

Narrative Orthodoxy and Hegemonic Power: An Evolutionary Perspective

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It was the heyday of narrative therapy, and Michael White and David Epston were quite busy. David had finished collaborating on a book that summarized his work on Anorexia, *Biting the hand that starves you*, published in 2004. Michael was busy working on a seminal book called *Maps of narrative practice*, which would be published in 2007. They eventually saw some light in their busy schedules and planned a meeting to re-imagine narrative therapy, a meeting that would occur after Michael's book launched. Three weeks before the meeting was going to happen Michael died...

Michael had been posing the rhetorical question, "What are we doing wrong? Why aren't the next generations coming up with novel ideas/practices?" According to David, it was their intention to find ways to insert more innovation and creativity into the everyday practice of narrative therapy.

In his 2016 JST article entitled, *Re-imagining narrative therapy: A history for the future*, David stated:

"I believe Michael would never have asserted that there need be any 'official mode of geographical representation' and that his mapping in *Maps* should assume such hegemony. Why do I suggest this? Michael aspired to live by the Foucaultian notion of 'movement of thought.' Rabinow and Rose (2003) described this methodology of Foucault as 'an antimethodology' or what they called a 'practice of criticism': 'Thus the practice of criticism which we learn from Foucault would not be a methodology. It would be a movement of thought that invents, makes use of, and modifies conceptual tools as they are set in relation with specific practices and problems that they themselves form in new ways. When they have done this work, without regret, they can be recycled or even discarded."

David went on to suggest that, "This is in sharp contrast to other notions of methodology, for example, how to do things as primarily to be ruled and regulated by canons..." (p.84)



In his 2018 San Diego address, *Re-imagining narrative therapy: An ecology of magic and mystery for the maverick in the age of branding*, David asks, "What kind of rules and what kind of freedoms will decide whether narrative therapy teaches scales only as a regulatory regime like so many contemporary psychological practices and limits our freedoms and our imaginations" (p.5). David (p.6) then quotes the Canadian philosopher John Ralston Saul, "Imagination protects us from the temptations of premature conclusions: the temptation of certainty and the fantasy of fixed truth," and then he goes on to encourage us to, "take heed of Saul's warning:" "as I said, enforced loyalty to declared truth is the way to marginalize the imagination."

What stands in the way of this re-imagination is something that I have been thinking about as "Narrative Orthodoxy." This Problem has encouraged deliberate attempts to undermine, sabotage, and discard ideas, practices, and even individuals whose work represents a departure from the original but relatively ancient discourses of our work. Some of these attacks were heinous in nature. David himself tells a story about a paper of his that was rejected from a narrative therapy journal because it wasn't narrative enough... I could share many other specific examples of policing that I am aware of, but in the end, I don't see these specifics as the overall point. Instead, in this paper, I will try to make a case for the importance of evolving the narrative lens to include ideas and practices that I believe are critical to narrative therapy moving forward and becoming more relevant to our current context of living. This context is greatly changed from the 1980s when narrative therapy was born; that's 40 years ago! I will also try to address some of what stands in the way of this critical development and will do so in a variety of ways that include words from our founders, academic presentation, metaphorically-situated questions, an old exercise, deconstructed clinical material and, of course, some interpersonal neurobiology...(it's me!). I must admit to having a great deal of passion for this conversation about orthodoxy, as narrative therapy has been an important part of my life and is quite dear to me. Lack of evolution results in sure death...

There has been a great deal written in the US recently about the Supreme Court decision to overturn Roe V. Wade, including the idea of "originalism," in this case meaning a strict interpretation of our constitution as was "originally" written. Proponents of this idea now dominate our Supreme Court and used this justification to overturn 50 years of precedent of abortion rights. It was as if they think the US constitution was written without a realization that much would



change in the years to come. Here are some quotes from a recent (2022) Washington Post article by Ruth Marcus that seem relevant to this discussion:

"Even beyond that, originalism suffers from multiple flaws. It offers the mere mirage of objectivity and therefore of constraint. It is self-refuting: The Constitution itself was deliberately written with grand, magisterial phrases — what Chief Justice Charles Evans Hughes in 1934 called 'the great clauses of the Constitution' — meant to be interpreted by future generations. It is incapable of being strictly enforced without producing repugnant results..."

"Did the framers of the Constitution or its amendments intend for its meaning to be fixed at that point in time, as they understood it? They certainly didn't say so."

"A faithful originalist approach would not fixate on the words' meaning at a particular point in time. The Founders were anything but originalists.

Originalism generates its own demise."

"The liberal justices took a stab at it in the Dobbs dissent. 'The Constitution does not freeze for all time the original view of what those rights guarantee, or how they apply,' they wrote. 'That does not mean anything goes.' Rather, they said, 'applications of liberty and equality can evolve while remaining grounded in constitutional principles, constitutional history, and constitutional precedents.'

I'm certainly in agreement with the latter point as far as narrative therapy goes, that the overarching principles of narrative therapy that we hold so dear need to be preserved, even while we shed some previous resistances to certain ideas that made sense to hold in the 1980s but not necessarily now. For example, I suggested (Zimmerman, 2018), that, while the construct of "emotion" may not have made sense to us in the 1980s as we strove to depart from the traditional psychodynamic/psychoanalytical models of the day, it may now need to become an important dimension of narrative therapy work given today's cultural context.

Before I go any further, allow me to provide some definitions... Ok, definitions can be boring, but these particular ones are being reviewed here because they contribute to the overall points being made in the article. First up is the term <u>orthodoxy</u>. The Merriam-Webster Dictionary defines orthodoxy as: "An orthodox



religious belief or interpretation is one handed down by a church's founders or leaders". Compare this to the one from vocabulary.com: "A widely accepted belief or theory is an orthodoxy. You could call the scientific theory of gravity an orthodoxy, since it's generally considered to be an established fact. The word orthodoxy comes from the Greek root words orthos, which means right, true or straight, and doxa, opinion. So orthodoxy describes the one true opinion."

As well, I would like to introduce the notion of hegemony. I am quoting here from vocabulary.com: "Hegemony is political or cultural dominance or authority over others..." Britannica adds "...by legitimating norms and ideas. The term hegemony is today often used as shorthand to describe the relatively dominant position of a particular set of ideas and their associated tendency to become commonsensical and intuitive, thereby inhibiting the dissemination or even the articulation of alternative ideas" (Rosamond).

From a poststructural perspective, one can see the influence of both Capitalism and Patriarchy on the development of institutional hegemonies. Capitalism, in the way it encourages competition for the dissemination and subsequent sale of resources, which might include the teaching of skills and knowledges. Patriarchy, for the way it encourages notions of superiority, and competition for power.

And lastly the term <u>evolution</u> from the Oxford Dictionary: "The gradual development of something, especially from a simple to a more complex form..." Webster defines it as "the descent with modification from preexisting species: cumulative inherited change in a population of organisms through time leading to the appearance of new forms: the process by which new species or populations of living things develop from preexisting forms through successive generations."

I also want to introduce the term <u>contemporary narrative therapy</u>, coined by Ann Epston, to refer to recent developments in our work that support the evolution of narrative therapy practice. David Epston (2020), commenting on the change of name of this journal from the Journal of Narrative Family Therapy to the Journal of Contemporary Narrative Therapy, stated that, "we are committed to discover and highlight examples of practice that cannot be explained by the existing narrative therapy literature." From my point of view, a contemporary narrative therapy is one that is inclusive of new ideas and new practitioners and what they bring to the work, and is consonant with the demands of the current cultural context. Let's now turn to some questions that relate to this evolution.



What's the problem? Some questions for the iron throne

Do you think it was a coincidence that poststructural models took hold in the mid-80s or was it a reflection of the (then) current culture and the experiences of those gravitating to these ideas? Do you think it is a coincidence now that mindfulness and affectively oriented models are taking hold, or is it a reflection of the current culture and the experiences of those gravitating to these ideas?

- 1. Do you remember that, in the 80s, we critiqued the then current models as being outdated and not relevant to current times?
- 2. Power relations do not operate only through repression or hindrance; they are also productive. As you continue to create good soldiers who tout the party line and spout only Narrative Orthodoxy, have you considered how this will affect narrative therapies' ability to evolve and meet the current demands of the culture? Or should we resist (power relations always leave open the possibility for resistance) being complicit in shaping our bodies along the lines of older narrative discourses?
- 3. Have you considered the real effects on younger people around the world who are experimenting with new ideas, of banishing any practices and ideas that, don't fit the Narrative Orthodoxy mold, despite the popularity and helpfulness and good effects of these new ideas?
- 4. Oppression involves a lack of tolerance for new possibilities in any form. We all feel passionate about standing up to oppressive ideas that have real effects on us, and also passionate about questioning all points of view. Back in the day, we were rebelling against the dominant models as they were restrictive and proscriptive; how is the promotion of Narrative Orthodoxy different? In either case, new ideas are shunned and those who hold them are made to feel unwelcome in the club, made to feel that their ideas have no place in the hegemony of Narrative Orthodoxy... Is that what you want?
- 5. Deconstructing the wielding of power and the establishment of power relations has been a hallmark of narrative therapy thinking from day one... Are you aware of the real effects over the last 20 years of Narrative Orthodoxy? How many people (e.g., both founders) have felt that they need to move away because their ideas no longer fit the mold?
- 6. There is a difference between theoretical understandings and experiential ones... Should the ultimate accountability of new ideas lie with the real



effects of these ideas on the day to day, week to week practice of therapy, and thus be best spoken about by those who regularly engage in that process?

This might be a good time to bring up a virtual institution that I suspect most of us are aware of, something that has been referred to as the "narrative police." Now I must admit (as I have in other writings) that I was once a card-carrying member of that organization. Caught up in the passions and excitement of these (at the time) new ideas, I believed they deserved a rigid following. Looking back at that time it now seems silly, as Michael himself was always adding to the work with new ideas from all sorts of places. I apologize to those I taught for whom I may have promoted the kind of "gaze" that we were all so desperately trying to usurp. How ironic is it that we spoke of the way our culture invited us to police ourselves, only then to replicate that process in our own teaching and presentation...

I'm not saying that there aren't more and less helpful ways of doing things, I'm just saying that having a rigid stance on what was helpful wasn't helpful at all. I am glad to have handed in my resignation from that hurtful organization, as it raised questions for those it had affected (even experienced practitioners) about whether what they were doing was even narrative therapy at all. When I first started giving workshops on Neurobiology, attendees would come up to me, often in a voice no louder than a whisper, and wonder if it was really ok to work with ideas from both perspectives, and would thank me for giving them "permission" to experiment with the new ideas they had been reading about and learning. I'm certain we could all contribute examples to what would be an extensive list of other no-nos that the gaze of the police tried to enforce, many that were accepted as truths without any measure of their real effects...

Practices and real effects on hegemonic power

Situating oneself in a hegemonic discourse inevitably leads to engaging in practices of power in order to maintain one's authoritative position. Felluga (2011) suggests that some of the ways dominant cultures maintain their dominant positions are to create institutions to formalize their power, to create bureaucratic structures to make their power seem abstract and not just attached to one individual, and to use education, advertising, and publication to induct individuals into the ideals of their group. Scholte (2020) notes that with discursive practices, hegemony secures legitimated dominance in world politics through the use of language and meaning. Willing subordination is achieved with semantic



signifiers (e.g., 'community', 'democracy', and 'justice') that construct the supreme force to be good. Similarly, narratives (e.g., of 'transparency', 'development', and 'security') spin positive storylines to legitimize a structure of domination, as do hegemonic accounts of history. In short, hegemonic discourses construct consciousness ('regimes of truth') in which the dominated genuinely believe that their domination is a good thing. He also points out that modern science affirms its hegemony with conference routines, academic prizes, and graduation rites.

In the U.S., teachers are currently being rooted out for deviations from locally prescribed orthodoxy (see Florida or Texas). And not just teachers, but any staff, parent, or individual who fails to construct themselves around dominant prescriptions can find themselves marginalized or even ostracized for holding beliefs counter to local hegemonic ideals. Indeed, one's personhood can be at stake when they are made to feel uncomfortable about their, to use a metaphor, race, if they are discovered giving voice to contemporary ideas or saying things that in any way betrays the hegemonic perspective. In a Washington Post article, *Opinion: Behind the latest GOP restrictions on race teaching: A hidden, toxic goal*, it was stated that Martin Luther King said he hoped America could live up to its stated ideals, but nevertheless, he wrestled with whether that was possible... Can narrative therapy live up to its ideals?

I wonder if one effect of hegemonic abuses of power would be to cancel the value of ultimate accountability ONLY to the real effects of any contemporary possibility, and not just to idiosyncratic and ill-informed theoretical speculation, possibly motivated by a desire to maintain one's position of power. For a relevant example, as suggested earlier, in order to have some experience-near opinion of what might be useful to an actual therapist, one would have to have spent many hours sitting in a therapist's chair in order to evaluate the real effects of any therapeutic possibility. Otherwise, any opinion could be seen as blanket entitlement to the "truth," and the holder subject to the temptation to engage in a common tool in the authoritarian playbook, (used currently and across history) to attack other positions and points of view, holding the belief that strength lies in attack and not in defense.

I'm not suggesting that all hegemonies are bad, or that all of us involved in trainings/training institutions don't engage in some of these practices. But in the end, as we all know, all ideas, practices, and institutional structures have to be



accountable to their REAL effects.

And now some questions for narrative orthodoxy:

(I decided to have a bit of fun here and resurrect an old training exercise we used a lot back in the day.)

Question: What is it that you want for narrative therapy?

Answer: I'm big on slow death... Without evolution, most ideas and practices fade away and die.

Q: Can you think of an exception to that rule?

A: Meditation has been around since 5000 BCE. But it was generated from indigenous knowledges, across ethnic and religious groups.

Q: What is your biggest enemy?

A: Context. You gave a great example of this in your discussion about the US Supreme Court. The conservative majority eliminated abortion protection rights for women because this protection isn't strictly the purview of the constitution as it was originally conceived. However, in the world TODAY, this protection is critical... I'm not a big fan of TODAY...

Q: Who are your best friends?

A: People who judge possibilities but have no actual personal knowledge or experience of what they speak about (despite being under the influence of an idea that they do).

Q: What is your favorite strategy for squashing resistance?

A: Create misleading misinformation... I believe that if you make the lie big, make it simple, and keep saying it, eventually, they will believe it... After all, the victor will never be asked if he or she told the truth...

Q: Don't you think resistance is inevitable?

A: Yes.

Q: Is resistance futile?



A: No comment.

Michel Foucault here: I have a comment. "WHERE THERE IS POWER THERE IS RESISTANCE."

Princess Leia Organa: "The more you tighten your grip...the more star systems will slip through your fingers."

Contemporary narrative therapy (CNT)

Is resistance futile? Whether it is or is not, there is plenty of it going on in narrative therapy land these days... Here are a few examples of individuals whose work has evolved. Most of them have spent many hours over many years seeing clients, and understand the changing developments in our ideas and in our lives:

- 1. Insider Witness Practices- (Tom Carlson, David Epston, & Sanni Paljakka) attempts to address trauma in novel and interesting ways. From my point of view, these are ways to bring forth, separate from, and then move on from the unhelpful affect that is getting in the way of allowing a client's life to finally move forward.
- 2. This group, also including Travis Heath, Kay Ingamells, & Sasha Pilkington, engages in what they refer to as "literary means to pedagogical ends."
- 3. Relational Interviewing- (Stephen Madigan & others) interviews the "relationship" in order to be helpful to couples caught in extreme conflict (in my mind, this "relationship" is formed from right-brain communications between members of the couple). Rosa Arteaga (also from the Vancouver School of narrative therapy) interviews the body to help women deal with trauma. And from this school, the philosopher Todd May has been suggesting that Maurice Merleau-Ponty and not Derrida might have been a place Michael could have gone especially to address the body in narrative therapy work (apparently, orthodox narrative therapists have heads only).
- 4. Acknowledging the "affective turn" Gerald Monk & Navid Zamani, as well as David Pare & Ian Percy, have written about the importance of bringing affect into narrative therapy work. Lynn Rosen has given workshops on Embodying conversations.
- 5. Revising psychoanalytic/dynamic practices for narrative therapy use- For



example, I read a very interesting and well thought out article on using a sand tray in a narrative therapy process. And one about working with dreams. Interestingly, even a group of psychoanalysts have evolved, referring to themselves as neuroanalysts. They have moved away from a one-directional conception of the therapeutic process, instead acknowledging the dyadic nature of the therapeutic relationship.

6. Interpersonal neurobiology (IPNB)- I dove into the interpersonal neurobiology literature to get inspiration for enlarging the narrative therapy lens to include a more affective focus, as well as to introduce practices such as meditation and imagery-based work into the narrative therapy tool bag. My former colleagues Marie-Nathalie Beaudoin and Ron Estes picked up the baton and did so as well.

What's common to all of these initiatives is that they maintain a narrative therapy meta-structure, constructed by previously mentioned overarching narrative therapy values. These initiatives also reflect the importance of developing new ways to address current issues. If you read the above and find it hard to imagine how these ideas get along with narrative therapy ones, you might consider doing due diligence and reading about the work that is actually being done in the room with clients. Michael White said that there were 2 kinds of Problems. One occurred when a person was resisting dominant discourse and was made to suffer accordingly. The other was when a person was (unhappily) cooperating with dominant discourse and was suffering accordingly. My personal response has usually been the former. And yours? What have been your (silent?) ways of resisting orthodox dominant narrative therapy discourse?

An IPNB interlude

One of Dan Siegel's more recent concepts is something he calls the plane of possibility. The plane is part of his metaphor for how the mind works (See "Mind" or "Aware"). In many ways, the idea is similar to Bateson's concept of restraints... What does this have to do with CNT you ask? Let's see.

According to Siegel, energy flow is the mechanism of mind. Your mind is able to send and direct the flow of energy; subjective experience may simply be sensing the feeling of that flow, whether it is coming from inside or outside the body. And so an embodied mind is beyond the brain (as it was for Bateson) and is made up of patterns of embodied energy flow. In the plane, the experience of spaciousness



occurs when the energy probability position is immersed in the plane of possibility, a probability position of near zero... In other words, if your mind is resting on the plane, all sorts of possibilities may arise.

Yet it would be difficult to get things done in general, let alone efficiently, if the mind were in an entirely open state all of the time. In this metaphor, above the plain lies plateaus, a more limited set of potential activations from which a more constrained pattern of peaks can arise. For example, a plateau formed by the meta-principles of narrative therapy carries with it certain intentions and usually leads to certain practices (peaks). A high and narrow plateau would indicate a narrow state of mind; only giving rise to a limited number of peaks. A lower broader plateau would indicate a more open state of mind. Peaks, however, especially narrow/rigid ones, are even more constraining and so are difficult to escape from (such as the effects of a Problem).

These filters operate from the "top-down" and may enable only certain elements to enter awareness, and in that way, plateaus serve as filters for what does or does not become a part of the peaks of actualization in awareness. This is in sharp contrast to information entering from the "bottom up," which means that the flow of energy and information is as fresh and new and unconstrained as possible. Needless to say, as therapists and teachers, it's helpful to be operating much of the time from the bottom up, opened up and on the plane, before rising to a preferred plateau, and from there to a peak with a question...

Perhaps the big picture for us is the importance of dipping below these plateaus and into the plane to open space for new possibilities in order for us to evolve and become something other than we are now...to allow new information and the effects of changing contexts to have more influence, thus opening the door for new plateaus to form to allow us to operate more helpfully in the current context. Tom Carlson suggested to me that one of Michael White's stated purposes of narrative therapy was "to encourage people to take an observer position in relation to the events of their lives," and that Tom had referred to this in a paper he wrote as a theory of outsight in narrative therapy (Carlson, 2020, p. 12). Dan Siegel's concept of mindsight (2009) is similar to this as well. All require the skill of being "in the plane" enough to separate from our preconceptions and our usual habits of responding, therefore leaving us open to what might be seen that wouldn't be noticed when caught in a plateau or peak.



Accordingly, as far as opening space for a more contemporary narrative therapy goes, we must first face Orthodoxy, the rigid peak which prevents new information from being relevant (like with any sort of Problem).

What does this discussion suggest about what is required for a more contemporary narrative therapy?... From my point of view, it is a stance of openness to new possibilities that allow for new organizational states to form. It is not a defined set of practices, except for the meta-practice of openness and curiosity, which have long been narrative therapy meta-practices. In the 2018 San Diego address, David discusses some of the spirit of narrative therapy and shares a story about Michael's hope that that spirit continues (p.1)... One such spirit was appreciating, "the magic of the other" (p.2)... Another was the "imagination in discovery"(p.2) ... Yet another was "irreverence and improvisation" (p.4)...

David notes that one of the central aspects of the work Michael did was the "spirit of adventure." (p.7) Quoting from the introduction to his and Michael's book, Experience, contradiction, narrative and imagination, "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 explore various ideas and practices.....we regard (this work) to be an 'open book'......however, we are drawing attention to the fact that one of the aspects of this work that is of central importance to us is the spirit of adventure. We aim to preserve this spirit, and know that if we accomplish this, our work will continue to evolve in ways that are enriching to our lives, and to the lives of those persons who seek our help". David notes that, "If there were anything approximating a manifesto for narrative therapy, you could find it briefly stated in the introduction."

Quoting from his introduction of Michael's 2011 posthumous book, he notes that the 'freedoms' required for our imaginations to re-imagine narrative therapy have now become very precious... and we may have to secure them appealing to a greater fidelity to this spirits..." (p.9). Discussing Thomas Kuhn's (1967) work, *The structure of scientific revolutions*, David noted his commentary about "how 'revolutionary sciences' overtime become 'normal sciences' which are left to mop up before being replaced by another 'revolutionary science.' If I were to predict when that will take place in any contemporary therapy, I would say around 25 years from the date of its discovery. It is a rather predictable path to its



obsolescence. If 1985 was the year of the origination of narrative therapy, then its' 'use by' date was looming around 2010. Michael and I had wisely proposed to preempt that, to' start all over again' in 2008" (p.14). David then goes, "...to Chick Corea's definition of improvisation and the balance between the rules and the freedoms and how over time there is a shift in favor of the rules. Shouldn't we resist such regulatory regimes, from both without and within?"

A CNT moment

I've had many experiences where widening the narrative therapy lens has resulted in new and useful possibilities... I imagine all of us practicing therapists have had MOMENTS where something pops into our heads, or we make a comment that seems to come out of nowhere and may even be in a form not sanctioned by our preferred model. Some therapists seem to operate in more intuitive and less Maps-y ways in general. What if some of that was teachable, which would require having understandings that we can teach? David Epston always seemed to operate intuitively to me, and while Michael White seemed to follow more of a defined map, he seemed to me to be unusually sensitive to where the affective flow of those he was interviewing was going. This was without ever discussing the process whereby certain directions and questions were seized upon and not others.

One hot topic in the neurobiology literature is "synchronicity," the roots of which lie in the reciprocal right brain to right brain flow of energy that is the nonverbal undercurrent in communications between all of us. It appears that as we interact, an increasing amount of this synchronicity begins to evolve. We are constantly receiving implicit, non-verbal information from others without necessarily acknowledging or consciously processing this information. What if we paid more attention to this and we became able to make more direct use of this information?

I received a call from the wife (V) of a client (B) whom I have been seeing on and off for some time. I had seen them as a couple previously, but the sessions were difficult as B could barely tolerate hearing any negative feedback. He had experienced a very psychologically abusive relationship with his father when he was growing up and had an identity of "Bad B," which was extremely easily triggered, so easily that he often had to run to the bathroom during the sessions, experiencing cramps and diarrhea. I hadn't seen V for about six months.



Working with V was also difficult, as you might expect, but in very different ways. She was forthcoming about her distress in the marriage, and presented an array of congruent emotional responses, looking sad when she was sad, angry when she was angry, and hurt when she was hurt. We were able to identify an easily triggered experience of "Lack of Respect," and had long ago mapped out its' effects and worked with them in traditional narrative therapy ways. Despite all of that, I always felt that something was missing, but was never sure how to get a hold of what that was in the sessions. I imagined that she had her own version of "Bad V," but unlike with B, it was not easily invited out. I also imagined that there was a lot of potent affect having its way with her. Likely I was thinking too much and working too hard.

When she arrived at the session (he was happy for me to see her alone), I could clearly see that Depression had taken over her face and body. It turned out that after a number of new incidents where B treated her and the kids in a very critical manner and had once again left her embarrassed in front of her friends and family, Hopelessness had taken over. She told me that she really didn't want to get divorced but didn't know what to do. I didn't know what to do either. I suggested a plan to involve B's mother, who had continued to inadvertently support the behavior that was having such deleterious effects; she had always been protective of him in an effort to make up for the treatment he had received at his father's hands. I had always wanted to involve her, but for reasons that go beyond the scope of this example, I had never contacted her. I could see that at least the idea of perhaps involving her in supporting B to set a new direction to become what we all knew was his preferred self, picked V up a bit. But this was just a band-aid for the moment.

The next morning, when I opened my phone, I had received the following text from her (she knew I was seeing him later that day): "Another bad night... I can't do it anymore... I can't go on like this... being in this situation is horrible."

I felt Hopelessness trying to overtake me as well. So I sat down and remembered "breathe... just breathe"... and I pictured V's face, easy as it was etched in my subconscious. Unlike in the sessions, where I often (too often) used more of my left brain to ask a question or to even say something supportive, I instead breathed and let myself feel the feelings that were coming into my body as I read her text. I responded back with the following message, this one now coming from my right brain instead: "The Hopelessness is overwhelming to me too... and you



hurt so, so bad... it must be horrible indeed to see yourself as someone who would be in a situation like this... sometimes I just don't seem to know how to help you..."

Not rocket science, not externalized (my experience is that sometimes you have to internalize affect so it's felt enough to be acted upon), but something that emerged in the MOMENT between us (synchronicity) in a way that we both felt... My close colleague Bill Lax, who is well versed in EFT, mindfulness practices, and narrative therapy, suggested to me, after reading what I had written, "that drawing from EFT and many other models, my response was one of empathy, feeling her pain, validation of her experience, and compassion for her experience, similar to that of many others (including perhaps all of us at one time or another) in the world who may be in situations like hers," and agreed with me that, "this was not left brain, but (well-trained) right brain activity that we often ignore when under stress." It is so interesting that this kind of response has not been privileged in narrative therapy writing other than to encourage therapists to "follow" the experience of the client...

Later that day, when B entered my office, something was different. V had communicated her distress to him in a "loud enough" way that he could hear it, and he was suddenly more open to doing the work he needed to do to become his preferred self. He acknowledged, for the first time, that, "I am abusive to her." This statement became a new starting point for us. He also agreed to let me contact his mother. V and I had a phone conversation the next day, in which she shared that she realized that the intensity of her feelings was previously unknown to her and had to do with "a lot of things" that she wanted to explore in her own therapy.

Finally: The end or the beginning?

My hope in writing this article was that it would not only invite you to come up with the "novel ideas/practices," that Michael White hoped to see from the "next generations" (see the opening paragraph), but also to help free you from turning the gaze of the narrative police on yourselves. From the beginning, narrative therapists took initiatives to stand up to impoverishing dominant specifications that had limiting effects on the enactment of one's own preferred values and practices. Indeed, it is a time-honored tradition for narrative therapists to question, comment on, and yes, even rebel against the operations of power that



support these dominant specifications...

So please "fight the power," stand strong with your own ideas, and find support for them among like-minded others.

It is important to remember that Michael White would go on reading binges of ideas that came from outside the world of narrative therapy. Tom Carlson reiterated to me that if there was a tradition in narrative therapy, it would be this practice of reading and letting the ideas that emerged from this process influence the next set of ideas in the work. It is my hope that all of us, all of you, will do the same.

In the 2016 JST article, David suggested that, "should you travel beyond where the "maps" go, you have some responsibility when you return to report back on where you went and what you found so others can travel the same direction... and sooner or later (hopefully sooner), a mapper will map such a territory, allowing so many more to travel there and enlarge the terra cognita of narrative therapy practice" (p.84).

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