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Content

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Editors' Note

We are pleased to announce the December 2025 release of the *Journal of Contemporary Narrative Therapy*. This issue brings together the work of practitioners whose writing emerges directly from practice—work shaped through close engagement with narrative ideas, ethical commitments, and lived therapeutic encounters.

A distinguishing feature of this release is that each of the featured authors participated in the *Apprenticeship in Contemporary Narrative Therapy* with David Epston, Kay Ingamells, and Tom Carlson. The articles reflect the apprenticeship's pedagogy: learning narrative practice from the inside out, through careful witnessing, co-research, and sustained attention to the effects of our words.

In **"An Apprenticeship in Extremis,"** *Jo Viljoen* offers a powerful, longitudinal account of therapeutic co-research conducted under conditions of profound risk. This article documents the emergence of narrative practice through lived urgency, ethical steadfastness, and collective witnessing.

In **"Narractivating Conversations with the Internalised-Other: A Therapy with a Little Bit of Fairy Dust,"** *Adriana Müller* explores innovative practices for engaging internalised others, demonstrating how imagination, playfulness, and rigor can coexist in deeply respectful therapeutic work. A Portuguese companion piece, **"Narrativando Conversas com o Outro Internalizado,"** extends this contribution to a broader linguistic and cultural readership.

Finally, "**In the Company of Awkwardness: Counter-storying Toughness in Therapy,"** by *Mauricio P. Yabar*, examines moments of discomfort and uncertainty as fertile sites for counter-storying, offering clinicians a nuanced account of how awkwardness can become an ally rather than an obstacle.

This issue also includes a poetic reflection by *Onix Morales Macías*, **"My Fascination with Inquiry / Mi fascinación con la pregunta."** Written in both English and Spanish, this piece traces the author's ethical and imaginative relationship with questions—understood not as techniques to be deployed, but as living territories that open worlds, protect dignity, and shape what becomes possible in practice and in life.

Together, these contributions reflect our hopes for contemporary narrative therapy: practice that is ethical, imaginative, grounded, and accountable to the lives it seeks to accompany.

Sincerely,

Tom Carlson, Ph.D.

Editor, Journal of Contemporary Narrative Therapy

Narrative Therapy News and Training Opportunities

Trainings and Workshops

Save the Date: 3rd Annual Contemporary Narrative Therapy Conference, November 5th – 7th, 2026

We are pleased to announce the dates for the 3rd Annual Contemporary Narrative Therapy Conference. Last year's conference was another sell out and we are already making plans to make CTTC 2026 even better. We are committed to bringing together some of the brightest thinkers and talented therapists who are working to reimagine narrative therapy for our contemporary times and problems. This unique workshop-style conference offers participants an in-depth look at the latest thinking in contemporary narrative therapy. More information to follow.

Three Interviews with David Epston

Counterstories, Wondefulness Enquiries, Witnessing Practices, & Possibilities for the Future with David Epston & Kay Ingamells.

This course demonstrated David's innovative teaching methods to teach the craft and art of narrative inquiry training using immersion earning through transcripts and internalized other questioning to focus on three interviews: 1) David's well-known interview and follow-up seven years later with Sebastian; 2) David's interview with counselor Viola who has met 8 times with 16-year-old Joel, and then 5 minutes in, he begins to interview her as Joel; 3) David's interview with social worker Karen as Jane and then as Jane's son, Tim. Each time, David and his close colleague Kay Ingamells review a recorded interview, alongside a transcript, paying close attention to questions and reflections. Relevant papers, essays, commentaries and opportunities for registrants to contribute are integrated throughout the course.

For more information go to: https://reauthoringteaching.com/narrative-training/ce-courses/buses-dont-run-yet/3-interviews-david-epston/

Apprenticeship in the Artistry of Narrative Practice with David Epston

Immerse yourself in this unique year-long apprenticeship with David Epston's narrative therapy practice. This is the only place in the world where you can learn directly from the co-originator of narrative practice together with his closest colleagues. We use a unique pedagogy developed over decades for teaching advanced narrative therapy practice. Nowhere else can you experience such intensive training that takes place within a very detailed story of your own therapy sessions and that of others.

This is a boutique learning experience, with between 6-10 apprentices in each cadre. The next group will begin in April 2026. The course will take place in an online learning community made up of like- minded, skilled narrative practitioners from all over the world. For more information see the ad in this release or go to: https://narrativeapprentice.com/. Click here to download PDF version.

An Apprenticeship in Extremis

Jo Viljoen

Why do we describe this as 'an apprenticeship in extremis'? Joanna had previously spent approximately 50% of the previous eight years in admissions to psychiatric hospitals, and her life was insecure when she was at home; she had received 12 diagnoses, including Temporal Lobe Epilepsy, and was receiving a cocktail of more than 12 medications.

Since this therapy was conducted online, all the conversations between Jo/David/Joanna and Pieter were recorded. David had lost his record of this when he changed computers, much to his dismay. It was only in 2015, when David returned to teach in Johannesburg and met Jo after all these years, did he learn that she had saved the correspondence to hard copy. David and Jo contacted Joanna and Pieter, and they agreed to publishing this online because it is important to them that there are witnesses to her struggle and survival. After some discussion, we all agreed that they provide us with pseudonyms.

Introduction

It was 1995, and in South Africa, everything seemed fresh and new. Apartheid was officially over, racial inequality supposedly a thing of the past. We were becoming a democracy without the expected bloodbath everyone was bracing for before the 1994 election. We were a rainbow nation in the making with a new flag and a new national anthem, that I still had to learn all the words for. The political changes opened portals of hope and brought the excitement of change. South Africans had new opportunities to get to know one another as equal humans, not as bosses and servants, maids and masters.

This time in our country's transformation was marked by hope and upheaval. We held our collective breath as rival factions of the previously banned liberation movements vied for influence and the old regime resisted change. Negotiations towards a democratic constitution unfolded into one of the most progressive constitutions in the world. Our Bill of Rights protects civil, political, social, and environmental freedoms – which were absent in the apartheid regime.

Against this political backdrop, I was happily married, and I worked part time at Vista Psychiatric clinic in Pretoria. Trained as a registered, psychiatric and maternity nurse, I preferred working in psychiatry. While nurses couldn't provide therapy or influence patient treatment, we followed modern diagnostic criteria and referred any irregularities to the psychiatrist. Psychiatrists are the team leaders; nurses the support staff.

One day, I bumped into Prof Dirk Kotze at the clinic, who had recently returned from Australia, where he studied with the narrative therapist, Michael White. Dirk and his wife, Elmarie, decided to introduce narrative therapy to South African students in Pretoria. I signed up for a short course the professor offered and found it so inspiring that I then commenced an eight-year exploration into storytelling as a form of therapy.

I became intrigued by the postmodern position of the therapist: as collaborator and co-traveller rather than nurse with expert knowledge and the patient with no power. Psychiatric nursing is a modern discipline and social science, while narrative therapy is seen as a postmodern healing practice not vested in the fixing or "healing" of the client. Narrative therapy honours the stories people choose to live by. Central to this practice is the distinction between problem-saturated stories, which are shaped by limiting narratives, and preferred stories that reflect a person's hopes, values, and unique ways of responding to life's difficulties with co-created multifaceted stories that the client chooses to live into.

Before I could join this course in narrative therapy, I needed to complete an undergraduate degree before enrolling in the University of Pretoria's Master Practical Theology with Narrative Therapy as praxis program. Five years after my initial accidental meeting with Prof Dirk Kotze, I was sufficiently academically qualified to enter the academic world of practical theology and narrative therapy as a master's student. At forty-five, optimistic about new opportunities, I hummed "Nkosi Sikelele Africa"[1] under my breath as I bought a rucksack and Doc Martens, excited to celebrate my new student life. Like the rest of the "New South Africa", I had a new beginning.

[1] Nkosi Sikelele Africa is South Africa's national anthem.

Michael White and David Epston, the originators of the narrative approach, visited South Africa on several occasions between 1992 and 2004 and conducted workshops in various centres in the country. I was very fortunate to learn from both in person.

The problem story

Working night shift

I worked nights in psychiatric nursing to support my studies. One night, I reported for the night shift at 18:45 for a “handover” from the day staff. The day nurse looked exhausted and said they had had a trying day. They admitted a familiar patient, Joanna, who had a reputation at this psychiatric service as a difficult patient, often attempting suicide and self-harm. According to the day report, Joanna turned the entire clinic on its head within minutes of her arrival. She resisted her admission, in "crazy acting-out behaviour". They said the patient was loud and refused a voluntary admission, tried to run away, and even climbed a tree to hide from the admission nurses. Her resistance earned her admission to the small isolation room adjacent to the duty room, where there was a one-way mirror for observation. We were given strict instructions to keep her on suicide watch as a serious suicide attempt preceded her admission. The chaos necessitated isolation, observation, and chemical restraints.

Although experienced in the critical moments of clinical psychiatric nursing, I felt concerned about what might await me that night. I timorously peeked through the one-way mirror between the nurse’s station and her room, and espied a tall woman, lying motionless on a mattress on the floor, both wrists heavily bandaged. She was breathing easily. For her protection, the isolation room contained no glass, sharp items, or extra furniture, merely a paper cup, a bedpan, and her mattress. The day staff were visibly relieved to go home.

During my shift, I performed my regular tasks, which included counting medications, reviewing prescriptions, distributing night medications, assisting patients who had difficulty sleeping, and providing support to those requiring additional attention. I remained concerned about Joanna, alone on her mattress, but every time I checked on her, I found her sleeping soundly.

At about 02:00, I had a few moments to myself and opened one of my new narrative therapy books. I was thoroughly engaged with a chapter describing the challenges two therapists encountered in their efforts to decrease the incidence of "self-abuse" within their facility. They found that arguing against self-abuse and offering possible alternatives were counterproductive. They decided they would try “co-research”, something they were introduced to at a David Epston workshop. The topic seemed rather relevant, considering the story of the new woman in the isolation room. I doubted that an approach like this might be implemented in the ward I was working in, and in reply to my musings, whispered to myself: “This method will never work here.”

The practice that was being described is known as the privileging of insider knowledges and entailed the identification of the knowledges persons had about their problems and how therapists might join them in countering these difficulties. The authors concluded that acknowledging their own lack of expertise and the resulting co-research, made it possible for their clients to find voice and share their insider knowledges (Nosworthy and Lane, 1996).

Meeting Joanna

Suddenly, I heard a soft noise. I looked up to see an attractive, tall woman with a shock of tousled blonde hair in front of me. She was dressed in crumpled day clothes, clearly slept in. I had no idea how long she had been standing there observing me, just as I had earlier observed her without her knowledge. I got up from my chair and introduced myself. She held a cup of strong local coffee out to me in both her bandaged hands. Coffee was technically contraband in the clinic at that time of night, but I chose not to mention it.

It dawned on me: “Ah, this must be the ‘difficult’ patient day staff told me about”. Although alarmed by her sudden appearance, I was relieved that she seemed calm. We shared friendly banter and were curious to get to know one another.

“Hi, I’m Joanna,” she said. “Who are you?”

“Hi. I am Jo. Thanks for the coffee. Do you want to sit down a bit?"

It was a common practice for patients who woke in the small hours of the night to find the duty sister for a chat. Joanna was coherent, awake, witty, and clearly astute. Her demeanour was unexpected, considering the information provided in the handover report. She told me the condensed version of her life; that she had been struggling with mental health issues since the age of sixteen, in and out of psychiatric clinics. She briefly mentioned that she had spent six months a year on average hospitalized in the past eight years. She soon became disinterested in her "story"; one I expect she must have repeated many times before to mental health care providers. Instead, she turned her attention to my book. "What are you reading?" she asked.

"Oh! This book! It is an introduction to narrative therapy", I responded.

She took the book from my desk and paged through it with growing interest. Somehow puzzled, she asked: "So what is narrative therapy?"

Even now, I hate that question. How does one describe these rich, emergent, collaborative, culturally-relevant practices in a nutshell?

"Well," I tried to explain, "in this approach, the person is the expert on his or her own life. The person is not the problem, the problem is the problem." She looked at me, clearly confused.

"It's called externalizing the problem..."

"Externalizing the problem!" she exclaimed. "I've been trying for years for somebody to understand what is wrong with me. Every time I get sick, it's as if there is a broken toaster in my soul that nobody can reach or fix. They keep adding diagnoses to the already long list of diagnoses I have! How do you externalize a problem like mine?"

I tried to explain: "Well, theoretically, narrative practitioners want to meet their client outside of clinically diagnosed problems. For example, I would have loved to meet you as Joanna the person first before the Joanna who is regularly admitted to clinic, struggling with survival and suicide."

We playfully externalized depression and wondered what its voice might sound like and what it might say to a person. What might depression's intentions be for

a person's life? Who might depression favour as teammates? Joanna particularly enjoyed this metaphor as she said she'd expressed her own process of attempting to weed mental illness from her brain through art.

I was happy to report to the day staff that Joanna, although awake at 02:00, was calm, friendly, and slept well for the rest of the night. The next night, when I reported for duty, Joanna was waiting for me, eager to show me her painting. It perfectly illustrated externalization to me!

Joanna was discharged a few days later. Before she went home, she asked me for a narrative therapist's contact details because she wanted to learn more about this approach. Not long afterwards Joanna and her husband invited me to help as her therapist, using narrative therapy. Although I declined their offer at first, they were not dissuaded by my lack of expertise, in fact, quite the opposite. They insisted that if I agreed, "We will all learn this narrative approach together".

Co-research as the creation of alternative knowledge

"Don't worry," Joanna assured me. "I've had more experience of 'being in therapy' than you've had of 'being a therapist'. I know the ropes."

All she wanted from me was someone to listen to her, to believe her, and to accept her as a person with worth. That I could do. I was also actively learning narrative therapy and becoming more adept at narrative philosophies and practices. Joanna was more than willing for me to try out the practices I learnt and read about, and discuss the effects they had on her. We stuck to our agreement to tackle this journey together for her to heal and for me to learn.

Co-research is a term I came across in my narrative studies. David Epston (1999) coined this phrase to describe these unusual ways of working:

> I chose to orient myself around the co-research metaphor both because of its beguiling familiarity and because it radically departed from conventional clinical practice. It brought together the very respectable notion of research with the rather odd idea of the co-production of knowledge by sufferers and therapist. What made this possible, in the first instance, was a thorough-going externalizing conversation, one in which the problem was a problem for everyone – and here I included myself. Here's where I parted company from the disinterested ethnographer. This has led, and continually leads, to practices, to discover a 'knowing' in such a fashion that all parties to it could make good use of it. Such knowledges are fiercely and unashamedly pragmatic." (From empathy to ethnography section, para. 7)

Joanna taught me first-hand the effect of our words on one another. She was quick to pick up and point out my 'nursing' voice wanting to offer suggestions and shared a story about something her art therapist said that had distressed her and pushed her to the edge, resulting in her most recent attempt on her life. The art therapist had apparently suggested that Joanna was toxic and that she should be divorced from her family for them to be safe. It soon became clear that Joanna was not the toxic one, but that the art therapist's "well-meaning" advice had been devastating to Joanna's gentle heart. Joanna's core values centred around light, love, and laughter. BUT I was confused. If Joanna opposed violence in our society, why was it ok for her to harm herself?

Her story

Joanna was thirty-four years old when we first met. She is a white Afrikaans woman, married to Pieter. They had two near-adolescent children. They chose to live outside the hustle and bustle of the city and settled on a picturesque, rustic, small holding.

In her birth family, Joanna was the eldest, with a younger brother. Their father was jovial, outgoing, and sociable, while their mother was more reserved. Joanna's mother saw herself as educated and classy with a postgraduate degree in German. Her children and their academic success were very important to her. Joanna told of growing up in a "perfectly normal" home where her father was the head of the household and her mother the caregiver. At times, her father drank too much and became abusive. He was "the captain of the ship"; they even

referred to him as Skipper. In true Afrikaans tradition, there were different sets of rules for family members: Skipper, as the head of the household, was the boss, and he ruled it as his kingdom. His wife and children had different rules to live by. They had to behave, excel at school, and go to church on Sundays. Although Joanna achieved excellent grades, she never felt the As were good enough for her parents, even though her report card earned her a measure of praise, acknowledgement, and their love.

Joanna's mom was extremely unhappy in her marriage and sought solace in a clandestine relationship, to which Joanna was a silent witness. Joanna was sworn to secrecy about her mother's male visitor and knew she held the family secret in her hands. Her mother told her that Joanna was her reason for living, because Joanna was her confidante and pride. "Without Joanna, I would kill myself", her mother apparently repeatedly said. Joanna knew that she was responsible for keeping her mother alive and understood that it was her role to keep peace in her family as their carrier of secrets.

By sixteen, Joanna had had enough. Morally outraged by her father's verbal abuse, the secrets in her family, and the family's double standards, Joanna stopped eating. Joanna felt the weight of the secrets she was guarding and sweeping all unpleasantness and anger under the proverbial carpet. She simply couldn't stomach food anymore. Joanna became emaciated, which resulted in her first admission of many subsequent admissions to a psychiatric unit. This marked the start of her documented history of mental health conditions. By the time we met, Joanna had amassed a hefty variety of diagnoses and medications, including a diagnosis of temporal lobe epilepsy.

Joanna and Pieter

Johnna and Pieter met at university and fell madly in love. Before long, Joanna discovered that she was pregnant, and despite medical warnings related to Joanna's mental health, the two young people decided to get married and have their baby. Pieter's job demanded that he travel widely, while Joanna, as the parent who stayed at home, was responsible for the care of the home and children. Joanna and Pieter have always enjoyed an enduring love for one another. One sensed this only after a very brief period in their company.

Curriculum vitae of Mental Illness

Joanna tried many times to take her own life. She used her prescription medication to overdose and combined it with acts of self-harm, cutting her wrists and other parts of her body. In narrative language, we might re-phrase this as her acts of resistance to the societal oppressions and expectations she could not change. One day, she explained to me how hard she fought to remain in the real world, to get up, dress up, and show up. But when the stress and anxiety overwhelmed her, psychosis extended a warm invitation to just fall into its waiting arms, where she would be confined to a psychiatric hospital, with no responsibility, and where she could be taken care of.

Over the years, the problems in her life had, in a manner of speaking, trained her how to let go when the going became too tough. At this point, she also believed fate had handed her a tragic life script where she, like her late uncle, who had committed suicide at a young age, would not survive beyond the age of forty.

Where do I begin?

Joanna enjoyed the sessions as much as I did, even though she regarded depression and anxiety as the major issues for the time. In line with seeking unique outcomes as we do in narrative therapy, I wondered whether she might be able to recall times when anxiety and depression were less present. Joanna had remarkable stories to tell about those times of freedom without anxiety and depression. For example, shortly after the birth of their daughter, Joanna said she observed how the other new mommies and housewives were managing and copied them. Consequently, she spent seven years free from anxiety and depression. She exclaimed, “I even baked my own bread!”

Even during those years without apparent depression and anxiety, Joanna experienced challenges related to performance anxiety and perfectionism. Although an eating disorder was part of her childhood history, she refused to accept that it had any effect on her now. True to the values of narrative therapy, where the client is the expert, I assumed the position of a de-centred but influential listener who worked from a not-knowing position, privileging Joanna’s stories. As our relationship developed, there were times when I voiced concern about changes in Joanna’s eating patterns and drastic fluctuations in her weight.

Joanna refused to revisit anything related to anorexia or bulimia; she wanted to focus on her current problems: Depression, Anxiety, Perfectionism, Temporal Lobe Epilepsy, and Insomnia.

My concerns

I worried about all the medication at her disposal. Whenever she was discharged from a clinic, she went home with three months of dispensed psychotropic medications. The benzodiazepines disinhibited her even at the prescribed dosages. Joanna had a love/hate relationship with medication and her diagnosed conditions. There were times when she accepted the psychiatrists' expertise, and then there were times when Joanna protested, feeling like a "lunatic" whose life was a waste.

Pieter's job demanded extensive travel, leaving Joanna home alone with the full responsibility of running a household and a small holding. When Pieter was away, Joanna felt more vulnerable, and these were times when self-harm became more evident and severe. Although she had helpers on the plot, the extent of such responsibilities overwhelmed her, sparking "episodes" of temporal lobe epilepsy. Periods of overwhelm easily translate into acts of overdosing and self-harm.

What on earth did I know?

I confess that I was very concerned about all the medication at her disposal, her history of abusing it in suicide attempts, and about my preliminary psychiatric knowledges of anorexia/bulimia. Dare I mention that my existing knowledge regarding eating disorders was based on the belief that patients are wilfully choosing to starve to manipulate, and that behavioural and cognitive therapies were the approaches of choice?

I recall a young woman in an adolescent unit in Pretoria, who sat at the nurses' station for full supervision over mealtimes. I can still see her furtively looking around to see who was watching her, and cutting up her peas into tiny, tiny slices without daring to put one morsel into her mouth. The staff called her manipulative, disruptive, and non-compliant. I remember that she lost privileges on the ward because of her refusal and manipulation strategies. I did not want to think that way or treat people in such a manner.

Inspired by David Epston's successful work with eating disorders using a narrative therapy approach (Maisel, Epston, and Borden, 2004), ever so often I dared to broach the subject of anorexia with her, but Joanna would have none of it. Although I loved reading about anorexia/bulimia and the anti-anorexia approach, I did not know how to position myself as a therapist in a conversation involving anorexia or bulimia. It is one thing to read about the therapy someone else is doing on paper and copying the practices in real life on another human being. The radical externalization and element of protest of anti-anorexia appealed to me, but I was wary of sounding like an expert. It was difficult for me to accept that despite noticing with my very eyes that something was going on with Joanna's eating and increases in frantic exercising, I had no room to speak about it. Joanna attributed these behaviours to her Temporal Lobe Epilepsy experience. I disagreed but decided to prioritize maintaining the therapeutic relationship instead of addressing topics she chose not to discuss. Despite this, my concern persisted, and I remained unconvinced by the explanation provided.

Session times: Are we even re-authoring?

We agreed to meet once a week. Joanna understood my concerns but kept reassuring me that she was fine. Joanna embraced the practice of externalization and delighted in the knowledge that she was not the problem, but that the problem was the problem. We were discovering the problem's voices and isolating the demands the immediate problems were making on her life. Despite successful externalizing practices, I doubt that we progressed beyond that, as our efforts did little to dissolve the problem stories, which were almost all-encompassing.

Naming Self-Destruction.

After several months, we identified her problems under the umbrella term "Self-Destruction" which incorporated all her psychiatric diagnoses. Regardless of whether she experienced anxiety, depression, or de-realization, these issues led to para-suicidal behaviour and self-harm. Joanna was firmly invested in the "sick role of a psychiatric patient" while I tried my best to step out of my psychiatric nursing shoes. Her suicide attempts were extremely dramatic events, necessitating emergency medical intervention.

Practices of externalization and naming helped her to start defining and advocating for a counterstory for a preferred life, but admittedly, “Self-Destruction” was viciously dangerous and opposed every small step she took towards choosing her own way.

Joanna wanted to work on a life story of Self-Care, but “Self-Destruction” fought against her and raged for weeks on end, commanding her to mutilate her body. I found her suffering unbearable to witness. She was hospitalized, sutured, shouted at by hospital staff for harming herself, medicated, given electroconvulsive treatments, and discharged with a bag of psychotropics. Then once again, we would resume our therapeutic conversations.

It was nightmarish for me to witness. I cannot imagine what it was like for her to live through this horror. I was witness to a slow and dedicated destruction by a set of societal belief systems that brainwashed this brilliant woman and convinced her that she was as useless as a discarded rag doll on the ash heap of life.

This was the period in which SS was revealed: her true nemesis. SS is self-sacrifice. Somehow, SS even demanded sacrifice from Joanna for the historical deplorable treatment of fellow South Africans before Apartheid. Many South Africans of my generation and the younger ones, like Joanna, still feel this residual guilt about the atrocity that was Apartheid. SS used our guilt and shame against her, accusing her of being worthless and a failure and an idiot to still be alive while so many of her country members suffered and were still suffering. A “New South Africa?” BAH! Hundreds had no food to eat; how dare she eat to satiety? She should sacrifice herself and preferably starve to death.

SS would whisper in her ear: “You know as well as I do, Joanna, there will be a lovely funeral with flowers and candles and holy songs and a beautiful eulogy and then it's over. Then it is you and me forever.”

There were these low times, when I was on the brink of losing hope, when Joanna’s creativity took over and challenged SS in expressions of art and poetry to express her belief in her right to live.

“I am not going to roll over and die!” she’d exclaim.

I am the lion.

Who fights death

To bring life

To tell

Fierce stories peacefully strong enough

To stand

in the shadow

All the while the voice of Self-Sacrifice became rampant; encouraging her to fall on her own sword, put everyone out of their misery, and die honourably as a tragic heroine.

Self-Sacrifice was relentless. It knew exactly where to kick her when she was down.

SS whispered: “You know where to find the blade Joanna. There is no hope for you. Take it and cut it until it’s over.”

SS brought with it chilly reminders of the cruelty of the gestapo, the starvation and torture of the concentration camps in Germany.

This decisive “struggle” to live or succumb to her death lasted for three weeks. She began vomiting after meals. I was out of my depth. I did not know how much longer I could hold her. I was drained, anxious, and afraid: SS was clearly planning on getting me out of its way.

All I could do was to hold space. It felt as if I was stubbornly standing in a doorway, trying to block the problem’s entry into Joanna’s story, but it shapeshifted and slipped past me and attacked both of us as it squeezed past.

It felt as if her intervals of living out her preferred story and then a return to the problem were cyclical and becoming closer together. There were many cycles of admission, electroconvulsive therapies, psychotropics and new medication

regimes. She struggled with short-term memory loss after the electroconvulsive therapies. Joanna distrusted the nursing staff who told her she was paranoid and psychotic, earning her higher dosages of psychotropics. Joanna said she was “fat and ugly” and wished she could take a blade and slice off the excess mass. She vomited after meals and stole food to keep in her room under her bed. She had to eat under supervision, which only served to strengthen her distrust in the nursing staff. Gradually Joanna would recover sufficiently and be discharged from the clinic, vacating a bed for yet another woman struggling with her own difficulties.

However, the minute everyone relaxed and breathed a sigh of relief, there was another profoundly serious incident of overdose and cutting. The last time this happened, Joanna was home alone with her children, and her ten-year-old daughter called me on the telephone desperately crying for help.

It looked like a crime scene when I arrived. Mercifully the emergency services arrived before I did.

I felt I had missed something important. I refused to continue this game of naming the problem, deconstructing its strategies, starting a process of reconstruction in good faith only to have hope cut off in a moment with a cheap Minora blade. I was fed-up with the situation. Although I was uncertain about the solution, Michael White and David Epston possessed significant expertise in addressing such complex issues. We needed help or Joanna might not survive.

Something had to change!

December 2nd, 2000, and as the annual holidays approached, I submitted an email letter to the Anti-Anorexia/Bulimia League, addressed to David Epston. I summarized our experiences, my attempts at helping her, and the cyclical nature of the destruction she was living.

When I opened my computer again, I was so surprised to receive an email from David Epston. It was December 4th, 2000. He said the Anti-anorexia/Bulimia League existed in boxes in his office, ready to be placed on the website. (At that time, David was planning on sharing stories on his website under an Archive of Anti-Anorexia/Bulimia, giving anyone who needed to read these stories free access.) The only other possibility that we had was for me and Joanna to be

willing to communicate by email, to which David would be the only respondent. He made it very clear that most of the weight of this practice might fall on my shoulders as he was leaving for Christmas holidays.

Virtual response team.

We were more than happy to share all correspondence with the League. In preparation for our Virtual Response Team, we studied the resources offered and invited David to become a member of Joanna's support team. Joanna wanted to rewrite her life story, rejecting the notion that she was destined for an obscure, albeit tragic and dramatic end.

By the time I wrote a reply to David as The Virtual Response Team, Joanna had made positive changes in her life. She avoided self-harm for a week, focused on her children, and enrolled in a reflexology course.

Both Joanna and I were aware that apparent wins over the problem story might potentially lead to setbacks. In the past, Self Sacrifice provided her with limited periods of "choose time" before drawing blood again and insisting on starvation. Her focus on self-care was an effort to establish a different pattern, though our attempts at change were still minimal and not yet resilient enough to prevent recurring harmful behaviour.

Miraculously for us, David had a change of plans, which made communication with him more accessible over the December holidays. He assured us that there was no urgency to get everything up and away and that we might take our time working ourselves into such a strange conversation. This was a tremendous relief.

Our discussion-without-an-end.

David relied on us to co-create the invention of a new practice which**, to his mind,** had never occurred before in the history of psychotherapy:

"Jo, can you discuss at some length that as far as I know, we (and I am counting yourself and them,) are inventing a practice that has never occurred as far as I know before in the 'history' of psychotherapy. Can you ask if they mind being pioneers, and for that reason, there will probably be some twists and turns that we cannot predict right now. We will only know about such twists and turns when

we reach them, and we will figure out what to do when the time comes. We are in 'terra incognita' and I hope you people find that as interesting as I do."

He asked us to become pioneers in a new narrative practice based on our three-pronged approach: email conversations between Joanna, David, and me as The Virtual Response team. The emails flowed between us for the better part of six months. At times, emails crossed daily, and there were also times when the periods between emails were longer and more relaxed. Initially, we got to know one another and learned how the process worked. David provided guidance throughout while I conducted conversations with Joanna in real-time, took copious notes, and then summarized the conversations for David in an email. David responded "inside" my email in capital letters for easy reading, thereby creating a mock conversation. He responded to the most minute detail we provided, his conversations filled with questions, challenges to Self-Destruction, and protests over the influence Self-Destruction had on Joanna. For example, I mentioned in passing that Joanna and I both enjoyed the writing process:

David: I am so relieved to hear that. Now that you both are feeling more comfortable with "it", is there any feedback you might like to give me? Admittedly, we are all in this together, and I should warn you we are all working it out as we go along. So, at any time, I would value your thoughts, suggestions, corrections, or whatever. I really mean that.

Joanna and I read and re-read his letters, highlighting areas of importance and interest to her as well as deleting and disregarding anything she did not agree with. The process of taking notes during in-person conversations with Joanna, transcribing, and summarizing our therapeutic conversations into letters helped me to learn the craft of anti-anorexia. Every letter incrementally saved Joanna's life and taught me narrative practice from the inside out. Over time, I transformed from being a student to a therapist with a position against anorexia/bulimia, with appropriate questions and responses. The most important lessons I learnt from this practice: David's commitment to this process and the fact that he never capitulated to the problem. It was clear that he was on Joanna's team.

The Virtual Response Team in action.

For clarity purposes, David's questions will appear in all caps to help distinguish his proposals from my own questions for Joanna.

Date: Fri, Dec 22, 2000

Jo: Hi David,

Hope you've enjoyed a well-deserved rest. I am also enjoying this process, and so is Joanna!! Joanna and I both love writing, so this process is working for us. She is enjoying being a partner and not a patient.

David: JOANNA, WHAT EXACTLY DO YOU MEAN BY THAT- YOUR NOTION OF YOU TELLING US FROM YOUR POINT OF VIEW, HOW THIS NARRATIVE THERAPY PROCESS POSITIONS YOU AS A 'PARTNER' RATHER THAN A 'PATIENT'?

David's sensitivity to language and recognition of the difference between her being a patient and a partner underlined our process of co-research and Joanna's lifelong struggle to be heard and honoured by the therapists and doctors treating her. She always felt that her experience wasn't recognised and honoured in psychiatry, but that she discovered here, in our therapeutic relationship, she felt known and accepted.

During my accidental apprenticeship with David, I experienced many exhilarating moments of narrative therapy in practice. For instance, during the following exchange between David and us:

Jo: Joanna says she is managing to struggle against self-harm at present by using the truth…

David: TRUTH JOANNA, WHEN DID YOU ESTABLISH YOUR OWN TRUTH AND MOREOVER BELIEVE IN IT????

With one question, David had proposed that Joanna had her own truth, rediscovered it, and was now using it to aid her against self-harm.

Jo: … to wipe out its lies, and even though it is rough going at times, like now, the septic tank on their plot has become blocked and Pieter is still away.... what would you do if that happens to you … and she is handling all this stuff. She said last night she dismissed all the lies self-harm had told her over the years about her marriage to Pieter.

David: BELIEVE IT OR NOT, SEVERAL DAYS AGO I HAD TO HANDLE IT MYSELF AND DIG OUT OUR LONG DROP TOILET AT WAIHEKE. NOT A PLEASANT JOB

David: THAT WAS SOMETHING FOR SURE!! I CAN IMAGINE IT WOULD HAVE HAD A STOREHOUSE OF LIES

That David could go up against the storehouse of lies that SS had about her and her marriage to Pieter was exciting and gave me permission to contest some of the lies that it held forth in the future. I learnt how to do it in real-time as opposed to reading something in a paper and trying to apply it. This kind of comment made me very excited that David could address directly the storehouse of lies that self-harm convinced her about herself.

I found it thrilling that David could directly contest the SS's storehouse of lies and all that it convinced Joanna of regarding her marriage to Pieter. This taught me how to position myself in practice so that Joanna and I could contest the lies that SS told her in our future conversations. A valuable lesson indeed.

Jo: She said she now sees that they have a good marriage, and that it is not true that Pieter stays with her to rescue her, or that she stays with him to be rescued. Her proof lies in the fact that they love each other, that love is enough, and that they have been partners for years.

This pen sketch was created during the period when Joanna was awaiting admission to a state hospital as a certified patient. This artwork serves as a notable representation of their enduring affection.

David: JOANNA, WHY DO YOU THINK SO MANY PEOPLE SEEM SUSPICIOUS OF ENDURING LOVES?

Instead of giving the problem any bandwidth, David emphasised their enduring love. Joanna happened to share a drawing of their love and togetherness with me at a different time, but it so clearly illustrates endurance, togetherness, and love. Self-harm wanes in the face of a love like theirs.

Jo: When she told me before that she believes the relationship needs to be helped, I invited the relationship to therapy. What I saw was a strong partnership between two people who really care for one another on a very deep level, and who have dismissed the lies romantic discourse holds forth as truth.

David: JOANNA AND PIETER, WOULD YOU BE WILLING FOR ME TO SEE THE 'NATURE' OF AN ENDURING LOVE??? I AM VERY INTERESTED IN SUCH 'LOVES'. ARE YOU?

Jo: So, I've discharged the relationship from therapy; there is really nothing to rescue. I think we can all learn a lot from their relationship as they have been through deep waters together and have still retained love, respect, and caring for one another. Their kids are great. And they are good friends.

It was not always plain sailing. There were times when Joanna was struggling to find meaning and overcome invitations from self-harm and self-hatred. This letter demonstrates Joanna's will to take back her life despite her struggle. She started noticing the small changes that she was able to make and detailed these changes because suddenly she realised how important the glimmers of hope are in the face of the overwhelming darkness.

A long, slow miracle in the making

I'm afraid I cannot find the exact date of this email, but I felt I needed to include it as part of our process.

Joanna: Thanks ahead for bearing with this long letter and sharing with me the long, slow miracle of recovery from Anorexia and Self-Destruction.

Jo: Joanna, it is a privilege to witness your long, slow miracle of recovery from Anorexia and Self-Destruction.

Joanna: I am struggling. So please excuse me if I ramble on a bit incoherently here and there. I am showing signs of distress: anxiety, depression. I've also got a flu virus: resources are very low. Little bit of TLE *(medication seems to be keeping that stable quite nicely).*

Jo: Joanna, it is quite common for sticky problems like anorexia and self-destruction, even depression and anxiety, to show their teeth when one becomes ill with a flu virus. It always kicks you when you are down,

professing to be your best friend and confidante. Some friend, hey? I am so sorry you must go through this.

Joanna: AND my eating behaviour is slightly buggered: I now have this repeating pattern of bingeing at night about once a week... only after taking a sleeping tablet. This is the only time I do not have full command of my choices, and SS seizes the opportunity.

Jo: I am hardly surprised that SS would step in and take advantage of you in this fragile state, Joanna. You and I have discovered that it flourishes whenever you are not in command of your choices, haven't we? What plans can you and Pieter put in place to put SS in its place and still ensure that you have a good night's sleep?

Joanna: Initially, I did not get too upset about this and decided that it was no good to be perfectionistic about eating perfectly right. But now it is clear that SS is using this to erode my strength. It upsets and seems to scare Pieter, which alienates me even more from him. Panic and lies: "You are already a Self-Destructing, bad person. Can just as well give up totally to self-destruction and eating disorder... bad person... deserve to suffer, etc.?"

Jo: Joanna, this is the immorality and meanness of SS that you and I became aware of, now clearly exposed in your letter. With an enduring love like yours, there is no space for SS to try and alienate you from Pieter. With all the strength that you can muster, Joanna, what might you choose?

Joanna: So, I am choosing now to take a lot of time out from work and other responsibilities for a few days, to:

- Rest and relax and recover.
- And to identify "the problems" and find solutions.
- And to identify the SS lies (that tell me "You are the problem") -- and replace them with the truth.
- Take stock of how things are going... which changes I can make to facilitate healing and keep my strength up.

Jo: Joanna, I am delighted to see how you are exercising not only your voice but your choices against SS and making decisions for the good of your life, not the death of your life.

In this document, it is possible to see her resolve to take back her life, her voice, and her agency. Joanna wants to live a life of her own choosing, without being trapped in the clutches of self-hatred and self-harm.

I learnt that SS even infiltrates her attempts at choosing for life, by insinuating itself into the minutiae of her plans, making the execution of her plans perfectly impossible. Her solution is to not strive for perfection but rather to embrace IMPURFECTION, which was a million times more fun, enlightening, and achievable.

Joanna: Jo, the magic is happening slowly. I've stopped taking sleeping tablets and turned to aromatherapy oils with great effect. I entertain no heavy topics or issues before bedtime, and being less perfectionistic about getting 8 hours of sleep.

Jo: A wise man once told me the creatives of this world don't need to have exactly 8 hours of sleep per night… Just saying.

Joanna: Pieter has agreed that we lock the security gate of the bedroom area, and he will keep the key, thereby barring SS from the kitchen binges.

Speaking, not starving

We continued with weekly sessions and, as you well know, this is a crooked path with its own set of challenges. I want to include a last example here to illustrate how Joanna and I both became clued up at anti-anorexia.

An email from Joanna in May 2000:

I wrote this email concerning the "success story of my life...” ages ago.

During my childhood, I started carrying with me a dark life story of loss, suffering, illness, tragedy, and self-destruction. This weighed me down, sapped me of life energy, and made it very difficult to love myself and therefore to love others.

Self-Destruction became an overpowering force that repeatedly hampered my brave moves towards "Self-Construction". Working in narrative therapy with you has opened the possibility of going back and retelling my life story with focus on victories, successes, life, love, and light. I chose to do this.

I saw that every single incident of tragedy/self-destruction was consistently followed by a miraculous victory of recovery, healing, growth, and re-engaging with light/love/life.

I ascribe these miracles/victories to the power of Universal and Godly love- as reflected in my own brave fighting passion for my life.

Self-Destruction used my past dark life story to keep me in bondage with despair, guilt, and inferiority. Now I am retelling my story using truth this time. My story turns out to be a balance of darkness and light (yes, the tragedies/disasters/Self-destruction were as real as the victories/recoveries/Self-Construction). The Truth is that all in my entire story is a life story of love/light /life. Never mind what my future holds, the balance between light/dark will always be tipped in favour of light. Why?

Now, without the weapon of my dark life story of SS/anorexia has been severely weakened and disempowered. And finally, I have a solid foundation for my journey of self-construction.

Retelling is really important to me.

SS implanted the idea that Joanna needs to rethink and correct everything she wrote or planned. Joanna slowly let go of the SS idea that she needs to rework everything she does to perfection; for example, that she must have perfect defenses if she wanted to resist SS "successfully". Trash. She now insists on standing on that imperfectly written draft as it is. It works, and it is good enough. She says her "balanced best" is always good. And it is.

The power of her art as part of her anti-anorexia

Seeding.

David generously hosted her art and prose on his website, www.narrativeappaoraches.com. This amplified her voice, spread her stories, and strengthened her resolve to know that her struggle reached thousands of others who might be uplifted by them.

Stories are like seeds.

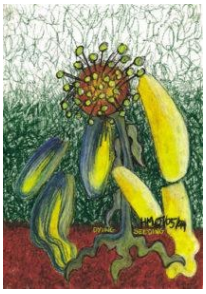
I need to trust to let some parts of my story go, to sow them freely like seeds, so they can settle in the fertile ground of other people's life stories.

There, the seeds can germinate and grow into healthy plants, feeding on the compost of anorexia.

This is self-nourishment, livening up, preparing for life and the next season.

New life sprouts forth in the form of new living segments of myself and the universe; we are all one, all part of one another, part of the universe.

My seed-stories can fly and plant seeds in the life stories of others.



Date: Fri, May 4, 2001, 1:02 AM

Dear David,

Joanna feels that the most powerful documents were the ones she generated on her life victories, her bill of rights, and her poetry. She says these documents

were stimulated by our therapeutic conversations and your curiosity in the form of emailed questions.

During our previous conversation, Perfectionism had become a huge problem in her life. It made her strive for perfection in every sphere of her life. We set about carefully deconstructing the half-truths it bases its tricks on, Joanna said she felt "enlightened", when Perfectionism's half-truths were exposed. (Her husband dryly suggested she swallow a lit candle when in search of enlightenment.) We had such a laugh when she remembered his comments and shared his dry wit in our conversation.

Regards Jo Viljoen

Overwhelm amidst the slow miracle of recovery.

The letter-writing process was life-changing for Joanna and me, but I noticed that there were times when she felt overwhelmed by the intensity and the perpetuation of the process, as well as all the questions. I was concerned that SS might infiltrate our efforts from the inside out and decided to ask David's advice.

"Jo Viljoen" Tuesday, May 08, 2001, 9:33 PM

Re: Joanna

Dear David,

I am noticing that Joanna is feeling overwhelmed at times at the intensity and the variety of questions we share in our emails. I know you said from the get-go that we should monitor the process and we have "weeded out" whatever Joanna feel is not significant or perhaps distressing.

David: THANK JOANNA FOR NOTING WHAT SHE CONSIDERS SIGNIFICANT.

Jo: Thank you very much. David, I have had to go slow with passing your letters onto Joanna.

David: IT IS VITAL THAT YOU ARE THERE TO USE YOUR DISCRETION AS YOU WILL SEE HOW SOME OF THESE CONVERSATIONS SEEM TO 'HEAT UP' AND TAKE OFF. AT LEAST THAT IS WHAT I HAVE FOUND IN THE PAST WHEN I WAS USING VERY DIFFERENT MEANS- XEROXING DOCUMENTS AND POSTING THEM OUT ON A REGULAR BASIS TO PARTICIPANTS.

THE WEBSITE, I BELIEVE, WILL REALLY SPEED THIS UP AT THE SAME TIME AS ALLOWING PARTICIPANTS TO RESPOND WHENEVER THEY WISH AS NOW ANY 'READER- E.G. ANYONE WHO WANDERS INTO THE SITE OR IS FOLLOWING THE DISCUSSION CAN JUST GO BACK TO THE REFERENCED 'DOCUMENT' AND THEN SCROLL FORWARD.

STILL, THIS IS ALL NEW TO ME AND OBVIOUSLY TRIAL-AND-ERROR, AS PERFECTIONISM HAS TRIED TO TURN YOUR (AND MINE) COMMUNICATIONS AGAINST HER.

Jo: SS has tried to convince her that she must reply to every question we ask, wearing her out. So, we have had to work out a way of countering its attempts at destruction and abuse. For the moment, we only ask questions when in face-to-face therapy, so that we can prevent SS from turning our anti-anorexia into weapons for its own use. I will see her tomorrow, and I will certainly tell her about your interactive site and we will look for ways in which we can contribute and participate.

Outsmarting the seductive voice of SS

As had become our custom, all communication flowed through me. Below, David is adding his comments to an email Joanna and I shared with him. In this letter, she is sharing her outsmarting anorexia/SS and denying its demands that perfection is required in every situation.

David: DEAR JOANNA: I READ THIS DOCUMENT WITH THE KEENEST INTEREST. MATTER OF FACT, IT HAS REALLY MADE MY DAY.

Joanna: I am still having a problem with bingeing (and sometimes also vomiting) some nights after sleeping tablet. In the past SS would convince me that this is a disaster. That I must have perfect eating behaviour all the time.

David: THAT IS PRETTY TYPICAL FROM WHAT I HAVE BEEN TOLD OVER THE PAST 15 YEARS. AS A 12-YEAR-OLD BOY, BRETT, ONCE TOLD ME- ANOREXIA AND PERFECTION ARE LIKE A MARRIED COUPLE! WHAT DO YOU THINK ABOUT THAT?

Joanna: One little imperfection in my healthy eating, and I would be doomed to judgment, punishment, panic, despair... a spiral into total starvation or a bulimic disaster.

David: HAVE I EVER TOLD YOU ABOUT THE DIPLOMA IN IMPURFECTION?

Joanna: But here and now: I am choosing to view this problem eating differently. I choose to hold onto my sanity.

David: JOANNA, YOUR OWN CHOICES ARE REFLECTED IN EVERYTHING YOU SAY IN THESE DOCUMENTS!!!! THIS IS SURELY A RED-LETTER DAY! MIGHT THESE CHOICES QUALIFY AS IF IT IS A 'PLANNED RETREAT'??????

Joanna: It might be an unhealthy and very ineffective way of dealing with my fears/doubts/depression and anxiety, but I must find ways to outsmart SS who promises a wonderful magic solution). But at the same time, I know if I choose it, SS wants to condemn me into tragic captivity. I am actively dealing with the problem by looking at it as a symptom that gives information about what isn't working in my life right now: I am literally "bingeing on life." So, I reckon I am becoming smarter in the process.

David: I LOVE THAT EXPRESSION!!!

Joanna: I am trying to take part in too much too fast too perfectly. I am now choosing to scale down on quality and quantity of all my participations except having fun and joy. The bingeing also indicates a need for more "sweetness" in my life.

David: I WAS SOMEHOW OR OTHER DEEPLY TOUCHED BY THAT EXPRESSION- 'SWEETNESS.' I SUPPOSE IT REMINDED ME OF HOW BITTER ANOREXIA IS!!!

Radical Externalization

David never faltered in his commitment to our Virtual Response Team's three-way conversation. I still wonder where he manufactured the time to pay attention to our emails and to respond in such life-changing ways. Joanna was never "the anorexic"; he always saw her as separate from the problem. He made it very clear that Joanna was the expert and that her experience is valuable. I learnt to focus on Joanna's relationship with the problem as the problem, with its own agenda, voice, and modus operandi.

As time progressed, through our Virtual Response Team communications, I became acutely aware of Joanna's voice and the cruel and usually seductive voice of SS. When Joanna spoke in her own voice and did not perform as a ventriloquist prop to SS, her words were filled with hope for now and the future. Joanna wanted to work, earn a living, and live and love like any other person without being regarded as a discarded, damaged rag doll thrown away on the dung heap of psychiatry. Joanna did not want to die or harm herself. SS loved to use Joanna as its mouthpiece, but here the letters between all the Virtual Response Team members helped to expose its lies as our letters offered alternative discourses and resources to assist her in quieting that parasitic voice.

David: JOANNA, JACQUI (ANOTHER CLIENT OF DAVID'S) TOLD ME IT WAS A 'DEAL' WITH THE DEVIL!

Joanna: SS will NOT use this eating struggle as an opportunity to infiltrate.

David: I BELIEVE WE ARE ALL TOO AT ONE WITH EACH OTHER TO EVER BE INFILTRATED FOR LONG. I THINK WE COULD ALWAYS 'SMELL A RAT', DON'T YOU?

Joanna: Obviously, this behaviour is not a cool idea as it loves to increase stress and anxiety, but I choose to bear it and forgive myself and be patient for a while. I know I will recover gradually. I have overcome eating difficulties on

multiple occasions in the past and have maintained recovery for extended periods, ranging from several months to years. I am fully committed to recovering and taking care of myself and returning to a healthy eating pattern ASAP. I refuse to panic/despair.

David: JOANNA, ANOREXIA WILL DO EVERYTHING IT CAN TO PANIC YOU, SO BEWARE!!'

I wrote a sidenote to this email, inviting Joanna to express herself fully in the body of the email.

Jo: Joanna, would you heed David's warning that anorexia will do everything in its power to panic you? And if so, how?

Joanna: Never mind what: I do not choose SS as an option.

Jo: I notice you have been choosing your own life and style for a while.

Joanna: I believe that if I give less importance to the problem, just accept it and deal with it (making haste slowly) SS will lose interest and go away. Go back to its own nest of darkness, tragedy, suffering, and destruction. where it belongs.

Jo: Might this choice be for you to live?

David: MANY LEAGUE MEMBERS WOULD AGREE WITH YOU HERE - TO SUMMARIZE THEM - 'THE MORE YOU GET INTO YOUR LIFE, THE MORE SS/ANOREXIA IS EXCLUDED FROM IT'! DOES THAT RING ANY BELLS FOR YOU?

Learning different strategies of combat against SS

David's courage to speak out in resistance to SS was one of the most powerful practices I'd ever experienced. He taught us never to fear it but to rather identify

the voice as the source of oppression and formulate our resistance to the lies and claims anorexia or SS had made over Joanna's life.

In his letters, he showed us how to externalize anorexia and to understand that its origins are rooted in historically established cultural discourses that have the power to construct women as anorexic. This was practical hands-on learning for me, as I had only known anorexia and bulimia as medically defined eating disorders with a poor prognosis and no cure. As it was, Joanna's story and experiences were "riddled" with other psychiatric problems for which she frequently sought treatment. David argued that anorexia, or SS as we came to call it, was tenacious in its hold on Joanna, confining her and silencing her inside the limits that it had set for her life. While I feared for her life, he fought for her life through his emails. He was not prepared to let SS get away with anything.

We started to see that Joanna was permitted to live a different life from the one SS held up for her. Through his letters, David showed us how to take a sliver of a preferred story and ask the questions that will decorate it, populate it, and how she may inhabit the story of her choice. Joanna's art spoke volumes. She designed The Bulb as a possible business logo for a practice in reflexology.

Holding a Bulb

Hope of a new life is represented in the bulb.

I root myself to the earth, just as the bulb will.

I use this as a logo for my work: I believe in holding a safe space for both partners and in sharing energy as the way to grow the bulb is the antithesis to self-starvation: it represents life at its core.

Holding a bulb symbolizes the possibility of believing that when you invest in something you can expect a wonderful return

Planting a bulb promises the growth of a beautiful plant.

Patience and resilience, faith and vision, and hope.

I have the guts to hold a bulb because it is fragile and symbolizes growth, health and life

I have the guts to hold on to the possibility of growth, life and healing

The holder becomes part of the bulb; becomes rooted

THE LEAF GROWING OUT OF THE BULB IS A STRONG INDICATOR THAT THIS BULB IS GOING TO MAKE IT!!!!!

This bulb most certainly made it!

David recognized SS's trash talk immediately and called it out. He exposed SS's lies and its immobilizing, totalitarian dominance. It's a type of seeing something for the first time and never being able to unsee it. He never once blamed her for "stinking thinking," or "manipulation," or attention-seeking behaviour.

Before David joined our team, we had some ideas regarding resisting the problem, but no idea how to escape from its hold over Joanna. Everything we did was useful to a point, after which Joanna was viciously attacked by SS. These attacks were heartbreaking, cyclical, and the periods in between were becoming shorter.

Inhabiting another realm: One of possibility, imagination, and hope

David situated the Virtual Response Team in another realm, where there was hope, imagination, colour, possibility, and art. Where people had choices and the ability to change their minds if they wanted to. Where one might inhabit a

landscape of dreams and imagination and plan how to make it work in this real world we lived in, wondering how one might bring the not-yet-imagined, the not-yet-said, or conceptualized into being. How could Joanna make her dreams come true?

We encouraged her to dream the dreams she had been afraid to dream before, for example, living her life after 42, the age her uncle had suicided, defying her old SS script that wanted to cut her life short. Every individual experience of anorexia/bulimia is storied in different ways. I learnt to tease out and identify common counterstory themes that I had not known about from psychiatric nursing. I learnt not only to recognize the persona, voice, and modus operandi of anorexia/bulimia but to encourage Joanna to take her preferred story and build a counternarrative on it. She wanted more than anything to live without labels, to live in peace, and to contribute to the world.

Before joining up with David, we had not yet learnt to counter the problem story effectively. We recognized all the unique outcomes that contradict the dark, dominant story of her life, but we did not know how to use resistance narratives and how to build preferred, alternative stories. That was probably where Joanna and I fell short in our initial conversations. It felt as if we were teasing a tiger that played with us until it turned on us, and Joanna repeatedly ended up in the hospital with mortal wounds.

Then a lion joined our team. David Epston had no fear of the tiger. Anti-anorexia proposed radical counterstories. We were no longer trying to make gentle meaning of Joanna's attempts at liberty; we contested and wanted to repudiate the dominant anorexic identity Joanna was living with. We were in a fight for her life. We realised that if we did not take these radical steps, the anorexic lifestyle Joanna had been living would prevail and sneak back into her consciousness.

The virtual response team with David taught me to distrust anorexia completely, while placing all my trust in Johana's ability to overcome this threat to her life. I realised that I was not merely "externalizing a problem" but that we were fighting a duel with SS, and SS wanted her dead. I realised it wasn't Johanna who stopped eating, to look for attention, but that she became so battle-worn that it repeatedly convinced her that death might be her only escape from this torture that was her life.

David held me to the fact that Joanna was not a psychiatric patient; she was not anorexia/ bulimia, she was an intelligent, attractive, and talented woman who had been turned into a chronic psychiatric patient with no prognosis. I used to say to her: “I wish I could manually change your mind and somehow let you see yourself through my eyes, not through the eyes of anorexia/bulimia/chronic psychiatric illness”.

David demonstrated through his email responses to our therapy stories that if we separate Joanna from the problem, we could constitute different accounts of her identity and personhood from stories told by her husband, her children, her parents, and her co-workers on the smallholding. Joanna was known to be friendly, loving, generous, and kind; the nemesis of anorexia/bulimia. As we were working on building her preferred story or resistance narrative, we outlined SS as the fiend, the villain, the deceiver, and Joanna’s killer if it had a chance. Foucault has argued that dominant discourses always produce resistance. David showed us how to conduct our strategy of resistance. This only became possible when we stopped seeing the problem in her life as an illness, but rather as an invisible killer that takes over the minds and lives of unsuspecting women.

What did I learn?

When we first met, Joanna was on a psychiatric roundabout. I felt silenced and ineffective despite my innate inclination to protest when I saw injustice. An avid protester of Apartheid, abuse of any kind, marginalization, and unkindness, when it came to the expert knowledge of psychiatry, I bowed to the experts because “what do nurses know anyway?” This was one of the main reasons I wanted to learn narrative therapy: to be able to take therapeutic conversations further than identifying a problem and then referring it to a bigger expert, like a psychiatrist.

David showed me how to rediscover my voice of protest: against the societal discourse of anorexia/bulimia. He used language to give form and shape and personality to the problem of anorexia, making it possible for us to explore its ways, agendas, lies, and trickeries. I started visualizing anorexia as a big tick on the back of a dog: sucking the host dry and poisoning the person. I started seeing how hard Joanna worked to be a so-called “normal” person, to be accepted into mainstream society, and what the penalties were if she was not perfect. Perfectionism surfaced as one of the critical voices she was living with. Whatever

she did was not good enough, which cleared the path beautifully for "prescribed punishment" and readmission to a psychiatric clinic.

WONDERFUL CHANGE OF TIME

We are writing this paper 25 years after the fact. I am happy to report that Joanna is now a student of narrative therapy herself. Here is a recent quote from one of her assignments:

Joanna writes:

> "Psychotherapy and cognitive behavioural therapy would repeatedly lead to disintegration and despair when I worked SO HARD in therapy to 'forgive and integrate' my terrible behaviour and my terribly disordered personality. Therapy just became another performance where perfectionism crept in. I would choose famous therapists who loved to be in a rescuer role and then labour to be the perfect rescued patient. Ironically, I worked with therapists who measured me against certain norms and ideas of what was healthy and how I could overcome my personality disorders with hard work. At the same time as idolizing the therapist, I would be angry at him or her for judging and labelling me and pathologizing my core being.
>
> On the day I entered my first session of narrative therapy, I was overwhelmed when I heard "the person is not the problem, the problem is the problem". This emphasized externalization, encouraging me to see myself as separate from my problems –a critical step in re-authoring. This foundational statement captures the essence of externalizing problems– a key narrative therapy practice that separates identity from pathology.
>
> This magical moment immediately opened many doors. I was totally surprised that the therapist was not interested in giving me any advice regarding my personality disorders and labels. Also, my therapist refused to go into an expert rescuing role."

Although we really don't know one another in person, David, Joanna, and I developed a kind of conceptual telepathy. Our emails contained questions, philosophies, challenges, and humour. The emails became transcripts, resembling

conversations; reading throught them felt as if he was there with us in the room while we spoke. We saw discourses differently, exposing society's compliance in the validation of SS's seductions; it was wonderful to see Joanna without her psychiatric labels! Despite all our wins, SS demanded perfection. This sometimes tripped her up, but now her resistance was relentless. No longer seeing Joanna as conflated with mental illness made it possible for me to help her plan resistances to its incessant invitations to return to its control and unseat the problem's convictions that she is bad or fat or worthless.

Questioning practices

I learned to craft questions in new ways. Instead of focusing on the history and the details of the problems, I started looking for glimpses of her own resistance against anorexia/bulimia/psychiatric illness. I learnt to formulate questions about her hopes and dreams, her thoughts and passions, rather than to focus on all the harm done by the dominant story. My main aim was to unseat anorexia/SS; to push it off balance for her to create space for her own identity, voice, and choice.

This meant that I had to, at times, challenge convictions she held for more than 15 years about her personhood. SS became the new visible enemy, and we were all on Joanna's side, pitting our weight behind her.

Other therapeutic documents as counternarratives

The therapeutic documentation that we engaged in during our therapeutic journey became written testaments to her recovery. Joanna started constructing a Core Credo documenting her faith and the role it plays in her life.

My Core Credo

I believe.

There is only one God: The God of Love, God of All that Is and Is Not.

All Beings remain equally Loved parts of God.

On earth we experience Oneness in Love through also experiencing the opposite: fear, darkness, and division.

We can Trust the Voice of Love…

Bill of Rights

Her Bill of Rights helped her to find her voice and to express her indignance at the problems in a therapeutic document. It was a part of her personal healing process and encouraged her to become an agent of change in her own life. It placed her in charge. This Bill of Rights is not merely a protest against the oppression of all the problems she experienced, but also a statement of truth about who she is as a person. She defied SS and its lies by claiming her right to participate in life, to succeed, to see herself as a talented writer and artist, and that mental illness did not doom her to disorder and madness.

Letter of dismissal to anorexia

Joanna made it very clear that she was no longer available to listen to and adhere to the negative, sabotaging voices of SS and all the mental illnesses that accompanied it. She refused it any airtime and chose to give her energy and airtime to her sharp mind, her spirit, and build on the truths about her life.

None of these changes, choices, and new life decisions happened instantly. We worked very hard at learning narrative therapy while Joanna chose healing instead of harming herself.

Joanna slowly admitted that she chose life in specific ways. She chose to enroll in this course in reflexology; she chose healing instead of harming her body. Joanna found hope and moral agency in her ability to co-construct her preferred spirituality and belief system.

Narrative therapy, when combined with a "justice-doing" approach, emphasizes the impact of social and political contexts on individuals' lives and well-being. It aims to empower individuals by helping them deconstruct dominant narratives that perpetuate oppression and construct alternative, more empowering stories that align with their values and goals. This approach acknowledges power imbalances and works to challenge systems of inequality while supporting clients in reclaiming their agency and creating meaningful change.

Joanna slowly recognized that the lies she believed about herself were embedded in the social and political contexts of her life. The dominant cultural narratives that kept SS alive were patriarchy and the beauty myth. It was fueled by perfectionism and the insistence that whatever she did, she had to fulfill the societal standards of perfectionism. She was never allowed a mistake; a mistake could cost her life.

Joanna describes what changed for her:

So, what has changed? Who has changed? Let's wind the story forward 25 years.

> "They said I would never, ever be able to hold a real job… in line with my intellectual and creative potential. They wanted to lock me up long-term…. They predicted that my marriage would never work out; and that my children would be so damaged that they would succumb to mental illness as well. They thought there was no hope for me, after all, I have been blacklisted at psychiatric clinics for violent behaviour; the police had to come and remove me. I thought I would never be able to hide the multitude of cutting scars on my hands and arms, which would mean that I can't work in a job face-to-face with clients. SS specifically convinced me to cut my hands so that I would never, ever be able to hide this. Yes, I do have a real job which is in line with my talents and sometimes I meet clients face-to face, although I work only four days a week as a deliberate self-care move.
>
> I am a technical writer, and I do suffer with anxiety and panic when I have a writing deadline at work. This is normal: just about everybody gets stressed by writing deadlines. I am working on solutions which include yoga breathing, exercises and becoming more technically able as a writer."

Conclusion

This apprenticeship turned me from a fledgling student into a narrative therapist. I learnt that no problem is too big to be changed by narrative approaches. David's letters were gifts, seeking the smallest alternative to the biggest, bloodied problem. He lived the hope and showed us how to do hope. He taught us to breathe and not panic, act and not shy away, and rest and retreat when needed. I

learnt to listen, to read the smallest detail, the absent but implicit meaning in words, to discover the stories in between the lines; to recognize the slyness of SS, and to validate the wonderful personhood of Joanna as she was taking herself back. Every letter from him was a gift, a gift that never stops giving because I am now privileged enough to teach my students what he had taught me and to continue to learn from them.

I recently asked a student if she might share what she's learnt from my teaching of narrative therapy, and she shared the following:

> *Jo, you never stood before me as a lecturer merely delivering content. You were not a dispenser of theories or keeper of tidy therapeutic formulas. No - you were the match. And somewhere inside me, long before we met, there was dry wood waiting, quiet, patient, almost invisible, until you struck the flame.*
>
> *What you offered was not a syllabus, but a stirring. You wove no neat boundaries between learning and living, between the therapy room and the wide, open world. And so, what began in the hum of a class spilled into my life like water slipping its banks - unstoppable, unpredictable, nourishing everything it touched.*
>
> *You made narrative therapy more than a profession. In your presence, the ideas breathed. Stories were not simply techniques; they were threads of connection, binding people to one another, binding me to a deeper purpose I hadn't yet named. I began to see that every conversation was possibility, that the work was not just about healing individuals, but about re-weaving communities, about listening until the quietest voices found their courage.*
>
> *You never said, "Go out and serve people." Instead, you showed me what it looks like to inhabit a way of being where service is not a project but a posture. Where asking questions is an act of generosity, and listening is a form of love. Where dignity is restored not with grand gestures, but with the small, steady honouring of another's story.*

You taught me - without teaching - that narrative is not a therapy; it's a language for living. It is the way a person chooses to stand in the world, with curiosity as compass, and respect as the ground beneath their feet.

Because of you, I learned to notice. To notice the stories people tell themselves and the ones they've been told. To notice how a people's history can be both wound and medicine. To notice the hope tucked in the corners where others see only endings.

You will never know all the places your spark has travelled.

The conversations I've carried into rooms you will never enter.

The circles of people who will never know your name but will feel your influence in the way I lean forward, the way I ask, the way I honour their truths.

This is the gift you gave me: Not a toolkit, but a way of seeing. Not a profession, but a life. You didn't hand me narrative therapy; you placed me in the flow of a much bigger river, and now I cannot stop moving with its current.

You changed my work, yes. But more than that - you changed my world. (Nonka Byker)

The honour and credit of every word Nonka attributed to me and my relationship with narrative therapy goes to David and Joanna. Without this apprenticeship and the meticulous teaching from Joanna and David, I would never have been able to bring narrative therapy to life for others.

My apprenticeship with David and Joanna helped me to develop the courage of my convictions to take on many problems other therapists shy away from, especially working with people suffering from the effects of addictions. Without David's help, I would never have been able to do the work that I now do. He taught me how to see the long strands of dark history but to protest the tiniest rebellions against despair. It was hard work, but we were unstoppable. We rolled

up our proverbial sleeves and got to work. David offered us his wisdom, generosity, and time. Time to gather around these stories and re-author them. They became art, living, breathing art because Joanna survived. David's questions and stories created bridges to land yet unknown, to strange territories where we could rest, laugh, and live with our stubborn hope.

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Narractivating Conversations with the Internalised-Other: A Therapy with a Little Bit of Fairy Dust

Adriana Müller[1]

A resposta certa, não importa nada:

o essencial é que as perguntas estejam certas[2]

Mario Quintana

In 2018, David Epston was in Argentina with Tom Carlson to present the *Insider Witnessing Practices*, and on the first day of the gathering, David spoke about the art of asking questions. Although it may seem trivial, questioning is the foundation of therapeutic work; therefore, it is crucial to be aware of *the how* and *the why* of every question. He introduced us to 'questions with Duendes'[3]: those that surprise, brighten the atmosphere, and reveal wonderful stories. I was fascinated by this perspective—questions that invite people to perceive *beautifulness*[4] in their lives.

Beautifulness is a word redefined by Paulo Freire that invites a gaze beyond appearance, condensing love, ethics, aesthetics, politics, and education, unveiling the poetic dimension of life and a belief in a fairer world (Nita Freire, 2021). Bringing *beautifulness* to our praxis is a constant invitation from Michael White, David Epston, and Paulo Freire. In the paper *Re-imagining Narrative Therapy* (Epston, 2019), while honoring his friend, David Epston mentions the 'spirit of adventure' that has always been present in the practice of both (Epston & White, 1990, p. 9). He also recognizes his partner's poetics and creativity, and invites us to keep the maverick spirit alive in an era when trademarks and franchises curb creativity and push people to copy rather than create. He warns us against letting narrative therapy become yet another "McDonaldization"; instead, it should reveal its potential through the faces and colors of every people, the beauty of

[1]Narrative therapist, with clinical experience since 1993, teaching narrative therapy since 2005, and collective narr ative practices since 2009. Also created the Rhythms of Life methodology in 2010.
[2] Translation: The right answer does not matter at all: what is essential is that the questions are the right ones.
[3] Elves.
[4] Boniteza, in Portuguese.

each culture, and the diversity of every corner of the world. In Freirean terms, may it always be an experience of *beautifulness*.

These reflections brought up some questions. What is new, creative, and interesting in our daily practice? How much Duende, spirit of adventure, and fairy dust[5] are we putting into our sessions? How are we bringing our soul, our way of being, our uniqueness into action in each therapeutic encounter? How are we contributing to the stories to reveal every lived experience's *beautifulness*? These are questions that have resonated within me ever since I translated David Epston's paper (2019) – and they have guided my steps throughout my current journey in narrative therapy.

In 2020, I began the *Artistry of Narrative Therapy* course with Tom Carlson, Kay Ingamells, and David Epston. The course's proposal is continuous learning about the art of asking questions within the context of narrative therapy; after all, questioning requires focus, dedication, and practice. Michael would say, "practice, practice, practice" (Epston, 2016, p. 85). During one of the meetings, David asked us to share our experience with the apprenticeship. I mentioned my amazement with the effects both the consultants and I noticed every time the conversation was guided by internalised-other questions (Epston, 1998). He listened carefully to my most recent experience: a special moving conversation with a woman's internalised grandfather. At the end, she told me she would keep this conversation in a sacred place inside her, so that it could be remembered forever and ever. When I finished telling the story, David asked me if I had written it down, for a conversation that ended with someone saying it will be kept forever in one's memory is something that deserves to be honored.

I perceived the *beautifulness* of that idea and decided to go a little further: I asked this person to write what she remembered of that moment. And I did the same with another person who also had a similar experience. This paper is about those stories and my thoughts about them.

[5] In Brasil there is a special fairy dust named Pirlimpimpim dust. It's a quintessentially Brazilian magical element, created by Monteiro Lobato in the Sítio do Picapau Amarelo books, and it is as a make-believe trigger.

The gift of gifted words

As palavras sabem muito mais longe [6]

Bartolomeu Campos Queirós

The therapeutic process unfolds through conversations, interweaving questions and answers in an ever-weaving loom whose threads are words. I admit my fascination with them: I relish the careful way people choose each word, the gift they carry, the horizons they open within the dialogue. Clients' words are both precise and precious, and I honor them as such. Yet I also delight in playing with words, turning them into poetry, joining them so they reveal something new. With words, I become a playful Duende (or a Fairy), crafting *beautifulness*.

When Michael White (2008) presents the concept of outsider witnesses, he outlines four guiding questions for the conversations that unfold after a story is told. While re-telling what they have heard, these witnesses speak about: 1) the word or phrase that caught their attention the most, 2) the image that that came to their mind, 3) the personal resonance of these words and images in their own history, and 4) the ways in which they have been moved while witnessing these stories (transport). As an outsider witness to the stories people bring to therapy, I listen not only with my mind, but, above all, with my heart. I glimpse *beautifulness* in their speech, and it is enchanting.

It thrills me when someone says, "I'm feeling more comfortable in my own skin," "the road ahead is no longer so foggy," "everything can be overcome," "I have claimed my strength," "the breeze is blowing in my life". The poetry is already there, evoking instant images that give rise to questions, and play-with-words. In this chain of cha(i)nge, problems can be dis-SOLVED (Anderson & Goolishian, 2018), and preferred identities can be and become in all their *beautifulness.*

Resonance is like a compass guiding me: wherever my enchantment settles, wherever words invite me, wherever images cheer me up, there I seek an oasis of meaning. I share these perceptions by making my ideas public within the session, by composing letters or poems that highlight such moments (Ingamells, 2018; Muller, 2024; White & Epston, 1990), or by creating collective documents –

[6] Translation: Words know far beyond...

whether multi-vocal, lived, or musical – woven from words rescued from the conversation (Denborough, 2008, 2018; Müller, 2012, 2013, 2015; Newman, 2008).

In all these instances, words are chosen with attentive affection, as though the therapeutic process helps people reclaim the grace of their words and the power of their voices. As Queirós (1986) suggests, we must help awaken certain words, so they live and breathe in daily experience. Words steer every moment of the therapeutic encounter. After all, as White (1988) writes: "… we could investigate the benefit of defining a therapy of literary 'merit' in which the therapist's greatest gift to persons seeking therapy is to help them become their own writers." (p. 10). He continues: "This approach establishes therapy as a context of curiosity and takes the form of a collaborative endeavour and an enquiry into new possibilities" (p. 13).

An enquiry in which questions are doors to alternative stories – or, as David Epston says, an invitation to "go down the rabbit-hole" (Marsten, Epston & Markham, 2016). According to White (1988), there are two main conversational perspectives: asking about people's experience and producing new knowledge – which appears through stories that fascinate both teller and listener. Paying attention to conversation, we may realize that most of our questions arise from resonance with the stories we listen to. They are a way to broaden our understanding about some aspects of the narrative that touched us in some way. Therefore, it is important that questions arise from genuine curiosity, a wish to broaden the narratives beyond what is expected or already known, and a search for versions that reveal the preferred identity of the person before us.

The metaphor of building alternative stories, seeking the preferred story, helps therapists contribute to a storytelling that reveals the person's best version. It is not about replacing a problem-saturated story with another deemed 'better' – a common misconception and an unfounded critique of narrative therapy. Rather, it's about finding ways to *storylive* (Müller, 2024) what happened; to understand the stances the person stands for and against; to make clear the person's life aims; and to highlight each one's aspired legacies. It is about *narractivating*[7] a

[7] I use this play-with-words to highlight the narrative possibility to activate preferred storylines through storytelling and storyliving.

story the person deems worthy of inhabiting in body and mind. A story collectively supported by significant others in the person's circle of affection, or, in White's words, in each one's 'association of life' (2008).

Considering the art and craft of questioning, it demands disciplined practice. After all, there are many types of questions, and each one opens different narratives and reveals specific storylines. Within this frame, David Epston (1998) brought the internalised-other question:

> Such paradigmatic questions can inquire about anything but always invite the respondent to answer from his or her experience of the other's experience. This has the effect of undermining cultural practices that affirm an objective reality. (p. 68)

Through such questions, we invite the person to answer 'as if' they were a significant other. This path grants us access to the *beautifulness* that lies in *tríbio time*[8] (Freyre, 2001): that simultaneous interweaving of past-present-future into the fabric of our narratives. In the *tríbio time*, we retrieve memories, update stories, and anticipate narratives. By braiding the three moments of Life – *tri-bio*[9] – we can 'say hullo again' (White, 1989) and fashion a story that represents us, honors significant people, and unveils our best. In *tríbio time*, we leave the known and familiar behind and pursue an expanded version, something singular and unique, our *untested-feasibility* (Freire, 1987).

Here, I introduce Sílvia, Ayla, and other important individuals I met. Then, we will see the stories that were *storylived* when they engaged in conversations about the internalised-other.

Catching a rise in a turquoise Vemaguet

Sílvia is a woman in her early fifties who is striving to rise above the end of an abusive relationship. Her feelings conflict – at times tinged with nostalgia ("I feel sorry for us"), at others anchored in the certainty that the ending was providential. Amid this search for meaning, Sílvia mentions her paternal

[8] Tribio as in latim: tri, for three, and bio, for life. Therefore, a time that encompasses simultaneously past, present, and future.
[9] Tri, from Latin: three; and Bio, from Latin: Life.

grandfather, Grandpa Álvaro, with whom she had a true-life partnership. He was a humanist who taught her about politics and culture in an incredibly unique way. She was eighteen when he died of emphysema, which made her feel "angry at him for leaving me." But, as time went by, Love came back to replace that anger, and today, Grandpa Álvaro is a sweet and comforting memory.

That day, Sílvia listed several guides she is putting into action to feel better with herself: the cultural projects at *Palavra Mágica* (her language improvement course), her determination to have healthy relationships, and the certainty that she needs to be clear about what she looks for in a relationship. Here is an excerpt from our conversation:

Adriana: Who wouldn't be surprised by this firm and determined stance of yours? Who knows you so well that would not be surprised about these attitudes and dreams of yours and would say this is "pretty much like you"?

Sílvia: Wow! My friends…

Adriana: Which friends? Shall we make a long list?

Sílvia: Rosa, Cecília, Hannah, Lívia, the students' mothers, my parents, my son, my brother Maurício…

Adriana: Is there someone who's no longer here among us, but who would certainly know about that resolute spirit of yours?

Sílvia: My grandma Gabriela and, of course, my grandpa Álvaro. I miss them so much! …

Then, she began introducing her grandfather. She told many stories about him, filled with details and deep emotion. She told me how much he valued friendships and how his wife (Sílvia's grandmother) mistreated him all the time. She mentioned everyday facts: her grandmother leaving only the leftover chicken for him during Sunday lunch, making it clear that she didn't honor him; the rides to

and from school with Sílvia and her siblings in the turquoise Vemaguet that puffed smoke and smelled of fuel – and how she loved being with him all the same. She told me about his humble origins, which never hindered her admiration, as well as their long, joyful conversations about politics, poetry, and life. Knowing Sílvia, it was clear to me how relevant this grandfather was in forming her preferred identity – this very identity she seeks to strengthen in this unfolding alternative story. So, I asked her:

Adriana: Sílvia, would you like to play a little game? It is like a 'make-believe'… You *pretend* to be your grandfather, and I'll talk with him about you. How does that sound?

Sílvia *(laughing brightly)*: Oh, why not!

Adriana: Okay. I'll ask you to stay connected with your grandfather – his memories, your shared stories, the sound of his voice, the range of his gestures, the sparkle in his eyes… and, before starting the conversation with him, I need you to tell me how he would like to be addressed. After all, it will be my first time speaking with him, and I wouldn't want to make a poor first impression! *(laughter)*

Sílvia: Oh, you can call him Álvaro, or Mr. Álvaro. As you wish. He was not formal about those things…

Adriana: All right. So, Mr. Álvaro, I am Adriana, a psychologist, and a friend of your beloved granddaughter Sílvia. She has been telling me so much about you that I got curious and asked if we could have a chat. Is that okay?

Sílvia's Álvaro: Yes, of course!

Adriana: I imagine you know all about what she's going through these days… and I wonder, what would you say to your dear granddaughter at this moment in her life?

Sílvia's Álvaro *(with a puzzled expression)*: I don't know…

According to Michael White (2012), it is important for the conversation to be structured like a scaffold: moving on, step by step, helping the person to move from what is already known and familiar to what is possible to be known. It is a way to put into practice, in the therapeutic context, what Vygotsky called the 'zone of proximal development'. Looking from this theoretical point of view, this first question was a big leap, at a point in the internalised-other conversation when Sílvia was still adjusting to its dynamic. So, I stepped back and began asking more familiar questions about stories I already knew. I asked Mr. Álvaro about his wife, his friends, the rides to school in the blue Vemaguet, and other shared moments with her granddaughter. Little by little, Mr. Álvaro found his voice, and the conversation got into a much better flow.

Adriana: Mr. Álvaro, could you tell me about taking your grandchildren back and forth in that turquoise Vemaguet? Did it really give off so much smoke?

Sílvia's Álvaro *(laughing)*: Oh! It sure did…

Adriana: And what about Sílvia? How did she deal with that?

Sílvia's Álvaro: She laughed with me… she stood there. She was not ashamed of me.

Adriana: When you look back and see little Sílvia, a young Sílvia, what stands out the most?

Sílvia's Álvaro: She was always joyful. She used to shine so bright! I was so proud of her! I still am. When she was 16, she loved to listen to my poems' recital. And our conversations about politics were amazing!

When I asked Sílvia's Álvaro if he had any advice for his granddaughter about how to manage romantic relationships, he became puzzled again. I told him not to worry, that Sílvia and I would figure it out, and he would learn it too. I thanked him for such a lively conversation and all the good stories, and we said goodbye.

Then, I spoke with Sílvia again and asked what she thought of the experience. Her

answer fascinated me: “When the conversation began, I realized it would be something special. Something I would have to listen to carefully and keep in a special place in my mind. A place that even if I get old and have Alzheimer’s, it will be there forever... “

The next session began with Sílvia still enchanted with the conversation with her grandfather. She mentioned the importance of realizing how much he admired and was proud of her doings and her being. This shows the importance of internalised-other conversations in thickening the alternative story.

She also mentioned that her grandfather probably didn’t manage to explain how to solve the relationship issue because he, too, never found answers for that question in his own marriage. Nevertheless, she could feel, during the conversation, that he was proud of her for trying to live a better life.

Sílvia’s account

“I was with my grandfather during this pandemic. We hadn’t seen each other for about 35 years. I had always missed him, but I didn’t know where to find him. He always understood me. He was the one who explained the ways of the world to me, from politics to poetry. He was the one who looked at everything I did and said: It’s beautiful!

On my birthdays, he would pick flowers — himself — and decorate my house so I’d wake up to see it all adorned. On the mornings, when visiting us, he’d say to me: good morning, flower! It’s been so long since I last saw you![10]

He was the one I really needed to talk to, but I didn’t know it. I never imagined how deep that longing was, and how much he still had to teach me.

Adriana Muller gave me this opportunity. In a narrative therapy session, she asked whether we could invite my grandfather to share what he made of everything I was living through.

I was ending my second marriage, an intense 16-year relationship. I was shattered, devastated. I had been disrespected in every sphere of my life: family,

[10] That’s a special poetical greeting, quite common in Brasil.

financial, professional, sexual, and emotional. I felt like nothing at all. One day, I told Adriana about my grandfather, who had died when I was 20.

He knew who I was; he admired me; he cared about me. He was sensitive and intelligent, but he too had troubles in love. He married a woman – my grandmother – who was an unwell, very unstable, taunting, angry woman. I still remember her humiliating him, treating him as if he were nothing. But, to me, he was everything.

He had to sleep with his head at the foot of the bed because she didn't like the smell of his head. At the Sunday family lunch table, he got the last piece of chicken. And I saw it, I noticed it, I knew it. I was only a child, but I knew it all.

Adriana asked me if we could invite my grandfather to a conversation. She asked if I could pretend to be my grandfather for a few moments. I would think like him, I would remember how he used to see me, and I would use the words he would say. She would be the interviewer. She would speak with him, and I would reply.

The conversation began. She addressed me as Mr. Álvaro, and I eased into it little by little. The first question – I no longer remember which – seemed deep, profound, difficult. I tried to answer, but I was still me. Adriana noticed, stepped back a few paces, and began talking to him about situations she already knew. That allowed me to slowly get my role in the play.

We spoke about the blue Vemaguet he loved and with which he sometimes took me and my brothers to school. She asked him about his granddaughter—what she thought of going to school in an old, noisy, smoke-belching car. And he replied that she liked it, that she didn't care about such things.

We talked about the flowers, the birthdays, the porcelain exhibitions, the teachings he passed on to me, and, moment by moment, I was more him than me. I knew what he would say, how he felt, what he thought about life, how he treasured our grandfather-granddaughter story, and how much he knew about me.

Then Adriana let the questions get deeper, and, eventually, these questions touched my moment of pain. She asked my grandfather about relationships and what he could tell me about what I was going through. He knew he didn't have

the chance to teach me about it...

He asked my forgiveness for not having been able to teach me to choose a love that would be good for me. He apologized that we never spoke about it and for not warning me as much as he wished. He spoke to me of longing, of admiration, and of his certainty that I would clear this karma of unfaithful relationships and step into a new phase. He said he believed in me and that he didn't want me to suffer like this anymore.

I really needed to remember how much I had already been loved. I needed to remember how good it was when people laughed with me and rejoiced in my presence. The meeting with my grandfather filled my heart with love, confidence, and hope.

I will never, ever forget that day. I lived it knowing it was a moment that would take up residence in my memory forever.

I ended the session both crying and smiling, with a tight longing for my grandfather, but with the certainty that it will be up to me to change the course of these incomplete, hostile stories. I belong to Love, and I will find someone gentle, steady, loving, left-wing, a dreamer. Someone who loves music, poetry, and cherishes the best values in the world.

Thank you, Adriana, for this healing, restorative, deeply respectful, creative, and affectionate experience. Thank you, Grandpa, for being so alive in my heart! I love you, my economist, my poet, my friend. You saved me once again, Grandpa. I will make you proud of me."

Not giving up in the face of challenge

"Quem me chamou? Quem vai querer voltar pro ninho?

Redescobrir seu lugar...

Você verá que é mesmo assim, que história não tem fim.

Continua sempre que você responde 'Sim'"[11]

(Brincar de Viver – Guilherme Arantes)

Ayla is a 54-year-old woman who chose to leave her job to care for her parents, Dona Luzia and Seu Gabriel. They were gaúchos[12] and left Rio Grande do Sul in 1969 with their seven children. Even far from home, they never gave up their *cuia* of *chimarrão*[13] – the famous *mate* – or the tradition of a good *Brazilian barbecue*.

At first, the plan was to take care of her mother, Dona Luzia, whose three-year prognosis stretched to fifteen. However, circumstances changed, and Ayla also began caring for her father, Seu Gabriel, who developed Alzheimer's. He died on March 13th, 2019. From then on, her mother's condition worsened, which required staying in the hospital more often and increasingly stronger medication at home. The onset of the pandemic made the whole situation quite cumbersome, and Ayla often spoke about everything she was going through with Dona Luzia.

A year after her father's death, Ayla began to speak of him a lot, recalling her memories and her admiration for him. She mentioned the way he managed his family life, always intending to protect them and leaving them prepared to deal with challenges. She told me that he had been a constant example of honesty, courage, faith, integrity, and so many other values that shaped her and her siblings' lives. On April 8th, during therapy, she said that her father "never gave up in the face of challenge." On April 20th, she was taken to the hospital with Covid-19 and lived out her father's teachings: she had faith and did not give up. She overcame the illness.

[11] Translation: "Who has called me? Who is willing to return to the nest? / Rediscover one's place…/ You will find out / stories are endless / and continue every time you say 'Yes'."
[12] Those who are born in Rio Grande do Sul.
[13] The gourd where they drink chimarrão (also known as mate).

On May 14th, after she had recovered, we resumed our sessions. From the very beginning, she talked about her father with pride and joy. So, I suggested that she do the internalised-other conversation. I called this experience a “make-believe game” in which she would be ‘Seu Gabriel’, and I would talk to him. She agreed, and we began. I do not have a record of the questions. I took some notes of the answers that reached my heart, and these are the guidelines for my account of that conversation.

I began by asking her to remember her father: his voice, his look, his scent, his way of walking and talking. Then I told Ayla that I did not want to be disrespectful to her father. So, I asked her to guide me on how he would like to be addressed and how I should refer to him. We agreed that I would call him ‘Seu Gabriel’ and that I could address him in an informal way. Once he had already met me, he would not feel disrespected by that.

I always start the conversation right after this agreement, to establish the distinction between the person and the internalised-other. So, I said: “Seu Gabriel, shall we begin our conversation? It’s been a while since I last saw you – how are you?” The intention, at this moment, is to create a relaxed, playful atmosphere so the person can feel at ease. I tend to ask questions whose answers I already know – and the person is aware of that. That is my way of building a scaffold from what is already known and familiar towards what is yet to be known.

To that end, I asked questions that focused on family relationships, as I knew it was an important theme for him. I also wandered around his thoughts on how his sons and daughter were managing his absence. Then, I moved on to another level of questions, and we talked about Ayla, and we spoke about how he perceived the care she was providing for Dona Luzia. As we went along, I could see she was increasingly connected with the internalised-other: her body posture, the way she spoke, a different way of looking at me. At that moment, I knew I was in conversation with Ayla’s Gabriel. Then, I started asking more subjective questions, such as: “Seu Gabriel, what do you admire in Ayla?”, “What have you long admired in your daughter?”, “What has always caught your attention?”, “Has she always been like that, or is it something that she has refined over the course of her life?”. I also asked what tips he might offer his daughter now that he had the opportunity to see life in perspective – or at least from another perspective.

My notes referred to these questions. And, as I mentioned earlier, these notes are driven by resonances, by the sense that these are precious words that deserve to be rescued, gathered with care, and honoured. Here is what I rescued about the admiration:

Ayla's Gabriel: I admire that Ay[14] never spares any effort to care for her family and friends and to maintain what needs to be. I don't know how she manages that!

Adriana: Ah, but the apple doesn't fall far from the tree! (We laughed out loud together.)

Ayla's Gabriel: She has so much love. She's always been good at taking care of others. I admire that love. And her never-ending will to care for others.

Here are the tips he had for her:

Adriana: What advice would you offer her now that you are in a different standpoint in a privileged place? I imagine you have a broader view of it all and that you are keen to give a few words of counsel to your daughter, who's so committed to caring for your Luzinha[15]...

Ayla's Gabriel: Maturity is unfolding, and she'll learn. When she becomes more mature, she'll learn to ignore some things. She needs to learn to leave things aside, to feel at ease. And she needs to do the things she likes: sports, traveling, seeing her friends again. She's been taking care of us for such a long time… She needs to take better care of herself.

Adriana: Do you think she can do that, Seu Gabriel?!

[14]Ayla's nickname.
[15] Dona Luzia's nickname.

Ayla's Gabriel: *Yes, she can! She really can.*

Adriana: Great! Let's have a toast with a mate! *(We laughed together.)*

I brought the conversation to a close, thanking him for his special contribution to our session. I also invited Ayla to reconnect with herself, giving her some random options such as stretching and moving her body a little (feet, legs, arms), taking a deep breath, even drinking some water. She said she enjoyed the experience and had not imagined it would feel so real: *"I could feel like my dad: his words, his accent, his way of sitting and looking, his caution when talking to someone he didn't know so well."*

Ayla's account

"I want to share a lovely, very special experience I had during my therapy with Adriana. She asked whether I'd like to have an experience with my father. I agreed, and she invited me to think of him and to recover my memories of him. Then she began asking questions to my father – and I answered as if I were him.

At first, I found it a bit strange, but soon I began to feel as though it was really him responding: his accent, the words he used to choose, the way he got emotional – he'd breathe in to hold his tears so he could keep talking… I had it all, so it was incredibly special. It was such a warm experience!

It was profoundly important. It did me so much good because I remember I was going through a very hard time. I had lost my dad a year before – it had just been a year – and my mom was extremely sick, bedridden. She was already in palliative care. And that conversation did me a lot of good because I felt as if he was there with us. I felt like he was answering those questions, and that feeling filled my heart with joy. I was at peace.

He talked about me, about how he saw me, about our relationship, and how it became especially precious after he was diagnosed with Alzheimer's. I could feel the importance I had for my father, the trust he had in me, and the peaceful moments I was able to give him at the end of his life.

That experience made me feel in harmony with him. It felt so good! I felt a fierce longing, a wish to hug him! The last three years of his life were very special because we lived them with all our hearts, unconditionally. It was so good to restore that. That experience gave me the chance to be with him again, and it made me really happy. When I woke up the next morning, I was feeling good, and I was happy!

So, it was something really beautiful. At first, I thought it wouldn't work because I'm far too much of a realist, and it was something which depends on imagination. And yet, it worked! I felt those were his answers, as if he were inside me, there, replying with great tenderness.

I can't clearly recall the questions, but I remember the feeling of peace and joy."

Reflections on 'what happened here?'

É perguntando que se aprende a perguntar[16]

Paulo Freire

Right at the beginnings of narrative therapy, whenever David Epston and Michael White met, they had a kind of ritual: they would watch each other's consultations and talk about what was new and different in their practices. David Epston (2016) presents it this way:

> And I also recall that at the end of my visits, he would devote some time to asking me: "What did you see me doing differently?" That was my clue to review not only his practice but my own. And I became just as dedicated and diligent about 're-seeing' (or researching) my practice, not by way of some sort of assessment but rather by asking myself the questions I believe Michael was asking of himself: "How did what happened here happen?" "What did I do that was implicated in what happened? (p. 85)

Therefore, to close these reflections, I invite you to come with me along Brazilian by-ways as I seek to answer the question: what did I do that was implicated in what happened? Along this path, I introduce a few Brazilian authors who have

[16] Translation: "One learns to ask by asking".

guided me on my theoretical journey.

Let's begin by saying that I have embraced the *tríbio time* proposed by Gilberto Freyre (2001). By that I mean my understanding is informed by a non-linear time, an ancestral-wisdom time that flows like a river, intertwining what was, what is, and what will be into a single flow of existence. It is from this understanding that I perceive that both the conversation with the internalised-other and the conversation of 'saying hullo again' can be built and inhabited. If the ones we love – the significant person – live within us beyond the bounds of time and space, they can be accessed and evoked. Their voices can be heard, their stories can be honored, and their legacies can be inhabited by us.

What Sílvia and Ayla share about their experiences during the internalised-other conversations shows that those who have died remain present in our lives, just waiting for us to say "hullo again" to reveal treasured stories.

I also dared to move beyond the known and familiar. I accepted Paulo Freyre's invitation (1987) and walked toward the *untested-feasibility*: that which is not yet (hence untested) but may come to be (hence feasible). Such a path requires patience and trust, care and respect, joy and lightness. Talking with the internalised-other requires patience to build a scaffolding conversation that interweaves questions and answers, trusting these moves may reveal what matters. When the stories surface, we handle them with the care and respect of an archaeologist handling a newly unearthed piece: brushing gently, lingering over details, holding the discovery in wonder, and trusting in all the potential it carries. We go on *narractivating* these stories, asking duende-like questions that bring joy and ease, and contributing so that each person keeps *storyliving* their life with lightness.

I also searched for the *precious particle* that Bernadete Lyra (2018) so often mentions. It may be a word, an idea, a feeling, a sensation, some memory, or any image that touches our heart and awakens in us the urgent curiosity to craft a narrative. A *unique outcome*, in Michael White's words (2012). It may be a turquoise Vemaguet, a tender remembrance of someone who has gone… These *precious particles* bring forward deep and mighty questions. Questions that make all the difference in therapeutic encounters.

Shall we go down the rabbit hole?

Out beyond ideas of wrongdoing and rightdoing, there is a field.

I'll meet you there."

Jalal-ad-Din Rumi

I have presented in this paper a few accounts of conversations with the internalised-other to show how this form of interaction creates a different – and special – connection between a person and his/her own story. However, it is important to point out that this is only one moment in the therapeutic process. As it has been mentioned, we spent some time "panning for gold" (Wylie, 1994) as some important aspects of the alternative story came along in earlier sessions. Each one of them needed to rest and wait for the questions that would invite them to take part in a storyline. As Pablo Neruda (1973) put it poetically:

If each day falls

inside each night,

there exists a well

where clarity is imprisoned.

We need to sit on the rim

of the well of darkness

and fish for fallen light

with patience.

That is what we do: we 'fish' those narratives that bring light and life to the alternative story.

During the conversation with the internalised-other, we invite the person to engage in a "make-believe play" and speak *as if* s/he was a loved one. This disrupts the individualist logic of "I am me, and you are you". Once the person agrees to "go down the rabbit hole" and steps into the dynamics of being both the one who speaks and the one who listens to what is said, s/he becomes, at once, performer and audience. The person becomes an outsider witness to a conversation that proceeds from them and emerges from within —in that magic world of affections and narratives about to be born. This way of listening "from within" makes possible a distinctive reflection between the person and his/her life story. As one woman told me after such a conversation: *"*How lovely to speak as if I were my aunt*! It gave me such peace, such joy… How much she loves me! And how many things we have in common!"*

In this way, the conversation with the internalised-other reveals elements that become the raw material for subsequent sessions. It is not the therapy itself, but part of a wider context, entering the therapeutic flow as a way to "awake memories" (Benites, 2023) and to activate precious stories in which I, he/she, we… everyone inhabits the same narrative time, giving voice to possible futures and creating untested-feasible paths.

After wandering through these stories and ideas, I keep wondering what you might experience during these magical and powerful encounters that happen when we go down the rabbit hole and let questions become the *pirlimpimpim* dust (the pixie dust) that brings wonderfulness to life.

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Narrativando Conversas com o Outro Internalizado: uma Terapia com Pó de Pirlimpimpim

Adriana Müller

A resposta certa, não importa nada:

o essencial é que as perguntas estejam certas

Mario Quintana

Em 2018 David Epston esteve na Argentina, juntamente com Tom Carlson, para apresentar a proposta da Testemunha Desde Dentro[1] e, no primeiro dia do encontro falou sobre a arte de fazer perguntas. Pode parecer trivial, mas perguntar é a base do trabalho terapêutico, portanto, é importante termos consciência do como e do porquê de cada pergunta. Ele nos apresentou as 'perguntas com Duendes': aquelas que surpreendem, alegram o ambiente e revelam histórias maravilhosas. Fiquei encantada com essa perspectiva de perguntas que possam convidar as pessoas a enxergar boniteza em suas vidas.

Boniteza é uma palavra ressignificada por Paulo Freire que promove um olhar para além da aparência e que condensa amor, ética, estética, política e educação, revelando a dimensão poética da vida e a crença em um mundo mais justo (Nita Freire, 2021). Trazer boniteza à nossa *práxis* é um convite que Michael White, David Epston e Paulo Freire nos fazem constantemente. No texto Re-imaginando a Terapia Narrativa (Epston, 2019), ao homenagear seu amigo, David Epston menciona o 'espírito de aventura' que sempre esteve presente na prática de ambos (Epston & White, 1990, p.9), reconhece a poética e a criatividade de seu parceiro, e nos convida a manter vivo o *espírito indomável* em uma época na qual as marcas registradas e as franquias cerceiam a criatividade e impelem as pessoas a copiarem, ao invés de criarem. Ele nos alerta para não deixarmos a terapia narrativa ser mais uma 'macdonalização', mas que ela possa mostrar a sua potência com a cara e as cores de cada povo, com a beleza de cada cultura, e com a diversidade de cada canto do mundo. Em termos freirianos, que seja sempre

[1] Em 2019 eles e Sanni Paljakka estiveram em São Paulo.

uma experiência de boniteza.

Ele nos alerta para não deixarmos a terapia narrativa ser mais uma ‘macdonalização’, mas que ela possa mostrar a sua beleza com a cara e as cores de cada povo, de cada cultura, de cada canto do mundo. Em termos freirianos, que seja sempre uma experiência de boniteza.

Essas reflexões trouxeram com elas alguns questionamentos. O que estamos fazendo de novo, de criativo, de interessante? O quanto de Duende, de espírito de aventura, de pó de pirlimpimpim[2] estamos colocando em nossos atendimentos? Como estamos colocando nossa alma, nossa forma de ser, nossa unicidade em ação em cada encontro terapêutico que temos com as pessoas que buscam nossa ajuda? Como estamos contribuindo para que as histórias contadas revelem a boniteza contida nas experiências vividas? Essas são perguntas que reverberam em mim desde que traduzi o texto de David Epston (2019) – e são elas que têm orientado meus passos ao longo da minha caminhada atual na terapia narrativa.

Em 2020 iniciei o curso *Artistry of Narrative Therapy* com Tom Carlson, Kay Ingamells e David Epston. A proposta do curso é realizar um aprendizado constante sobre a arte de fazer perguntas dentro do contexto da terapia narrativa, afinal, perguntar requer foco, dedicação e prática. Michael diria, “pratique, pratique, pratique.” (Epston, 2016, p. 85). Em um dos encontros, David esteve presente e pediu que a gente contasse como estava sendo a experiência do curso. Foi quando contei que estava muito surpresa com os efeitos que eu percebia – e que as pessoas relatavam – quando a consulta acontecia baseada em perguntas para o outro internalizado (Epston, 1998). Ele ouviu atentamente enquanto eu relatava a experiência mais recente: um encontro cheio de emoção que terminou com a pessoa dizendo que havia sido algo tão especial que ela guardaria para sempre em sua memória. Quando terminei o relato, ele perguntou se eu havia pensado em escrever aquela história, afinal, uma conversa que termina com a pessoa mencionando que vai guardá-la para sempre em sua lembrança é algo que merecia ser honrado e escrito.

Percebi a boniteza dessa ideia e resolvi fazer algo mais: pedi para que a própria

[2] É um elemento mágico bem brasileiro, criado por Monteiro Lobato nos livros do Sítio do Picapau Amarelo e que funciona como gatilho de faz de conta.

pessoa relatasse o que lembrava daquele momento. E fiz o mesmo com outra pessoa que também viveu experiência semelhante. Esse texto é sobre essas histórias e sobre as reflexões que fiz sobre elas.

A força das palavras bem-ditas

As palavras sabem muito mais longe...

Bartolomeu Campos Queirós

O processo terapêutico acontece por meio de conversas e envolvem, invariavelmente, um entrelaçamento de perguntas com respostas, sendo que os fios desse tear são as palavras. Confesso que sou encantada pelas palavras. Gosto de perceber o cuidado com que são escolhidas pela pessoa, a força que elas carregam e as possibilidades que oferecem para a conversa em curso. Para mim, as palavras dos clientes são precisas e preciosas. E eu as respeito como tal. Além disso, gosto de brincar com as palavras, de traduzi-las em poesia, de uni-las para que revelem algo novo. Com as palavras, brinco de ser Duende e de criar bonitezas.

Quando Michael White (2008) apresenta o conceito de testemunhas externas, ele menciona as quatro perguntas norteadoras das conversas que se desdobram a partir do que uma pessoa conta. Ao re-contar o que ouviu, aquelas pessoas que ouviram o relato – as testemunhas externas – são convidadas a falarem sobre quatro aspectos: 1) qual palavra ou expressão lhes chamou mais a atenção, 2) qual imagem essa palavra ou expressão evoca em sua mente, 3) de que forma tais palavras e imagens geram ressonância com a sua história pessoal, e 4) quais ações ela se sente motivada a realizar a partir dessas lembranças e reflexões (o transporte). Em sendo uma testemunha externa dos relatos das pessoas que buscam terapia, eu escuto as palavras que elas usam em cada consulta com a mente, mas, principalmente, com o coração. Vejo boniteza nelas, e elas me encantam!

Me encanta ouvir alguém dizer: “estou me sentindo mais confortável em minha pele”, “a estrada à minha frente já não tem tanta neblina”, “todas as coisas são superáveis”, “tomei posse da minha força”, “minha vida está mais arejada”. A poesia já está ali, e gera em mim imagens instantâneas a partir das quais surgem as perguntas e os jogos de palavras. E, nessa dança da muDANÇA, acontece a dis-

SOLUÇÃO dos problemas (Anderson & Goolishian, 2018) e as identidades preferidas podem ser e aparecer com toda sua boniteza.

A ressonância é como uma bússola que me guia: onde meu encantamento repousa, onde as palavras me convidam, onde as imagens me animam, ali vou buscar um oásis de sentido. Então, compartilho com as pessoas as minhas percepções, seja 'tornando públicas' as minhas ideias durante a própria conversa, seja escrevendo cartas e poemas que evidenciem esses pontos de destaque (White & Epston, 1990; Ingamells, 2018; Muller, 2024), ou até criando documentos coletivos – com voz coletiva, documentos vivos ou musicais – com as palavras resgatadas da conversa (Denborough, 2008, 2018; Newman, 2008; Müller, 2012, 2013, 2015).

Em todos esses exemplos – e em tantos outros – as palavras são escolhidas com atenção e carinho, como se no processo terapêutico as pessoas resgatassem a compreensão do valor de suas palavras e do potencial de suas vozes. Como propõe Queirós (1986) precisamos ajudar as pessoas a acordarem algumas palavras para que elas estejam vivas e presentes em suas experiências diárias. E são as palavras que nos conduzem ao longo de toda a experiência dos encontros terapêuticos. Afinal, como nos indica White (1988): "Assim, podemos investigar os benefícios de definir a terapia de 'méritos literários' na qual o maior presente do terapeuta para a pessoa buscando terapia é ajudá-la a se tornar autora dela mesma" (pag.10). E ele continua: "Essa abordagem estabelece a terapia como um contexto de curiosidade e é realizada como um esforço colaborativo e uma investigação sobre novas possibilidades" (p.13).

Uma investigação que acontece por meio de perguntas que funcionam como portas para as histórias alternativas – ou, como David Epston mesmo diz, um convite para "mergulhar na toca do coelho" (Marsten, Epston & Markham, 2016). Segundo White (1988) sugere, existem duas perspectivas principais nas conversações: perguntar sobre a experiência das pessoas e produzir novos conhecimentos – e estes, aparecem por meio de histórias que fascinam tanto quem ouve quanto quem conta. Se prestarmos atenção, a grande maioria das nossas perguntas emergem das ressonâncias com as histórias que ouvimos, como uma forma de ampliar o entendimento sobre um aspecto específico da narrativa que nos tocou de alguma forma. E é importante que as perguntas assim sejam: um interesse genuíno em saber mais, uma vontade de ampliar as narrativas para

além do que é esperado ou já conhecido e uma busca por encontrar aquelas versões que revelem a identidade preferida da pessoa com quem conversamos.

A metáfora da construção de histórias alternativas, em busca da história preferida, ajuda o terapeuta a contribuir com aquela narrativa na qual a pessoa possa revelar o seu melhor. Não se trata de trocar uma história saturada de problemas por outra que seja 'melhor' – um equívoco comum e uma crítica não fundamentada à terapia narrativa. Trata-se de buscar formas de narrar o que aconteceu e, também, os posicionamentos a favor e contra isso, os objetivos de vida da pessoa e os legados que ela pretende deixar a partir disso. Trata-se de narrar uma história que a pessoa considera que vale a pena ser habitada tanto com o corpo quanto com a mente, e que é sustentada de forma coletiva por pessoas significativas que fazem parte da sua rede de afetos, ou, nas palavras de White (2008), do seu clube da vida.

Considero que perguntar é uma arte. E, como tal, precisa ser treinada com disciplina e atenção. Afinal, são vários os tipos de perguntas e, cada uma delas, abre diferentes narrativas e nos revelam histórias distintas. Dentro desse contexto, David Epston (1998) nos apresenta as perguntas sobre o outro internalizado:

> Tais perguntas paradigmáticas podem versar sobre qualquer tema, mas sempre convidam o respondente a responder a partir de sua experiência da experiência do outro. Isso tem o efeito de minar as práticas culturais que afirmam a existência de uma realidade objetiva. (p. 68)

Por meio dessas perguntas, convidamos aquele que acompanhamos a responder 'como se fosse' uma pessoa significativa em sua vida. Esse caminho nos ajuda a acessar a boniteza presente no tempo tríbio (Freyre, 2001): esse entrelaçamento de passado-presente-futuro que acontece simultaneamente e constitui o tecido sobre o qual tecemos nossas narrativas. No tempo tríbio podemos acessar memórias, atualizar histórias e antecipar narrativas. Por entrelaçar os três momentos da Vida – tri-bio – podemos 'dizer olá novamente' (White, 1989) e construir, agora, uma história que nos represente, que reconheça as pessoas significativas e que revele o nosso melhor. No tempo tríbio deixamos de lado o conhecido e familiar e passamos a buscar uma versão ampliada, algo singular e

único, o nosso inédito-viável (Freire, 1987).

Tendo isso em mente, apresento a seguir os dois relatos sobre os encontros que tive com Sílvia e Ayla, as pessoas significativas que elas me apresentaram e as histórias que foram escrevividas (Müller, 2024) ao realizarem as conversas sobre o outro internalizado.

Pegando carona em uma Vemaguet azul turquesa

Sílvia é uma mulher de pouco mais de 50 anos, que está em busca de superar o fim de um relacionamento abusivo. Seus sentimentos são conflitantes visto que ora tendem à nostalgia – "tenho pena de nós" – ora se conectam à certeza de que o fim foi providencial. Em meio a essa construção de sentido, Sílvia menciona seu avô paterno, Vô Álvaro, com quem tinha uma "parceria de vida". Um humanista que lhe ensinou sobre política e cultura de forma muito especial, e que morreu de enfisema quando ela tinha 18 anos, o que lhe causou "raiva por ele ter me deixado". Mas, com o passar do tempo, o Amor voltou a tomar o lugar dessa raiva e, hoje, o Vô Álvaro é uma doce e reconfortante lembrança.

Neste dia, Sílvia mencionou alguns critérios que está colocando em ação para se sentir melhor consigo: os projetos culturais do seu curso, sua determinação em ter relacionamentos saudáveis e a certeza de que precisa ser clara sobre o que quer e busca em um relacionamento. Segue um trecho da nossa conversa:

Adriana: Quem não se surpreenderia com essa sua postura firme e determinada? Quais pessoas te conhecem tão bem a ponto de saberem que essas atitudes e esses sonhos são típicos de você, são "a sua cara"?

Sílvia: Nossa! Minhas amigas...

Adriana: Quais amigas? Vamos fazer uma lista bem longa...

Sílvia: Rosa, Cecília, Hannah, Lívia, as mães dos alunos, meus pais, meu filho, meu irmão Maurício...

Adriana: Alguém que não está mais aqui, mas que certamente saberia dessa sua forma firme e determinada?

Sílvia: Minha avó Gabriela e, claro, meu avô Álvaro. Que saudade deles!...

Ela, então começa a me apresentar o seu avô. Contou muitas histórias sobre ele, com detalhes e muito sentimento envolvido. Falou da importância que ele dava às amizades e sobre a forma como sua esposa (a avó da Sílvia) o destratava a todo momento. Mencionou fatos da vida cotidiana: o almoço de domingo no qual sua avó servia primeiro todos da família, deixando para ele somente o resto do frango, numa clara demonstração de que não o prestigiava, as caronas de ida e volta da escola, com Sílvia e seus irmãos na Vemaguet azul turquesa que soltava fumaça e tinha cheiro de combustível, e de como ela gostava de estar com ele, mesmo assim. Contou sobre a origem humilde dele, o que nunca foi empecilho para que ela o admirasse, e sobre as longas e alegres conversas sobre política, poesia e a vida. Conhecendo Sílvia, ficou claro para mim a relevância desse avô na constituição da sua identidade preferida – essa mesma identidade que ela busca fortalecer nessa história alternativa que está se revelando. Foi, então que perguntei:

Adriana: Sílvia, você quer fazer uma brincadeira? É tipo um faz de conta... Você 'faz de conta' que é o seu avô e eu converso com ele sobre você. O que você acha?

Sílvia: (rindo animada): Ah, pode ser!

Adriana: Então, vou pedir para você continuar conectada com o seu avô. As lembranças dele, as histórias de vocês, o som da sua voz, a forma dos seus gestos, o brilho no seu olhar... e, antes de começar a conversa com ele, preciso que você me diga como ele gostaria que eu o chamasse. Afinal, vai ser a primeira vez que vou conversar com ele e não quero causar má impressão! (Risos)

Sílvia: Ah, pode chamar de Álvaro, ou Sr Álvaro. Como você quiser. Ele não era dessas formalidades...

Adriana: Tudo bem. Então, Sr. Álvaro, eu sou Adriana, psicóloga e amiga da sua

neta querida, a Sílvia. E ela estava me falando tanto de você que fiquei curiosa e pedi para que a gente pudesse conversar. Pode ser?

Álvaro da Sílvia: Sim, claro!

Adriana: Imagino que o senhor saiba de tudo o que ela está vivendo atualmente... e eu me pergunto, o que o senhor teria a dizer para sua querida neta neste momento da vida dela?

Álvaro da Sílvia (com a expressão confusa): Não sei...

Segundo Michael White (2012), é importante que a conversa se organize como um andaime em construção: subindo pelos estágios, paulatinamente, para que a pessoa possa se sentir segura de sair da história conhecida e familiar até chegar a narrar o que é possível ser conhecido. É uma forma de colocar em prática, no contexto terapêutico, aquilo que Vygotsky denominou de zona de desenvolvimento proximal. Dentro desse marco teórico, a minha primeira pergunta foi um passo muito grande, em um momento da conversa com o outro internalizado na qual Sílvia ainda estava se adaptando à dinâmica. Então, voltei atrás e comecei a fazer perguntas mais familiares, sobre histórias que eu já conhecia. Perguntei sobre sua esposa, sobre os seus amigos, sobre as idas à escola na Vemaguet e outros momentos juntos. Assim, pouco a pouco, o Sr Álvaro foi tendo voz e eu fui percebendo a conversa fluir de forma mais natural, como se eu realmente estivesse conversando com o outro internalizado – o Álvaro da Sílvia.

Adriana: Sr Álvaro, me conta como era essa história do senhor ir levar e buscar seus netos na Vemaguet azul turquesa! Ela ficava mesmo fumaçando?...

Álvaro da Sílvia (rindo): Ah! Era isso mesmo...

Adriana: E a Sílvia, como ela ficava nessa hora?

Álvaro da Sílvia: Ela ria comigo, ficava ali. Ela não sentia vergonha de mim.

Adriana: Quando o senhor lembra da Sílvia pequena, jovem, o que mais se destaca?

Álvaro da Sílvia: Ela era sempre alegre. Uma luz! Eu tinha muito orgulho dela! Tenho ainda. Quando ela tinha 16 anos, adorava ouvir as poesias que eu declamava. E as nossas conversas sobre política eram ótimas!

Quando perguntei para o Álvaro da Sílvia se ele teria alguma dica para dar à neta sobre como lidar com os relacionamentos afetivos, ele voltou a ficar confuso. Eu lhe disse que não se preocupasse, que nós duas iríamos descobrir e que ele ficaria sabendo da resposta. Agradeci a conversa tão animada e cheia de boas histórias, e nos despedimos.

Voltei a conversar com a Sílvia e lhe perguntei o que havia achado da experiência – e a resposta dela me surpreendeu:

"Quando começamos a conversa, percebi que seria algo especial. Algo que eu teria que ouvir com muito cuidado e guardar em um lugar especial da minha mente. Um lugar que, mesmo que fique velhinha e tenha Alzheimer, vou lembrar para sempre... "

Na consulta seguinte, Sílvia voltou a comentar sobre essa conversa com seu avô dizendo como foi importante para ela perceber o orgulho e a admiração dele por ela e por tudo o que ela fazia. Isso demonstra a importância dessas conversas com o outro internalizado no fortalecimento da história alternativa.

Além disso, Sílvia mencionou que, provavelmente seu avô não conseguiu lhe explicar como resolver a questão afetiva porque, também ele, não encontrou respostas para essa pergunta em seu casamento com a esposa. Mas que pode sentir, durante a conversa, o orgulho que ele sentia dela por estar tentando.

Relato da Sílvia

"Eu estive com meu avô nesta pandemia. Não nos víamos há uns 35 anos. Ele sempre me fez falta, mas eu não sabia onde encontrá-lo. Ele sempre me entendeu. Foi ele que me explicou as coisas do mundo, da política à poesia. Era

ele que olhava para tudo o que eu fazia e dizia: é lindo!

Nos meus aniversários, colhia flores – ele mesmo – e ornava a minha casa para que eu a visse enfeitada quando acordasse. Nas manhãs em que nos visitava, ao me ver, repetia: bom dia, flor do dia! Quanto tempo eu não te via!

Era ele com quem eu precisava muito falar, mas eu não sabia. Nunca imaginei o tamanho dessa falta e o quanto ele ainda teria para me ensinar.

Adriana Muller me ofereceu essa oportunidade. Em uma sessão de terapia narrativa ela me perguntou se poderíamos convidar o meu avô para dizer o que ele estava achando de tudo o que eu estava vivendo.

Eu estava terminando o meu segundo casamento, uma relação intensa de 16 anos. Estava destruída, devastada. Havia sido desrespeitada em todos os campos: familiar, financeiro, profissional, sexual, emocional. Eu me sentia um grande nada. Mas um dia, falei do meu avô, falecido quando eu tinha 20 anos, para a Adriana.

Ele sabia quem eu era, ele me admirava, ele gostava de mim. Era sensível, inteligente, mas também teve problemas amorosos. Casou-se com uma mulher – minha avó – que era louca, bem precária, provocadora, raivosa. Eu ainda me lembro dela humilhando-o, tratando-o como um nada. Mas ele era tudo para mim.

Ele tinha que dormir de ponta cabeça porque ela não gostava do cheiro da cabeça dele. Ele recebia o último pedaço do frango na mesa do almoço do fim de semana com a família. E eu via, reparava, sabia. Eu era uma criança, mas eu sabia.

Adriana perguntou se poderíamos convidar o meu avô para uma conversa. Perguntou se eu poderia ser o meu avô por uns momentos, pensar como ele, lembrando de como ele me via e o que diria. Ela seria a entrevistadora. Ela conversaria com ele, e eu responderia.

A conversa começou. Ela me chamava de Sr Álvaro e eu fui embarcando aos poucos. A primeira pergunta, que já não me lembro, me pareceu forte, profunda, difícil. Tentei responder, mas ainda era eu. Adriana percebeu, voltou uns passos e começou a conversar com ele sobre situações que ela já sabia. O que me permitiu entrar, devagar, na brincadeira.

Falamos da Vemaguet que ele adorava e com a qual levava, às vezes, a mim e aos meus irmãos à escola. Ela perguntou a ele sobre a sua neta. Sobre o que ela achava de ir para a escola em um carro antigo, barulhento e que soltava fumaça. E ele respondeu que ela gostava, não ligava para essas coisas.

Falamos das flores, dos aniversários, das exposições de porcelana, dos ensinamentos que ele me passou e, a cada momento, eu era mais ele do que eu. Sabia o que ele diria, como sentia, o que pensava sobre a vida, sobre a nossa história de avô e neta, e sobre mim.

Então, Adriana foi deixando que as perguntas ganhassem profundidade e que tocassem no meu momento de dor. Ela perguntou ao meu avô sobre relacionamentos e o que ele poderia me dizer sobre o que eu estava passando. Sobre o que ele deixou de me ensinar.

Ele me pediu perdão por não ter conseguido me ensinar a escolher um amor que me fizesse bem. Ele se desculpou porque nunca falamos sobre isso e o quanto ele gostaria de ter me alertado. Ele me falou sobre saudade, admiração e sobre a certeza de que eu ia limpar esse carma de relacionamentos desleais para adentrar em uma nova fase. Ele disse que acreditava em mim e que ele não queria mais que eu sofresse assim.

Eu precisava muito me lembrar do quanto eu já havia sido amada, de como era bom quando as pessoas riam comigo e se alegravam com a minha presença. O encontro com o meu avô encheu meu peito de amor, de confiança e de esperança.

Eu nunca, nunca mais me esquecerei desse dia. Eu vivi ciente de que aquele era um momento que iria morar na minha memória para sempre.

Terminei a sessão chorando e sorrindo, com uma saudade apertada do meu avô, mas com a certeza de que vai caber a mim mudar o rumo dessas histórias incompletas e hostis. Eu sou do Amor e vou encontrar alguém suave, firme, amoroso, de esquerda, de sonhos, da música, da poesia e dos melhores valores do mundo.

Obrigada Adriana por essa experiência curativa, reparadora e profundamente respeitosa, criativa e afetuosa. Obrigada Vô por ainda estar tão vivo dentro de

mim! Te amo meu economista, poeta e amigo. Você me salvou, Vô, mais uma vez. Vou fazer você ficar orgulhoso de mim".

"Não desistir diante do desafio"

"Quem me chamou? Quem vai querer voltar pro ninho?

Redescobrir seu lugar..

Você verá que é mesmo assim, que história não tem fim.

Continua sempre que você responde 'Sim""

(Brincar de Viver – Guilherme Arantes)

Ayla é uma mulher com 54 anos que escolheu deixar seu emprego para cuidar de seus pais, Dona Luzia e Seu Gabriel, ambos gaúchos que saíram do Rio Grande do Sul em 1969 com os 07 filhos, mas não deixaram de lado a cuia de chimarrão – o famoso mate – e a tradição de um bom churrasco.

Inicialmente a ideia era cuidar de sua mãe, Dona Luzia, cujo prognóstico de 03 anos durou 15. Porém, as circunstâncias mudaram e ela passou também a cuidar de seu pai, Seu Gabriel, que desenvolveu Alzheimer. Seu Gabriel veio a falecer no dia 13 de março de 2019 e, desde essa data, sua mãe foi piorando o quadro clínico, ficando internada com mais frequência e tendo que usar medicação cada vez mais forte quando em casa. Além disso, com o início da pandemia a situação ficou ainda mais complicada e Ayla mencionava muito as situações vividas com Dona Luzia.

Depois de 01 ano da morte de seu pai, Ayla passou a falar muito sobre ele, mencionando as lembranças que tinha e a admiração pela forma como ele administrou a vida da família sempre com a intenção de protegê-los e prepará-los para os desafios, sendo um exemplo constante de honestidade, coragem, fé, integridade e tantos outros valores que moldaram a vida de cada um dos filhos. No dia 08 de abril ela disse durante a terapia que seu pai "não desistia diante do desafio". No dia 20 de abril ela foi internada com Covid19 e fez valer mais esse ensinamento do seu pai: teve fé e não desistiu diante dos desafios. Superou a doença.

Aguardamos ela se recuperar e, no dia 14 de maio, retomamos as consultas.

Desde o início da consulta ela falou do seu pai, sempre com orgulho e alegria. Foi, então, que resolvi propor que fizéssemos a conversa com o outro internalizado. Chamei essa experiência de “uma brincadeira de faz-de-conta” na qual ela seria o Seu Gabriel e eu conversaria com ele. Ela aceitou e começamos a brincadeira. Não tenho registro das perguntas, somente de algumas respostas que ele foi dando e que anotei pela força que continham. Apresento, então, o meu relato dessa conversa.

Iniciei pedindo para ela se lembrar de seu pai: sua voz, seu olhar, seu perfume, sua forma de andar e de falar. Então, disse para a Ayla que não queria ser desrespeitosa com seu pai e pedi para que ela me direcionasse sobre como ele gostaria de ser chamado e como eu deveria me referir a ele. Ficou combinado que eu o chamaria ‘Seu Gabriel’ e que poderia chamá-lo de você, afinal, ele tinha me conhecido e não se sentiria desrespeitado.

Sempre começo a conversa logo após esse combinado, para estabelecer a diferença entre a pessoa e o outro internalizado. Portanto, eu disse: “Então, Seu Gabriel, podemos começar a nossa conversa? Faz tempo que não lhe vejo, como o senhor está?” A intenção, neste momento, é criar um clima descontraído, de brincadeira, para que a pessoa possa se sentir tranquila. Costumo fazer perguntas cuja respostas eu já conheço – e a pessoa sabe disso também – para ir construindo os andaimes que partem do conhecido e familiar em direção ao que é possível ser conhecido.

Para isso, fiz perguntas que enfocavam as relações familiares – um tema tão importante para ele – e as considerações que ele tinha a fazer sobre como os filhos estavam administrando a sua ausência. Em seguida, passei para outro nível de perguntas e conversamos sobre como ele percebia a questão dos cuidados que a Ayla estava tendo com Dona Luzia. Ao longo dessas perguntas pude perceber que ela estava cada vez mais conectada com o outro internalizado: sua postura física, a forma como ela falava, um jeito diferente de olhar, me mostravam que eu estava conversando com o Gabriel da Ayla. Foi então, que passei a perguntar sobre considerações mais subjetivas dele em relação à filha, tais como: “Seu Gabriel, o que o senhor admira na Ayla?”, “O que o senhor tem admirado na sua filha ao longo desses anos, que sempre lhe chamou a atenção?”, “Ela sempre foi assim ou isso é algo que foi sendo aperfeiçoado ao longo da vida dela?”. Também fiz perguntas sobre quais dicas ele teria para dar à sua filha agora que ele estava

tendo a oportunidade de ver a vida em perspectiva – ou, ao menos, de outra perspectiva.

Foram as respostas a essas últimas perguntas as que anotei. E, como mencionei anteriormente, essas anotações são motivadas pelas ressonâncias, pela percepção de que aquelas são palavras preciosas que merecem ser registradas, colhidas com cuidado, honradas. Assim anotei sobre a admiração:

Gabriel da Ayla: Admiro na Ay que ela não mede esforços para cuidar, para manter o que tem que ser. Não sei como ela dá conta!

Adriana: Ah, mas a fruta não cai longe do pé! (Rimos juntos)

Gabriel da Ayla: Ela tem muito amor. Sempre soube cuidar. Admiro esse amor e esse querer cuidar.

E, assim ficaram anotadas as dicas que ele tinha para ela:

Adriana: Quais dicas o senhor teria para dar a ela, agora que o senhor está vendo tudo de outra perspectiva, de um lugar privilegiado? Imagino que o senhor tenha uma visão ampliada de tudo e que esteja com vontade de dar uns conselhos para sua filha que está aqui, tão empenhada em cuidar da sua Luzinha[3]...

Gabriel da Ayla: Ela vai ter mais maturidade. Ela vai aprender. E quando tiver mais maturidade ela vai aprender a ignorar algumas coisas. Ela precisa aprender a ignorar, para ficar mais tranquila. E voltar a fazer as coisas que ela gosta: esporte, viajar, reencontrar seus amigos. Ela está há muito tempo cuidando da gente. Precisa cuidar mais dela.

Adriana: Será que ela consegue, seu Gabriel?!

[3] Apelido carinhoso com que ele chamava sua esposa, a Dona Luzia.

Gabriel da Ayla: Consegue! Ela consegue sim.

Adriana: Aí nós vamos brindar com um mate, tchê! *(Rimos juntos).*

Fui finalizando a conversa, agradecendo a participação especial dele em nossa consulta e convidando a Ayla a voltar a se conectar com ela mesma. Costumo pedir que a pessoa espreguice, mexa um pouco o corpo (pés, pernas, braços) e beba um pouco de água. Ela relatou que gostou da experiência e que não imaginava que seria tão real: *"Pude sentir como se fosse o meu pai mesmo: suas palavras, seu sotaque, seu jeito de sentar e olhar, sua cautela em conversar com alguém que ele não conhecia tão bem"*.

Relato da Ayla

"Quero contar uma experiência muito legal, muito especial que eu tive durante a minha terapia com a Adriana. Ela perguntou se eu gostaria de fazer uma vivência com o meu pai. Concordei e ela pediu para que eu pensasse nele, resgatando a lembrança dele. Aí ela começou a fazer perguntas para o meu pai – e eu fui respondendo como se fosse ele.

No começo eu achei um pouco estranho, mas depois eu fui sentindo como se verdadeiramente fosse ele que estivesse respondendo aquilo: o sotaque dele, as palavras que ele costumava usar, a forma como ele se emocionava e ficava com a voz embargada e puxava o ar para não deixar as lágrimas caírem e ele continuar falando... Eu tive isso, então, foi muito especial. Muito gostoso ter essa experiência.

Foi uma experiência muito importante. Me fez muito bem porque eu me lembro que eu estava em um momento muito difícil. Eu tinha perdido o papai há um ano, tinha acabado de fazer um ano, e a mamãe estava muito mal na cama – naquela época ela já estava com os cuidados paliativos. E aquela conversa me fez um bem muito grande porque senti como se ele estivesse ali, com a gente, como se ele estivesse respondendo aquelas perguntas, e isso me trouxe uma alegria no coração, uma satisfação muito importante.

Ele falou de mim, de como ele me vê, de como era a nossa relação e o quanto ela

ficou especial, principalmente depois que ele foi diagnosticado com Alzheimer. Pude perceber a importância que eu tinha para o meu pai, a confiança que ele tinha em mim, a tranquilidade que eu proporcionei para ele no final da sua vida.

Isso me deixou bem tranquila com relação a ele. Foi bem gostoso. Me deu uma saudade grande, uma vontade de abraçá-lo! Os três últimos anos da vida dele foram muito especiais porque vivemos isso de forma plena, incondicional. Foi muito bom restaurar isso. Poder ter essa experiência foi mais um momento com ele e isso me deixou bem alegre. No dia seguinte acordei bem, estava feliz!

Então, foi algo muito legal. No começo eu achei que não ia rolar não, que eu sou realista demais, que isso é uma coisa que envolve a imaginação, e acabou que não foi! E eu senti que era ele respondendo aquilo, como se ele estivesse internamente em mim, ali, me respondendo com muito carinho.

Não me lembro bem das perguntas, mas lembro do sentimento de paz e alegria."

Reflexões sobre 'o que aconteceu aqui?'

É perguntando que se aprende a perguntar

Paulo Freire

Logo no início da terapia narrativa, sempre que David Epston e Michael White se encontravam, havia um tipo de ritual que realizavam: assistiam às consultas e conversavam sobre o que havia de novo e de diferente em suas práticas. David Epston (2016), fala sobre isso:

> E eu também me lembro que, ao final das minhas visitas, ele tirava um tempo para me perguntar: 'O que você me viu fazendo de forma diferente?' Essa era a minha deixa para revisar não apenas a sua prática, mas também a minha. E eu também me tornei dedicado e aplicado em 'rever' (ou re-pesquisar) a minha prática, não como uma forma de verificação, mas me fazendo as perguntas que acredito Michael fazia sobre si: 'Como aconteceu o que aconteceu aqui?', 'O que foi que eu fiz que implicou no que aconteceu?'. (p. 85)

Então, para finalizar essas reflexões, convido você, leitor, a me acompanhar por veredas brasileiras enquanto busco responder à pergunta: o que foi que fiz que

implicou no que aconteceu? Nesse caminho de brasilidades, lhe apresento alguns autores brasileiros que me guiam ao longo da minha jornada teórica.

Inicio a resposta dizendo que acreditei no tempo tríbio proposto por Gilberto Freyre (2001). Acreditei na possibilidade de um tempo não-linear, um tempo da sabedoria ancestral que corre como um rio, entrelaçando o que foi, o que é e o que será em um único fluir de existência. É por meio desse entendimento que percebo a conversa do outro internalizado e a conversa de dizer olá novamente podendo ser construídas e habitadas. Sim, o outro a quem amamos – as pessoas significativas – vivem em nós para além da limitação de tempo e espaço e, por isso mesmo, podem ser acessadas e evocadas. Suas vozes podem ser ouvidas, suas histórias podem ser honradas, seus legados podem ser habitados por nós.

O que Sílvia e Ayla nos apresentam sobre a vivência delas durante a conversa com o outro internalizado mostram que as pessoas que já faleceram continuam sim, presentes em nossas vidas, somente aguardando que a gente lhes diga 'olá novamente' para poderem revelar histórias que guardam preciosidades.

Além disso, ousei seguir para além do conhecido e familiar. Aceitei o convite de Paulo Freire (1987) e caminhei em direção ao inédito-viável: aquilo que ainda não é (daí ser inédito), mas que tem a possibilidade de vir a ser (daí ser viável). Tal caminho se faz com paciência e confiança, com cuidado e respeito, com alegria e leveza. A conversa com o outro internalizado requer paciência para ir construindo os andaimes entrelaçando perguntas e respostas, e confiança de que esses movimentos vão revelar aspectos importantes. Quando as histórias aparecem, tratamos delas com o cuidado e o respeito de um arqueólogo por uma peça recém-descoberta: pincelar com suavidade, deter-se nos detalhes, manusear a descoberta com encantamento acreditando em todo o potencial que elas carregam. E seguimos narrativando essas histórias, fazendo perguntas de duendes que trazem alegria e descontração, e contribuindo para que cada pessoa possa continuar escrevivendo sua vida com leveza.

Também fui em busca da partícula preciosa que Bernadete Lyra (2018) sempre menciona: aquela palavra, ideia, sentimento, sensação, lembrança ou imagem que faz nosso coração ficar atento e desperta em nós a curiosidade urgente de construir uma narrativa. Um acontecimento singular, nas palavras de Michael White (2012). Uma Vemaguet azul turquesa ou uma lembrança saudosa de

alguém que se foi... Acreditar no potencial das partículas preciosas e na profundidade das perguntas que elas nos convidam a realizar faz toda a diferença nos encontros terapêuticos.

Quer entrar na toca do coelho?

"Além das ideias de certo e errado, existe um campo.

Lá eu me encontrarei com você."

Jalal-ad-Din Rumi

O processo terapêutico acontece por meio de conversas e envolvem, invariavelmente, um entrelaçamento de perguntas com respostas, sendo que os fios desse tear são as palavras. Confesso que sou encantada pelas palavras. Gosto de perceber o cuidado com que são escolhidas pela pessoa, a força que elas carregam e as possibilidades que oferecem para a conversa em curso. Para mim, as palavras dos clientes são precisas e preciosas. E eu as respeito como tal. Além disso, gosto de brincar com as palavras, de traduzi-las em poesia, de uni-las para

Apresentei aqui alguns relatos de conversas com o outro internalizado visando a demonstrar como o formato dessa interação cria uma conexão diferente – e especial – da pessoa consigo mesma e com a sua própria história. Porém, cabe destacar que esse é apenas um momento do processo terapêutico. Como foi mencionado nos relatos, os encontros anteriores permitiram que dados importantes da história alternativa já tivessem sido garimpados (Wylie, 1994) e estivessem potencialmente presentes, aguardando as perguntas que os convidassem a serem narrativados. Como nos apresentou poeticamente Pablo Neruda (1973):

Se cada dia cai

dentro de cada noite

há um poço

onde a claridade está presa.

Há que sentar-se na beira

do poço da sombra

e pescar luz caída

com paciência.

Sim, buscamos estas narrativas que trazem luz e vida para a história alternativa.

Durante o encontro com o outro internalizado, o convite para a pessoa entrar na 'brincadeira de faz de conta' e conversar 'como se' fosse alguém querido gera uma quebra na lógica individualista segundo a qual "eu sou eu e você é você". A pessoa aceita 'entrar na toca do coelho' e embarca em uma dinâmica na qual é ela quem fala, mas, também, é ela quem escuta o que é dito. Sendo simultaneamente ator que apresenta e plateia que assiste, a pessoa se torna testemunha externa de uma conversa que acontece a partir dela e que surge de dentro – nesse mágico mundo dos afetos e das narrativas prestes a nascer. E esse estilo de escuta 'desde dentro' torna possível uma reflexão diferenciada entre a pessoa e sua história de vida. Como me relatou uma moça após a conversa com o outro internalizado: *"Que gostoso conversar como se fosse a minha tia! Me deu uma paz, uma alegria... Como ela gosta de mim! E quantas coisas temos em comum!"*

Desta forma, a conversa com o outro internalizado revela elementos que se tornam matéria prima dos encontros subsequentes. Ela não é a terapia em si, mas parte de um contexto maior, entrando no fluxo terapêutico como uma forma de "acordar memórias" (Benites, 2023) e ativar histórias preciosas nas quais eu, ele/a, nós... todos habitamos o mesmo tempo da narrativa, dando voz a futuros possíveis e inédito-viáveis.

Termino esse artigo esperançando que você também possa vivenciar esse tipo de encontro mágico e potente que acontece quando entramos na toca do coelho e deixamos as perguntas serem o pó de pirlimpimpim que promovem maravilhosidades.

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In the Company of Awkwardness: Counterstorying Toughness in Therapy

Mauricio P. Yabar[1]

The story related in this paper is real, retold here to the best of my recollection. Any edits were made solely for purposes of length and clarity, never to alter the story itself. The transcript and prose poem herein are included with permission from the person at the center of the story. However, because of the deeply personal nature of what is discussed, identifying details, including names, have been redacted.

Introduction

When I was growing up, there was not a single day when I wasn't teased by the athletes or "jocks" at my school. I learned to cope in quiet, strategic ways, namely avoidance. I became adept at steering clear of the areas where they typically gathered. However, I often felt exposed and vulnerable under the gaze of boys and men eager to point out the ways I failed to conform to societal expectations. I survived school, but the experience left me scared, mistrustful, and fearful of others, especially those who embodied traditionally masculine traits. This isn't an uncommon experience among gay men, many of whom learn to navigate the world by suppressing essential parts of themselves, often at the cost of fuller, more liberated lives.

Even after the boys from school were long gone, my fears and mistrust lingered. Which is why it might come as a surprise that, after becoming a therapist, I packed up and moved 1,748 miles to begin a career as an adolescent therapist in an all-boys residential facility. Unsurprisingly, these early injuries shaped how I engaged with the young men I worked with. No matter how deeply I wanted to help, I was often overwhelmed by anxiety, unsure of how to show up authentically in these relationships. Once again, I was doing my best to cope, but this time, avoidance was no longer an option. I had made an important commitment as a helper, and my clients needed me to pursue an alternative path.

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This paper explores how therapeutic relationships and narrative ways of working guided me to counterstory the relational wounds I carried from childhood. In supporting young men through their struggles, I found myself reengaging with subjugated aspects of my own self-narrative. I focus in particular on my work with Quentin, a young man referred to me for substance use counseling, and on the use of Internalized Other Interviewing (Epston, 1993; Tomm, 2010; Tomm, 2025)—a practice that transformed our therapeutic relationship by allowing each of us to confront and work through our own distinct anxieties and reservations.

Naming the feeling in the room: Awkwardness

One lasting impact of the bullying I faced as a child was a persistent and frustrating sense of unease in conversations with young men. It was a deeply embodied experience: my body would tense up; my words would stumble; my accented English seemed heavier to me and, I worried, harder to understand. I became overly self-conscious, so much so that it pulled me out of the moment and away from the therapeutic work I needed to be doing. I was, of course, frustrated with this development, but I was not sure how to address it. And since avoidance was no longer an option, I did the only thing I could: I grounded myself in the experience, accepting the burden. In doing so, I forced myself to remain present in spite of the distracting bodily and psychological distress that infiltrated my therapeutic conversations with my clients.

But one day, this experience, as uncomfortable as it was, became a surprisingly useful element in therapy. One client in particular, Quentin, was especially instrumental in helping me learn how to work with it. He shared that he, too, had been experiencing something similar in our sessions, though for different reasons. Chief among them was the emotional vulnerability talk therapy often demands, something many boys and men in Western cultures are taught to fear and avoid.

One of the qualities of narrative therapy I value most is its collaborative spirit. Narrative conversations are intentionally scaffolded through transparency and purposeful relationship-building practices, including, at times, self-disclosure (Freedman & Combs, 1996; Ribeiro et al., 2021; Schloemer, 2000). This proved to be quite effective in my work with Quentin. Letting him in on my discomfort proved to be a turning point, marking a shift in our therapeutic relationship. Realizing we were no longer alone in this experience, we named it,

"awkwardness," and began co-creating ways to work with it, around it, and through it. And with that, Quentin gave me permission to engage the *"awkwardness"* rather than retreat from it. The rest, as they say, is history.

Inheritance of silence: A moment remembered

Quentin (23) began consulting me for court-ordered therapy following ongoing struggles with substance use, or in his words, *"because I couldn't keep my ass out of jail."* At the time of our initial session, he had already been revoked from probation four times due to new drug-related charges and was staring down the real possibility of additional jail time.

Quentin looked every bit the all-American jock. He had blonde hair, blue eyes, and the kind of boyish yet sturdy build that made him seem like the golden kid from a suburban family with every opportunity laid before him. Sitting outside my office, he could have been mistaken for someone with an uncomplicated present and inevitably bright future. However, his eyes implied a more complex story—curiosity edged with confusion and unease, tempered by a flicker of determination and hope. That subtle openness, glimpsed behind the surface, quickly disrupted my own assumptions and drew me into seeing beyond the jock stereotype, revealing a young man searching for direction and possibility—a story yet to be written, one in which I was about to play a meaningful role.

Our first conversation was a memorable one. Quentin appeared forthcoming and communicative, but at the same time, he seemed intent on controlling my perception of him. I noticed how he would withdraw from the conversation whenever vulnerability was inevitable. But I also realized I was contending with my own form of vulnerability avoidance. Quentin was accompanied by his father, who, fortunately for both of us, did not shy away from emotional expression at first. Fearing he might lose his son to drugs, he spoke with a raw honesty that set the tone for what would eventually become possible in Quentin's and my work together.

During that first meeting, as his father wept, recounting the anguish of watching his son slip away, Quentin stared beyond me at the bare, colorless, and forgettable wall. I figured he withdrew because the moment made him feel exposed and uneasy—awkward. After some time, Quentin and I came to

understand that his avoidant responses echoed those of his father, who had long struggled to express vulnerability himself. During that first interview, a palpable awkwardness filled the room, which I instinctively perceived as a problem and tried to avoid. I suspected Quentin's father sensed the awkwardness too, as he quickly wiped his tears, straightened in his chair, and shifted the conversation to a new topic. Looking back on that moment, I am struck by the image of three men in the room, quietly wrestling with what they could not name or bear to express freely. However, this is what we are taught to do as men: suppress our feelings, toughen up, and move on (Schermer, 2013). In fact, the avoidance felt so familiar, so automatic, that I did not question it at the time. Instead, I saw the awkwardness as the problem to overcome.

When awkwardness becomes the doorway

Throughout our work together, Quentin and I not only challenged the notion of "toughness" that men often perform to affirm their masculinity but also came to see how it constrained the depth of our therapist-client relationship. Beneath that facade of strength, we uncovered awkwardness, anxiety, discomfort, and vulnerability. Rather than avoidance, this time we chose to welcome awkwardness into our conversations.

As our work deepened, we learned how Quentin's commitment to performing toughness had silenced parts of him that were hurting. We eventually came to understand that it was his unaddressed pain that underpinned many of the challenges he was facing, including his abuse of alcohol and drugs, as well as a growing pattern of anger. In Quentin's words, his life felt "abstract." He shared that whenever something bad happened, he never quite knew how to find his way out. He explained that he felt trapped in a way of living that left no room for hope or dreams about the future. In describing his experience, Quentin spoke of "just existing day to day, running in circles, wasting away," and wondering, "How much alcohol do I need to drink to feel better?"

The problems Quentin faced were conditioned, reinforced, and even justified by the unforgiving ideals of toughness upheld by our patriarchal society. These expectations, of course, had to be thoughtfully deconstructed before awkwardness could successfully guide us toward discoveries we had not anticipated. It was at that point that we gave ourselves permission to be

vulnerable, to feel awkward, to name emotions, to face pain, and to recognize its impact. The result was a counterstorying of long-held reservations that influenced his presence as a client, and mine as his therapist. Now, we were connected in more sincere ways. For me, that counterstory left a lasting impact on my work with other young men I would have once felt awkward around, lifting the barriers that had stood in the way of the work I was meant to do with them and for them.

Over time, I not only learned to sit with the awkwardness; I managed to lean into it and use it to my advantage. In my work with Quentin, this shift opened space for conversations about past traumas, grief, and deep-seated low self-esteem. It also gave me permission to experiment with less conventional therapeutic practices, for example, Internalized Other Interviewing (Burnham, 2000; Epston, 1993; Tomm, 2010, 2025). This curious practice, perhaps sometimes uncomfortable by nature or design, became a shared tool through which we embraced awkwardness rather than evading it. And it was through this very awkwardness that we found our way into conversations that exposed how pain had shaped Quentin's life and fueled unhelpful coping strategies.

The absent but beloved: An encounter with loss to remember the self

Internalized Other Questioning (IOQ) draws from the premise that we carry the relational presence of others within us. It invites clients to step into those internalized echoes by speaking from the imagined perspective of someone significant in their lives (Epston, 1993; Tomm, 2025). The therapist addresses the client as if speaking to that other person, creating the condition for the client to encounter themselves through the relational lens of the other's experience and understanding. In this sense, IOQ is not a performance or role-play but a reflexive inquiry into one's relationship with the internalized community that shapes identity and meaning (Tomm, 2025).

David Epston once shared with me that many narrative therapists shy away from Internalized Other practices (*D. Epston, personal communication, July 17, 2017*). This piqued my curiosity, and I wondered, *Is it because of how awkward these practices can feel in the room?* I'll admit, I too, had my own moments of hesitation and sometimes avoided such practices altogether. I often found myself preparing more carefully before sessions where I planned to use Internalized Other questions. And yet, I never stopped trying them because I genuinely

believed in their unique potential. Nonetheless, the more I practiced, the more I noticed the awkwardness. Eventually, I came to see that the awkwardness was not a problem to be solved; rather, it was an essential part of the process.

It turned out that Quentin had long been concealing many painful stories that had quietly shaped his experiences, strained his relationships, and cast uncertainty over his future. When we were both trying to avoid the awkwardness, we were unknowingly turning away from the very doorway to discovery. It was within these stories of pain that we found something close to magic. Many stories were told and retold, but it was the story of losing a best friend for which the awkwardness proved most valuable, guiding us gently toward what needed to be felt and said.

I learned that, while in high school, one of Quentin's closest friends had been diagnosed with terminal cancer. He shared how he set aside his own pain and grief to focus on creating meaningful memories during their final times together. Socialized to be tough, Quentin was no stranger to suppressing his feelings. He admitted that this period of his life made him even more adept at turning emotional concealment into a default coping mechanism. The day we talked about the loss of his friend, Quentin and I did not just invite awkwardness into the room; we pulled up a chair and gave it a central role in the conversation.

That very awkwardness, which we allowed to lead rather than linger, became a pivotal force in shaping what I now call *Time-Traveling Internalized Other questions*. The following transcript illustrates how awkwardness made space for me, as the therapist, to introduce these questions and engage Quentin in a process that allowed him to revisit and reimagine a meaningful relationship in his life:

Transcript excerpt

Mauricio: Quentin, I wonder if you would be willing to engage with me in a conversation about you and Steven in a pretty different way, perhaps might seem a little bit weird or strange… I have done this exercise with other people in therapy and have been told how useful these sorts of strange conversations can be…

Quentin: Yeah…?

Mauricio: Yeah. It might invite emotions, different emotions or ways of expressing these emotions… what do you think?

Quentin: Oh, about what?

Mauricio: Having this sort of different conversation with me?

Quentin: Oh yeah, for sure, yeah…

As I tried to initiate an Internalized Other conversation, I found myself feeling awkward and anxious about engaging Quentin in this way. Aware of how deeply the ideals of toughness shaped both his experience and my own, I began to worry that the entire exchange might fall flat. In hindsight, choosing not to retreat and continuing with this line of inquiry marked the moment I stopped resisting the awkwardness and began letting it guide me.

Mauricio: Ok. Let's see… maybe let's go back to the time right before he got diagnosed. Do you remember what you were up to or what you guys were doing at that time in your lives?

Quentin: Yeah… it was homecoming week, my parents were gone, pretty much just ran all over… all over town. It was the best time of my life.

Mauricio: Can you help me understand how this was the best time of your life?

Quentin: It was really fun. There were like a lot of activities, you know, with homecoming week, you know, a lot of stuff to do. It was junior year so… and yeah, we were on the football team and there's always this tradition at our school where the junior girls would play the senior girls in a flag football game… we called it the puff football game, and then the boys from the real football teams were the coaches. I remember that game was coming up and like the three of us were coaching, like these girls our age. I don't know, it's silly, but it was really fun.

I intended my question to be directed toward Steven, but I noticed Quentin was still responding in his own voice. I could have allowed that to stand as it would have been a safer path, but I sensed the importance of staying with the discomfort and pressing forward. So, I tried again, this time framing my next question with greater focus and directness.

Mauricio: It might be interesting for us to transport ourselves back to 2010, right before Steven passed. And I would like to learn a little bit more about Steven but from his point of view, from his perspective. Because you knew him pretty well, I wonder if I could interview you as if you were Steven. So, you would answer my questions as you think Steven would have. Would that be something you'd be willing to try?

Quentin: Ok, I can try it.

He seemed curious, but still half-guarded. I sensed that he was beginning to trust the therapeutic process, and so was willing to entertain my odd request. I felt it was important to acknowledge my gratitude for his willingness to step into this exploration with me.

Mauricio: Ok, we can try… thank you. Alright, let me think how we can start… what to ask first… so this would be back in 2010, ok?

Although the awkwardness still created pauses and hesitation, I was beginning to feel more ready to transform it into something meaningful. I glanced at an empty chair in the office and imagined awkwardness sitting there, quietly urging me on: "Go ahead…"

Quentin: Ok.

I looked Quentin in his eyes but addressed him as Steven.

Mauricio: So, Steven, tell me a little bit about your life these days?

Quentin as Steven: I go to school, I play sports, I hang out with a few friends on the weekends.

Mauricio: Steven, can you tell me a little bit about your relationship with Quentin?

Quentin as Steven: Ummm, close. Lots of joking around, always laughing. Lots of putting things aside and being in the moment.

Mauricio: Steven, how would you describe you guys putting things aside and being in the moment? Or what was that like?

Quentin as Steven: Ummm, start a conversation and an hour later you're still talking and laughing, but not about what you started talking about. It's hard to describe, but I have never had a connection like that with a lot of other human beings, if that makes sense.

Mauricio: It sure does. Steven, what do you think made it possible for you and Quentin to develop such a unique connection where you can laugh about anything together, and even as time passes, you are still laughing?

Quentin as Steven: Time and closeness.

In the following section, I incorporate a question originally suggested by David Epston in his review of the transcript for the apprenticeship program I was enrolled in (Epston et al., 2017). Quentin and I revisited the original conversation together, using some of David's questions to guide our reflection and deepen the dialogue.

Mauricio/David: Steven, it sounds to me that the time you spent with one another and the closeness you felt to one another was unparalleled. Was there a kind of magic between you? Do you know what I mean?

Quentin as Steven: Quentin and I knew we were good friends without talking about it. It was an understanding between us. Most people try too hard to be liked by their friends, but with Quentin, we were ourselves and liked each other without effort. That's just the way life went. Life put us next to each other… that was the magic.

Mauricio: Steven, is there anything about Quentin that you can think about that might have played a role in you wanting to develop and nourish this connection?

Quentin as Steven: His friendship.

Mauricio: Beautiful. If okay with you, now let's travel in time again… Steven, you have been diagnosed with cancer. Quentin is going through a lot of pain because of what you're going through. What do you think about this pain your friend is experiencing right now?

Quentin: I don't even know how to answer that. I don't know. I'm wondering if that ever even crossed his mind.

The question seemed to throw Quentin off, and for a moment, he stepped out of the role of Steven. Perhaps seeing his pain reflected through his friend's eyes was simply too much for him to tolerate in that moment—another glimpse into his ongoing struggle with vulnerability, which continued to surface from time to time. After all, the voice of *"Quentin-behind-the-mask"* was only beginning to emerge, while the performance of toughness remained a well-developed and rehearsed narrative. Still, I chose to stay with this line of inquiry, letting awkwardness carry me forward. It felt like an important opportunity to finally explore the pain of losing his best friend, a long-suppressed reality that was asking to be expressed and felt.

Mauricio: Steven, based on what Quentin has shared with me about his pain about your illness, and the closeness and unique connection you've described, I can only imagine the pain all the friends in this trio were experiencing… what do you know about this pain?

Quentin as Steven: We were all worried and scared.

Mauricio: Steven, can you teach me about your experience of these worries and fears?

Quentin as Steven: All the doctors that I've been through have told me there's no chance. I mean it's stage four. I mean, everybody tells me it's just a matter of time before I die.

Mauricio: Steven, and what would be your guess about how Quentin experienced these worries and fears?

Quentin as Steven: He put them on hold temporarily.

Mauricio: How did he put them on hold?

Quentin as Steven: Umm, in a way not giving up on life, I guess.

Mauricio: Steven, do you have any knowledge about how exactly it is that Quentin was able to accomplish putting his worries and fears on hold?

Quentin as Steven: He focused on encouraging me. He really encouraged me to keep playing basketball throughout my chemotherapy. Umm, we still went bowling and did all the stuff we used to do.

Mauricio: Steven, what do you think as to what might have been so important to Quentin that he continued to encourage you to keep playing basketball throughout your chemotherapy despite his worries and the fears, and the pain?

Quentin as Steven: Because he admires and respects me, I guess.

Mauricio: Steven, do you admire and respect him as well?

Quentin as Steven: Yes.

Mauricio: Steven, can you share with me what it is you admire and respect about Quentin?

Quentin as Steven: That he's been there for me and keeps encouraging me no matter what.

Here, Quentin begins to recognize himself beneath the masks he has grown used to wearing. Through his friend's eyes, he starts to recognize the kind of friend he was and comes to understand these descriptions as reflections of choices he made, grounded in his values and what he stands for in life. I made a note to revisit this part of his narrative in future conversations, but at that moment, I chose to trust my instincts and continue exploring through Internalized Other questions and time-travel dialogue.

Mauricio: I see. Thank you. Now if it's okay, let's travel in time again. Time has passed, maybe six years. Steven, what do you think about what has been going on in Quentin's life?

Quentin as Steven: Ummm, I feel sad actually. I feel sad for what's happened.

Mauricio: Steven, what specifically makes you feel sad about what's happened in Quentin's life?

Quentin as Steven: He had a lot of other ideas about where his life was gonna go.

Mauricio: Steven, what sort of ideas did Quentin have about where his life was going that you might wish for him to seek out again and revive in his everyday life?

Quentin as Steven: Definitely not what's happened. Playing football somewhere. Be a college graduate.

Mauricio: Steven, did you ever imagine what's actually been going on in Quentin's

life instead of where he knew it was gonna go?

Quentin as Steven: Ummm, no.

Mauricio: No? Steven, how come? What do you know about Quentin that does not fit with where his life has been going?

Quentin as Steven: He's reserved, not that outgoing.

Mauricio: Steven, how do you think that being reserved and not outgoing would have kept Quentin from all the troubles he has been going through in his life since your departure?

Quentin as Steven: Just like… I think he would have been more in control, I guess.

Mauricio: Steven, Quentin would have been more in control of what?

Quentin as Steven: Himself.

Mauricio: Being in control of himself. Steven, what do you think he would have been able to accomplish because of being in control of himself?

Quentin as Steven: Anything.

Mauricio: Did you say anything, Steven?

Quentin as Steven: Those dreams of being like a student athlete. I think he could have accomplished his dream of going into the Navy.

Mauricio: As you may know Steven, those things have not happened. Instead, Quentin has had some problems with substance use and some struggles with the law. He also has been struggling with anxiety and has been thinking that he's not good enough. He has been thinking about all these problems and his lost dreams. Steven, if you had the chance to say anything you wished to say to Quentin, what would you say to him?

Quentin as Steven: Get big. I don't know, man up and be tough.

Mauricio: Steven, does Quentin know what you mean by that?

Quentin as Steven: He would know exactly what I meant.

At this point in the conversation, it became clear that Quentin's model of toughness had been reinforced within the culture of athletes and "jocks," where emotional restraint and stoicism were expected. Further exploration of expectations like "getting big" and "manning up," for example, may reveal important insights into how they have influenced him. Just as important would be helping Quentin see that emotional expression in therapy—allowing himself to feel and be seen—could represent a new kind of strength or toughness. Steven's voice and perspective might help anchor this emerging counterstory.

Awkwardness creating possibilities

When asked to reflect on the Internalized Other conversation above, Quentin described it as *"wonderful and horrible,"* a phrase that I thought summed it up well. The awkwardness coexisted with the prospect of transformation. While initially uncomfortable and obtrusive, the awkwardness soon enough became a helper, guiding and carrying both of us as the conversation unfolded. As we leaned into that space, I could feel layers of shame, anxiety, and pain beginning to peel away. This was not a process that belonged to Quentin alone; we experienced it together.

There was something extraordinary in watching Quentin recognize himself in new ways, seeing himself and what he stood for in life reflected back through the imagined voice of a beloved friend no longer living. That moment carried a kind of quiet magic. The Internalized Other conversation presented above was profoundly transformative. Yet transformation, I realized, is never contained within a single exchange; it requires ongoing practice and repeated engagement. The awkwardness, as I experienced it, would continue to make this possible. It opened space not only for more Internalized Other conversations, but also for many other practices that would shape our therapeutic relationship and the trajectory of Quentin's becoming.

Quentin was able to continue setting aside some of the masks he had long hidden behind and to allow different aspects of his humanity to come forward—to be

seen, witnessed, and valued. I had the privilege of witnessing those different versions of Quentin emerge in our work together. One such example follows below.

Reclaimed strength: Unmasking the poetic self

Once awkwardness was welcomed as an active participant in our work, Quentin began to make full use of this unexpected ally. Our work in therapy expanded beyond Internalized Other interviewing to include metaphor creation, letter writing, and poetry. What follows is Quentin's own articulation of anxiety—an expression shaped through the very awkwardness he once avoided but had come to embrace in our work together.

> *Anxiety is like the ocean. There is a natural energy that is strong enough to move me, it builds somewhere deep and comes in waves, leaving precious moments of tranquility in between. Although some are stronger than others, the waves are relentless.*
>
> *As a child my first experience in the ocean was overwhelming. A wave was strong enough to knock me over as I underestimated its power. I went under and had a strange feeling of being totally out of control. I did my best to right myself, finding the surface and taking a gasp of air. I discovered, however, the ocean did not wait for me to collect myself. It rudely slapped me again, knocking me back under. I quickly learned that the surf is unforgiving and unkind to inexperienced swimmers. I retreated to shore to ponder the natural force I had just come face-to-face with. I was intimidated.*
>
> *Anxiety is like the ocean. It comes in and then washes away. It is not kind to newcomers. It is unforgiving to those who don't know how to co-exist with such a natural force. Many avoid it at all costs, the risk too much to bear. But there are a few thrill seekers among us who throw caution to the wind, and brave this formidable force. They can be found hanging 10 toes off the front of their surfboard, or down in the depths among the sharks. Either way, there are more than a few enlightened individuals who know that a new world awaits, if we learn to ride the wave.*

My first time standing up on a surfboard was some kind of accomplishment. No longer did I feel at the mercy of the mighty ocean. I felt a surge of energy, a thrill. It wasn't the exact same wave that had beaten me down as a child, but one just like it. It was not as if I had beaten a former foe, but more as if I found a new friend. A person whose friendship I had been resisting, maybe because I had not yet learned how to play along. The same thing that had me frightened for my life had become something fun and exhilarating. Not because the ocean was now different, but my relationship with it was.

Anxiety is like the ocean. It is an energy that comes in waves. It can drown you and leave you tumbling. But if you learn how to paddle into it, and stand out in front of it, you can ride it and unleash feelings of joy within you.

I am no longer scared of my anxiety the way I used to be. It used to wash over me, leaving me speechless and out of breathe. Now I recognize its waves and I've begun to learn how to ride. Some waves are meeting new people, some waves are opening up and not liking what I will find, some waves are revisiting the death of a dear friend. As a child these things would beat me down and keep me under the surface. But, as a man I'm learning how to go with it. Standing on a surfboard is much like standing in the face of your anxiety. It isn't a sure thing. You're going to fall quite a bit, and once you're up, there's no guarantee you stay there. But with time and a lot of discomfort, you become more acquainted with the waves.

I am now at a point where I have ridden some of these waves to completion. I have been faced with a lot of anxieties and worries, but I have now taken notice of the energy it brings into my being. I do not run from it like I used to , but instead I find a way to ride with it. I have found that I often find feelings along the way that are amazing. I try to stay out in front of that energy, and when you do it right you can find feelings you never would have found, had you stayed on the shore.

Quentin described writing this thoughtful reflection on his experience of anxiety, which he held onto for several weeks before finally deciding to share it in therapy.

Reflecting on his hesitation to share his writings about anxiety, Quentin explained that his struggle with awkwardness had kept him from embracing an important part of himself: *"It's a part of me that I'm not really in touch with and that I didn't identify with until recently. It is a part of me that uses metaphors and is more poetic. I guess it is a poetic intelligence if I try, but I didn't care in the past."* I wondered if this reluctance was tied to Quentin's tendency to perform toughness in the world. In earlier conversations, we had used the metaphor of *"wearing a mask"* to describe this way of showing up. He described, *"The mask… the football player me was celebrated by all people. It was something that set me apart and made me feel that I was the best at something."* As we grew more curious about the *Quentin-behind-the-mask*, we began to catch glimpses of him, thanks in part to the awkwardness we had learned to welcome into our conversations. As he gave voice to the person behind the mask, he reflected, *"I have a soft side and a poetic side, a side of me that was really in pain and that I was running away from. This is a side of me that second-guesses and that limits the steps I can take in my life. It is indeed a better version of me. It is this side of me that got me to bring in my writings on my experience of anxiety. The old version might not have brought it."*

I rejoiced at hearing Quentin refer to an *"old version"* of himself, confirming my suspicion that something had shifted. He went on to describe how he had internalized patriarchal beliefs like, *"guys aren't really supposed to do that kinda thing… showing a softer side, having a poetic and more vulnerable side."* This gave rise to important conversations where rigid ideas of masculinity were further deconstructed, allowing us to explore how they had influenced Quentin's identity, limited his emotional expression, and fueled ongoing pain and self-defeating choices.

Counterstories born in relationship

In this paper, I have reflected on how my personal childhood wounds once influenced my work as a therapist with young male clients. I explored notions of masculinity and the demand for toughness, and how such dynamics can complicate therapeutic work between male therapists and male clients. For me,

they often bred reluctance toward emotional expression and vulnerability, which gave rise to an experience of awkwardness and, in turn, ways of coping that undermined the core goals of therapy. While avoiding awkwardness and discomfort once seemed like the only option, grounded in my commitment to helping, I learned that I could choose to face these experiences differently. In embracing awkwardness, I came to see therapeutic relationships as potential sites of repair for the client and therapist alike. I learned that counterstories can arise in the therapist–client relationship, allowing long-standing scars to be experienced in renewed ways. To illustrate this, I focused on Quentin's story and our unconventional work together. I described the central role that awkwardness played in shaping my use of Internalized Other practices. That awkwardness, instead of standing in our way, became the very ground of a shared transformation—a counterstory born from the therapeutic relationship itself and our courage to follow where discomfort pointed.

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My Fascination with Inquiry

Onix Morales Macías

This reflection is an attempt to trace where my devotion to questions comes from—not as technique, but as a way of being with language, memory, and others. Written in the wake of my apprenticeship in Contemporary Narrative Therapy, it follows how questions began to reveal themselves to me as living territories, ethical acts, and companions that shape what becomes possible in our lives and relationships. What follows is not an argument, but an offering—an invitation to linger with inquiry as a form of care.

My dad used to leave little notes inside books.
He underlined sentences as if there were a secret heartbeat inside them.
Sometimes he read them aloud to my brother and me.
I was six or seven years old; I didn't fully understand the words,
but I could feel how he chewed on a paragraph for hours,
or for days, opening cracks, air vents,
as if he were searching for another world behind every sentence.

When I began reading literature, I imitated him without even noticing.
I wanted to magnify that gesture of his:
I would write the sentences that moved me on a wall,
as if the house itself needed to read them with me,
or maybe the others who came into the house could read them as small gifts.

I hid in the bathroom to reread them,
trying to decipher what was behind them,
what dent each word left behind over what I was living.

Years later, when I encountered narrative practices,
I understood why I did that: stories are doors;
behind every door lives more stories,

that my self is an archipelago of selves, an ancestral onion, a tree full of grafts.
Where can a meaning transport you?
Are words powerful enough to play with our “realities”?

Wittgenstein wrote:
“The limits of my language mean the limits of my world.”

When I learned narrative maps, I became confused.
Was I supposed to memorize questions?
Conjugate them, recite them like formulas?
“Just practice,” they told me.
“Practice until they pass through you.”

Years later, I understood that they weren’t narrow questions in themselves, but territories from which narrative practices were sustained.

In 2023, while studying with David Epston, Kay Ingamels, and Tom Carlson, new paradigms entered; the transcripts of clients were analyzed with surgical precision: each question was intervened until its edges were revealed. I asked myself:
What does a question want?
What does it do?
Where does it lead?
What does it limit?
What does it make possible?
What ethics does it protect?

Since then, questions pursue me without compassion, not gently, but like restless animals. Every question can open, half-open, or close worlds. Choosing the weave of questions with care can carry protagonists, antagonists, collective characters, round characters, and archetypal ones toward their new—or re-chosen—plots.

Being in the fresh-salt waters of questions has suspended me in so many possible narratives we might create…
(sigh)

> There are questions that arrive like rivers, others like tides. Some carry mineral memory, others a newly born humidity.
>
> Some questions assemble themselves; they require heart and a bit of oil to pump the blood vessels of our “in-betweens.”
>
> Other questions have the answer right at the tip of the nose; others must be chased with the tips of our toes while we wait for that SOMETHING.
>
> Some questions not only get spoken, but they take a leash and accompany the tremors of everyday life.
>
> Some questions do not seek an immediate answer; they open narratives, they pierce through meanings, as if each one contained its own internal worlds, its climates, its vegetations.
>
> Others slide without tearing.
>
> Some are born only as a murmur, and we must learn to listen to them with our knees, with our back, with the thirsty parts of the body.
>
> There are questions without destination, seeking signals everywhere.
>
> Some questions stay so close to the trachea that a single breath of attention is enough for them to blend with our breathing.
>
> There are questions that chase you like restless Pac-Men just to see where you’ll take them.
>
> Others return us to ourselves—more open, more multiple, more in motion.
>
> Some questions lodge in our rooms for indefinite times until past,

present, or future experiences catch up to them so they can be lived.

Some questions need enough life to be felt before they can be spoken.

And then there are others, my favorites: the ones that flee from any fixed, given answer, those that only want to live among the branches of our contradictions.

There are also others that are favorites to me, those containing a maternal-ontological breath, an originary pulse that was never entirely erased and still seeks to open space between careful skins.

There are nomadic questions that do not cling, that move while leaving traces in every encounter.

Some questions stay so close that you could brush against them with your shoulder; they are like small animals seeking warmth.

There are others that can only be reached if we follow their trail with the faintest scent-movement, almost like groping in the dark; something shifts there: they deterritorialized us, pull us from the fixed memories we thought we were, or perhaps reterritorialized us in a new place, an unexpected ground where something roots again.

There are those other questions that tug at my Schizo-Collective gaze; they flee from deductive answers, they make invitations to "between-worlds," to zones where no identity is closed or guaranteed, because everything is in coexistence, in translation, in mestizaje of meanings.

Questions are perhaps imaginative acts, acts of resistance, defenses against our pains, our structural violences, the obligatory orders, the linearities that demand obedience. Questions are not a trajectory; they are territories and deterritories in movement, choices and influences of freedom, forms of life.

Questions from our Souths are the ones that move through our markets, our

marches, the hands that pass out warm “tamales” on the corner and sustain the day; they are also the ones that slip between the fruit stands, the ones that smell of ripe mango and wet earth, the ones that know that thought is born the way bread is: kneaded with time, with labor, and community.

These are the questions that unashame our accents and our mestizajes.

Questions are…
the minerals that pulse in our subsoils, silently guarding the ancestral memories of what we were before we had a name—because questions care.

Mi Fascinación con la Pregunta

Onix Morales Macías

Esta reflexión es un intento por rastrear de dónde proviene mi fascinación por las preguntas—no como técnica, sino como una forma de habitar el lenguaje, la memoria y el encuentro con otres. Escrita a partir de mi experiencia en el Aprendizaje en Prácticas Narrativas Contemporáneas, sigue el modo en que las preguntas comenzaron a revelarse para mí como territorios vivos, actos éticos y compañeras que moldean lo que llega a ser posible en nuestras vidas y relaciones. Lo que sigue no es un argumento, sino una ofrenda: una invitación a demorarse en la pregunta como una forma de cuidado.

Mi papá dejaba notitas dentro de los libros.
Subrayaba frases como si en ellas hubiera un latido secreto.
A veces nos las leía a mi hermano y a mí.
Yo tenía seis-siete años, no entendía bien las palabras,
pero podía sentir cómo él masticaba un párrafo por horas,
o por días, abriéndole grietas, respiraderos,
como si buscara otro mundo detrás de cada frase.

Cuando empecé a leer literatura, sin darme cuenta, lo imité.
Quise engrandecer ese gesto suyo:
escribía en una pared las frases que me conmovían,
como si la casa misma necesitara leerlas conmigo,
o tal vez los otros que llegaban a la casa podrían leerlas como pequeños obsequios.

Me refugiaba en el baño a releerlas,
buscando descifrar qué había detrás,
qué hendidura dejaba cada palabra en lo que estaba viviendo.

Años después, cuando conocí las prácticas narrativas,
entendí por qué hacía eso: las historias son puertas,
detrás de cada puerta viven otras historias,
que mi yo es un archipiélago de yoes, una cebolla ancestral, un árbol lleno de injertos.

¿A dónde te puede transportar un significado?
¿Las palabras son tan poderosas como para juguetear con nuestras “realidades”?

Wittgenstein escribió:
“Los límites de mi lenguaje significan los límites de mi mundo.”

Cuando aprendí los mapas narrativos, entré en ciertas confusiones.
¿Había que memorizar preguntas?
¿Conjugarlas, recitarlas como fórmulas?
“Solo práctica”, me decían.
“Practica hasta que te atraviesen.”

Años después comprendí que no eran preguntas estrechas en sí,
sino territorios desde donde se sostuvieron las prácticas narrativas.

En 2023 al estudiar con David Epston, Tom Carlson y Kay Ingamells entraron nuevos paradigmas, las transcripciones de consultantes se llenaron de disparos quirúrgicos: cada pregunta era intervenida hasta revelar sus bordes, me preguntaba:
¿Qué quiere una pregunta?
¿Qué hace?
¿A dónde lleva?
¿Qué limita?
¿Qué potencia?
¿Qué éticas cuida?

Desde entonces, las preguntas me persiguen sin compasión, no con suavidad, sino como animales inquietos, cada pregunta puede abrir, entre abrir, o cerrar mundos, elegir cuidadosamente la trama de las preguntas puede llevar a los protagonistas a los antagonistas a los personajes colectivos, a los personajes redondos y los personajes arquétipicos a desarrollar sus nuevas o re-elegidas tramas.

Estar en el agua dulce-salada de las preguntas me ha suspendido en tantas narraciones posibles que podamos crear…
(suspiro)

> Hay preguntas que llegan como ríos, otras como mareas. Algunas traen memoria mineral, otras una humedad recién nacida.
>
> Algunas preguntas se arman a sí mismas, requieren corazón y un poco de aceite para bombear los vasos sanguíneos de nuestros “entres”.
>
> Otras preguntas tienen la respuesta en la punta de la nariz, otras hay que perseguirlas con la punta de los dedos de nuestros pies y esperar ese ALGO.
>
> Hay preguntas que no sólo se enuncian, toman una correa y acompañan los temblores del día a día.
>
> Hay preguntas que no buscan una respuesta inmediata, abren narraciones, atraviesan significados, como si cada una contuviera sus mundos internos, sus climas, sus vegetaciones.
>
> Otras se deslizan sin desgarrar.
>
> Otras nacen apenas como un murmullo, donde hay que aprender a escucharlas con las rodillas, con la espalda, con la parte del cuerpo sedienta.
>
> Hay preguntas sin destino, buscando señal por doquier.
>
> Hay preguntas que se quedan tan cerca de la traquea que basta un

soplido de atención para que se confundan con nuestra respiración.

Hay preguntas que te persiguen como Pac-Man(s) inquietas para ver a dónde las llevarás.

Hay otras que nos devuelven a nosotros mismos más abiertos, más múltiples, más en movimiento.

Hay preguntas que se hospedan en nuestras habitaciones por tiempos indefinidos hasta que las vivencias pasadas, presentes o futuras las alcanzan para vivirlas.

Hay preguntas que necesitan suficiente vida para ser sentidas antes de decirse.

Están esas otras, mis favoritas: las que huyen de cualquier respuesta fija, dada,

esas que solo quieren vivir entre las ramas de nuestras contradicciones.

Hay otras también favoritas para mí, esas que contienen un aliento materno-ontológico, un pulso originario que no fue borrado del todo y que aún busca abrir espacio entre pieles cuidadosas.

Hay preguntas nómadas que no se aferran, que se desplazan guardando huellas en cada encuentro.

Hay preguntas que se quedan tan cerquitas que uno podría rozarlas con el hombro; son como animales pequeños que buscan calor.

Hay otras que sólo se dejan alcanzar si les seguimos el rastro con el mínimo olfato-movimiento, casi como un tanteo, ahí algo se desacomoda: nos desterritorializan, nos arrancan de memoras fijas que creíamos ser o quizá nos reterritorializan en un nuevo lugar, un suelo inesperado donde algo vuelve a hacerse raíz.

Están estas otras que jalan mi mirada Esquizocolectiva huyen de respuestas deductivas, hacen invitaciones “entre-mundos”, a las

> zonas donde ninguna identidad está cerrada ni garantizada, porque todo está en convivencia, en traducción, en mestizaje de sentidos.

Las preguntas quizá como actos imaginativos, actos de resistencia, defensas a nuestros dolores, a nuestras violencias estructurales, a los órdenes obligatorios, a las linealidades que exigen las obediencias.

Las preguntas no son un trayecto, son territorios y desterritorios en movimiento, elección e influencia de libertades, formas de vida.

Las preguntas desde nuestros Sures son las que se mueven en nuestros mercados, en nuestras marchas, las manos que reparten tamales calientes en la esquina y sostienen el día, son también las que se deslizan entre los puestos de fruta, las que huelen a mango maduro y tierra mojada, las que saben que el pensamiento nace igual que el pan: amasado con tiempo, con trabajo, y comunidad.

Estas preguntas que desavergüenzan los acentos y nuestros mestizajes.

Las preguntas son…
los minerales que palpitan en nuestros subsuelos, guardando en silencio las memorias ancestrales de lo que fuimos antes de tener nombre, porque las preguntas cuidan.