHER INQUIRY

*The philosophers have only interpreted the world, in various ways. The point, however, is to change it.*<sup>76</sup> Karl Marx, *Theses on Feuerbach*.

*Poets are the unacknowledged legislators of the world.* Percy Bysshe Shelley, *A Defence of Poetry*.

*The language of a poem is not that of a journalist.* Badiou, (2001, p. 82).

#### A reiteration

In Chapter One of my dissertation, I have taken the position that being and becoming with others within therapeutic contexts is not as much about the acquisition and mastery of particular therapeutic techniques and formalized practice procedures as much as it is about an aesthetics of engagement. I have described the fine art and the craft of such engagement as a practice involving a narrative poetics. As well, I have described the active refusal and protest against problem influenced and/or prescribed identities and relationships as a poetics of resistance.

In Chapter One, I have also noted McNamee's (2004, 2012) proposal that we engage within and mix genres and perspectives, without becoming too attached to any one theory; a theoretical practice McNamee has named as one of theoretical promiscuity.

In Chapter Two I have highlighted the thinking/writing/practice of a number of therapeutic practitioners and others whose work has been influential for me over the decades, beginning in the late 1960's. In this chapter, I have stressed the trans-disciplinary pattern of my own reading, and the trans-disciplinary reading and efforts of others whose thinking/writing/practices have been inspiring of my own work over the decades.

In Chapter Three I have further described a way of engaging relationally and purposefully with others, a practice I have taken to referring to as a narrative poetics. Such a practice, especially within a therapeutic context, pays attention to the knowledge, wisdom, and lay experience, lay knowledge (Adorno) each person is in possession of, as opposed to an expectation of reliance upon so-called knowledge and wisdom of professional experts. As such, lay knowledge can be understood as a form of resistance against biomedical and purely psychiatric discourses and understandings.

In Chapter Four I have attended to and outlined ways in which language can be utilized to pathologize the actions, intentions, and experiences of persons, in a manner that may contribute to a sense of inadequacy, deficit, and disparagement in regards to one's identity.

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<sup>76</sup> This sentence, with its challenge to action, is engraved upon Marx's tomb, London, England, Highgate Cemetery.

In Chapter Four I have intentionally focused upon ways in which psychiatric and psychological language may influence the construction of deficit identity, contributing to a sense of hopelessness for some persons and detracting from their confidence in their own personal, relational, agency.

The language of deficit and of diagnosis formed the groundwork, and provided the structure, for what I have referred to as normative and prescriptive ways of engaging with struggling, suffering others', especially in regards to practices I encountered within the substance use "treatment" field.

In Chapter Seven, I go on to describe this initial encounter with such ideas and practices, and the other ideas and practices influential in transforming and reconstructing an alternative matrix of structures and ways of engaging with young persons' struggling with substance use, and related dilemmas.

In Chapter Five I focus explicitly upon the original contribution and the enormous influence of Michael White's thinking/practice upon my practice, in both therapeutic and educational contexts. In Chapter Five I also reflect upon how my re-engagement with White's *oeuvre* for the purpose of this dissertation has opened for me a novel appreciation of his ideas and the application of these ideas in practice.

Chapter Five described the originality and creativity of White's thinking, and narrative practice innovations that White contributed throughout his lifetime to the field of a socially just, ethically accountable, therapy. In regards to a narrative poetics of resistance, I also highlight White's reading across disciplines and genres, and just how lucid and erudite a tapestry White was able to create based upon his reading, in conjunction with his well honed style and aesthetics of engagement with struggling others'.

In Chapter Five, I have also described aspects of narrative inspired practices currently being undertaken by several of my colleagues, within their innovative practices moving narrative therapy theory/practice beyond Foucault.

In this homage to White, I have also described threads of White's thinking/writing/practice that appear influenced by his reading of Gaston Bachelard, and, towards the end of life, thinkers such as philosopher Gilles Deleuze (cf. Carey, 2010, and Winslade, 2009).<sup>77</sup>

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<sup>77</sup> Australian therapist Alan Jenkins (1990, 2009), whose early work provided an intriguing alternative to, and critique of, normative theories associated with so-called "anger management" has also become inspired by Gilles Deleuze, and writes of his own invitational practice that "Invitational theory is informed by a Deleuzian conceptualization of desire, whereby life and processes of living are regarded as inherently productive and expansive. Our lives are continually shaped by a multitude of *flows of becoming* which have infinite possibilities" (2009, p.xi).



In Chapter Six, I have described the work of several practitioners whose thinking and reflections upon therapeutic engagement has been responsible for returning to therapy the notion of the sacred. In this chapter, I have explored ways in which the thinking/practices of Imelda McCarthy, Noillage Byrne, Kiwi Tamasese and Charles Waldegrave, amongst others, offer sacred and culturally accountable ways of being and becoming in relational therapeutic contexts with suffering and struggling others. I have also focused in this chapter upon Michael White's descriptions relating to spirituality and the sacred, as situated within the context of his ethics.

I have introduced aspects of the thinking/writing of philosopher Emmanuel Levinas' thinking, particularly Levinas' thinking and reflections upon how it is that we, as human, social, relational beings, greet and appreciate the "other". I have noted how the thinking of Levinas has migrated and become incorporated into the thinking/writing/practice of some narrative and social constructionist influenced practitioners, and how Levinas' thinking could be further utilized within the domain of therapeutic and educational practices.

### **Reflections for further inquiry**

In Chapter One, my intention was to begin to describe and explore the fine art of therapeutic engagement as a practice of being and becoming within a aesthetics of engagement, as described by a practice I have taken to referring to as a narrative poetics of resistance. Such a fine art, an ancient craft really, involves being with an-other, while continually becoming *other* within the process of dialogue and (therapeutic) conversation. Extrapolating from the therapeutic domain to the educational one, I would add that this is an area I am increasingly interested in; that is, how collaboration with graduate students can create new learning possibilities, and transformational experiences, for all involved.

As such, I remain interested and committed to opening the field of possibilities for more relational, generative, ways of being and becoming within educational and organizational. Towards the end of his life Derrida (2007) remarked, "Each book is a pedagogy aimed at forming its reader" (p.31), yet each book is also representative of the dialogue and reflection deriving from inter-relationship, conversation and dialogue, reading and reflection, and being with a myriad of companions. As linguist Lev Vygotsky reflected, "We are the voices that have inhabited us" (cited in Andersen, 2007, p. 90).

In Chapter Two, I described the work of others' who have, in turn, discussed their own sense of how the pre-science that one brings into the therapeutic encounter can inform one's sense of the other (e.g., the client/s), and the importance of leaving such pre-sense in abeyance, and positioning one's self in a not knowing domain (Anderson & Goolishian, 1988).

Social constructionist thinking regarding ways in which identity becomes co-created within relationship (i.e., in both the linguistic and embodied space between one and an-other) continues to be a consideration I hope to explore in the future. The pre-dominant emphasis and fetishism regarding individualism within counselling psychology, and the diagnostic categorization of human suffering, remains anathema for me. As a person involved in working with graduate students interested in becoming therapists and community development practitioners, I hope to continue my own thinking/writing within this area, and remain in a position to engage students within dialogue, ever seeking to unravel the taken-for-grantedness of

any perspective. This is one reason why McNamee's (2004, 2012) challenge regarding theoretical promiscuity is intriguing.

I remain interested in further developing an ongoing critique of theoretical perspectives within the fields of counselling therapy and education, bearing in mind "that questions of epistemology are deeply bound up with matters of political history" (Eagleton, 1996, p. 13), a point I make quite often in conversation with students. Eagleton (1996) further observes,

As Peter Osborne has pointed out, 'the narrative of the death of metanarrative is itself grander than most of the narratives it would consign to oblivion'. Postmodern culture is much taken with change, mobility, open-endedness, instability, while some of its theory flattens everything from Socrates to Sartre to the same tedious saga. A supposedly homogenizing Western history is violently homogenized (p. 34).

In Chapter Four I have outlined a non-pathologizing perspective on the utilization of language in the construction of identity. Tom Andersen (REF) indicated that language is not innocent. As such, language can begin to foment and describe an identity that fits with a person's sense of who they are and whom they aspire to be in relation to others, or, language can be used to prescribe and ascribe identity, often in deleterious and deficit ways.

A narrative poetics of resistance encourages the imagining of novel, and other, possibilities where the relational construction of identity is concerned.

In Chapter Five, where I have described my re-engagement with the thinking/writing/practice of Michael White, I recognize that there remain many ways in which narrative therapy theory itself can be creatively utilized in moving beyond the analysis of power envisaged by Foucault as incorporated by White (Epston, 2010). A close reading of Foucault's entire body of work indicates that he himself moved beyond power and knowledge (cf. Deleuze, 1995), and that shift may provide a topic for further discussion at some other point in time.

I am interested in writing a major essay regarding the creative ideas and practices espoused by the co-author of narrative therapy, David Epston. I have intentionally not elaborated upon the extremely important role played by Epston in regards to the beginnings of a narrative therapy, a literate therapy, and Epston's own shift theoretical shifts and evolution beyond Foucault. For me, an appreciative critique of Epston's thinking/writing/practice will entail a major separate endeavour, a project I have already commenced upon.

In Chapter Six I have focused upon the place of the sacred within a narrative poetics of resistance, and the multiplicity of ways in which the sacred may be comprehended and attended to. In consideration of this intention, I would suggest, as Hillman (1975) some time ago proposed, that we understand the etymological origins of the concept of therapist, pathology, and other words that, some would suggest, have lost their meanings. Another project I wish to complete involves expanding upon the discussion of ethics associated with Michael White's appreciation of the sacred. White's work is not often considered in this sense, and I see this a further contribution to the multiple ways in which narrative therapy theory has been construed and comprehended.

Chapter Seven entailed a heartfelt remembering of the “long, strange, trip” (Garcia, Weir, Lesh & Hunter, 1970) involved in providing the theoretical direction at Vancouver’s Peak House, between the years 1989-2004, and moving Peak House away from traditional residential substance use ideas/practices, initiating an adventure into collaborative, narrative, social constructionist and social justice oriented ways of being engaged with young persons, families, and communities.

In Chapter Seven I have described the shift in practice and theory I initiated at Vancouver’s Peak House between the years 1989-2004. In this description, I especially focused upon the evolving emphasis and attention to accountability in terms of culture, gender, sexuality, and age that developed at Peak House. I have described how we began to place more emphasis and understanding upon the solution knowledge and indigenous wisdom young persons possessed, and less and less emphasis and importance upon the diagnoses accompanying the young persons into the Peak House community.

I am certain Peak House was not the only program co-evolving along non-traditional, non-normative, non-prescriptive ways, offering alternate forms of practice around working with substance use, and the range of experiences in persons’ lives and relationships that invite substance use into play. I am interested in knowing of other such programs. In the future, I would like to collaborate with others in authoring/co-authoring a collection of book chapters relating to non-traditional practices in this field.

Additionally, in the future I would like to be part of an effort focused upon publishing the literary documents, art, and mixed media productions created by young persons in their own re-authoring journeys. I have a small archive of such material from participants at Peak House, and would appreciate seeing what others have done as further illustration of externalizing practice.

In the following, final, section of this last chapter, I write about how the work of a narrative poetics of resistance is hopeful and sustaining, for without such hope we, as therapists and as teachers, would be incapable of remaining creative and enchanted within our practices.

### **Co-evolving hope**

*It is not enough to be compassionate, one must also act.* Dalai Lama.

Michael White (2012), speaking to Tom Andersen, spoke as follows:

In your speech, there are echoes of what Paolo Freire was saying. Many of you would know Paolo Freire as a Brazilian activist, community worker, and teacher. The thing he was most concerned with at the time of his death was what he called the “neoliberal fatalism,” or the new liberal fatalism among the people of the professions. It’s people

with a liberal critique of how things are, but with a kind of fatalism, a paralysis of will. We critique everything, but what can we do? (p. 25).

This is a sentiment often expressed by therapeutic and educational practitioners alike. My thought is such sentiment may lead to disenchantment, cynicism and sarcasm, or a kind of existential despair and hopelessness. White (2012), in attending to Tom Andersen's words, detected hopefulness, and not despair, commenting:

There's nothing that can be done, because we don't have access to power, and I thought a lot about this in relation to listening to Tom. The sentiment of his work is that we can do a lot, and there are many gaps that we can find. We can step into those gaps and there is so much that we can challenge, and I was thinking about a lot of the ripples that have come from Tom Andersen's work. Tom has had a profound influence on the practice of not just family therapy, but psychotherapy internationally. Many of his ideas and some of the developments that he has put together in collaboration with others have been embraced, and a lot of these practices actually run against traditions. Against taken-for-granted ideas and therapeutic practice. I would have enjoyed seeing a conversation between Tom Andersen and Paolo Freire, because I think this would have been very rich. (p. 25).

My passage over time, my involvement with both therapeutic, community development, and educational contexts has allowed me to reflect throughout composing this dissertation upon how imperative it is to "keep the faith" and believe in relational being, dialogue as a means toward the dissolution of dilemmas, and a focus upon remaining enchanted. As I often mention in the context of teaching, what is required in such an endeavour is commitment, perseverance and patience.

Coming as I am towards the end of the writing of this dissertation, I recall how French philosopher Alain Badiou (2012) described the great Irish writer, Samuel Beckett, as "...that renowned chronicler of despair, of the impossible..." (p. 82), then going on to say, Beckett "...is also a writer of the obstinacy of love" (p. 82). Beckett, writing at the end of his novel, *The Unnameable*, reflected, "You must go on. I can't go on. I'll go on". And so we must go on discovering ways and means of remaining enchanted even when faced with struggles and dilemmas that attempt to recruit us into hopelessness and despair. Indeed, Beckett, in his own narrative poetics, used words and language to create meaning out of seemingly meaningless events and relationships, and sense out of non-sense. In the dialogues between his characters, language is the connection, is the relationship. Following from Maturana and Varela (1987), language and languaging create the possibility of thought and thinking, not the other way around. Perhaps this is what Marx and Engels (1970) were considering when they wrote, "Life is not determined by consciousness, but consciousness by life" (p. 47), continuing to say, "Consciousness, therefore, from the very beginning is a social product..." (p. 51), a proposition I assume influenced Vygotsky (1962, 1978).

Maturana and Varela (1987), proposed, "...the biological foundation of social phenomena" is "love" (p. 246). Going on, they write, "...without love, without acceptance of others living beside us, there is no social process, and, therefore, no humanness" (p. 246). In Maturana and Varela's ethic, "A conflict is always a mutual negation. It can never be solved in

the domain where it takes place if the disputants are ‘certain.’ A conflict can only go away if we move to another domain where coexistence takes place. The knowledge of this knowledge constitutes the social imperative for a human-centered ethics” (p. 246).

Positioning one’s self from a belief in “being certain” often leads to injurious action, transgression of the other, and perhaps violation. Such possibility for the imposition of therapeutic violence, and inadvertent contributions to further pathologizing a person (Tomm *et al*, 1992) can easily occur all too often.

Laing (1967) wrote, “Love and violence...are polar opposites. Love lets the other be, but with affection and concern. Violence attempts to constrain the other’s freedom, to force him to act in the way we desire, but with ultimate lack of concern, with indifference to the other’s own existence of destiny (p. 50).

Offering one way to move away from such imposition of one’s ideas and beliefs upon another, Amundson and Stewart (1993) proposed a “therapy of curiosity” and not a “therapy of certainty”. In their view, a therapy of curiosity allowed a practitioner to “...tolerate confusion and ambiguity without moving to premature closure”; and is a practice and way of engaging whereby a practitioner ‘Moves more slowly in defining the problem, taking time to consider the experience in the room’. A therapy of curiosity is also a practice in which a practitioner “...looks for the special indigenous knowledge of the client” by respectfully asking intentional questions.

Johnella Bird (1994), too, has given much thought and reflection to the influence of hopelessness within therapeutic and institutional contexts. Bird writes,

In order to work with life/hope we need to be knowledgeable about the environments that perpetuate and support hopelessness and the idea of hopelessness. The pervasive or strong logic of hopelessness frequently offers people (clients) only one option and that is death. The internal dialogue of hopelessness can completely dominate people’s (clients’) thinking, thus reducing the possibility of rediscovering life/hope. We can intrude on this thinking by challenging the logic of hopelessness. Alternative ideas and experiences are then brought out through an enquiry centered on a pursuit of life/hope (p.190).

Finally, as Badiou (2012) proposes, “We could thus say that the future of philosophy depends on its capacity for progressive adaptation to the changing of its conditions” (p. 3), and I would suggest the same might be claimed regarding perspectives informing both therapeutic and educational practices. The co-founder of narrative therapy, David Epston (2010), similarly wrote, “There is nothing sadder for me than a school of therapy whose theory no longer is pertinent to current circumstances” (p. xxxvi).

In thinking about and reflecting upon what my experience of new learning has been in writing this inquiry into a narrative poetics, and how it is that we can engage others in therapy and elsewhere within the domains of our lives and relationships, in an ethical, accountable, transparent, non-violent manner as architects of dialogue, a few thoughts come to mind.

One persistent thread that comes through this inquiry is a reminder of how theoretical rigidity, and mistaking ideas and perspectives for truth, may quickly lead to negation, conflict,

and the construction of ideological barriers, often with dire consequences and effects. For those of who currently have, or have had, vocations as therapists, we experience this rigidity of perspective and belief in certain truths, in our conversations with suffering, struggling, others, all the time. We also experience this when we read newspapers, listen to new broadcasts, political party debates (they don't refer to these conversations as "dialogues") and, yes, even when we read, or at times write for, academic and other journals.

As indicated at the beginning of this inquiry, one of my intentions throughout has been to underscore the affinities and the convergences, the correspondences, between the theorizing that arises in an attempt to articulate therapeutic practice. When difference comes to our attention, to consciousness, then we can "listen and learn", or, we can become entrenched and embedded within ideological positions that ultimately entangle us within nets and webs of illusion, becoming disruptive, discouraging, and fomenting disengagement, not reengagement.

### **After thoughts, after words**

It is late at night, the month of February, 2014, very silent in the darkness of our home, and raining outside the window where I sit at my writing table, surrounded by photographs of my grandchildren, children; parents, grandparents; siblings; dear friends, some alive, some departed, and my companion, Gail and I, over the past couple of decades. Our two cats beside me, Moir asleep upon my desk and his sister Genevieve asleep on the chair beside me, where they have been often these past couple of years as this dissertation has been composed.

I think back to when this writing began. Drawing out the initial ideas of this inquiry into chapters while celebrating Gail's 50<sup>th</sup> birthday in Venice, reading/writing by a swimming pool at a farm house in Tuscany, then in the hills above Sorrento, along the Amalfi Coast. Returning to Vancouver that autumn, commencing the hard work of committing words to the screen, at our friends' Susan and Rick's cabin in Roberts Creek, on British Columbia's Sunshine Coast, autumn storms blowing up from the ocean, moving through the forest, falling trees, taking out power lines at times; grateful then for wood fire and candle light, wine, and conversation.

Writing this dissertation has allowed me to remember the struggles of early days experienced at Peak House, remembering and recalling the persons whose writings and example nurtured, re-sourced, sustained and enchanted me throughout challenging periods of struggle and transformation; many of those persons have been acknowledged within this dissertation.

Writing this dissertation has given me a sense of renewed hope in making a difference in terms of residential, therapeutic programs, as well as making a difference within educational and teaching contexts. My hope would be that others who may read this dissertation will become similarly inspired, knowing that relational, organizational, institutional innovation and transformation is entirely possible where there exists vision and persons committed to taking action to realize a vision, engaging with perseverance, patience, and compassion.

Decades ago, my father brought the following words to my attention, authored by his favourite theologian, Bernard J. F. Lonergan, S.J. (1956, p.74). The final, in-conclusive lines are his, in memory of my father.

For there is an intellectual desire, an Eros of the mind.

Without it, there would arise no questioning, no inquiry, no wonder.

## Appendix

Letter to the BCACC, March 21, 2000

March 21, 2000

Attention: M. Angela Burns, Registrar  
B.C. Association of Clinical Counsellors  
14-2544 Dunlevy Street  
Victoria, B.C., V8R 5Z2

Dear M. Angela Burns & Registration Committee Members:

I am writing in response to your letter of March 8th, 2000, in which you notified me that the Registration Committee had denied my application. This letter is intended as a "letter of appeal", with accompanying "letters of support". In support of this appeal, the following Vancouver professional therapists have written on my behalf:

Dr. Heather Elliot, Ph.D., Arden Henley, M.A., R.C.C., Vikki Reynolds, M.A., R.C.C., Garth Thomson, M.S.W., and Stacey (Orr) Sprague, M.A., M.S.W., Ph.D (Candidate).

To be honest, I was shocked my application was denied. I have practiced in Vancouver for the past twenty years, and have an international reputation as a therapist, counselling teacher, counselling trainer, and counsellor/therapist supervisor. The therapeutic work that I have been instrumental in pioneering at Vancouver's "Peak House" program attracts visitors from around the world curious about "how to" establish similar programs in their own countries. This week (March 23-28th), I will be in Toronto, presenting a two-day workshop for twenty therapists interested in alternate, collaborative, ways to work in the domain of substance misuse with young persons and their families. At "Peak House", we have most recently been receiving attention because of the ways in which we have integrated First Nations personnel (including an M.A. in Counselling Psychology candidate), and healing practices, within the program. We are dedicated to ensuring that we have a racially, and culturally, diverse team.

2.

However, before going on in regards to myself, I thought it may be interesting to preface what I have to say by way of appeal with the following brief narrative on the academic backgrounds, and initial training, of the innovators, founders, and pioneers of what we now refer to as family counselling and family therapy in North America.

Based upon the criteria of the Association, these founders of family therapy would also have to be denied entrance.

When you look into it, the story of the history and evolution of family therapy presents a multidisciplinary tapestry integrating ideas and theories from psychiatry, cultural and social anthropology, sociology, social work, philosophy and other disciplines. Several of the founders of family therapy as we now know it had distinctly non-clinical counselling academic histories, training and experiences.

Nathan Ackerman's background was in child psychiatry, but he developed an interest in the

importance of placing the individual's mental health problems within a social context, based upon his own experiences working with a community of miners in Western Pennsylvania suffering from the real effects of unemployment during the depression. Ackerman came to realize that the etiology of mental health problems could arise due to environmental factors.

Lyman C. Wynne, who would later work with Murray Bowen at the National Institute of Mental Health (Bethesda, Maryland), had a medical background when he entered Harvard's Department of Social Relations for a Ph.D. During this period, he studied sociology, social anthropology, and social psychology. In the mid-1950's, Wynne worked with Murray Bowen, who was then a psychiatrist. Bowen went on to develop his own counselling theories, particularly in regards to multigenerational transmission, and what has become known as family of origin work. Bowen's work continues to have enormous influence on teaching, and practice, in Vancouver through the auspices of David Freeman, and the Pacific Coast Family Therapy Training Association.

Carl Whitaker, who was probably one of the most creative and eccentric innovators in family therapy and counselling, also had a background in psychiatry.

Paul Watzlawick, one of the pioneering therapists to work at Palo Alto's Mental Research Institute (created in the late 1950's by Don Jackson, a psychiatrist), has a background in languages and philosophy, and is especially interested in Wittgenstein and Bertrand Russell, and novelists such as Dostoevsky and Arthur Koestler. Interestingly enough, solution focused therapist Steve de Shazer also worked at M.R.I., and refers constantly to the philosopher Wittgenstein in his published, theoretical, writings. de Shazer's wife, and partner in creating solution focused therapy, Insoo Kim Berg, was recently in Vancouver, and also referred to the philosopher Wittgenstein in her public workshop.

Another major contributor to the work on evolving a distinctly "family" therapy (and "brief" therapy) was John Weakland. Weakland studied engineering before becoming a cultural anthropologist, and a family therapist. Gregory Bateson's first career was as an anthropologist and ethnologist. Bateson's theoretical work in family therapy ( cybernetic ideas, patterns of communication, the importance of social context, conscious purpose, etc ) continue to exert influence on "new" therapeutic ideas, including the narrative therapy of Michael White and David Epston.

Last but not least, Virginia Satir came out of the University of Chicago's School of Social Work. By the time she became therapist/scholar-in-residence at Big Sur's Esalen Institute, she had profoundly affected the ways in which both individual and family therapy was being practiced.

In the past decade, my own particular theoretical interest has been in applying the concepts of narrative therapy within a residential program dedicated to assisting young persons in liberation from the oppressive effects of substance misuse. Narrative therapy was created by Michael White and David Epston. Michael White has a Bachelor's degree in social work, yet has been granted "Master therapist" status by the AAMFT. David Epston was born in Canada, and has a degree in anthropology and sociology, and studied at UBC. For many years now, I have related to, and been encouraged by, the following comment Michael made regarding David's background in



anthropology:

"Without doubt, David's fascinating childhood experiences...and his former career as an anthropologist ideally equip him to traffic in storytelling. In fact, upon reflecting on his unique location in the therapy world, I see that he hasn't departed from anthropology at all. An anthropological degree has been defined as an 'intellectual poaching licence' -- an apt description of the sort of credential that David would take most seriously. He collects ideas for stories from all over and displays a profound disrespect for 'disciplinary' boundaries in his search for helpful metaphors to interpret events in social systems".

3.

My hope for the Association would be that the "criteria for membership" be expanded to make space for persons such as myself who, while not meeting the exact criteria as indicated, do meet the core counselling courses, based on the concept of equivalency. I hoped to make this clear in my February "addendum" letter, written to "Glen Grigg & Committee Members", and passed to the Committee by Bev, at my bequest. I do not intend to reiterate what I have written in that letter, or detailed elsewhere within my *c.v.* I hope that you re-read that letter, in light of what I am proposing in this one. It appears that what I am proposing was once the case. I have been aware of the association for many years, and, in fact, am aware of the intriguing stories tracing the evolution of the Association. I am also aware of, and have known or worked with, persons within the therapeutic community who were brought into the Association with B.A.'s, or degrees that were not directly related to "counselling". For example, Avraham Cohen, with whom I worked twenty years ago at the Maples Adolescent Treatment Centre, has been an R.C.C. for many years, yet only received his M.A. two years ago. I know this because I supervised his M.A. practicum.

My belief is that a person learns how to perform in facilitative, beneficial, and ethical therapeutic ways through experience and practice, over time, with encouragement from others. Mere theoretical learning, especially of an academic nature, can only offer ideas and shape perceptions. Academic courses, in and of themselves, do not "teach" students how to be useful to persons oppressed by problems. My position is that I have advanced learning within, and beyond, all of the core counselling courses as described by the Association. The professionals I have enlisted in support of this appeal recognize my theoretical breadth of knowledge, and my own creative contributions to the domain of therapy, particularly within the areas of substance misuse theory and practice, and in narrative therapy. This counselling work has not only been published, but has also been presented, over the past decade, in workshops throughout North America. My therapeutic practice has thus been open to scrutiny, and has been made transparent through publishing, workshops, and teaching. In other words, unlike most practicing therapists, my own work is "out there" in the world. I think this is what makes "our" work ethical, and accountable.

I think it is important to point out that I have also supervised students at all academic levels, from child care counsellors, through to M.A., and Ph.D's. Most recently, I have supervised an M.A. student from UBC in Counselling Psychology, and sat on her M.A. thesis committee. As well, I assisted in the clinical supervision of a Ph.D intern, at Yaletown Family Therapy in Vancouver.

On a weekly basis, at Vancouver's "Peak House", I supervise three family therapists. I am the Clinical Consultant at Peak House, and was formerly Clinical Director. In fact, Vikki Reynolds, one of our therapists, and a person who has supplied a letter in support of this appeal, was accepted by the Association not too long ago, and I was her clinical referee. Currently, I am supervising an M.A. student in Counselling Psychology from Vancouver's City University.

It is obvious to me that in B.C., as elsewhere in the world, "clinical counselling" is performed by a wide variety of persons with diverse academic training. My partner works for a Greater Vancouver Mental Health team doing "clinical counselling" with mentally challenged persons. My partner is a R.P.N., has a B.A. (1999) in psychology, and commenced her M.A. last autumn, at Vancouver City University. The fact remains, for fifteen years she worked as a counsellor, supervisor, and, at one point, a program director. I also know countless others who work in the areas of mental health, social services, and related fields as therapists and counsellors, even though their degrees are in social work, nursing, education, or other fields.

Finally, I wish to point out once more that I taught for many years at Vancouver Community College, in the area of substance misuse counselling. I also facilitated experiential seminars for practicum students from V.C.C., a mandatory component of their certificate program. For the past two years, I have been on the teaching faculty at City University, and have enclosed a letter of support in this appeal from my friend and colleague, Director, Arden Henley, well known to your Association.

Once again, my hope is the Association will open space for my acceptance based upon consideration of the fact that family counselling, family therapy, is indeed an evolutionary creation, based upon multidisciplinary threads and strands of ideas, concepts, practices, and counter-practices. As well, I would hope that all the certificates, courses, workshops, in-service training, and related, on-going reading and years of experience would be acceptable and given equivalent status to university course work.

I continue to work as a therapist in two Employee and Family Assistance programs (Vancouver Hospital, and Yaletown Family Therapy), and to act as Clinical Consultant at Peak House. As well, I continue to teach at City University, and give workshops throughout B.C., and in Toronto through the Toronto Narrative Therapy Project.

The fact remains that I have dedicated the past twenty-plus years of my life to the profession of counselling and therapy.

Respectfully submitted,  
Colin James Sanders, M.A.

A handwritten signature in black ink that reads "Colin James Sanders" followed by a stylized circular flourish.

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