Journal of Narrative Family Therapy
Ideas and Practices in the Making

Founding Editor: David Epston

Francophone Release, 2019

Editors: Tom Stone Carlson, Ph.D., David Epston and marcela polanco

www.JournalNFT.com

Content

Introduction
p. 1  Narrative Francophone Countries by Catherine Mengelle

Special Release on Narrative Francophone Countries
p. 9  Toward an Epistemology of Equity: The Fair Trade of Narrative Minds Across Boundaries of Language by David Epston

p. 18  Enchanting our Practices: A Narrative Approach with Children by Charlie Crettenand

p. 28  Little Steps Toward Letting the Legacy Live: Fine Traces of Life to Accompany Families Grieving the Death of a Child by Linda Moxley-Haegert & Carlin Moxley-Haegert

p. 53  Telling another Possible Story: A Conversation with Dina Scherrer by Dina Scherrer & David Epston
Narrative Francophone Countries
By Catherine Mengelle

Introduction
As I was about to send the first draft of a book I was writing on narrative practices (NP), David was getting in touch with Pierre Blanc-Sahnoun regarding those practices in the francophone world. An important part of my book relates the history of NPs, particularly their early years of development in France, so I was the one who ended up replying to David’s enquiry and I decided to expand my work outside of France, to the francophone world. I contacted Charlie Crettenand in Switzerland who, in turn, interviewed Rodolphe Soulignac. Charlie also researched André Grégoire's contribution to NPs1 in Québec. André taught NPs in French-speaking European countries for many years. For my part, I sought to retrieve the first French characters involved in this story in an attempt to re-tell it… But we all know the tricks memory can play on us. After giving it some thought, I came to the decision that it would be better to let everyone tell their own story in their own words. That being said, this new approach is pushing me to considerably review the draft of my book. Thank you David, your inquiry was very timely! Thank you also to all those who kindly accepted my request to travel back in time.

The story seen from Bordeaux, told by Catherine
In 2004, Michael White replied positively to an invitation from Isabelle Laplante and Nicolas de Beer to come to France to facilitate a Narrative Therapy workshop. Isabelle Laplante and Nicolas de Beer were the CEOs of Mediat-Coaching, a training center located in Paris which has since been closed2. Fabrice Michaud, a coach and facilitator in Bordeaux, attended this workshop. Fabrice told Pierre Blanc-Sahnoun, “You are a coach, a musician and a writer; you should look into these practices, you’ll be able to use all your talents in one go!” Pierre’s curiosity being piqued, he decided to enroll in the next seminar which was to take place in 2005. Shona Russel and Sue Mann facilitated this workshop for Mediat-Coaching. In 2006 and 2007 Michael White returned to Paris. Again, Pierre attended both workshops. Following in Michael’s footsteps and accepting once again Mediat-Coaching’s invitation, Sue and Shona delivered the 2008 workshop. Elizabeth Feld joined in at that time. Pierre then decided to fly to Adelaide to the next International Conference on Narrative Practices, the first one to take place after Michael's death. In Adelaide, he shared an apartment with Nicolas de Beer and Jean-Louis Roux. This time, and for the first time, he attended David Denborough and Stephen Madigan’s workshops. In 2009, a translation of Maps of Narrative Practice was published under the auspices of Isabelle and Nicolas. I cannot help but think how incredibly intense those five years must have been for Nicolas and Isabelle!

---

1 We will learn further down this article why Narrative Therapy (or NT) became Narrative Practices (or NP) in Francophone countries.

2 A group of practitioners still teach Narrative Practices in Paris in a coaching training center called IFOD
In 2009, alongside Elizabeth Feld, Christophe Belud, Sandrine Janssen and Christine Thubé, Pierre Blanc-Sahnoun co-founded La Fabrique Narrative in Bordeaux. This was the start of another intense story. I joined them in 2011 along with Dina Scherrer, and we were soon followed by Fabrice Aimetti, whose narrative T-shirts have become a ‘must have’ in the francophone narrative community! All of us still feel very moved when remembering an anti-symposium organized by Pierre in Bordeaux, 2009. At the time, like the amazed innocent beginners that we were, we started practicing our narrative scales.

But let’s go back to the beginning of our story. In those days, Mediat-Coaching was delivering training sessions called “Orientation Solutions” in which Steve de Shazer had spread Michael’s name. For 10 consecutive years, in a school called “Pegase Processus”3 Steve de Shazer and Insoo Kim Berg had developed a new way of thinking in France, more particularly in Brittany, in the cities of Saint-Brieux and Rennes. In those western regions of France, they contributed to the construction of a strong solution-focused based network. In a book titled Les Pratiques de l’Approche Narrative4, Julien Betbèze, a psychiatrist and hypnotherapist, shares with us the somewhat confidential story of the arrival of narrative ideas in the world of French psychotherapy. He explains how Steve de Shazer had many times over exposed his differences and similarities with the work of Michael White. In the nineties, articles on this type of work were starting to be translated and published in journals dedicated to family therapy. In Panorama des thérapies familiales published in 2003, Mony Elkaïm, a neuropsychiatrist, wrote a full chapter on narrative practices. Julien goes on to explain, “Therefore, in our culture, Narrative Therapy first came about through conversations on competency-centered, systemic family therapy and Ericksonian approaches. I recall having wonderful and lively conversations with JF Bourse about the translation of Michael White and David Epston’s book Narrative Means to Therapeutic Ends. A translation that he undertook as a solution focused GP-Acupuncturist-Hypnotherapist... May he be thanked”.

It is in this context that Michael White came to France for the first time in 2004, having been invited by Nicolas de Beer et Isabelle Laplante who were both already involved in solution-focused practices. The world of psychotherapy can be grateful to the coaching world who contacted Michael White although, despite existing translations, the different branches of family therapy remained stuck in their own belief systems. I remember how surprised I was when I first heard of the arrival of Michael in Paris, directly from the CEO in charge of the publishing company Satas. The seminar was organised by Mediat-Coaching. No information had filtered in the world of psychotherapy. At the beginning of the 21st century, everything was in place for the arrival of Narrative Therapy in France. Despite the sudden death of Michael White in 2008 which could have resulted in a settling down of the narrative movement in France, this

---

3 Psychotherapy training and research centre
4 Published in 2017 by Inter Editions, Paris. This collective and collaborative book coordinated by P Blanc-Sahnoun gathers the different practices of Narrative practitioners.
practice continued to evolve and spread, not only in France but also in Switzerland and Belgium. A very lively francophone community had been born.

Within 10 years, the French narrative community trained many practitioners, particularly in the coaching industry. Many Master Classes had been organized in Paris and in Bordeaux, allowing the French practitioners to adopt the best practices from world-renowned professionals. David Epston, Shona Russel, Sue Mann, Stephen Madigan, David Denborough, Cheryl White, Jill Freeman, Lorraine Hedkt, John Winslade, Peggy Sax and many others have taught in France. Translations kept coming until the French narrative community felt mature enough to publish its own practices in its own language. Pierre Blanc-Sahnoun is still at the forefront of this work, which consists in sharing narrative ideas in France. From 2009 onwards, Pierre became a major stakeholder, launching many initiatives: translations, production of written material and organisation of Master Classes.

He is the one who asked me to translate some of the work of Morgan and Denborough; he encouraged many young practitioners to write about their new, developing practices in several collaborative books. The initial invitation of Michael White by Mediat-Coaching as well as the creation of specific training aimed at coaches is unique to France. Unlike other countries, narrative practices found a more fertile ground within the coaching industry than in the mental health or social work sectors. There is one exception though: Nantes, in western France. As discussed earlier, this is because this region is deeply rooted in solution-focused practices. Bertrand Hénot, who also runs the Hexafor Social Work Training Centre, is deeply committed to training future social workers in narrative practices.

Today, new schools of narrative practices have been created in France, Switzerland and Belgium. These schools are opened to coaches, psychotherapists, psychologists, medical doctors, social workers, managers, family therapists, speech therapists, nurses, etc. This is the reason why we speak of narrative practices, because they are interwoven into many different professional practices. In 2018, the French, Swiss and Belgian narrative communities have slowly merged into what is now called la Fédération Francophone des Pratiques Narratives (FFPN). This new entity has 2 goals. The first is to gather and unite all French-speaking narrative practitioners, regardless of their profession. The second is to release material written or translated into French. In 2014, Rodolphe Soulignac, a psychologist in Geneva, organised the first Journées Narratives Francophones5. In 2016, Bertrand Hénot and his team organised the Journées Narratives Francophones or Francophone Symposium in Nantes. In 2018, this symposium took place in Bordeaux in La Fabrique Narrative. Practitioners from Québec, Switzerland and Belgium came, joined through a video link by Tahitian and Romanian practitioners, and by letter by a practitioner from the Ivory Coast. Marianne Lemineur has been mandated by the FFPN to organise it the next symposium, in Belgium, in 2020.

5 Note from the translator: “Journées Narratives Francophones” will be translated into “Francophone Symposium”
The story seen from French-speaking Switzerland, told by Charlie

It is likely that NPs were first introduced to French-speaking Switzerland by a psychiatrist called Dr. Pedro Gonzales. Dr. Gonzales was giving lectures in the faculty of family therapy of the University of Geneva. Having visited Australia in 2003, he had brought back with him a video of Michael White. At the time, this video did not generate much interest; we were used to listening to systemic practitioners who were very guiding and mobile in the therapeutic relationship. In 2010, the first training in NT to happen in Geneva was organised by Rodolphe Soulignac with the support of André Grégoire, a psychologist from Québec. André became Rodolphe's mentor and tutor. He taught in Lausanne and Belgium many times between 2004 and 2008. While André was facilitating an introductory workshop on NT requested by an NGO named Paroles d’Enfants in front of 80 participants in Belgium, Michael White was delivering his first workshop in Paris in front of 12 people. Later, André and Michael met in Paris and shared a laugh about this. NPs in French speaking Switzerland were first taught by 2 psychologists, and from there, they spread to the world of psychology/psychotherapy and psychiatry. In 2016, after having been trained by André Grégoire, Peggy Sax, David Paré and David Epston in Montréal as well as in Vermont, I became a facilitator myself. Today, Relance Narrative has become the main training centre on NPs in French-speaking Switzerland. On top of being active members of the FFPN, Rodolphe and I organise trainings, workshops and supervision. We have been involved in several collective publications and are currently working on a book titled Eupsychology, which is about “depathologizing” the act of living thanks to NT.

Lettre d’André à Charlie

Dear Charlie,

Where to start Charlie? You’re asking me so many questions.

How about we start in 2005, half way through the story. 2005 marked the beginning of the European Francophone adventure of NT. It all started with the training I facilitated for Paroles d’Enfants in Paris. In addition to their clinical work on sexual abuse within families, this NGO organised all sorts of workshops and symposiums in Francophone countries with the goal of spreading groundbreaking practices and ideas in the care industry. They got a hold of me thanks to one of their facilitators who had talked to them about the work I was doing in Québec. They invited me to present my work twice in Paris: the first time I delivered a workshop on Solution-Focused Therapy and the second time on Narrative Therapy. Needless to tell you how happy I was to get these invitations. In part because I was flattered to be trusted, somehow blindly by these people, but also because I had been waiting for this moment for a long time; how come, in the country where Michel Foucault, Jacques Derrida and other high powered thinkers came from, no one seemed interested in the work they had unknowingly contributed so much to? I had had a few conversations about this with Michael White and David Epston but they couldn’t solve this enigma either.
In 2005, I went to Paris for the first time and delivered a workshop for over 30 professionals from the care industry. They were so thrilled with the training that the following year Paroles d’Enfants invited me again to Paris and Liège. As the 2006 dates were soon arriving, I learned that Michael White was also going to be in Paris at approximately the same time to deliver a workshop for Mediat-coaching. I had met Michael White previously and we agreed to meet for one evening in Paris to share a meal. Needless to tell you how lively our conversation on NT was. Michael was thrilled to be in Paris, in the city where Michel Foulcault had developed his powerful ideas. Both of us were excited at the idea that NT was, at last, emerging in the Francophone world. For you to understand this “at last” moment, I need to go back in time and return to the questions you asked about my first encounters with NPs. It started in 1992, when my colleague Josée Lamarre and I created the Training Centre of Strategic Psychotherapy in Montréal. The training sessions we were offering at the time were evolving around Brief Therapies as they were then called. Since I had attended workshops delivered by Steve de Shazer and Bill O’Hanlon, among others, the dominant method we taught was Solution-Focused. Thinking about it today though, I would say that postmodernism was informing our practice, that is, we knew we were constructing reality through language.

In those days, I was devouring any reading that was in any way relating to the constructivist-constructionist perspective. That is how I put my hands on Narrative Means to Therapeutic Ends as soon as it was published in the US. In 1993, when I heard of the workshop that Michael White was going to deliver in Burlington, Vermont, my colleague and I immediately enrolled. It was the first training tour that Michael was doing in the States. As far as I was concerned, it was a case of love at first sight; even more so, since Michael had generously and spontaneously agreed to give an interview to be published in our newsletter. That is how we published a special edition of our newsletter in which 8 pages were dedicated to NT. The following years, we built a 2 year training program encompassing Solution-Focused Therapy, Palo Alto Brief Therapy, Eriksonian and Narrative Therapy. A complete cocktail of therapies, you might think! In those days though, everybody was happily talking to each other, there was a genuine feeling of communication between the different approaches and practices. Often, we were attending the same international conferences where all of us would meet, connect and exchange ideas during workshops.

Getting back to my collaboration with Josée Lamarre, as time went by, we drifted apart; I grew closer to Narrative Therapy and she felt closer to Solution-Focused Therapy. That being said, we kept having wonderful conversations and carried great respect for one another. In addition to the training programme we had created, twice a year we would invite international guests to teach a two day long Master Class. In 2000 and 2007, Michael taught those Master Classes. David Epston came in 2004. Those Master Classes were very successful in Québec, gathering from 125 to 150 people; some of whom came from New England in the US and Ontario, Canada. I, myself, was delving deeper and deeper into the realm of NT, primarily through reading material and participating in yearly clinical workshops. Michael facilitated such workshops for years in Toronto; there was not a chance that I would have missed one of those!
I also undertook significant training with Stephen Madigan. As for the NT program you attended, I created it in 2008-2009. I feel the need to say “I” because I was the one who wanted to push the spread of narrative ideas, and I could see there was a genuine interest in the facilitator community to spread the word too. I will add that it coincided with the 2nd Master Class that Michael taught in Montréal. I made it a point to create a collaborative workshop gathering Peggy Sax and David Parré too. Unfortunately, in 2012, all came to an end with the closure of our centre and the health issues that fell upon me.

Back to 2005 and the European adventure when I met with Michael White in Paris. As you already know, NT had found its audience. It seemed like Paroles d’Enfants had even developed an addiction to it! They loved the practice of NT as well as the ethics which go along with it, and asked me to come back over and over again to facilitate workshops for them. From 2007 to 2015, depending on the year, workshops were delivered in Liège, Lausanne and Paris. The themes we developed had widened: introduction to NT, advanced NT, trauma and loss, etc. In 2009 and 2011 Parole d’Enfants invited me to their AGM held at UNESCO - the same AGM you will be a guest speaker to, this coming December - they invited me to their 2011 and 2014 annual meeting in Liège too. As you can imagine, there are many professionals who have integrated NT in their practices and are now practitioners in their little corner of Francophone countries.

I suspect that you already know about my encounter with Rodolphe. You might have to double check with him, but I think that Rodolphe came to the first workshop I facilitated in Lausanne in 2007. A few years later, he came again and attended the advanced training. If I am not mistaken, Rodolphe invited me to Geneva for the first time in 2011 on the occasion of the Certificate of Narrative Therapy.

Dear Charlie… I can only imagine how overwhelmed you might be right now, considering all the details I have off loaded on you! I am hoping that these details will help you weave a story without too many difficulties. Maybe it will encourage you and the new generation of practitioners in Bordeaux, Switzerland and Belgium to keep spreading these powerful, dense ideas. I have no doubt there are many more realms of NPs to explore.

Books available in French
Translation work:


White, M., Cartes des Pratiques Narratives (original title: Maps of Narrative Practice), 2007, French translation directed by Isabelle Laplante and Nicolas de Beer 2009, Satas.


Many translations of major articles to be retrieved from the Fabrique Narrative website (wikispace).

**French Publications:**

Bernard, N., La Poésie contre le burn-out, reconstruire la dignité au travail avec les Pratiques Narratives, 2018, Publibook .


Scherrer, D., Échec scolaire, une autre histoire possible, le coaching au service des jeunes en difficulté, 2011, L’Harmattan.

Scherrer, D., Accompagner avec l'Arbre de vie, Une pratique narrative pour restaurer l'estime de soi, 2018, InterEditions.

Soulignac, R., Planches narratives, Redevenir auteur de sa vie de couple, aider les couples, les groupes et les professionnels, 2015, Chronique Sociale.
Soulignac, R., Planches narratives, Redevenir auteur de sa vie professionnelle, Aider à guérir de la démoralisation au travail, 2016, Chronique Sociale.


Collection of texts published in French (many authors):
Dire bonjour à nouveau - L’Approche Narrative pour les personnes, les familles en deuil, 2018, Satas, coordination Pierre Blanc-Sahnoun et Catherine Mengelle.


Pistes narratives, Pour faire face au sentiment d’échec personnel et professionnel, 2011, Hermann, coordination Catherine Besnard-Péron et Béatrice Dameron.

Books being written at present:
Mengelle, C., Découvrir les Pratiques Narratives (titre non définitif), 2020.

Dunod Crettenand, C., Soulignac, R., Eupsychologie et thérapie narrative pour dépathologiser l’existence, 2020, Chronique sociale.
It is a particular honour to address you from so far away on the occasion of the third Francophone conference. And I thank Pierre for translating my letter to you on my behalf. To redeem such an honour has meant many of my days have been occupied thinking about what I might say and as a consequence many of my nights have been both dreamless and sleepless. I am told that in a TED Talk, you are advised to talk about one matter only. If that be so, I warn you that this is not a TED Talk. In fact, I want you to know ahead of time that I worry that I am trying to cover too much ground in this letter to you. For that reason, I have requested the conference organizers email a copy of this address to you to read at your convenience. I hope this will allow you to relax and just take in what is comfortable for you.

First I wanted to tell you two stories to set the scene for what follows:

I cherish a memory of a revelation I had when I was 17 years old. I remember it so keenly that when I do, it seems I am reliving it. My secondary school examinations were just around the corner. I had never studied quite so diligently before. Which university you were eligible for depended on your marks. I am sure that had a lot to do with it.

I had taken French for five years and Latin for four years in secondary school. I took considerable pleasure translating either of them into English. I found it beguiling. I recall a momentous occasion translating a short story by Guy de Maupassant when I found myself, to my surprise, shouting aloud: “You have a French mind! You have a French mind!” There was no one I could confide this in whom I thought might understand what I could possibly have meant by this. I worried that my parents would have been concerned for my mental status going around shouting aloud. And it only dawned on me sometime later what it meant and the significance of what had been revealed to me.

Only a few weeks later, while translating Julius Caesar’s *Gallic Wars* from Latin to English, I had a similar revelation and once again believed myself to have a Latin mind as well. I now considered myself to be in possession of ‘three minds’ but wisely again I kept this to myself. But from then on I believed that languages, each of which was of course a culture encoded in words, had ‘a mind of its own’.

With being somewhat better read, I can support my conclusion reached in my youthful enthusiasm. The French philosopher of the imagination, Bachelard wrote: “At times our words think for us” (1994, p.xxxix). Or the Romanian-born French philosopher, Emie Cioran (1987):
“On n’habite pay un pays, on habite un langue” (We do not live in a country, we inhabit a language).

One of my life’s regrets is that I was never able to become truly bilingual. It was only as a ‘travelling companion’ on an intellectual and political journey my colleague and friend, marcela polanco, took ‘translating’ Michael’s Maps of Narrative Practice (2007) into her Colombian Spanish that I have been able to somewhat alleviate this regret. Late last year, I embarked on a very similar journey but very different terrain with Sumie Ishikawa undertaking what we refer to as ‘Japan-esing’ narrative therapy in Japan. She and her colleagues are translating Narrative Therapy in Wonderland: Connecting with Children’s Imaginative Know-How (2016) that I co-authored with David Marsten and Laurie Markham. I will have more to say about these matters later.

Here is another tale at variance to the above. At a recent social occasion, I was introduced to the niece of friends who had just returned from the United States where she had attended Hamburger University, where she completed a bachelor’s degree in Hamburgerology. Don’t laugh! There is a Hamburger University offering degrees in Hamburgerology. Reading their prospectus on line, I learned that Hamburger University was established in 1961 and is located at Oak Brook, Illinois, near Chicago by McDonald’s to instruct their employees in the various aspects of restaurant management. To date, it has graduated more than 80,000 students; 7500 students attend each year. It has the capacity to teach in 28 languages and now has campuses all around the world.

I was intrigued as I suspect you would have been to learn of their pedagogy. For example, what did they teach and how was it assessed? She told me that, what I suppose is the equivalent of a dissertation, was the following: she had to provide instruction to would-be employees on how to make a Macburger, so that a Shanghai Macburger was absolutely identical to one made in New York; a Macburger in Mumbai was absolutely identical to one made in Berlin. And if she faltered or had not memorized her script word-for-word, she would have been failed. I am glad to report she passed with flying colours and now has a McDonald’s franchise here in New Zealand.

To my way of thinking, these are the two extremes of what I am going to call ‘translation’ in the widest sense of the word – one which currently goes by the term ‘global’ and the other which has concerns for ‘the local and particular’ which narrative therapy also endorses.

Let me tell you how I began this journey with marcela polanco. I had organized a conference in Havana, Cuba in 2007 with the help of others after I had been invited by the Cuban psychiatric and social work associations to present narrative therapy there. I refused to do so until we worked out an agreement that they would teach their visitors, 200 of us, and we would teach our hosts, 200 of them, for 3 days and then for the 2 days that remained, we would join one another in bilingual workshops. There was intentionally an ‘epistemology of equity’ – or to use
Toward an Epistemology of Equity: The Fair Trade of Narrative Minds Across Boundaries of Language


polanco’s metaphor – ‘fair trade’. We would trade one another. The conference was called: ‘The Spirit of Community in Narrative Therapy and Cuban Social Programs’. But it wasn’t so much a conference but a place where two community and healing practices met one another. Many on both sides – visitors and hosts – told me it was the best ‘conference’ they had ever attended. I certainly felt the same way.

At that time, marcela, who had migrated from Colombia to United States some ten years before amidst a 50 year long civil war, was enrolled in a PhD program in family therapy at Nova Southeastern University in Florida. She was studying narrative therapy in her PhD programme, of course in English, and now was a teaching assistant, once again of course in English. She was particularly looking forward to attending a workshop on narrative therapy presented by Marta Campillo, a professor in a Mexican university, the first one she had ever attended in Spanish, her mother tongue. Afterwards, I accidentally came up behind her and overheard her telling Marta with considerable shame that she had been unable to understand a word of narrative therapy in Spanish and that somehow or other, she felt she had betrayed her mother tongue that had been passed down to her by her mother, father, family, community, culture and country. She was wondering how this had come about when she realized I, quite unintentionally, had overheard her. She blushed with mortification. Somehow or other, we both then pretended as if nothing had happened and quickly changed the subject to an unrelated matter.

However, I could not get this matter out of my mind. I had no idea you could know narrative therapy in your second language but find it unintelligible when translated into your mother tongue. Although I was an ignorant monolingual, luckily, I was reminded of my revelation from when I was 17 that each language had a ‘mind of its own’. I had a sleepless night pondering this.

The next day, I enthusiastically approached marcela with a tentative proposal for a topic for her doctoral thesis. I suggested that “given that you know narrative therapy in English but not in Spanish, would you consider that your English-speaking marcela might watch as your Spanish-speaking marcela learns narrative therapy and write this up?” She was intrigued by such a prospect and decided to do so by translating Michael’s 2007 Maps of Narrative Practice into Spanish. You might have thought that for a bilingual with post graduate degrees from both Colombia and United States that this would have been a very easy PhD.

Not so. In fact, her thesis turned out to be 581 pages long, without intending to do so, ended up writing three intimately linked versions within it. When Michael White learned that she intended to translate ‘Maps’ while she was studying with him in Adelaide in 2008, he asked her out to dinner to discuss this. Marcela recalls asking Michael: “What are your hopes for my translation of ‘Maps’ into Spanish?” She was intrigued by such a prospect and decided to do so by translating Michael’s 2007 Maps of Narrative Practice into Spanish. You might have thought that for a bilingual with post graduate degrees from both Colombia and United States that this would have been a very easy PhD.

Not so. In fact, her thesis turned out to be 581 pages long, without intending to do so, ended up writing three intimately linked versions within it. When Michael White learned that she intended to translate ‘Maps’ while she was studying with him in Adelaide in 2008, he asked her out to dinner to discuss this. Marcela recalls asking Michael: “What are your hopes for my translation of ‘Maps’ into Spanish?” She was intrigued by such a prospect and decided to do so by translating Michael’s 2007 Maps of Narrative Practice into Spanish. You might have thought that for a bilingual with post graduate degrees from both Colombia and United States that this would have been a very easy PhD.

Marcela recalls asking Michael: “What are your hopes for my translation of ‘Maps’ into Spanish?” She was intrigued by such a prospect and decided to do so by translating Michael’s 2007 Maps of Narrative Practice into Spanish. You might have thought that for a bilingual with post graduate degrees from both Colombia and United States that this would have been a very easy PhD.

Not so. In fact, her thesis turned out to be 581 pages long, without intending to do so, ended up writing three intimately linked versions within it. When Michael White learned that she intended to translate ‘Maps’ while she was studying with him in Adelaide in 2008, he asked her out to dinner to discuss this. Marcela recalls asking Michael: “What are your hopes for my translation of ‘Maps’ into Spanish?” She was intrigued by such a prospect and decided to do so by translating Michael’s 2007 Maps of Narrative Practice into Spanish. You might have thought that for a bilingual with post graduate degrees from both Colombia and United States that this would have been a very easy PhD.
only you can decide. I am not a Spanish speaker, nor know nothing of your culture and politics”. Marcela admitted to me recently that she felt embarrassed by this query. However, this emboldened her to proceed with considerable zeal and 18 hour long study days which believe it or not, she told me were some of the best times of her life.

She speaks of her first attempt in the following ways:

“I was doing a domesticating translation, which was literal, concerned for fidelity and to remain pure to Michael’s original text. I consumed ‘Maps’ like a McDonald’s burger. I was dismayed to realize that I was engaging in the ‘Whitening of my identity’ without any reference to the geopolitics of knowledge and political disparities’. I am a Mestiza woman...Spanish, African, the Indigenous musica and Jewish blood runs in my veins. Should I deny this to myself and my readers? Had I inadvertently colonized myself?”

Let me briefly introduce you to translation theory and the two basic translation strategies it proposes: domestication and foreignization.

Since the 1970s, these two strategies have been engaged in a cultural and political dispute – and I mean dispute – as well as a linguistic one. A domesticating translation means erasing and then replacing the language being translated by the language that does the translation; what marcela came to refer to as a ‘colonizing translation’. A foreignizing translation preserves the difference of the language under translation and requires the reader to ‘go abroad’. What marcela called a ‘decolonizing translation’. Lawrence Venuti is the foremost advocate of translation by foreignization, believing there is what he refers to as “violence” residing in the very purpose and activity of a domesticating translation. He holds that domestication involves “an ethnocentric reduction of the foreign text to Anglo-American cultural values”. On the other hand, he strongly argues that foreignization can be expected to “resist ethnocentrism and racism, cultural narcissism and imperialism” (Venuti, 2010, p.78).

Marcela then turned to a foreignizing translation. This is how she describes her second version of ‘Maps’:

“The politics and ethics of narrative therapy were so familiar to me that when I first learned about it, it went right to my heart. I now decided that I should retain the integrity of its practice but not be colonized by it. I retranslated ‘Maps’ in terms of my country, culture and language. I did so by turning to the literatures and stories of Colombia and Latin America and its social and political histories. For some time, I put narrative knowledge on hold and then returned to it later. I searched for Latin American knowledges that resembled the sources that Michael and David had sought out. And without much difficulty found them”.

Toward an Epistemology of Equity: The Fair Trade of Narrative Minds Across Boundaries of Language

“My third translation was what Clive Scott refers to as a “co-authoring translation” and what I have come to call ‘fair trade’. I have a utopian vision of narrative therapy in Latin America where the knowledges and histories implicit in Spanish and English meet at the border between them and where both are considered to have legitimate contributions to make. Where there is “an epistemology of equity”. Here a fair encounter takes place in which the authority of each is challenged and something new can come about, though familiar to both”.

How does marcela intend to go about this? I will have more to say about that before the end of my address.

Before I do, I wanted to quote from Travis Heath, a colleague in Denver, Colorado about a meeting we had in 2015. My so-called travels with marcela polanco and that meeting with Travis made me wish to address you here today.

There had been a lot of buzz at conferences in Adelaide and Vancouver about this very robust, charismatic brown guy in his early 30s with dreadlocks whose presentations were thrilling those who attended them. When I realized I might hear him speak in the 2015 conference in Vancouver, I jumped at the opportunity to attend. He spoke about ‘Ray’, a 24 year old African-American man on probation for a crime of violence. Ray had told him:

“There are a lot of people in the world who don’t have a voice. And by voice I mean, you know, we all have a voice box that works. What I mean when I say voice is a voice that others can hear and really listen to. My whole life I have never really had that voice because I am poor and black....except when I rap. This is true you know for the whole crew in my neighbourhood too. Rap is our voice”.

This is what he told a recent audience at a workshop marcela, Travis and I gave in his home town of Denver:

“Just then, I looked to my right to see the eyes of my colleague and co-presenter Paulo Arroyo. It was as if he had just seen a UFO, an unidentified flying object. He nodded his head to the left indicating that I move my glance in that direction. As I looked into the second row there was David Epston just getting comfortable in his seat. I had the reaction that any seasoned presenter would have... “Oh, shit!”

While my presentation was about the work Paulo and I had been doing with hip-hop and rap music with young African-American and Latino men in probation, the first 30 minutes was a history lesson for those who might not be very familiar with narrative therapy. I made a quick calculation in my head and determined that I was prepared to reference David and/or Michael White’s work directly at least eight times. Usually when you are presenting
the history of a therapeutic approach, the co-founder isn’t sitting in the second row!! Oh dear! Given that the proceedings were about to begin, I bit my lip, put both feet firmly on the ground, and pushed off into the great abyss. Within the first 10 minutes of the presentation I sneaked a look – or 10 – at David trying to gauge what he might be thinking. I saw him smile and nod. This was enough for me. At least I hadn’t made a fool of myself, or if I did, he wasn’t going to let anyone know it. Paulo and I made it to the end of the presentation. I exhaled deeply with a sense of relief due to the fact that it was over. I quickly made my way to the exit.

Later that night, all of the conference presenters were invited to meet together over dinner. As I was standing and talking to Paulo, David approached us. Uh oh! The moment of truth. I pondered finding a way to make my exit, but I was blocked in on all sides. Any attempts to flee would prove clunky and likely futile.

“I enjoyed learning about your work,” David said. “Really well done. Would it be alright if I asked just one question?”

I nodded my assent.

“Why are you asking Australian and New Zealand questions?”

A little bit confused, my face begged for a more in depth explanation.

“What if you let hip-hop ask the questions?” David queried.

Just then, it hit me what was transpiring. Here was the person who helped create this thing called narrative therapy, and he was inviting me to do things not the way he had done them, but rather, the way that best fit the work Paulo and I were doing.

Still a bit stunned by his question, David followed up: “Would you like my permission for you to rap?”

I looked at Paulo and we nodded affirmatively in unison.

“Well, you have my permission,” he said with a warm smile. It’s a smile I will remember until my dying day”.

Why had Travis erased his own culture, language and replaced it with a version that you might expect in Adelaide and Auckland? Had narrative therapy, against its will and unwittingly, become a colonizer of others? Perhaps it had despite its best intentions.
Let me tell you how marcela and I went about foreignizing Michael’s ‘Maps’ in the first instance and then establishing the grounds for a ‘fair trade’. We hit upon a fanciful notion to assist us here. I suspect there are other ways but this served our purposes wonderfully well. We imagined something that was contrary to fact. As you well know, narrative therapy was ‘born and bred’ in Australia and New Zealand, and within Anglo-American culture at large.

We set off together on our ‘travels’ in Latin American literature, politics and cultures by imagining that narrative therapy was in fact born and bred in Latin America. And if this was so, we asked ourselves what would have been its Latin American sources? And we then began, like explorers travelling up river against the river’s flow perhaps hundreds of miles inland until we found its source or sources. We would ‘trace’ every aspect of narrative therapy that seemed distinctive to either or both of us and find a Latin American source. Sumie Ishikawa refers to this as ‘cultural precedents’ in Japanese culture/language/literature for narrative therapy. And as marcela mentioned, this was far easier to do than either of us had expected. I was encouraged to rethink my New Zealand narrative therapy while marcela was required to rethink her United States-informed narrative therapy. In some ways, we ended up with more narrative therapies than we so far know what to do with. But let me tell you how wonderful it is to revel in variant versions of something you have come to love and the creativity that comes in to play here.

Like marcela, those of you who have no particular allegiance to Anglo-American English and culture, let me remind you of some of narrative therapy’s longest standing commitments. First and foremost, it has never sought any sort of professional monopoly over knowledge or global or universal ‘truth’ for which it can claim ownership; in fact, I argue that the reverse is the case. It has retained a humility and concentrated its efforts in what Foucault called ‘the return(s) of knowledge’. Narrative therapy acknowledged ‘local’ knowledges and in fact, one of the practices that I am proudest of – and perhaps requires the greatest skill – is that which elevates the knowing of the other, rather than elevating professional knowledges. It is narrative therapy that considers what it refers to as ‘insider knowledges’ as equivalent to ‘outsider or professional knowledges’. Michael and I took up where the philosopher (and your countryman), Michel Foucault left off when he referred to “the insurrection of subjugated knowledges…”

He wrote:

“When I say subjugated knowledges, I am referring to a whole series of knowledges that have been disqualified as nonconceptual knowledges, as insufficiently elaborated knowledges, naïve knowledges, hierarchically inferior knowledges that are below the required level of erudition of scientificity…and it is thanks to the reappearance of these knowledges from below…a knowledge that is local, regional, differential, incapable of unanimity, and which derives power solely from the fact that it is different from the knowledge that surrounds it. It is the reappearance of what people know at a local level, of
these disqualified knowledges, that make critique possible”. (Foucault, 2003, pp. 7-8)

Narrative therapy, obviously, owes a considerable debt to French philosophy and sociology. No one can argue about that. A re-imagined narrative therapy could as well be again refurbished by a Francophone re-creation of narrative therapy. What marcela has referred to as ‘fair trade’, an exchange which does not in any way privilege Anglo-American English over any other language or culture. And surely no other language takes more pride in itself and its integrity than French. Surely French literature has something to say to us in addition to philosophy. I was rereading recently the preface by Priscilla Pankhurst Ferguson, the translator into English of Bourdieu et al.’s *The Weight of the World: Social Suffering in Contemporary Society* (La Misère du monde), “I decided to favor the Frenchness of the text” (1993, p.viii). I am not suggesting here a ‘Frenchness’ of narrative therapy but rather something far more than that. Pierre and I came up with the ‘French-ifying’ of narrative therapy to imply your co-authorship of a veritable Francophone narrative therapy that distinguishes itself as French.

In 2011, I wrote in my introduction to Michael’s posthumous *Narrative Practice: Continuing the Conversation*:

“Michael, I am off another tangent here but I have been meaning to tell you that I have become interested in bilinguality and the politics of translation. 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 renew itself?” (Available to read here)

I remain convinced of this watching over the shoulders of marcela polanco in South America and more recently of Sumie Ishikawa as she ‘Japan-eses’ narrative therapy in Japan’. (See Journal of Narrative Family Therapy, Release 3, Available to read here)

At some point you may have to go away as far as you must, please return as far as you can; and we will meet you there. Where exactly am I referring to? What marcela refers to as the borderlands where neither language nor culture reigns over the other. It is between languages where the play of creativity resides. It is here that what David Denborough has referred to as “inter-cultural invention” will take place. Marcela and I believe that such encounters of ‘fair trade’ in such borderlands will be one of the ways narrative therapy will be re-imagined. In such a ‘re-imagination’ you may very well re-invent narrative therapy as you take it ‘home’ to your
culture and language, and I ‘re-create’ it and bring it ‘back home’ in English to Aotearoa New Zealand and Australia.

References


Enchanting our Practices: A Narrative Approach with Children

“Trame Narrative Practice”, Sion, Switzerland

By Charlie Crettenand, Psychologist-Psychotherapist FSP

What if we were to dive into the white rabbit’s burrow to meet the children we work with and to gather their stories of wonderfulness in order to tame the ferocious Problems that seize the best of them. Let’s imagine how we can co-create magical, inspiring, creative conversations with families, which can contribute to restoring their dignity. Welcome to Wonderland!

Introduction
The ability of children to navigate a world inhabited by imaginary creatures that they create themselves, has always fascinated me.

On the playground, the playhouse attached to a slide becomes a pirate ship, and the rubber tiles on the ground to cushion falls become dolphins and whales swimming alongside the ship.

At home, the space behind the sofa in the family room becomes the cave of the wolf who lurks in the shadows ready to jump on one of the little pigs played by a willing sibling. The grandfather's slippers can magically transform a child into a giant or Tom Thumb in the ogre's boots.

We are invited to listen to stories of our young wizards and enchanters about the possibilities that they can imagine, the way they can transform reality. There is no end to the stories they can tell.

Yet, in our professional practice, we do not often make use of this talent when we start working with a child and his/her family. When we meet a family for the first time, we open the door of the waiting room and find an almost tangible unease in the room: the child’s head is down, his/her gaze looks up beneath his/her eyebrows or from the corner of an eye, he/she refuses to say hello despite the parents’ insistence, or to stand up and accompany the parents out of the room. When we are sitting together in the consulting room and start the conversation addressing the child, he/she often does not want to explain to the professional why he/she is here today. So we turn to the parents and address them, and the session begins.

---

1 This article is based on the address I gave during the 3rd French-speaking Days of Narrative Practices in Bordeaux (France) on June 4, 2018. Thanks a lot to Kate Lindley for the translation from French to English and to Peggy Sax for your kind revision.

2 This article gives pride of place to the epicene language, a true way, in my opinion, to inspire more choice and respect!
Let me invite you to look at the situation from the child’s eyes, from the other side of the mirror. Let us imagine the following description, told by a child. We will call him/her Charlie.

Daddy and Mommy told me that we were going to meet someone, even though I did not really understand why or what exactly we were going to do with that person. Perhaps I had been told that we have to go. Because things just can’t go on any longer the way they are, that my parents feel helpless in changing the course of things, and that because of this or that behavior, the whole family is suffering.

I am therefore well aware that it is my fault that we are going and my parents are not looking forward to going. I know that my parents are making an enormous effort to go, at least that is what I have heard them saying.

When we get there it looks pretty nice, even slightly welcoming. There are books and games for children. It looks strangely familiar, similar to the pediatrician’s waiting room, but I know that trips there are not always very nice. On top of it my parents have that serious look that says “this is not going to be much fun”.

The person we are coming to see, this person I don’t know, comes into the waiting room. She/he looks pretty friendly. But what if it is a trap? I think I should be suspicious and careful.

The stranger invites me to go into another room that is not like the pediatrician’s and to choose a chair or a place on the sofa. I am impressed by this room. There are big books and plants like at Granny’s that we have to be careful not to knock over. The lady/man sits in front of us, legs crossed, with a file in his/her hands.

Oh goody, I-spy games and paper and pencils to draw! I’m saved! I want to start straight away. ”Not so fast,” says Mom, ”we’re here to talk. Come back and explain what’s going on.”

I can see that I cannot run away, so I go as far as I can to get away from the stranger. I climb up on Mom or Dad’s knees with my face against their shoulder. Or I sink into a big chair, which is too big, but comfy. I pull my legs up against my tummy and put my face down on my knees.

My parents are nervous. I know because Mom has that strange silly smile on her face and she is playing with her hands. Dad pouts and looks out the window as if he was pretending he was outside, anywhere but here.
The stranger asks me if I know why I am here. I might, but I'm not sure if I want to explain it to him/her. In any case, I'm not sure I understand correctly what has happened and whether it is because of that, that we have to be here.

The stranger seems to lose interest in me and speaks to my parents. I am left alone! But what I hear them saying is not nice. It is really not nice at all! I am being described by my parents in ways that make me feel bad. They are telling this stranger about everything that has gone wrong lately. She/he asks them what it was like when I was younger, whether things have changed or not. She/he asks them about what they have already tried with me and whether it worked. They look at me, judge me, blame me. They wonder what's wrong with me. I feel very small and I would like to disappear.

Isn't that a terrifying story? We are far from the pirate ship race, the wolf’s cave or the boots of seven leagues. Where is Charlie’s creative potential, his/her talent for imagining things? Is it hidden from our sight, lurking somewhere waiting to be discovered? What if we were to start all over again and differently? What if we were to discover Charlie’s wonderfulnesses before we address the Problem?

The "Wonderfulnesses" of Children
Freeman, Epston and Lobovits (1997) propose that we "get to know the child outside of the problem" (p.34). They suggest to not let the problem define the identity of a child, or impose the way of approaching the situation through a problem. They question the practice of looking at the child and describing him/her through the filter of the Problem.

In their recent book Narrative Therapy in Wonderland (2016), David Marsten, David Epston and Laurie Markham propose that we start the first session with a "Wonderfulness Interview". These interviews invite us to inquire about the "wonderfulnesses" of the child in order to give a different tone to the conversation. The intention is to get to know the child through his/her unique, individual and wonderful interests, passions, talents, strengths, etc. Often it turns out these "wonderfulnesses" will be of great help to face the problem when it is finally invited to make an appearance.

But it is often not enough to have the intention of seeking out a child’s wonderfulnesses to put in to practice with a family. Problems seem to come up quickly, and families are quick to remind us of them, constantly talking them up (and talking the child down). This means we will need to make our intention and practice explicit, clearly informing the family about this approach.

"We are here to discuss a difficulty that is really bothering you right now. I am interested in hearing about that difficulty, but before I do that I would like to propose that I find out more about you. I’d like to leave the Problem to the side. Is that ok with you?"
This exercise can be quite difficult to follow through on because the Problem tends to dominate all conversation and is brought up again and again. It may be useful to suggest that we move decisively away from talk of the Problem, that we lose interest in the Problem for the time being. Here are some ways of proposing that:

- "Would you agree to take a vacation away from the Problem and bring some fresh air into our discussion?" (Freeman et al., 1997, p.36)
- "I hear that the Crises are very present at this point in time. Would you agree to put them on that empty chair and we will come back to them later? In the meantime, I can get to know Charlie a little better away from these Crises."
- "Fears have taken up a big place in Charlie’s life and make you very worried about him. Could we imagine putting the Fears in a box while I find out about something else?"

Kay Ingamells, a family therapist in New Zealand, advises her clients that the first session will be entirely devoted to getting to know each other and that the Problem will not be addressed in the first session.

Here are some other ways to initiate this “Wonderfulness Interview” (Marsten et al., 2016):

- Invite parents to introduce their child based on what is unique, fabulous, wonderful about him/her. As they describe their child’s important abilities, propose names for them, such as: “the right dose of courage", "contagious generosity", or "overflowing imagination”
- Ask them to illustrate these wonderfulnesses with a story for each one (i.e Landscape of Action questions: Bruner, 2002; White, 2007)
- Ask them how long these marvels have been around, “When did you notice this in your child for the first time?”
- Ask them if there are other people who have witnessed this wonderfulness, “Do his/her friends see this too? Who else is aware that this is important to her/him? If this or that person (alive or dead) was here with us today, what would they think / tell about it? (i.e Re-membering questions: White, 2007; Crettenand & Soulignac, 2014; Crettenand, 2018)
- Ask them to trace the genealogy of this wonderfulness, “Does this quality come from his/her mother, father, grandparents, an uncle or an aunt?”
- Inquire whether they are inspired to be like their child, “How does your daughter/son inspire you to live your life differently? Could you tell a story where you used your child as a role model to help you out in a situation? When does your child surprise you so much that you want to be like him/her?”
Sometimes, the Problem has taken up so much place in the family's life and caused so much suffering and conflict that it is difficult for parents to remember what is wonderful about their child. In cases like that, it may be useful to think of a person who knows the child very well and looks lovingly on him/her, someone who can “linger over the particularity of the other” to use an expression of Bakhtin (as cited in Freeman et al., 1997, p.64,). I am reminded of Marilyn Frye’s famous “loving eye” quoted by Epston (2014, p.7):

“The 'loving eye' knows the independence of the other. It is an eye of one who knows that to see the seen, one must consult something other than one's own will and interests. Under the 'loving eye', people who lay claim to certain kinds of knowledges aren't unauthorized or de-legitimated because they are not regarded to be in a position to know”.

You could also ask the child, “If your pet, your cuddly toy, your lucky charm could talk, what would they say about what is most enjoyable about you? (Choose a characteristic) What story could he/she tell about it?”

In conclusion, I invite you to try this approach out. Imagine finding out what is wonderful about the child you meet and being enchanted by him/her and the family.

**A Problem Child or a Family Facing a Problem?**

Aside from those first decisive moments of meeting a family, we can look at other moments when we might set a different tone that can “change everything” for the work we do. I want to talk about the narrative way of looking at our approach and the families, beset by difficulties, who consult us. We are aware of our responsibility in the way we approach our work, how we engage with others in conversation, and what it would mean to propose a different and uncommon perspective.

The child is often "pathologized" in the speech of those around him. He/she can be seen as the source of the suffering and hardships of the family. In other words, they are a “problematic child”. The time of the typologies is not over yet since every few years the general public is informed and invited by many popular psychology books to flush out the "manipulators", the "narcissists" and other "toxic" people whether they be their parents, siblings or partners in their everyday surroundings.

The systemic approach offers a broader perspective. It invites us to consider the family as a whole, which has adopted certain dysfunctional behaviors or ways of communicating. These symptoms are acted out by the child in service of the family.

---

3 Here, in the original French version of this article, there is a play on words about the word “Enchanted”. In French, “Enchanté·e” means “Nice to meet you” and “Enchanted”
The narrative approach proposes an epistemological turn, if you like, a further step. It is neither the child nor the family who are the Problem. "The Problem is the Problem," according to Michael White’s term.

We have moved from the Problematic Child, to the Problematic Family, to the Problematic Problem (Crettenand, 2017).

In the next part, I propose that we invite children into conversations that encourage his/her imagination and creativity. We can help families to engage differently with the Problem and find ingenious ways of dealing with it. I will draw on a type of knowledge, Carnival Knowledge, and then illustrate it with a story of my own.

**Carnival Knowledge**

In a recent lecture in San Diego, David Epston (2018) explained what characterized his and Michael White’s intention in their first lecture on the Narrative approach that they gave in 1985. He said they were attracted by a particular type of knowledge. They drew on the Russian philosopher, Mikhail Bakhtin’s term, “Carnival Knowledge.”

Do you know the Carnival? In the Valais, where I come from, it is an ancestral tradition. We spend a lot of time, each year, carefully preparing our costumes, the floats for the street processions and the particular type of music, “Guggenmusik”, played by the costumed bands. In Sion, Switzerland, the Carnival begins with an official ceremony, where the mayor hands over the keys of the town to the Carnival, and therefore to the people, and is relieved of his official functions for the week.

Bakhtin describes the time of Carnival during the Middle Ages and the Renaissance as:

> “The triumph of a sort of provisional liberation from the dominant truth and the existing regime, from the one-off abolition of all hierarchical relations, privileges, rules and taboos. It was the authentic feast of time, that of becoming, alternation and renewal... [All people] were considered equal, and there was a particular form of free, familiar contact between individuals separated in normal life by the insurmountable barriers of their condition, their wealth, their employment, their age and family status” (as cited in Shaw, 2007, pp.5-6).

It is a way of dethroning official power, or the dominant discourses, and shaking up the taken-for-granted truths. I wonder, who more than a child deserves to be crowned King or Queen of the Carnival?

While in interaction with a child, one realizes more than ever the performative side of language, or “when to say is to do” to borrow the expression of British linguistic philosopher J.L. Austin (as cited in Lambrette, 2017). It is also one of the goals pursued by therapeutic questioning in
different therapeutic approaches (strategic, narrative, etc.).

Let me tell you a story about my daughter Olive and her friend, Grinchy (in French: Grinchouille), and how we live together.

First of all, let me introduce you to Grinchy. He entered our family life when my daughter, Olive, was about two years old and "NO!" was extremely popular word in our house. When Olive was close to frustration, Grinchy would make her explode. We learned quickly when he was about to make an appearance and what to do to curb his appetite. Many a frustrating situation for Olive has been escalated, with the help of Grinchy, into a full-blown scene. However, thanks to our training in outwitting him, many such situations have been avoided. Grinchy has grown up with Olive and continues to accompany us. We talk about him frequently and our relationship has evolved, as do his ruses as well as our ability to deal with him.

As Grinchy is such a part of our lives, and I wanted to know more about Olive's pal, I recently asked her what Grinchy looked like. At four and a half years of age, Olive told me he was pink, her favorite color, and then mimed his gestures and facial expression (arms crossed, pout, frown, gaze looking up from underneath his eyebrows). She explained to me what he says, for example, "when the parents say we will go out to do something, he says, "no! I want to stay home!" When I asked Olive if he looked more like a character out of a cartoon or an animal, she said an animal. It was impressive to watch her look around in the room to pick up cues and details, which she then included in her description. Listening to her and talking with her, I was convinced that Grinchy looked like his description that she was constructing in that moment. He had three arms and six legs, rather like a pink ant. He lived in one of her ears. Sometimes he lived in the right ear, sometimes the left. She never knew in advance on which side he would pop up.

A recent appearance of Grinchy was on a rainy day in March. It was late afternoon and I went to the nursery to pick up my three children: Olive, Léon (two and a half years old) and Eglantine (8 months old). Something told me that Grinchy was around that day. I took the children’s rubber boots and the biggest umbrellas. Olive and Léon had fun with the umbrellas at the bus stop while we waited. The bus was very late. When it finally arrived, we climbed on and got off at the bus stop closest to home, but a fifteen-minute walk up a hill. I put Léon and Eglantine in the stroller, protected from the rain. It was late and I knew that Eglantine was getting hungry. With Olive walking beside me, I was tense, knowing that this was an ideal time for Grinchy to make his presence felt. Our walk, a gentle climb up the hill, is long for a small person.

And then Olive tells me, "I don’t want to walk anymore."

I try to encourage her, but I can feel that resistance is growing stronger. She tells me, “my legs hurt.” If Grinchy were to appear now, he will have her rolling in the puddles on the ground, screaming. I imagine Olive soaked to her skin, cold and shivering. I check the time, knowing that
quickly, very quickly, I must think of something. I tell her, "I sense that Grinchy is with us. If you want, why don’t we invite him for supper when we get home? We can have a slumber party, like we did with Noelie. We can listen to music and dance and tell stories, how about that?" Olive looks at me amazed and then begins to tell me about her day at the nursery while we finish our walk home. Carnivalesque knowledge, turn-arounds and role-plays have a bright future ahead of them!

Concluding remarks
In line with the theme of this article, let me propose an alternative conclusion which, I hope, will resonate with you and prolong our conversation. First of all, I’d like to hear what Charlie, whom we met earlier, has to say:

My path is hard, the slope is steep. I remember the way it used to be. I remember having fun, laughing and looking forward to doing things. I remember my parents’ gaze upon me. They looked at me, proudly, with love and reassurance.

Today, I feel saddled with this incredible weight upon my shoulders, a weight I can’t get rid of. I no longer have my parents’ gaze which illuminated my path. I walk in the dark, not knowing how to move ahead at my age. I feel alone and as if a part of me has been ripped away from what my parents used to see in me.

“But I am still here,” I shout, “I am still myself!”

I am stuck behind this luggage, which is too heavy and too big, and hides me. Today I am no longer that laugh that rings out. I am no longer that spontaneity that jumps up. I am this heavy burden.

Will I perhaps forget my own name at some point? What name will I then take? Surely the name of my burden. And from then on, when I am called by that name, I won’t be me anymore.

Unless...

Unless someone notices what I can see in the clouds that dot the sky, or can hear what the wind in the branches of my tree whispers to me, or remembers that once upon a time, I was able to make my parents proud and happy.

Perhaps one day, we will meet and I may smile at you. I will tell you about myself. I will tell you the story about the kingdom at the bottom of my garden and the inhabitants who only
can see. I will let you hear my laughter, and you will see, that it will make you want to laugh with me. And I will tell you where I was hoping to go when I took this path.

What comes next remains to be written. I would like to end with a poem which was inspired by writing this article, and tells of some of my intentions, dreams and wishes for working with children and their families.

Once upon a time there was a child
Who was he/she really?
Intriguing, investigative, intrepid?
To find him/her
Slip down
Into the burrow of the
Fast white rabbit
A child in Wonderland
In his/her search, all his/her senses awake
Where is he/she hiding?
This happy child stuck
Behind the Problem
Which sticks to his/her skin
Giving him/her such a pale look
Child in Suffering
Under influence
Listen to his/her cuddly toy
Who remembers
How this child is a wonder!
Weave with these golden threads
The plot of a story
Fresh. Rosy smile.
Rich with his/her wonderfulnesses
Let's leave the Problem behind!
Give us space! Give us oxygen!
Child, will you be my guide?
Allow me to follow you
As if enchanted
Let us take up your story
With your own words, at your own pace

---

4 Thanks to Nicolas Pirson, my enchanting accomplice, for inspiring this text.
5 To know more about poetic tradition in narrative approach, see Christopher Behan, 2003, Rescued Speech Poems; Sanni Paljakka, 2018, A House of Good Words
As you wish

References


représentations métaphoriques : un média d’intervention systémique sous mandat. 
*Thérapie Familiale, 37*(4), 363-386.


Little Steps Toward Letting the Legacy Live:
Fine Traces of Life to Accompany Families Grieving the Death of a Child
By Linda Moxley-Haegert and Carlin Moxley Haegert

(Elements of this work have been previously published in both French and English. Moxley-Haegert, 2015; 2018. We have been given permission to translate the French into English)

Introduction
The objective in this paper is to describe narrative practices used in work with families who have had a child who died in palliative care at the Montreal Children’s Hospital, Canada as well as describing how this work was received. We describe how 13 parents and two siblings responded to these practices. We hoped to better understand the perspectives of these families on how various narrative practice bereavement services helped them and in how parents responded to such practices as making meaning (without asking them to do so) and the identity projects that were promoted through narrative practices.

Narrative therapy has been described as a form of psychotherapy that seeks to help people identify their values, and the skills and particular knowledges they have which will help them to live those values, so they can effectively confront whatever problems they face. In this specific work the problems faced were managing when a child is very sick with a life-threatening condition and the child dies. During this difficult yet precious journey we sought to help each family member co-author new narratives about themselves.

According to David Epston narrative therapy involves:

“Listening to and telling or retelling stories about the challenges and problems people encounter in their lives. In the face of serious and sometimes potentially deadly problems, the idea of hearing or telling stories may seem a trivial pursuit. It is hard to believe that conversations can shape new realities and meanings of our lives. But they do." (Narrative Approaches, n.d.)

This was found to be the case in our work that for many of these family members, they not only were able to shape new realities but appreciated finding new meanings. In this particular palliative care program, community was developed by the narrative practitioner to promote such ‘tellings and retellings’ and many narrative community practices, as well as individual narrative therapy, were used to promote such pursuits.

Additionally, we sought to challenge some dominant discourses regarding grieving that some parents had found not helpful (i.e. Kubler Ross, 1969 and her stages of grief; Freud, 1961 and Lindeman, 1994 who suggested detachment from the loved person who has died as a goal in
managing grief).
Ultimately, our hope is that this work will lead to the consideration of more uses of narrative practices in pediatric health care settings, in palliative care, and in bereavement care in particular. If too ambitious, we are optimistic that readers of this paper will begin, or continue, to deeply question and consider the role of narrative therapy in the lives of children and their families.

**Life (and Death) as an Identity Project**
As a psychologist and narrative practitioner for a children’s palliative team, the important question was how to be helpful to family members. How could one respectfully acknowledge their stories of pain and anguish while intervening in such a manner as to keep the presence of the child alive even after death? In response to these questions we shaped narrative practices to ‘fit’ this situation (Moxley-Haegert, 2009) in order to help the children and their families create their identity life projects so the children could leave a legacy and the parents could assure that this legacy would live on in the lives of the families the child left behind.

Michael White (2001) stated that life is an identity project. He also stated that identity is a public and social achievement, not an individual achievement. Our work discussed in this paper is to demonstrate how narrative practices can be used to help families develop their new identity in a social and public way after the death of a child (i.e. Little Steps, 1). Identity can get confusing when there is a loss of a child.

‘Am I still a mother when my only child has died?’
‘Am I still a parent of two children when only one child is still alive?’

We have described this work using the stories of the people who consulted the narrative practitioner involved in this palliative care program. These stories are told from her (Linda’s) perspective as well as using the parents’ or siblings’ own words.

**How It All Began**
Linda: *Pierluc was as adventuresome in the afterlife it would seem as in life itself. Three months after his death from a devastatingly fast growing tumour he paid me a visit in my dreams (speaking English perfectly even though in life he knew no other language than French). He stated that his mother needed help. I awoke, fresh with amazing memories of both Pierluc and of his mother, Sylvie. Both had such vivid personalities. I remembered Pierluc sailing down the hospital hallways using his intravenous pole on wheels as a semblance of a skateboard. He was very deft and ran into no one. Shortly after hearing that the treatment for his tumour was not working and would be stopped, I went to visit him in his hospital room. I had only known him for four and a half short*

---

1 Stories are written in italics for clarification for the reader
months and already I knew I would never forget him. He was playing a video game and his video character had just died. He reset and that character came alive again. I asked him, somewhat tentatively, ‘Is that what happens to us when we die, we reset and come alive again?’ He was scornful and very wise for a 7-year-old: ‘No, silly, they become a flash of light and go up to the sky. I am going to ride a dolphin there’. Then softly, he said; ‘That will be pretty soon’. Later I asked his dad, ‘Has he been told what it means to stop treatment?’ His dad said: ‘No and we are not planning to tell him’. However, I let both parents know what Pierluc had told me and they wondered if he understood more than they had thought. Dolphin was a theme for him because he had been planning to go and swim with the dolphins for his Children’s Wish (a program that supports children getting a dream wish when they are severely ill). Pierluc had been told that this trip could not happen until later. It was much later, and that is another beautiful story. Pierluc turned for the worst less than a week later. We found a storybook in French that told of a mother dolphin releasing her baby dolphin to fly to the sky after death. Sylvie read this to Pierluc and told him a story of his trip to swim with the dolphins, reading and talking of dolphins all night until Pierluc lost consciousness in the wee hours of the morning.

Sylvie was one of the parents who asked me to provide services to help, not only the children when they are sick, but the family members as well. Together with other parents, we created the COURAGE (Cancer as an Opportunity to Unite and share Resources in an Amicable Group setting that provides Encouragement) group for parents and families in oncology which later turned into a COURAGE program using community narrative practices to provide support for parents, families and the sick children (Moxley-Haegert, 2012; 2015).

Pierluc’s parents lived far from Montreal but I went to the Memorial service for him. I noticed that the dolphin theme continued as his parents had placed his ashes in a dolphin chamber. There were many parents from the COURAGE program there and Sylvie seemed to be surrounded by supportive friends. When she did not call me for the follow-up that I could have provided, I thought that she must have been managing all right. I had written her a narrative letter with many of my memories of Pierluc during his months in hospital and sent some questions to help in the re-membering of Pierluc. I received a lovely note of thank you and acknowledgment for the work we had done together.

Narrative Practices Used in This Work

Re-membering: Questions to Say ‘Hullo’ Again. Michal White (2005; 2007) used the metaphor of life as a ‘club’ (to create a community) that includes significant members of the past, the present and the future. When someone dies, the relationship with the person one has loved is not lost. Hedtke (2000; 2012; 2014) and White (1989; 2007) taught the narrative practice of re-
membering conversations and these conversations seemed useful before and after the death of a child (White, 2007, Chapter 3). Borrowing from ideas by Hedtke (2012), re-membering questions were added to certain narrative letters sent after the death of a child. Such questions, as follows, could help parents to say ‘Hullo’ again.

**Getting to know you – again:** (Questions will use the male pronoun, as such questions were sent to Pierluc’s parents in the narrative letter they received)

- Could you please explain who your child was before his death, what kind of person was he, what did he like?
- What do you think he might have chosen as his profession? What were his passions? How did he like to spend his time?

**Contributions and appreciations**

- What have you received from having known him? What contributions has he made to your life?
- What things about knowing him make you realise what is important to you?
- What have you appreciated in your relationship with him?
- What did he say that was important to you? (If the child died before talking)
- What things do you think he would have wanted to say to you that would have been important to you?)
- What did he teach you?

**Identity**

- If you could feel his presence now, how would it show itself?
- What difference would it make to your life if you were able to do just that?
- What possibilities would it bring to your life if you could feel his presence closer?

**Re-membering**

- If he could hear what you are saying now, how would he respond? What would he be feeling about your relationship together?

Guided by the metaphor ‘Saying Hullo Again’ one can help parents to re-establish the relationship with their child that they might have lost when the child dies (White, 1989).

Linda: *I called Sylvie and it certainly was evident that she was having a very difficult time. She said that she had lost her community when Pierluc had died. Those friends from the COURAGE program whose children survived seemed to not know how to interact with*

---

2 See Moxley-Haegert, 2009 for an example of such a letter
her now. Because she lived some distance from many services in Montreal, she did not know many other parents who had a child who died. She was feeling very alone and lost and I began to consider forming a narrative therapy bereavement group. I learned that some parents who had been involved with grief groups that followed some contemporary ideas of grief felt they were doing something wrong if they did not follow the stages of grief; if they did not feel they had learned from this experience; or did not believe that they needed this experience to gain certain knowledge; or felt that they did not want to disengage from the relationship.

However, meeting with Sylvie made me re-think the need for providing a group which followed narrative therapy ethics of re-engaging, keeping the loved one close, keeping stories alive, and bringing the best of the past into the future. Sylvie was interested in this idea as she was such a social person and was willing to travel far for such a group.

I also heard what David Epston, Kay Ingamells and Tom Carlson call a counter-story during this conversation (using double story listening). Antoine (not his real name as I have not permission to use it) went on a swim with the dolphins’ trip for his children’s dream wish. He had been a friend of Pierluc’s in the hospital and his mother was Sylvie’s friend in the COURAGE group. When Sylvie heard that Antoine was going to swim with the dolphins, she asked if they would bring a picture of Pierluc on a toy dolphin so he could also swim with the dolphins. The dolphins took a particular liking to Pierluc and played with the toy dolphin for a long time. Sylvie was able to bring Pierluc closer to her heart and soul. When I pointed out this story to her, she began to realize that her stories were not only of loss and sadness. She had a counterstory of this new ability to be able now to seek out joy and appreciation.’

Translated from the French ‘Little Steps’ book 1, Sylvie wrote: Pierluc cherished one dream, that of swimming with the dolphins. The Wish Foundation helps children have a wish, but the cancer progressed so quickly that he left us a few days before the planned trip. When the doctors told us that he only had a few hours to live, I slept at his side and told him to close his eyes and I told him of the dream trip he was supposed to have taken. Pierluc smiled and saw very well in his imagination.’

The ‘Double or Counter Story’. Narrative practices in search of the ‘double story’ helps people to distance themselves from the realities of the problems and to focus on other realities that are also present, but relatively unavailable (White & Epston, 1990). David Epston, Kay Ingamells and Tom Carlson have recently further developed the theme of listening for subordinate stories into what they call a counter-story. Counter stories are actions and are identity focussed. The

---

3 Please refer to Ingamells, 2016 for more information on counter-storying ideas
‘Little Steps’ document\textsuperscript{4}, was produced under these conditions and inspired by the narrative practice of always listening for the hidden and subordinate stories (White, 2007). Such listening recognizes not only the stories of these parents’ challenges to survive the death of a child but also the stories of the competences, the special abilities and the special knowledges that can be specifically discovered on this occasion.

Linda:  
\textit{During our group meetings that we later called the Little Steps group, Sylvie remembered Pierluc’s high action, courage and vibrancy. She talked to others in the group asking, ‘What might I be doing with Pierluc if he had lived? She realized that one thing he would have loved would have been to learn to ride a motorcycle. She decided that her learning to drive a large motorcycle would be a way to celebrate Pierluc’s life, and to take such road trips as he would have wanted to take. Her husband turned in his four-wheeler that he had bought to play with Pierluc for another motorcycle. The two parents then had an interest in common.}

Sylvie:  
\textit{Two years after the death of Pierluc I enrolled in the Huma Ecuador Challenge with Leucan – an organization for the well-being and recovery of cancer stricken children. This challenge tested me in every imaginable way, and that is where I realized I still had a taste for life.}

\textbf{The Definitional Ceremony.} To accompany this project of identity reconstruction of the parents involved in the production of the souvenir album “Petits Pas/Little Steps”, we proceeded to the ‘re-narration’ of the history of the parents in written and artistic form, to make a definitional ceremony. A re-narration of stories promotes the development of rich stories that recognize and value life. The objective was to help parents renegotiate their earlier conclusions about life identity that may be weakened with the loss of a child\textsuperscript{5}.

Linda:  
\textit{Pierluc and his mother helped me to think of collective ways of practice as a means of helping with this challenging time. Prior to this, my bereavement work had not used ideas of group work. This was in part because other parents had told me of grief support groups that they felt were harmful. I did not want to replicate this harm. I invited Pierluc’s mum and several other parents to participate in a project that aimed at determining knowledges and understandings recognized after the death of a child and letting the legacy of their children live.}

\textsuperscript{4} This document can be accessed through the Montreal Children’s Hospital Here.
\textsuperscript{5} Definitional ceremonies were also used with children to re-value life (Moore, Taiwar & Moxley-Haegert, 2015)
**Collective/Community Practices.** Through various collective practices\(^6\), the narrative therapist works to assist families to find stories of hope that would help them better manage these tragedies. We used narrative practices with the intent of finding a way that the child’s presences might remain. To this end the children were encouraged to use narrative collective ideas (e.g. Denborough, 2010; Ncube, 2006) to make legacies. Narrative collective practices allowed for subordinate stories to emerge which could leave a legacy. We began to use collective and community practices so the legacies of these children could continue to live on in the hearts of their families and friends.

**The Little Steps Programme**
Community was developed with our Little Steps Program. This form of community engagement is characterised by a criss-crossing exchange of stories and messages. These are stories and messages that contain hard-won knowledges about ways of responding to tough times. They are stories and messages that describe family initiatives, skills, values and dreams that are implicit in these stories or messages. Our particular community was bilingual, both French and English, the two official languages in Canada. The project Little Steps was designed to be a living document (Newman, 2008) so that stories could be continually added to the album that was the result of this project. It is our hope that such a community approach described here can be replicated by practitioners in many different contexts.

When beginning this project parents were presented the following in both verbal and written form:

*When such a catastrophe as the death of a child occurs, we can ask ourselves many questions regarding how to make sense of all this?*

*Humans use language universally to tell their story. Narrative Practice focuses on the narrative process of the story in order to cope with strong emotions. In this group, we will share our stories and it is the hope that we can then create together a collective document that will demonstrate what we are doing to survive this life challenge. Questions have been prepared that may lead you to share your thoughts and achievements. The purpose of these questions is to guide you through the experience of your story, which we perhaps can write together and pass on to other families.*

**Questions for the realization of our project**
We started the project with questions developed with the help of other therapists practicing the narrative approach (David Denborough, 2010; personal communication, 2009). The categories of questions arose from the many previous conversations with parents consulting

---

\(^6\) For more ideas of collective narrative practices see David Epston’s Anti-Anorexia Leagues [Here](#), and Dulwich Centre’s Collective Narrative Practices [Here](#)
the narrative therapist in individual narrative therapy within this palliative care program. Many of these categories seemed important to parents as ways to bring the child who had died closer to their hearts.

The physical - the place:
- Are there particular places you frequent that provides a sense of comfort to you after the death of your child? Why are these places special? Could you tell a story of one of these comfort areas? What are you doing in this location?

Memory - your memories:
- Are there particular memories that you revisit and that bring you comfort? If so, can you share a story about some of them?

Your own story:
- Were there other moments in your life where you had to deal with loss or grief? If so, how did you do it? Would you like to tell us a story of these moments? What were the most difficult steps? Did you get help or support on these occasions from any person or particular community? If so, how did this help you? And what would these people do or say if they were with you now?

Missing/lamenting:
- What are the things you miss most in relationship to your child who died? Why are these things so important right now? Have they always been important to you? How did they take on this importance? Who else knows what matters most to you in life?

The spiritual:
- How do you approach the issues of pain and loss? Are you spiritually engaged in one way or another? If so, what kind of “spiritual conversation” do you have at the moment? With God, with yourself, with others? What do you think of these spiritual conversations? Are they important to you? Have these values always been important to you in life? Who transmitted these spiritual values to you?

Culture:
- Are there specific ways in your culture to respond to the pain and loss that is important to you? Why are they important? How do you participate? Are there aspects or ways of your culture to respond to the pain and loss that do not fit very well for you? If so, how do you find ways to grieve in your own way?
Different areas of expression:

- At this moment of loss, are there certain odours, sounds, songs, textures, tastes, dances, etc. that are particularly important to you? If so, could you explain why they matter? Are there rituals that you find useful? These can be rituals that celebrate a person’s life or rituals that increase the memories of your child or other forms of rituals.

What was at least one of the results of these conversations? A memory album to help other parents that is now available to consultation on line, on the website of the Montreal Children’s Hospital, Montreal, Canada.

The Little Steps memory album

To help with this identity project created through what became the ‘Little Steps’ album, we planned ‘a ‘telling’ of the stories in written and artistic form. These are stories of survival about how these parents are in the process of managing their lives after the death of a child. Retelling stories of survival can thicken the story, making a re-grading (in a strength direction) of earlier conclusions about identity of life which can be weakened by the loss of a child. It was hoped, as well, that these parents could help themselves while helping other parents.

The ‘Little Steps’ project also followed the narrative practice of searching for ‘double stories’, including hope stories and perhaps new identity knowledges that could be discovered (White, 2007). The hope was that identity knowledges could become social and public.

A group of mothers used ‘scrapbooking’ as a form of narrative therapy for grief. Each child has its proper story. ‘Little Steps’ is a memory album of all the stories accompanied by words of comfort, words of hope and counsel developed by these parents in grief to help and support other parents who have had a child die. Written and created by a group of mothers whose child was treated at the Montreal Children’s Hospital for children (Montreal, Quebec, Canada), and edited by Linda Moxley-Haegert and Marie-Claude Proulx, this album ‘ Little Steps’ is an amazing work of love. (Petits Pas 1)

The goal was to unite parents living the death of a child with the aim of sharing their special knowledges and creating tools to help other parents living this experience. In this way, we implemented the knowledge of what parents had not found helpful with support groups and the knowledge of what was felt could be helpful from narrative practice. This was a different identity project.

Two excerpts from the Preface of Little Steps Album

Never in their wildest dreams could parents think they would have a child diagnosed with a life-threatening condition. Then, when it happens, it seems like their greatest nightmare. However, when that nightmare turns into knowing a child will die, the reality of this wild dream seems like
a living hell. Yet these parents must live on. While working with these families, the aim was to have conversations that can be healing. We often wondered how to have such conversations and not end up only with stories of suffering. How can one respect their very difficult story, and yet find stories of mastery and coping? How could we together find ways that achievements, knowledges, and resources can be voiced?

Identity is built through stories. We contain multiple identity stories. Many people contribute to one’s identity. Through re-membering we can incorporate stories of a child who has died into our identity’. It was the hope and dream of Linda and Marie-Claude that a new identity could be built through the creation of this document, Little Steps.

The ‘Little Steps’ project
Each chapter contains different elements: text, scrapbooking, drawings, lists, thoughts, poems, witnessing, etc. We wanted the project to be flexible and thus to permit parents to express themselves and share with other parents in any manner they wished. Every item in the book was edited in order to follow narrative practice ethics of practice. That is, nothing is presented as a must or should, but what was found to be helpful to the person.

A picture of the introduction [Figure 1] is included to demonstrate their work. Individual stories are French for the francophones and English for the anglophone. All introductions were bilingual.
Chapter 1, Portraits:
This chapter allows you to get to know us, the parents, and our children. You will read about our journey and learn about our struggles. We share our story with you.

Chapter 2, The how to's:
Hope is what helped us to find our way through the stormy times of our grief. Our grief surrounded us with many struggles before and after the death of our child. We hoped for less pain and more happiness to come our way. We did not know how to find that happiness. Here we tell you how we found our way out of the storm and began to live again, albeit in a different light.

Chapter 3, Pastimes:
The grief a parent faces when a child is sick or when a child dies is all consuming. It disables you and every day life becomes difficult and overwhelming. An escape from the emotions, anxieties and pain faced each day was a necessity. The ways we chose to escape from our daily turmoil are shared in this chapter. These moments of escape were priceless for our well-being. Some of these activities still play a prominent part in our lives.

Chapter 4, Creations:
Creativity seemed to be an activity many of us chose as a means of escape. Many creative avenues were chosen. Scrapbooking, card making, crafting, drawing, writing, reading, music and poetry are a few examples. Why did so many of us reach out to our artistic side? I once read that “art requires the ability to surrender to the unanticipated possibilities of the work as it unfolds”. Our hope for a brighter tomorrow provided us with the ability and willingness to surrender to our ‘art’. In doing so, creativity provided us with a great peace and a means to release our pain. It was a therapeutic escape.

Chapter 5, Words and writings:
Understanding a parent’s grief is very difficult if you have not traveled the same road. However, acknowledgement of the grief a parent is enduring is priceless. Kind words, simple acts, listening, and a hug are all simple gestures that provide enormous comfort to a grieving parent. Comfort can also be found in books, poems, support groups or music. This chapter lets you know some of these that brought us comfort.

Chapter 6, Family and those around us:
The illness and death of a child does not only affect the parents. They say “it takes a village to raise a child”. That same village is there when a child is ill and the parents are left with empty arms. The people in this village help us to live day to day, they support and comfort us and they grieve with us. Brothers, sisters, parents, aunts and uncles, friends and colleagues also suffer the loss of this child. How they helped us and how they grieved for the loss of our child is found here.

Chapter 7, What we did not find helpful:
The death of a child is difficult. No one wants to think of such tragedy. Many people are not comfortable talking to a grieving parent and often speak and act inappropriately. Their words and actions are hurtful, although with good intentions, and do not help us. This chapter shares some of the words and actions that have not been helpful to us.

Chapter 8, Rituals, symbols and souvenirs:
Our pain is forever present, but so are our children. You are invited to think about what it might mean to children and families who have suffered this trauma to know that their legacies are shared with you. What would it mean to them to acknowledge that they can leave a legacy rather than a loss? What would it mean to the parents and siblings to know that they are ‘Letting the Legacies Live’? What new ideas for legacy do you have?
In Helping Others, We Helped Ourselves
Two mothers were overheard to say: “In aiding others I realized that I was helped myself”. They were asked if they would be willing to explain in more detail what they meant by this statement, and Martine wrote the following:

Thank you for directing our project with such dedication and organization and compassion. When Linda asked me to be part of this project, I felt privileged to be part of something that joined my interest in creating and my desire to help others. At first it was hard and then I realized we were being led by hope. I hope with this project I will lead others to want to help themselves while helping others.

While participating in Little Steps with Linda, psychologist and Marie-Claude, nurse specialist in palliative care, I was very pleased to work with two women who had such dedication. They led the project with great respect, plus I liked that the meetings were in a beautiful office far from the noises and atmosphere of the hospital.

At the first meetings each told their stories. This was hard to listen to. Each experience was different but also so close to mine. In fact, the pain of memories was intense for all. However, I realized that one of the things in common during this project was that we were all being guided by hope.

For me, listening without judging the behavior of other members, as we had been asked to do, was challenging. I felt grief harder to overcome. In addition, expressing oneself gently without hurting others sometimes became difficult because the emotions, spontaneity and sensitivity were palpable.

Through the dialogues I began to relive the beautiful moments with my child and appreciate even more all the delicacies of my family and my friends. We seemed to be encouraged to let the images speak and to express my way was a balm to my pain, because I shared my methods of relief and appeasement. I allowed myself to laugh, to be happy and to live fully the present moments.

When I think about the project “Little Steps” I feel that I had a chance to share my abilities with people around me who could understand me completely. I was helped to create something which was healing. Imagine a project that allows oneself to express one’s emotions or share one’s lived experiences, all in the goal of helping others. We were surrounded by people with a lot of imagination. I felt I was able to let go of these cowardly feelings of never recovering and I could then give birth to another baby in this creation.

Evaluation of this Work
In our practice we used many ideas developed by David Denborough (2008) and we adapted many of these ideas using our own creativity. Many parents discussed their feelings of loss of their previous community during the illness and death of their child. Thus, it seemed particularly appropriate to use community narrative ideas with these families. This paper describes an approach to collective work that required a development of a community in oncology (COURAGE programme, see Moxley-Haegert, 2012) and invited outsider witness practices as well as definitional ceremonies at all times (Moore, Talwar & Moxley-Haegert, 2015). In an earlier informal enquiry regarding the usefulness of the multiple narrative practices used in oncology, 50 parents responded to a questionnaire. The results demonstrated that two of the collective/community activities, Tree of Life and questions for finding hope7, were among the three practices they most appreciated (the third being the individual narrative therapy sessions). We wanted to do a more formal inquiry about this work in palliative care.

In this enquiry regarding how people in palliative care received this therapy and what they felt about its effectiveness, we were using the narrative principles of double-listening (White, 2004) as well as double-storied testimony (Denborough, 2006) as an approach to conducting an enquiry (Marlowe, 2010). There are certain ethics of practice that we followed both in the narrative practices provided and during this enquiry. These ethics relate to the belief that the insiders (those affected by the problem) are the experts in the knowledge of what is helpful to them. This follows David Epston’s insider witnessing enquiry ideas shown in his work with anorexia nervosa (Maisel, Epston, & Borden, 2004; Epston, 2019). Although at the time the authors were unaware of Sasha Pilkington’s (2014) narrative work, we noticed that we have both interpreted narrative therapy in palliative care in similar ways, as have we interpreted in similar ways the narrative work of Lorraine Hedke (2014).

There is also a growing body of quantitative and qualitative studies exploring the experiences of bereaved parents and their adaptation to the loss (Stevenson, 2014; Stevenson et. al., 2017). Much of the research findings of these researchers support the idea that parents might appreciate the use of such narrative practices to enhance meaning making and promote counter-story development, as well as create new self-identity. There is support that collective practices such as helping others, definitional ceremonies, re-membering conversations that bring the child closer to their hearts and souls, and of building community could also be seen as helpful.

Co-research
To try to understand how families in this enquiry viewed narrative therapy, four parents and the therapist co-developed the following questions (Freedman & Combs, 1996; Gaddis, 2004):

- What would you say was important to you in the therapy provided to you during your time of grief? What did you most appreciate in the work?

7 Questions created by the authors and placed on pictures to be answered and coloured in by the children, see Moxley-Haegert, 2012 for examples
• How would you describe what was meaningful to you?
• Were any narrative methods used to help you in the process of managing grief useful, and if so how?
• Were any of the narrative methods used not so helpful, and if so how?
• What could have been done differently in this work?

Ideas from Lokken (2011) were also used to consult with parents who needed bereavement care in order to develop questions. These questions were chosen collectively from among questions used frequently in the narrative therapy conversations. Research ideas also came from readings by Thorne (2008).

A collective document presents the written collective responses of 15 family members to these questions. The themes developed are narrative therapy terms which present some of the hopes and dreams of the described outcomes from narrative therapy conversations and community practices.

We present the collective document in bold type, with quoted comments in italics. These questions and responses are termed primary research in narrative communities, that is, questions for therapeutic purposes as well as research purposes.

Some Ways in Which this Work was Received

The Collective Document: “What sustains us through difficult times?”

A large number of us have confronted what could be called the greatest tempest of our lives: the death of a child. Sometimes these storms seemed like a hurricane and have produced such very hard times.

We are mothers and fathers and siblings with a family member, a child, who died and we worked hard to overcome this most difficult time in our lives.

It was not easy to survive the death of a child in our family, but we have worked to keep going during very difficult times. We have been thinking about all our special abilities and special knowledges that have helped us face so many problems and sustained us during these very tempestuous times. We have thought about all that has helped us keep hope alive during this greatest challenge of our lives. The questions in narrative therapy helped us find our ways of survival.

Some of us felt that we lost our identity when our child died. Am I a parent when my only child has died, am I am mother of two children when one has died?

---

8 For ideas regarding collective documentation please refer to Denborough, 2008.
Life as an identity project

Sylvie: For me, working on the French in Linda’s manuscript for her chapter to go in a grief counselling book has really helped me to find closure and turn the page, as well as giving me a more concrete sense of our individual meetings and permit a new reflection. What really touched me in the text were the explanations of the need of humans for self-identity. It is certain that after the death of a child, we ask ourselves if we are still a parent. It has been hard to respond to the questions of who is in our family when we meet people. Often, we are questioned regarding how many children we have.

Do I respond, originally two but now only one child? In that case, we need to begin talking about the fact that one child has died, and our questioner is put in an embarrassing situation and offers condolence. In brief, I still have work to do but less now that Linda has given me the necessary tools to reconstruct my identity. Please thank her again for permitting me to help her with her text (Moxley-Haegert, 2018).

Doris: I really appreciate what I learned about myself while participating in the Little Steps project. I found my voice, literally and figuratively. I joined a choir and it has given me a new lease on life. Thanks for helping me find my voice.

Some of us felt that the project Little Steps, a narrative collective document guided and edited by Linda and Marie-Claude Proulx, helped us find our identity again and refocused our direction in life. Others found identity in different narrative practices.

Some of us had difficulty in finding a meaning in these experiences.

Meaning-making

Maude: I attended a group for bereaved parents, and they wanted me to find meaning in the experience. I did not want to search for a positive meaning as they expected. I did not have to have my son die in order to understand that I was a strong person. No one involved with the Little Steps project seemed to expect or asked me to find meaning and yet in the process I learned so much about myself and what I want with life. I became brave enough to get pregnant again as I realized that I was always a parent even when my only child had died.

Martine: I want to thank Linda and Marie-Claude for directing our project. When Linda asked me to be part of this project (Little Steps), I began to make meaning of the whole experience. I wanted to help others living with the experience of the death of a child. I hope with this project I led others to want to help themselves while helping others.
Sylvie:  *I really appreciate that when Linda had a dream about my Pierluc and he told her to call his mother, she listened and called me. I was so down that I could not reach out but my Pierluc reached out 3 months after he had died and Linda listened. We made sense of even a dream.*

Nash:  *What I really appreciated was the legacy [a collection of pictures and sayings that her daughter Iman used to give meaning to her life] that my daughter left us with her work with Linda and Kelsey. I learned more about her values, beliefs and wishes for her life than I had ever known. Some things we did not talk about together. It gave me more meaning about her life.*

Anthy:  *Our pain is forever present, but so are our children. I wrote this in the Little Steps book and the creation of this book helped me understand and make more meaning of the experience.*

Nathalie:  *Raphaël had special knowledges and a special story to tell. He told Linda of a dream that he had in which he was dying in a fire and his mother wouldn’t save him. Linda has a special conversation with him about this dream and they decided that if it should happen that he was in such a situation and his mother didn’t save him, it was that me, his mother couldn’t save him. Later, when we went to Florida to see Disneyworld for his special wish, he managed one day before he became so sick we had to call emergency services. When the emergency responders arrive, they were firefighters. Raphael, using his dream, said to me, I am dying maman [mother], and you can’t save me. I was so happy that he and Linda had had that dream conversation, so then we could speak about death that night so openly.*

Many of us realized that making meaning of this difficult time was important for us in our healing but it had to come from ourselves and not forced by others.

Some of us found that it greatly helped to have a supportive community around us. For some of us that was more difficult, but the narrative therapy we received helped us develop community when it was not there naturally.

Some of us found it so helpful to find ways to continue the memory of our child so our child will not be forgotten. For some of us remembering came through re-membering conversations with Linda. For others, it was through the creating The Little Steps book or the Tree of Life, and for others it was in the creation of legacies by our children. Linda also took pictures and filmed our projects and sent us every copy of them, as well as the questions of hope our child answered in that group project.

Re-membering
Jackie: What I really liked was the letter written by Linda and Kelsey and that they collected memories from the team to put in the letter. It reminded me of some of the good times in hospital with Liam. Thank you.

Maude: I would like to thank Linda so much for that re-membering conversation she had with me. And for filming it so that I have the conversation forever. Taric was always going to remain with me but he became so vivid after that conversations.

Nicki (sister age 14): I loved the memory box we made together. I could remember not only Harris Dean but my twin brother and sister who died right at birth. I still have it and look at it sometimes.

Some of us began our healing by keeping our children close to our hearts which was keeping our relationship with them alive.

Some of us found help in finding another story other than just the story of our pain.

Double stories
We found that there was often more than just the hurt and pain.

Harris-Dean’s family: We appreciated the stories that some of the after-therapy questions helped develop. We found a lovely memory regarding Harris-Dean’s only outing during which he wore a snowsuit for the first and only time. We remembered that it was a time of concern and worry because he was going to another hospital for an intervention. However, during the after-therapy conversation, we were able to remember his snowsuit and appreciate that he got a chance to wear a snowsuit and that there were other ways to remember that outing. We appreciate that remembering the happy part of that story is helpful even now to bring Harris Dean more into our lives.

Community building
Anthy and George: What we valued most was the encouragement of the creation of a community (we called it the Condo Boys) on the NICU [Neonatal Intensive Care Unit]. The families of four little boys in the neonatal intensive care unit asked to be placed together and our therapist helped us in this endeavor. These four families are still in touch today. Two of the boys survived and two did not. Our son Harris-Dean is still a condo boy with the one little friend who died. Our boys are buried in the same cemetery so that Harris-Dean and his friend can still be together.

Maude and Martine: By helping others in the creation of the Little Steps Book we were actually
helping ourselves. Also, we got a chance to develop our own community of parents who understood our experiences as others never could. Our new Little Steps community was very helpful in our healing process.

Sylvie: I lost my community when Pierluc died because I had been very active with the COURAGE group, a community that Linda developed for the oncology programme. When I told her how lonely I felt, she began thinking of the Petit Pas (Little Steps) project. At first, I felt that I would cry too much if I attended but then when I did I found so many loving families who completely understood. I really appreciated that even though it was hard at first.

Jimmy: I really appreciated Linda coming to our home to do the Tree of Life with my family. We would have preferred to do it with other families who were part of our community developed by Linda. Both my wife and my daughter, Megan (see *2), were dying of cancer and could not easily leave home. My wife was so happy to strengthen our family togetherness while creating our Tree of Life as a family. Now I am so happy to have that legacy of our family when my wife and my daughter were alive.

Some of us received considerable support from the community of other bereaved parents while others found community within the family.

What was appreciated about this work?
Harris-Dean’s father George: I appreciated the part of narrative therapy that allows the family to lead. I was never ‘a talker’. I healed more by doing and sometimes I really did not want to talk so much. My wife was a talker and I appreciated that there were services so my wife could talk and that I did not feel pressure that I had to talk as well.

Laura (sister, age 13): I was ten at the time of my brother’s death. I have kept the memory box that Linda and I made together. I really appreciated this memory box. I also appreciated it when my therapist went to my school and helped me explain to my class what it feels like to have a brother sick for many years of cancer, then die. Linda helped the teachers understand that it still is as hard to manage after a brother had died as to manage when a brother is sick. Also, she explained that everyone managed grief uniquely, that there is no should in how one manages it. I really appreciated that.

Anaya (A different name was given for this mother to respect privacy requested): What I really appreciated was the book that my daughter, A…….., created with the psychologist. My daughter’s name meant ‘who knows what God has brought us through this child’. The book reminds us of the love and joy and intelligence that God brought us through our child.
What could be done differently?
Martine: There is nothing I would have wanted done differently. I felt respected and never judged. I never felt pressured, disturbed or stressed by the process. I was given room to be creative in an intellectual way and I felt so much better after.

Evaluating the Ethics of This Practice

On Bilingualism and Culture. There is an ethical consideration relative to the particular environment in which this work was done, since the collective and community work was carried out in both of Canada’s official languages, French and English. The psychologist and narrative therapist was an anglophone (English first-language speaker) born outside Quebec. This means that, as polanco and Epston (2009) have written, “considerations of bilingualism or multilinguality can influence our practice within language” (p.62). For this reason, the therapist frequently consulted francophones (French first-language speakers) on the accuracy and quality of the written language as well as on cultural interpretation (polanco, 2011; 2013). It was, in part, for this reason that Marie-Claude Proulx was invited to be part of the Little Steps group.

On Accountability and Transparency. As narrative therapists, we try to engage in practices of accountability and transparency: the openness of our work with parents and children and constant questioning of this work are more likely to provide those who consult us with what they want to receive. We must be alert to any form of discomfort and remove any issues that cause such feelings. Always, an attempt was made to lead with questions and respect the preferred wish of those consulting us, for example, George who stated in the collective document that he preferred not to talk very much, but was able to participate in creating a Tree of Life with his family. Children and parents seem to appreciate when the therapist is inspired by their answers and uses these answers to guide the rest of the conversation, and when the therapist frequently confirms with them that the topics are the ones they wish to address. The practices of accountability in relation to this dilemma involve continually asking questions such as those used in this co-research. These accountability practices can also be put in place by asking frequently, “Am I addressing the subject that you want me to ask about?” We tried to watch for discomfort and to pull back when necessary. As we learned from George’s comments, this was greatly appreciated.

On the co-research: In this co-research, the parent or sibling was asked to intimately describe what was helpful and unhelpful in the therapeutic approach. Co-development of questions to be posed to parents and families was also part of the ethics of this narrative practice.

On the Circle Giving and Receiving: Each family received a written narrative summarizing their particular responses to these questions after our interview conversations9. Martine, one of the parents who responded to the questions and who was a great admirer of narrative practices, reminded us of what the Just Therapy group taught us (Tamasese et al., 1995, p. 109). Martine

---

9 An example of such narratives can be found in Moxley-Haegert, 2009
recommended two new resources for more creative ideas. We used this book and website in our work (Corneau, 2014; Jobin, 2014). This narrative practice is certainly a circle of giving and receiving.

**Conclusions**

In summary, in palliative care work with children and parents, we used narrative therapy and community practice to create songs, poems, films, art, documents to consolidate values, beliefs and special knowledges in a medium that not only preserves these values, beliefs and special knowledges, but also communicates them and makes them known to family and friends. This work was named, ‘Leaving a Legacy’. We helped these legacies develop through the use of many Tree of Life workshops (Denborough, 2010; Ncube, 2006), a monthly ‘Journey Group’ (McPhie and Chaffey, 1998), weekly group projects which we called ‘Questions to Find Hope’ all which produced words of wisdom to be shared with friends, family members and other families participating in the COURAGE program. Legacies were also created through individual narrative therapy conversations (Moxley-Haegert, 2012; 2015).

We had many re-membering conversations to help parents keep the memory of the deceased child alive in their hearts. But in this article we mostly discussed the collective work with parents after the death of the child. Collective community work included archiving stories in a document called "Little Steps" and community development between parents who already knew each other and newly mourning parents. This development was supported through sharing letters, stories and support. This particular narrative practice was named "Letting the Legacy Live." We are honoured to have been able to participate in a therapeutic exploration in which many of the participants considered themselves to have benefited from the process.

For us, this therapeutic exploration is the result of a communication in the respect of the ethics of the Just Therapy group who taught that “the values of humility, sacredness, respect, justice and love, trust and cooperation are essential to the accountability process” (Tamasese, et. al., 1995, p. 109). We believe that these values were part of our responsibility for this work. The responses of the participants in the follow-up enquiry reminded us what the Just Therapy group taught us.

**Appreciation**

These conversations were lovely and rewarding experiences. We hope was they were just as rewarding for the families. The co-research enquiry suggests this was so. It was an honour to be part of a therapeutic journey which could produce such a response from so many who told us they benefitted greatly from the process.

We would like to express our appreciation to all these family members for their many conversations with us both in the narrative therapy process and in the enquiry process.
1. To read more of Pierluc’s story and those of other children refer to the Little Steps publication: Access it here (français) and Access it here (in English) 2014
2. We shared photos, stories, documents and names in this article with the permission of the families and individuals involved. We worked together on how to share these ideas of resources and specific knowledge. This work could not have been done without the input of the community. We want to pay tribute to all the families and children we worked with who shared their stories and feelings of loss, pain, and fears, while finding their own hopes and dreams, values and the beliefs, and the particular knowledge they have treasured. Special thanks to the outstanding oncology staff and members of the palliative care team who participated in this work. We want to thank particularly Sylvie Séquin and Martine Bélair (two of the nine authors of Little Steps) who helped us so much with this article (particularly in French).
3. We wish to thank the parents who spent so many hours in the creation of this book and who decided to take control of their nightmares and to try to find transformation into what could become a dreams of survival.
4. We would like to express appreciation to the McGill University Health Centre for giving us permission to interview these parents.
5. Recently, We carefully considered polanco’s (2011; 2013) ideas in terms of "foreignising" narrative therapy for French speakers, even if it is of European-American type. polanco & Epston (2009) suggested that translation studies and bilingualism offer interesting contributions to the development of narrative therapy. They say that narrative ideas migrate with cultures, and these passages can enrich and diversify narrative practices. Linda considered this view in the past and their statement is corroborated by our experiences (Moxley-Haegert, 2009).

Notes:

1. Spirituality and religion are implicated in helping the bereaved cope with their grief. These family members did not mention either as helpful although the children did (Moore et. al., 2017)
2. All parents except Anaya wanted their real first names used and those of their children.
3. Megan’s voice can be heard reading a children’s collective document in oncology in a Dulwich Centre Friday afternoon presentation (Moxley-Haegert, 2012).

Linda Moxley-Haegert has worked in palliative care teams using narrative practices with children and families since 1991 in Newfoundland and Quebec. You may contact her at lmhaegert@yahoo.com.

Carlin Moxley Haegert has a master's degree in applied psychology and is becoming a registered psychologist in Ontario where he also studies analytical (Jungian) therapy. He learned narrative
therapy with his mother, Linda, and has participated in narrative therapy workshops in Vancouver, Winnipeg and Dublin, Ireland. You may contact him at carlinhaegert@hotmail.com.

References


DAVID: Dina, can you tell us how you got started?

When I trained as a coach in 2007 (after twenty years as Director of Development and Communications of a large advertisement group) my intention was to support men and women in their work lives. Because I more or less had educated myself, had been raised in difficult family circumstances and moreover was a woman, it had not always been easy for me to grow and evolve at high levels in the company. I have never been accompanied and I have lost a lot of time and energy in finding my place, understanding what is happening in relationships with people. By becoming a coach, I was going to accompany what I had sorely missed during my professional career: a space to doubt, to regain strength, to get out of isolation and to find one's way when sometimes we have the impression to remain lost.

So I started to offer my services in organizations but as I am an “activist coach” and I like the idea that coaching is not exclusively reserved for managers in companies, I decided early on to also put my practice serving other people. At the beginning I worked voluntarily to accompany women over 45 who after having stopped working for many years (divorce or others) found themselves in search of a professional project.

And then one day, in 2008, my friend Véronique, who is also a narrative practitioner, tells me about a project that she has been offered but that she does not feel like taking and in which she can imagine me. This project was aimed at a whole sensitive department of the Parisian suburbs. It was a test project. Funded by the European Social Fund and initiated by the Creteil Academy. It was a question of accompanying in all the colleges of this sensitive department of the suburbs of Paris the classes of “3rd Segpa” (the Level 3 class in France is in high school where kids are 13-14. It is the class immediately before college, meaning that a decisive step of orientation takes place in it).

These are classes where they gather young people in very great learning and social difficulty, who will not be able to go to standard high schools and who are oriented to vocation training.

These young people are 14 years old. They often accumulate difficult family problems; they are sidelined in colleges in special venues with specific teachers. They have trainings, depending from the colleges, in carpentry, plumbing, sewing. They are very unhappy to be in these classes and/or they are considered “stupid” (by their words). The other young people of the "general" classes make fun of them as if they were awkward or outcasts.
Our work with them is to help them find their professional projects, close to what interests them in life and restore their very damaged self-identities. My reasons are simple. As I said above, I go with what I missed. I was myself abused by the school system and put very early to 12 years in a special class for children with emotional difficulties. Like these young people that I accompany, I left the school system very early at 16 with a CAP (very basic professional certificate) as a shorthand typist. An occupation that I did not choose, but as I had no idea for some other occupation, I was told “you are a girl so that should be interesting for you.” At best, I can say I endured my school years.

Things worked out for me when I started working. I learned by doing. I went back to school while working to fill in the gaps in my education. I ended up as Director of Development and Communication for the world's largest advertising group.

So my intention in going to meet these young people is to offer them a space to find hope in order to project themselves more confidently into the future. Given my career, in front of these young people, everything in me says that "it's possible to do”.

DAVID: Dina, how did you go about that?

My first experience was in 2008. It was the first time in France that we offered to coaches to go within the colleges to support young people. It took a big organization to get between a math class and a French class. As far as I am concerned, I had to accompany 4 whole classes in 4 different colleges. Each class had a dozen sessions which were spread over the whole school year.

The start was very difficult for me because the teachers of these young people were against this program and they even went on strike so that I did not come. I had to understand and hear what was behind their demands. It was necessary to organize a meeting where in front of the teachers and the parents of the young people I had to defend my intervention. I started by telling them, “What I see and hear behind your demands are people who defend their honor and their utility. Maybe you think I’m doing what you cannot do. If that's what you think, I am totally wrong in the way I explained myself. We are here to do very different jobs.” And I answered all their questions and removed all misunderstandings. And then I was able to resume my mission in close collaboration with those teachers.

Regarding the young people, they immediately invested this space of accompaniment where the students had the possibility to show something else of themselves.

DAVID: Dina, would you for English readers provide a summary of your book School Failure, Another Possible History: Coaching at the Service of Young People in Difficulty (2011)?
It is a book where I tell my experience of this first narrative accompaniment mission with this audience of young people in the colleges. I modestly recount how I got narrative ideas back into the school environment. I tell how narrative practices can be a beautiful answer to restore damaged identities, find hope in the future and the desire to move forward. All the main narrative concepts are discussed and concretely set up with these young people, session after session. We follow these young people from the beginning to the end of the accompaniment.

DAVID: When you first were introduced to the ‘practice’ of Insider Witnessing Practices, what piqued your curiosity about ‘translating’ this to the circumstances of these young people in schools?

When I first heard about this "Insider Witness" concept it was when you presented it to us in Bordeaux in 2014. What seduced me at first (like everything that seduces me in general in my practice) is that this concept would help me to help my clients. I always watch, in my accompaniments, the moment when the person switches to the side of hope. When this hope comes, it's hard for the person to hang onto it sometimes. So I am sensitive and conscious of all concepts, methods that help people cling to their newfound strengths.

I did not immediately think of using it with young people in schools.

I first wanted to experience it as you presented it to us. I need to understand the intentions of the concept, doing it at first in a very formal way before eventually adapting it. I immediately felt the power of the concept. I am somebody who is very intuitive. I feel, I do and I think after!

In hindsight, what raised my curiosity was that you spoke to us in a way which was totally new for me. I like the idea of helping to open up new areas of support. Then, the idea of performing my client in supervision with his agreement and making him listen or read the conversation immediately appeared to me as a powerful way for my client to revisit, in a certain way, his story through me. Through what I know about him, through the image that I have of what is important for him etc ... I first experimented "the IWP" twice in supervision with Pierre as you had originally presented it. With Christine, a client who had experienced a painful history of professional harassment, and with Roxane, a 17-year-old girl who had been out of her home for two years with a story of "school phobia". In both cases, the experience was an extremely strong moment of accompaniment. It favored this famous moment of change towards hope. As if it had spared me several sessions. It has helped to anchor progress, to open new paths of help for people, to honor forces and alternative stories.

It was from these two experiences that I began to think about how I could use it in my school accompaniments.
DAVID: Can you relate how you ‘translated’ IWPs, which originated in ‘psychotherapy contexts’, to the circumstances of these young people in schools?

I have repeatedly used this concept or an inspiration of this concept in school. Below are three examples. As it has had encouraging results, I have many requests from teachers for educational guidance on different topics, but I take baby steps.

The 1st example was with an educational mediator. For several years now, I have trained and supervised the educational mediators of a whole department in the Paris suburbs. These are mediators specifically trained to intervene in so-called “very difficult colleges”, where there is a lot of violence. They are not part of the National Education. They work full-time in colleges. They are trained and paid by the city hall. Their job is mediation between students, between teachers and students, between parents and teachers. They have a very difficult job. They often feel helpless in the face of young people and the French education system. They do not feel highly regarded by the educational framework of the college, since that is not part of the National Education. As part of my supervision with a mediator named Moustapha, he tells me about a young man, Serkane, whom he accompanies. Serkane is regularly abused by his father and humiliated by some young fellows from the college because he was placed in a difficult class and was not always very well dressed because low money. He has very few friends.

He likes to stay in the mediator’s office, a place of well-being for him.

Moustapha has been following Serkane and his family for 2 years. He tries to get Serkane out of isolation, to honor his resistance, his strength. I trained Moustapha in narrative practices; he was seduced by ideas but has trouble putting them into practice. I have the impression that he is quite modest in fact. The exchanges between him and Serkane are not done so much by words but by the reassuring presence of Moustapha. So I had the idea to offer him this experience of a proxy conversation. I said to Moustapha: “Would you be ok to have a conversation with me like you were Serkane? I will ask you questions and you answer as if you were Serkane. We will record our conversation so you can listen later with Serkane. Of course you have to ask Serkane for his authorization before. The intention of this exercise is for Serkane.”

“By listening to this conversation”, I said, “Serkane will feel heard and recognized in what he lives, it will help to anchor his improvements, eventually open new avenues of work with him. You will allow him to listen to his story through you and what you know about him, what hopes you have for him. What do you think?” Mustapha was ok with this. He then found a way to address Serkane indirectly and overcome his own modesty.

We had some time after our conversation with Serkane’s agreement. Then Moustapha had Serkane listen to our conversation. Moustapha told me that the young man listened masterfully
to the conversation on Moustapha’s mobile phone. He asked Moustapha if he could have a

copy so he could listen to it again. Moustapha did not always have the answers to my

questions, so Serkane had to improvise the answer himself, and this has opened new avenues

of work. But above all, Serkane was amazed because he rediscovered his story through

Moustapha, a story that was much richer than he thought. As for Moustapha, he told me that it

was very beneficial to him too because he had felt less helpless, and afterward this exercise

made him feel useful for Serkane.

The 2nd situation was the case of a high school girl, Roxane. Roxane is 17 years old, she is an

excellent student but had no longer going to class for over a year when I meet her. The

accompaniment was decided by her mother and the principal of Roxane’s high school. Both

were looking for a way to help Roxane return to class. Roxane, however, loves school, likes to

learn, likes interaction with classmates and teachers. Her head wanted to go to class, but her

body could not do it, as if something had sucked all her strength. While staying at home,

Roxane remained one of the best students in her class. She recovers the lessons; she created a

whole network of mates and teachers who bring her lessons.

We worked a few weeks with Roxane whose goal was to get back to class. During the

accompaniment she had sometimes found the strength to show up, but only sometimes.

Roxane had accomplished a lot during our work, but I felt a little stuck with her as if I did not

have all the data to help her. This is the moment when I suggested to Pierre to do a proxy

conversation with me where I would play Roxane. When I asked Roxane if she was ok with this,

she immediately said yes. Because she was a minor, her mother and teacher were also asked

permission. Pierre and I filmed our session. Afterward, Pierre and I continued to talk about

Roxane as part of a debrief. The camera continued to record, and this was an important part of

the conversation as she mentioned it. We decided to show everything to Roxane. Roxane saw

the film alone. When I saw her again, she had a leaf full of notes. It was a great meeting with

Roxane. Re-listening to her life through me made her realize that she had bravely resisted her

story of "school phobia" and set up an entire organization to lose nothing of what was

happening in class. This opened up new avenues of work. Roxane returned to class a few weeks

later.

The 3rd time was between a teacher and her student in the context of a conflict between them.

I adapted it to the context. I have been working for four years in the same college to

accompany a class of 4th (NB 4th means 13 years old) in difficulty. A class designed specifically

to bring together young people who have noticed the loss of faith in themselves or dropout for

various reasons. A specific program has been designed for these students to regain strength

and confidence.

When I arrive at the college that day, the head teacher confides to me. In her own words, the

teacher says one of the students in the class, Areski, had been "ruining her life" since the
beginning of the year. “He routinely messes with the class and is insolent.” The teacher informs me she consistently has to “fire him from the class”. She thinks that he particularly resents her because it seems that he does not have the same behavior with his other teachers. She does not know how to go about it anymore. I had actually noticed that during the classes I was shadowing, Areski often complained about this teacher, whom we will call Mrs. Martin.

I propose to Mrs. Martin a special session. I said, "Would you be willing, if Areski agrees of course, to have a meeting together, all three of us? A session where you will be invited both to answer questions in front of the other, but where everyone will respond as if they were the other. In other words, you will put yourself in the shoes of Areski and answer my questions as if it were Areski who answered, and do so in front of the real Areski. Then we will reverse and he will answer as if he were you. The intention is that you and Areski change your position to see and understand what is happening in the other. For the listener, it is a moment when they can see if the other has understood something of what is important to them. I won’t hide that I have not done this kind of conversation often, and I do not guarantee the result. But I think it's worth a try."

Mrs. Martin immediately agreed. She was ready to do anything to settle the situation and find more comfort in her relationship with Areski and in her class. When I proposed this exercise to Areski, he was much less enthusiastic. He said to me, "It's weird, your stuff. I'm in, but I'm not sure I'll talk."

We were all three going to try.

I put the frame: "As you know, everyone will play the role of the other. The other remains a silent witness. You will be able to give your impressions, but afterwards. I thought it would be better to start with Mrs. Martin, but I did not want to impose that. I just started, "Whom do we start? And fortunately Areski immediately said "she" by pointing to his teacher without looking at her.

"Mrs. Martin, you tell me when you are ready."

In broad outline, this is the dialogue that followed. I remind you that it is Mrs. Martin who plays the role of Areski:

DINA: Hello Areski. Why did you agree to do this exercise with Mrs. Martin?

ARESKI: I do not know why. I came but I do not believe it will help

DINA: Can you tell me about your relationship with Mrs. Martin?
ARESKI: She is crazy, Mrs. Martin. And she is lame. You do not know everything she can do. Since the beginning of the year she always attacks me, and for nothing most of the time.

DINA: What’s wrong with what lives between you and Mrs. Martin? Can you give me some specific examples?

ARESKI: As soon as I get back into the classroom, she looks at the time to see if I'm late. As soon as someone talks, she turns to me. Once, she had corrected all the copies except mine. It is not fair.

DINA: What have you done to try to fix things with Mrs. Martin, or what ideas would you have?

ARESKI: Yes, it seems to me that at first I tried to talk with her to tell her that it was not me who was chatting, or that I did not think it was fair how she was treating me. But since I thought she was doing it regardless, then after a while I gave up. It was useless.

DINA: What is important to you that Mrs. Martin may not see or understand?

ARESKI: That I want to be treated like the others. That I make efforts. That it's not always me talking or bullshitting in the classroom.

DINA: These important things correspond to what values for you?

ARESKI: Justice, I believe. Respect.

DINA: If she was there and you had the opportunity to send her a message, what would you tell her?

ARESKI: If you want me to respect you, respect me.

DINA: Do you want to add something?

ARESKI: No, I said everything.

Needless to say, as early as Mrs. Martin's first answer, Areski began to be interested in what was going on. Little by little, his face, which I was observing from the corner of the eye, was transforming. He smiled, he laughed, I even think he was moved. His first reaction was to say, "I am too shocked. She knows me too well. It sounds like she's in my head."
From that moment, I knew it was won. That their relationship would change dramatically. It must be said that Mrs. Martin really understood the exercise. By answering as honestly as possible, she managed to forget herself a bit and improvise her pupil, look for the right answers for Areski. It's a nice gift she gave him. Frankly, if we had not started with Mrs. Martin, I'm not sure that Areski would have had the energy and the drive to really get into this exercise. But when it was his turn, and the strength of what had just happened, he made a lot of effort to play the game himself and try to meet Mrs. Martin too.

What is powerful in this kind of exercise is to ask the questions to the actor while thinking about the listener. This requires building questions whose answers might interest the listener. As for the person being interviewed, this exercise allows them to revisit the situation where it is possible to think otherwise. It's a proxy conversation with all the protagonists in attendance. I could measure that day the power of this type of conversation that can change the color of a relationship in one session.

Mrs. Martin told me that there was a “before” and an “after” this meeting in her relationship with Areski. This unique session with the three of us allowed them to find serenity in their relationship. Mrs. Martin is more attentive to Areski, to his efforts. Areski, for his part, has no more anger, so is less in permanent reaction.

On the other hand, I supervise coaches who intervene with young people in middle and high schools. I have already, as Pierre did for me and Roxanne, had two proxy conversations between two coaches.

DAVID: How was your IWP received by these young people? How was your IWP received by the teachers and school administrators?

In the case of Roxane and Serkané, after having asked for their permission and explained the process and the intentions, the young people immediately said yes. So this concept was very well received. In both cases the companions (Moustapha for Serkané and me for Roxane) had already made a long way with the young people. The alliance and trust favored the fact that the young people accepted.

As this concept is rather new to me, I need to put all the chances on our side for the success of the exercise. I wait to get to know the young person well, and to know well the companion who will play the young person. To have no doubt about the positive intentions of the companion.

In the case of Areski, it was a little less obvious because he did not want to make this effort for his teacher because he did not like her too much. But as she had accepted on her side, this had
intrigued him a little, so he said yes without believing it too much. The exercise did not bother him, but doing it with this teacher he didn’t like was not too appealing to him. But later I knew he had told the other kids because they told me about it and they all wanted to do the exercise with their teachers too.

So I would say overall that young people are very open and very curious about this type of concept. Nothing surprises them. They even like to be surprised. Do things a little differently.

DAVID: Dina, what were your initial impressions of how it (your IWP) was going?

I had been working on interventions for 5 years in the college when I proposed it. So I know very well all the educational supervision, and that it goes well between me and the faculty. When I propose something they make me feel confident. Alliance and trust are already there too. This allows me to have the audacity to propose this type of concept.

What they experience is not always easy, so they are open to finding solutions to help young people and to find comfort in their work. For example, in the college where I intervene some teachers cannot teach alone. They have a supervisor or mediator with them all the time to do discipline while they teach. They feel a little lost and helpless. They are suffering also so anything that can help is welcomed.

The mediator and the teacher who had this experience spoke about it a lot to their colleagues. I receive feedback and requests to replicate the experience with others.

DAVID: Can you tell me, given that our readers might like to implement your practice in their circumstances, how you ‘went about it’ in your school context? Can you do so in as much detail as possible? Are there any stories that come to mind that might be instructive to our readers?

You must know that I do not have much perspective yet. It’s pretty new to me. So for the moment, I would say that it is necessary above all:

A climate of trust and alliance with the school. For my part, they know me. I always spend two or three years in the same school. I always make sure to create a link with the management. I keep them informed of everything I do with young people before, during and after. Before: we decide together what to work. During: they are aware of everything I do, often they participate. After: I report on the progress with the young people. We discuss it...

Before starting to work with young people, I organize with all the teachers of the young people involved, and for two days we share together so I can show my posture, my methods and concepts of work. These are two resource days for them. I take this opportunity to model a
little what I do with young people. And if certain ideas seduce them, then I train them and I help them move toward application in the class.

It's important to know that everything I do in school costs nothing to the school, the kids or their families. This is paid for by the general council of the concerned city or a foundation with donations. So maybe that makes them more curious, open to new techniques.

Gather the people involved before putting in place a new concept in order to fully explain all intentions, answer all questions, and remove any misunderstandings. When I say all, it's parents included of course. Intentions and ethics. Put all people at ease. It will not harm the young people in any way, nor the accompanying adults (no repercussion around confidentiality). Make completely transparent all the steps of what we will do and why we will do it.

DAVID: Did you have difficulties that you had to resolve as you proceeded? If so, how did you resolve them?

At the beginning when I started in 2008, yes. As I said above, I met many difficulties related to teachers’ suspicion of me. Primarily because I was a foreigner to the school system. The school world was a new country that I had to visit smoothly. Learn their language, their habits and customs. Now they have adopted me and know where I am going. It is them today who call me to intervene. I cannot go everywhere so I train a lot of people who duplicate this work in other schools.

Honestly, the school loves narrative ideas. For themselves, for the young people. The only difficulty for them is how to apply the ideas with 30 students in front of them and while they are in a position to deliver knowledge. We have a lot of fun to find how to apply them in their daily lives. But I no longer encounter any difficulties since I proceeded as I said above.

Regarding proxy conversations, they are surprised at first but open to experiment.

DAVID: Did you, at any time, get the sense you were now on your own and had to re-invent the more traditional or classical IWP?

I do not know if I’m on my own, but what I do know is that I feel comfortable with this kind of conversation, this way of working. I believe very strongly in its power and efficiency. I know that from now on I have this new opportunity to intervene and that makes me stronger and less helpless.

On the other hand, the young audience has no prerequisite on what can be offered to them as sometimes adults have. They are open and they like to be surprised, they like to play. They like to see adults in another role.
DAVID: Pierre, knowing Dina’s practice as you do, what would you say is unique about a Dina Scherrer IWP?

Difficult question but I will try humbly to answer it.

In supervision, I think that we use this conversation fairly the same way you have taught us. I would say that what is new to me is that this conversation helps both the accompanying person and the young person or the person who is going to listen to the conversation. It may not be the initial intention, but every time I have had this conversation playing my client it has been as strong for me as it is for them. For me, it helped me to help my client by opening new tracks. It reinforced the work done with my client while I thought I was not going much forward. It was also the case for Moustapha who told me that it had made him feel more helpful for Serkane. So a sense of utility.

Regarding my work with the teacher and her student, clearly I was inspired by the proxy conversation, but I took the initiative by asking my “client” to be directly present rather than having the conversation heard afterward. And it was very powerful for the young person; I saw openness and change before my eyes during the conversation. I felt the need for both of them to be present.

I would like to quote and translate to answer this question an excerpt from the foreword I wrote for Dina's book about the Tree of Life, published earlier this year:

"From the beginning, Dina has been an instinctive activist of narrative practices, as though the mind and posture had flowed naturally in her veins long before she met the ideas of Michael White and David Epston. Her posture is a unique blend of intuition, humor, optimism and benevolence. All those who worked with her or benefited from her teaching will tell you the same thing: with Dina, everything becomes possible and under her amused gaze, the summits that seemed tragically inaccessible the minute before very quickly become "why nots“ punctuated by laughter."

To complete this answer, I would like to add that Dina has been from the beginning a very pragmatic practitioner, never afraid of anything, a "Maverick" walking out of the marked paths. I think it’s partly due to the fact that she did not go to any “large university” and therefore she was not formatted by the French university system, which produces very knowledgable big brains, but are totally insensitive to the poetry of the reality and its opportunities. It is thanks to this ability to constantly invent and test new possibilities that Dina has become one of the leading French-language narrative practices, and a practitioner who is unanimously acclaimed.
by her clients who talk about the conversations with her with tears in their voices and in their eyes.

DAVID: Dina, while re-inventing the classic IWP, do you owe any thanks to colleagues whom you consulted or were in discussion?

I performed with Pierre in two conversations by IWP, so we talked a lot about this subject. But what I did in schools actually I did not talk to my colleagues. I talked about it after the fact.

DAVID: What were your initial outcomes? Did you do any evaluations, either informal or formal?

Since I have not taken a lot of risks in choosing schools where I have been working for a while and where I know teachers well, the results have been really great.

The young people talked about it to their classmates. The teachers talked to their colleagues. All in very positive terms. And that gave ideas to other teachers and mediators. The results are rather informal at the moment. In the 3 schools where I intervened this year, I asked them live this experience. The management of the three schools wants me to develop more next year. The experience has changed the teacher/student relationship in almost every session.

DAVID: By any chance, did the ‘student’s enthusiasm’ for IWP exceed your own?

Yes really the results have been beyond my expectations.

The young people all showed great emotion when they heard their stories told and played by their companions (the professionals who accompany them like mediators and teachers). This gave way to beautiful and rich conversations. This helped anchor progress. This creates another form of relationship between them. Two young people said that they often listen to the audio conversation.

DAVID: By any chance, did they contribute any thoughts or ideas to your re-invention (if I can call it that) of IWP?

They have contributed by their openness and confidence in accepting this new way of proceeding. By accepting it they showed me it was possible.

Once, I could not do it because the teacher hesitated. He was afraid of losing his authority or his credibility. On the other hand, young people have always accepted.

DAVID: How long is it since you first introduced IWPs to your school contexts?
Two years.

DAVID: Do you consider that the outcomes are improving? If so, what are your grounds for believing this to be so?

Yes, considerably. In the schools where I intervene the directors wish to make the conversation more widely available to teachers, they also want to deploy these conversations to all the educational mediators of a department. I lead follow-up groups with them every month and they want to bring these conversations into their practices.

On the other hand, with my colleague Catherine Mengelle, I will be teaching a workshop with narrative practitioners who accompany young people in schools next September. I want to make them aware of IWP conversations. I was waiting to have some experience before doing trainings. So it will help them to develop a little more this kind of work within schools.

DAVID: By any chance, have you ever consulted the students about how you conduct your re-invented IWP? If so, what did they have to say?

No, but this question makes me want to do it. For the moment I always take a lot of time to present to them what we were going to do, to make clear all the intentions, and answer their questions. I make sure to open a space where they are safe to speak with me. Now that you ask me the question, I really want to speak with the students about how they see things and the new ideas they might have. Back to school!