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Journal of Contemporary Narrative Therapy

Editors: Tom Stone Carlson, Sanni Paljakka, marcela polanco, and David Epston

Editor's Note

Welcome to this special release on the topic of narrative supervision! We are keenly and curiously aware that the topic of supervision and training has not received much attention in writings of narrative therapy. We see this release of JCNT as a bit of a humble beginning and hope to see many more papers that seek to expand upon what it means to engage in supervision and training in ways that are consistent with the spirit, ethics, and practices of narrative therapy.

The idea of this special release came, as so many good things do, serendipitously. My colleague, and co-editor of JCNT, Tom Carlson, told me of an experiment, of sorts, that he had been engaging in for the past year with a doctoral student, Danna Carter, who was working on completing her requirements to become a supervisor. Danna had approached Tom at a narrative therapy conference in San Diego in 2018 and told him about the influence that his article (co-authored by Martin Erickson) on narrative supervision and training had on her life and work. Since the article, "Honoring and privileging new therapy knowledge and experience" was written almost 20 years ago, together they hatched a plan to try out this story-based approach to supervision in her current context and with a student who did not identify as a narrative therapist. In order to help readers get up to speed with the ideas that were informing Danna and Tom as they went about this experiment, we are republishing the paper written by Tom Carlson and Marty Erickson in this release. Their paper will be followed by a paper by Danna Carter and Tom Carlson called, "Narrative Supervision as Counterstory Development" that provides an account of their learning together as well as the reported outcomes and effects of this experience on the work and life of the student involved. I hope that you find the outcomes of this serendipitous experiment as interesting as I did.

The third paper in this release is written by Bevan Kovits. This unique paper entitled, "Walking hope-lit paths to new doorways: A letter about my experience as an apprentice in narrative therapy," provides an account of her experience in a year-long apprenticeship in narrative therapy.

The fourth paper in this release, "This Girl is On Fire: A Feminist Narrative Supervision Story," is a supervision story written by Sanni Paljakka to her team at the Calgary Narrative Collective after one of their weekly supervision team meetings. The paper shows the on the ground ethics and theorizing in a committed feminist narrative agency.





Honoring and Privileging Therapists' Personal Experience and Knowledges: Ideas for a Narrative Therapy Approach to the Training and Supervision of New Therapists

Tom Stone Carlson, Ph.D. and Martin J. Erickson, Ph.D.

**Note: This paper was previously published in the Journal of Systemic Therapies in 2002.

ABSTRACT

This article discusses an approach for the training and supervision of new therapists built around social constructionist and poststructuralist ideas from a narrative therapy perspective. We briefly discuss some of the pitfalls of current training/supervision in marriage and family therapy (MFT) that are deficit based and/or that disproportionately grant privilege to expert knowledge. We articulate this emerging training approach which utilizes the rite of passage metaphor, centers relationalism, and incorporates the honoring and privileging of new therapists' lived experience, knowledges, skills, talents, ideas, morals, personal ethics, values, and beliefs. Concrete practices of experience privileging, re-membling, and creating communities of concern are detailed and illustrative examples from our supervision work are given.

In the field of marriage and family therapy (MFT), we are continuing to experience the proliferation of postmodernist, social constructionist, and poststructuralist informed ideas, theories, and practices (Doherty, 1991; Mills & Sprenkle, 1995). These ideas have been addressed and incorporated across most all sectors of the discipline of MFT from theory to research, to practice. While postmodernism and social constructionism have had profound effects on the field of MFT, in regard to new therapist supervision and training the field of MFT has remained aligned with modernist philosophy and practices.

In general, there has not been a great deal written in MFT that addresses the supervision and training of new therapists (Todd & Storm, 1997). In regard to postmodernism and social constructionism, there have been articles and books addressing these ideas for the training and supervision of experienced therapists (Biever & Gardner, 1995; Bobele, Gardner, & Biever, 1997; Prest, Darden, & Keller, 1990; Thomas, 1994; Wetchler, 1990; White, 1989/90; White, 1997; Young, Perlesz, Patterson, O'Hanlon, et al., 1989; Zimmerman & Dickerson, 1996), but only one article addressing the training and supervision of new therapists (Edwards & Keller, 1995). The lack of literature addressing social constructionist and/or postmodernist approaches to the training/supervision of new therapists gives the message that although these ideas are very influential in the field, they do not apply to new therapists, or that new therapists are not capable of being trained in these ideas. Edwards and Keller see the hierarchical emphasis in most training/supervision as undermining "the ability and creativity of supervisees" and as limiting "the opportunity for more open, collaborative conversation" (p. 142). They propose ideas for supervision that grant privilege new therapists' perspectives, provide a context for the elaboration of constructed narratives, and the creative ornamentation of possibilities (Edwards & Keller, 1995). It is their position that postmodern and social constructionist ideas offer a wealth of possibilities for the training and supervision of new therapists. This paper joins with the encouragement of Edwards & Keller (1990) to foster the creativity of new therapists from day one (p. 151). We also draw on ideas we have





previously published concerning the need for therapists to re-capture their personal knowledges, skills, beliefs, and values in their work (Carlson & Erickson, 1999); and we expand these ideas specifically toward the training/supervision of new therapists.

Our work and personal lives have been influenced positively by the incorporation of narrative therapy ideas (White, 1993; 1995; 1997; White & Epston, 1990). Most narrative therapy literature concerning the training/supervision of therapists has been directed toward seasoned therapists; often offering an antidote to the classical traditions of training/supervision therapists have previously received (White, 1989/90; White, 1997; Zimmerman & Dickerson, 1996). It is our belief that narrative ideas offer some wonderful potentials for the training/supervision of new therapists as well. Narrative ideas encourage us to recognize and honor the more local and personal knowledges, skills, ideas, beliefs, and so forth that are so often disqualified and marginalized by the privileging of professional accounts of our work, relationships, and lives as therapists.

One area particularly important in the training/supervision of new therapists is the personal nature of their hopes, motivations, and desires to be therapists, and the personal nature of their self knowledges, skills, and lived experience they bring to the venture. We believe ideas, teachings, theories, practices will be much more meaningful and available to new therapists when they are personally embodied and incorporated into the stories of their lives. All knowledges and practices we use in the training and supervision of new therapists will have some sort of constitutive effect on how these therapists construct the stories of their experience (Foucault, 1980; White, 1997). We believe that all traditions of training/supervision in MFT have real moral effects (White, 1995) on the personal stories new therapists construct around these experiences. This places on us as trainers and supervisors a certain accountability for the relationships we foster with new therapists as persons, with very person implications. We believe training/supervision from this perspective offers a unique and valuable relational experience for both trainers and new therapists. It has been our experience that there are ideas and practices in current use in training/supervision that serve to keep both trainers and new therapists from experience this felt connection and accountability.

Potentially De-Personalizing Pitfalls of Training/Supervision

There appear to be two distinct approaches or practices to the training and supervision of new therapists in the modernist tradition, 1) what we will call the “self-of-the-therapist discourse,” and 2) what we will call the “professionalism discourse.” These two approaches represent the underlying predominant traditions of thought that training/supervision have been typically based on. It is important to note that probably no training or supervision would be 100% representative of either of these approaches as outlined here. Most training and supervision employ a mix of both, although one discourse is usually emphasized over the other. Additionally, it seems fair to assert that almost all training/supervision of new therapists in MFT partake of one or both of these approaches to a certain extent. In other words, there seems to be very little offered in new therapist training/supervision in MFT that would be outside these two dominant approaches.

Some self-of-the-therapist traditions in training/supervision tend to be deficit or pathology based by centering training around encouraging new therapists to “deal with” their personal issues. From this perspective personal issues (such as developmental inadequacies, family of origin deficits and structural





problems, unresolves psychic conflicts, object relations introjects, lack of differentiation, and so on) must be discovered or acknowledged and then worked through and resolves. This then allows therapists to be non-reactive, neutral, and able to effectively work with others in a manner that will avoid their personal issues muddying the waters of the therapeutic relationship and process.

Other training/supervision ideas are rooted in the business and professional metaphors of what Michael White (1997) calls “the culture of the professional disciplines.” White describes this and its effects and what counts as knowledge as:

. . . a culture that produces particular, highly specialised, and formal knowledges that constitute systems for the analysis of persons’ expressions of life, which are constructed in terms of behaviours. It is claimed that these systems of analysis provide, for professional workers, privileged access to the objective truth of these expressions. In this culture, those ways of knowing the world that relate to the more popular and more local discourses of ‘lay’ communities are marginalised – often categorised as quaint, folk and naive – and frequently disqualified. These other ways of knowing, those that have been generated in the immediate contexts and intimate communities of a person’s daily life, mostly don’t count in terms of what might be taken for legitimate knowledge in the culture of the professional disciplines. (p. 11)

Such a focus in training/supervision can encourage and enforce a businesslike and/or technocratic approach modeled to trainers and expected of the new therapists. Most often new therapists are educated and instructed in the expert knowledges and practices of the various theories in MFT which forms the basis of the training process. New therapists are encouraged to situation their understanding, knowledges, skills, and thinking within these expert knowledge traditions. Expert knowledges are privileged over personal knowledges, beliefs, values, morals, experiences and skills as new therapists are asked to adopt the expert knowledges as their underlying frame of intelligibility in their work. We note there are perhaps many good outcomes of these traditional approaches to training/supervision which supervisors and trainers might want to be aware of and utilize. It is the potential hegemonic exclusion and disqualification of alternatives to these traditions that we believe to be detrimental for new therapists.

These ideas can encourage a disassociation of the personal from the professional constitute effective “remembering to forget” practices (Epston & White, 1992). In other words, practices which serve to continually remind us to forget the very personal nature (the personal knowledges, skills, beliefs, values, memberships) of our work and lives as therapists and as persons. We are concerned that the emphasis and imposition of these ideas can invite a lot of unhealthy self-doubt among new therapists, along with feelings of incompetence and despair. We are concerned that these pitfalls can encourage a “never quite measuring up” discourse in training/supervision that is hard to escape.

In this culture of psychotherapy, therapists find it ever so difficult to escape the sense that they have failed to know what needs to be known. The outcome is that the lives and the work of therapists become ‘thinly described’, and this very significantly narrows available options for action in life generally, and in ‘work’ more specifically. (White, 1997, p. 17)

PRIVILEGING THE PERSON IN THE THERAPIST

While there are many different aspects of narrative therapy, the rite of passage metaphor can play an important role in how narrative therapists see the process of therapy. Epston and White explain,





Our interpretation of this metaphor structures a therapy that encourages persons to negotiate the passage from novice to veteran, from client to consultant. Rather than instituting a dependency upon “expert knowledges”, this therapy enables persons to arrive at a point where they can take recourse to certain alternative or “special” knowledges that they have resurrected or generated (Epston & White, 1992, p. 13).

We believe that this metaphor can also be adopted as a metaphor for training/supervision. Most supervisors would probably agree that the goal of supervision would be to help persons make the transition from novice to expert, however we believe the right of passage metaphor suggests that new already have alternative or special knowledges and skills about life, and that by carefully consulting them, this knowledge can be brought forth. We propose that trainers encourage a decentering of the dominant professional accounts of knowledge and become familiar with the very personal knowledges that come from the rich history of new therapists’ lived experiences (Carlson & Erickson, 1999).

When new therapists express their motivations to be therapists as genuine desires to help others, they are often encouraged to explain the “real” desire according to some expert knowledge. Unfortunately, sometimes sincere desires to care for and help others are often replaced by explanations of some desire to make up for some pathology or dysfunction in trainees’ families of origin. For example, I (TC) was encouraged, in one instance of my training, to interpret the “real reason” for my desire to be a therapist as the result of the peacemaker role I played in my family of origin, as if my becoming a therapist was a way of continuing to save my family. Thus my desire of being a peacemaker was a result of pathology rather than seen as a genuine attribute that could become a strength to my work as a therapist. This theorized account of my motivation to be a therapist was given primacy over my personal desires to bring peace to the lives of persons who are suffering. I have often wondered what would have happened if this personal sincere desire was given primacy over expert knowledge and explored in ways that helped me connect in a real way to the experiences of my life where I was involved in bringing peace to the lives of others and/or an exploration of how these desires came into my life.

We support an approach to training/supervision which seeks to bring forth the personal knowledge, skills, hopes and so on which are central to the new therapist’s desires to be a therapist. This approach is centered in a belief that, as persons, trainees have valuable lived experiences, knowledge, skills, and desires that have invited them into this helping field. It is also centered in the belief that trainees have sincere and genuine desires to help and care for others, that they probably have special skills in caring for others, and that these skills and desires should be explored, brought forth, and made more primary to their work as therapists. We also believe that for new therapists to develop confidence in their abilities, they need to experience personal agency in regard to their work, to experience themselves as having an active role in the shaping of their lives as therapists, thus experiencing what Harre (1983) refers to as “self knowledge.”

Embracing the Relationalism of Noddings and Buber

We have also been personally influenced by the ideas of Nell Noddings and Martin Buber, and have found their ideas helpful in allowing us to see alternatives for training/supervision. The focus of both of these persons’ ideas is on the ethics of relationships between persons. Nell Noddings (1984) was an educator who proposed that ethics in relationships should be based on an ethic of care. She describes





the relationship between “the one caring” and “the cared for.” When acting out of an ethic of care, Noddings suggests that the one caring acts out of a commitment to care for the cared for on a personal level. It involves the one caring receiving the cared for unto herself, engrossing herself in the life of the cared for and having an experience of feeling *with* the cared for. Noddings’ ideas are similar to Martin Buber’s I-Thou. Buber (1970), spoke of the possibility of an I-Thou relationship in which each person confirms the other to be of unique value, and are thus able to share in the experience of one another. This relationship is an honoring and reverencing relationship; a relationship where a person is able to see, experience, and confirm another person for who they are, as a “thou,” suggesting respect, reverence, and honor.

These ideas have resonated with us and invited us to take on ourselves an ethic of relationalism in our relationships with supervisees. This ethic encourages us to have feelings of honor and reverence for the persons who train with us. It instills in us a desire to reverence their lived experience, knowing that their lived experience is, in a sense, sacred. Our desires are to participate in practices that privilege the lived experience of new therapists in a way that invites therapists to “story” and to tell and re-tell these sacred experiences of their lives. This ethic also encourages us as trainers to engage in “walking with” and “feeling with” the new therapists. It invites us into a relationship of collaboration and intimate responsiveness, and at the same time invites us to be ever aware of the position of power we hold as supervisors and the ethical calls and demands of the relationship.

Foundations of this Supervision Approach

Our preference for this type of supervision of new therapists has four foundational beliefs. The first belief is that the new therapists’ personal lived experience should be honored and revered. This also includes a belief that people are the experts on their lives, that they can experience freedom and creativity when their personal knowledge is privileged, and that freedom and creativity decrease as professional outside knowledge is used to describe their desires, skills, motivations, and so forth.

The second belief is that possibilities of creative action in life come as persons are encouraged to develop rich descriptions of their lives that are based in their actual lived experience. Rich description (Geertz, 1983; White 1995, 1997, 2000) is in contrast to the thin conclusions that decontextualized expert knowledge offers for our lives. Most professional accounts of knowledge invite us to take part in a reductionistic search for the “real” cause of our behaviors, as search that invites pathological understandings of our desires and motivations. Using practices that encourage rich description actually encourages persons to stand up to the pathological accounts of their lives and search for meaning and experiences that have been lost as a result.

The third belief is based on our preference for seeing stories as the primary way in which persons make sense of their lives and who they are as persons. We use the narrative metaphor (E. Bruner, E. 1986; J. Bruner, 1986, 1991; White 1995; White & Epston, 1990) to help us be aware of how trainees are “storying” their experiences during the training process. The narrative metaphor has also influenced our belief that privileging the personal knowledge and skills of new therapists should be primary to training/supervision in MFT theories because the stories that are creative and enriching of persons’ lives are founded within their personal experiences and not outside their experiences of self. We share





Harre's (1983) belief that "Self-knowledge requires the identification of agentive and knowing selves" (p. 260).

The fourth belief has to do with a principle that we call "moral preferences." We have found it wonderfully helpful to engage in conversations with trainees that privilege their unique preferred ways of thinking and being (White, 1995, White, 1997, 2000). These preferences have to do with their genuine desires and personal knowledges about ways of thinking/being that best fit their life. We agree with Freedman and Combs (1996) that most often persons' deepest desires and hopes are to care for the self and others. These preferences cannot be simply individual personal preferences, these preferences are intimately relational and moral. Our understanding of this comes from social constructionist (Gergen, 1991; 1994) and constitutionalist (Foucault, 1980; White & Epston, 1990) thought which both asserts that we are inherently relational beings and that the self does not exist in isolation. Constitutionalist thought invites us to consider the intimate nature of accountability, that every interaction we have with others literally has constituting or shaping effects of them. This invites us to experience an intimate connectedness and accountability with and for others. Helping new therapists explore their moral preferences, their preferred ways of being with and toward others, is central to our approach to training/supervision. We invite therapists to intimately consider the moral implications of their preferences on others, in a reflexive manner. In other words, we encourage them to establish personal ethics situated in relational morality and accountability.

TRAINING/SUPERVISORY PRACTICES

As we have tried to honor these foundational beliefs, we have found ourselves using three main training/supervisory practices: 1) experience privileging practices, 2) re-membering practices, and 3) creating communities of concern. These three practices are used throughout each step of the training/supervisory experience. While we will present them here in a certain order, we use them interchangeably throughout the supervision process. These three practices serve as the means by which we guide therapists through the steps involved in our model of supervision.

Experience Privileging Practices

"Experience privileging practices" seek to grant privilege to and to honor the personal experiences, desires, motivations, knowledge, and skills of new therapists. This practice represents more than a technique or intervention. It represents an ethical stance that we take to honor and privilege the knowledge of persons and not participate in the pathologizing of their lived experience. Experience privileging practices remind us that ideas and beliefs are most meaningful when they can be tied to very personal experiences. Rather than simply exploring the desires and knowledge of new therapists, this practice invites them to "story" these personal desires and knowledge through an exploration of lived experiences that contributed to the development and maintenance of these desires. We use experience privileging questions to guide our efforts in this practice.





Re-membering Practices

Re-membering practices are ideas that are informed by the work of Barbara Myerhoff (1982), particularly as her work has been applied by Michael White (1997, 2000). Myerhoff defines re-membering as such:

To signify this special type of recollection, the term “Re-membering” may be used, calling attention to the reaggregation of members, the figures who belong to one’s life story, one’s own prior selves, as well as significant others who are part of the story. Remembering then, is a purposive, significant unification . . . (Myerhoff, 1982, p. 240)

Re-membering is about helping persons find membership or experience a return to membership with the significant relationships of their lives. These significant members can be persons past or present, alive or deceased, relatives or friends, real or imagined, personally known or not, and so on.

Because the stories of our lives are lived through relationships, it is important for persons to re-member the relationships that support their preferred ways of being as therapists. This re-membering is more than a mental endeavor of thinking about significant persons, it invites persons to literally re-experience these relationships and especially to re-experience how these relationships invited them to feel and experience themselves as persons at an affective as well as intellectual level. As therapists re-member these significant relationships, lost knowledges are reclaimed and become personally available to them.

Fostering Communities of Concern

In our discussions with both new and experienced therapists, we are distressed about the many experiences of isolation that have been expressed; we have often experienced this isolation as well. Along with this, we have often heard therapists share their desires to connect with other therapists who hold similar ideas and values. We believe the burnout therapists experience is often directly related to the lack of meaningful community therapists have with other therapists. We have more recently begun to explore the benefits of establishing communities of concern for new and experienced therapists. These are communities dedicated to honoring and privileging the experiences of one another, where all members can stand as witnesses to the preferred developments of one another’s lives. Narrative therapists see the creation of such communities as a vital role of their work (Freedman & Combs, 1996; Madigan & Epston, 1995; White, 1995, 1997, 2000). The reason that these communities are so important is two-fold. First, while stories make up our lives, it is the performance of stories that is generative of lives. Therefore, stories are not embraced until they have been “performed before an audience” (Freedman & Combs, 1996; White & Epston, 1990). If the alternative stories and knowledges of persons are to be maintained, persons need to be connected with others in a way that allows for the continual performance of these alternative stories. Communities are also important because they provide a structure for persons to share their preferred developments with others. These preferred developments are then witnessed by others in the community, thus allowing these developments to be storied by those involved.

We believe creating communities of concern for new therapists is vital to the development of their self-knowledge (their selves as knowledgeable). In our discussions with new therapists (and from our personal experiences) we often hear them talk of their frustrations and their struggles that have led to





feelings of personal failure or inadequacy. For example, the focus of most supervision, especially for new therapists, on so-called “stuck” cases encourages therapists to talk more of their perceived failures than of their experiences of success. We are concerned with the effect that this practice has on the personal stories of new therapists. We use communities of concern as a means of celebrating the experiences of new therapists. As new therapists have experiences in therapy that represent their preferred ways of being, these experiences can be shared with others, witnessed by others, and thus entered into their stories of themselves as therapists and persons.

PRACTICAL STEPS

These three practices guide us throughout training/supervision and are used interchangeably in the specific steps in which we invite new therapists to participate. We will now present some of the practical steps which we see as important in helping new therapists develop stories of their identities as therapists which invite a sense of personal agency in the development of their preferred ways of being with clients. After each step we present a brief illustrative example of some of our conversations with therapist trainees.

Step One: Privileging the Personal Desires and Motivations of New Therapists

In this first step, we are especially concerned with giving new therapists an opportunity to share their sincere and genuine desires for entering this field. In order to do this, we feel it is important to invite them to separate from professional and pathological accounts of life and invite them to honour their own personal desires and motivations for becoming therapists. Once these desires have been shared, we devote a significant amount of time exploring with the therapist how these desires came into their lives, what personal experiences nurtured these desires, and what these often “hard won meanings” (Turner, 1986, p. 37, hopes and desires say about what they value in life. We have found that these very genuine desires provide a good starting point to help new therapists enter into an exploration of their personal knowledges and skills related to caring for and helping others. We use experience privileging and re-membering questions (such as the following) to help this process unfold.

Experience Privileging Questions

- What experiences from your life do you think invited you into this field?
- What was it within you that brought you into this field?
- Could you share with us your sincere desires and hopes for becoming a therapist?
- What personal experiences in your life nurtured these desires?
- How do you think this desire [i.e. to care for others] developed in your life?
- What do you think these desires say about you as a person? Do you think these desires represent certain qualities or values that you hold?
- How do you see these desires being a help to you when working with others?
- How would you prefer to see yourself as a therapist?

Re-membering Questions

- Could you share with us a story from your life where you felt particularly cared for? What was this experience like for you?





- What was it about this experience of being cared for that was most memorable to you? What did this experience teach you about how to care for others?
- Is there someone in your life (past or present) that you believe embodied this desire to care for others?
- When you were/are with this person how did/do you experience/d yourself? How did you think that person saw/sees you? How did/do you see yourself when you were/are with this person?
- What do you think it would mean for your life as a therapist and as a person if you were able to keep the experience of your relationship with this person more present in your life?

As the hopes and desires of new therapists to help and care for others are situated in their lived experiences and relationships, these desires are in a very real sense storied into their lives. As these desires and relationships are storied and re-storied they become resources that can be called upon in times of need.

Example One

During one of my (TC) individual supervision sessions with a master's level student I invited the student to reflect on some of the questions highlighted above. It should be noted that the student I was talking to was a second year student and had already learned what it means to be a professional therapist. Therefore, our conversation involved inviting each of us to step away from what we both had been taught professionally and rely on our personal thoughts, beliefs, desires, and hopes. The following is an excerpt from one of our conversations together.

Supervisor: So, what are some of your sincere desires and hopes for becoming a therapist? Before you answer that question, I would like to invite you to take all of the things that you have learned from your training and put it aside for a moment and think about what is personally important to you.

Student: This is hard to answer. . . When I think about what my real desires and hopes are I think about wanting to help people believe that their lives can be better; that there is hope.

Supervisor: So, you want to offer them a sense of belief and hope for their lives? How do you think that this desire to bring hope to people's lives developed in your life?

Student: I don't know. I guess I have always been a positive person. No matter how hard things have been for me and my family has gone through some hard times, I always had hope that things could be better.

Supervisor: Where do you think that came from?

Student: My mom. My mom has always been there for me and she has always been able to lift me up when I am down.

Supervisor: So your mom shared this hope with you? I am just wondering what it is like when you are with your mom? I mean, how do you feel about yourself when you are with her?





Student: I feel safe. I feel like I can do anything.

Supervisor: Sounds like an important relationship for you.

Student: It is.

Supervisor: What has it meant for you to recognize that this desire comes from your mom? And what do you think it would bring to your work as a therapist if you were to be able to keep your relationship with your mom closer to you when you work?

Student: I never really connected my positive attitude to my mom before. It has been nice thinking about her in this way. I feel closer to her. It is nice to know that she can help me in my work. I think if I remember that my desire to bring hope comes from her it will help me to keep believing in myself and my clients.

Step Two: Privileging Personal Knowledges

We believe new therapists coming into this field probably do so because they have some special knowledges and skills about helping others. In our conversations with both new and experienced therapists this has been a common theme. Most of these persons have shared how they have had experiences in their lives where others sought them out for help and they felt like they had some natural abilities to help people experiencing problems. We believe these experiences of helping and the special knowledges which have come from these experiences should be explored, honored, privileged, and made central to the supervisory process. Again, we are interested in helping new therapists personally story these knowledges and experiences. The following are some questions we believe to be helpful in bringing forth the special knowledges and skills of new therapists.

Experience Privileging Questions

- What have your experiences of being cared for taught you about how to care for others?
- What ways of relating to others have you found to be most helpful?
- What skills or abilities of relating and helping others have you developed in your life?
- Why has it been personally important to you to develop these skills or abilities?
- What do you think your friends, family, etc. would identify as qualities you have that will benefit you in your work as a therapist?

Re-membering Questions

- Can you recall someone with whom you had a special caring relationship or who you think you were able to help out in a significant way?
- What was it about that relationship that allowed caring to take place?
- How did you experience yourself in this relationship?
- If this person were here today what would they say about you, your qualities, your desires? Especially with regard to your decision to become a therapist?
- What abilities did this person have or share with you that you would also like to have or share with others in your work as a therapist?





- How might you be able to draw from the wisdom, love, knowledges, and skills of this person in your work as a therapist?

These questions allow new therapists to have an experience with this knowledge in a way that will continue to be meaningful to them as they develop their stories as therapists.

Example Two

Supervisor: Last week we talked about your desires to bring hope to people's lives. I was wondering if we could talk more about this?

Student: Sure.

Supervisor: I am just curious about some of the skills that you have developed in your life about how to bring hope to people's lives? I mean, what have you learned about how to bring hope to others' lives from your own experiences of being helped by others? Does that make sense? Like what have you learned from your experiences with your mom and others?

Student: My mom taught me the importance of really listening to people. I don't mean listening like a technique but really being there for someone. When I came to her with a problem, I felt like I was not only heard but that I was completely accepted. I felt in that moment that I was more important than anyone else in the world.

Supervisor: Has that carried over into your life?

Student: Yeah. I think that I am able to really listen to people. My friends have always come to me with their problems and I remember how I felt when I was with my mom. I just listen really hard and let them know I care.

Supervisor: And how do you think this special ability to listen that you have can help you bring hope to people's lives?

Student: Well, I just think back to my own experience. The more accepted and listened to I felt, the more hope I felt. Does that make sense?

Supervisor: Yeah. Listening to you talk has had me thinking back to times in my life when I have felt accepted and truly listened to and I can see the connection. How important would it be for you to be able to draw on this special ability in your work?

Student: I think that I already do, but sometimes I feel like I shouldn't do it too much. Like it really isn't therapy.

Supervisor: Is that how you personally feel or is that connected to some of the things you have learned about what it means to be a professional therapist? What have your personal experiences taught you about what is most helpful?





Student: I guess I think that it *is* therapy and it *is* important but that isn't the message that I have gotten from other therapists. But if you were to ask me what I believed I would say that it is the most important thing that you can do as a therapist.

Supervisor: So if you could trust in what you knew to be best and in your special abilities how would that make things different for you?

Student: I would feel relieved. I would feel like I could be more of who I really am. I wouldn't have to worry so much about doing therapy I could just be there for my clients.

Step Three: Establishing Moral Preferences

We believe that the most important thing therapists can do is to engage in a very personal exploration of their preferred ways of being with others *and* the effects that these ways of being have on others. Moral preferences are explored with regard to the real moral effects of new therapists work on the lives of those who come to consult with them. Moral preferences thus are relational ethics which are concerned with how others experience themselves in their presence; what the new therapist's hopes are for how the clients experience themselves as persons; what qualities the therapist wants to guide their ways of relating to others; and etc.

In our conversations with other therapists, we have often heard them speak of desires to be compassionate, caring, and loving. We encourage them to invite these qualities into their work as therapists and to consider how therapy guided by these qualities would look. We believe that their moral preferences should become central to their work with others. As new therapists learn theory and professional accounts of therapy they will be in a better position to choose theories that are consistent with their personal values and beliefs and that fit with the moral preferences they personally value (Carlson & Erickson, 1999). We believe that it is important to tie these moral preferences to their lived experience and significant relationships of their lives. Some of the questions that we have found to be helpful include:

Experience Privileging Questions

- What are your hopes about how others experience themselves when they are with you?
- How do you want others to experience themselves when they are in your presence?
- What are your preferences for how you want to be with and toward others?
- What types of qualities would you like to guide the way you are with others?
- If you were to invite [caring] into your life as a therapist, what would [caring] have you doing? How would it have you relating to those who consult you? How would [caring] have you seeing them as persons? What type of relationship would [caring] encourage?
- What types of theoretical orientations and practices do you think fit with your moral preferences as a person and therapist? Which ones do you think do not fit?

Re-membering Questions

- From whom do you think these desires to help and care for others came from?
- Is there someone in your family, or a friend, or teacher, etc. who was a champion of these desires?
- Can you remember someone with whom you felt particularly cared for and loved?





- What was it like for you to be with this person?
- As you are remembering this person how do you find yourself feeling about yourself?
- How does remembering this relationship invite you to be with others?
- What does it tell you about your preferred ways of being as a therapist?

Example Three

This next example comes from an interview that the co-author and I had together. While we have used these ideas in our training of new therapists, these ideas have also been very personally meaningful to us. Whenever we give a presentation on this topic, we take time to interview one another in front of the audience to give them an experience of our experience of these ideas. During a recent presentation, Marty interviewed me about my own moral preferences as a therapist and helped me to connect these preferences with a person in my life.

Marty: Tom, I know that we have talked about this a number of times together but I am wondering if you have any new thoughts about your preferences that you want to guide your work?

Tom: Well, during this conference I have made a connection that has been very meaningful to me. As far back as I can remember, I have had a strong awareness of injustice and felt a desire to stand up to these injustices. This feeling has always been with me as a therapist but it wasn't until recently that I felt a desire to make that stand on a more social level. As a therapist, I have felt committed to taking a stand against personal more local injustices but more recently I feel a desire to take a stand for justice at the social and cultural level.

Marty: Where do you think this desire has come from?

Tom: This is the connection I made. I went to a presentation that helped me connect these desires with an important person in my life. My great-great grandmother is Cherokee. My family has not talked about her very much but for some reason I have always felt a connection with her. At this moment, I have a strong feeling that my desires for social justice come from her; that she has somehow shared those desires with me.

Marty: What has it meant for you to think of her in this way? And what do you think it will mean for your work as a therapist?

Tom: It has been a really emotional experience for me. She experienced horrible injustices in her life. When I think about standing up to injustice and standing for social justice, I am no longer standing by myself. I feel like she is standing with me and I am standing for her and her people. And when I am standing for her and her people I am also standing for me and my people because she is a part of me.

Marty: How do you feel re-membering her will help you to stand for social justice in the future?

Tom: To know that I am not doing this alone and to know that she has shared this desire with me





makes me feel more committed to taking these stands. I think it will help me to not lose sight of the political nature of my work and the importance of keeping the focus of my work at the political level.

Creating Communities of Concern for New Therapists

We believe that it is very important for new therapists to have a community of concerned persons to help them in the development of their preferred ways of being. These communities are communities of support, communities that are guided by ethics that encourage a privileging, honoring, and a reverencing of each member. This is not a group that is about evaluation. It is a group that is dedicated to helping new therapists experience authorship over their developing stories as therapists. As mentioned earlier, the community serves as witnesses to developments in the new therapists work that represent their preferred ways of being. The community also provides a place for new therapists to re-tell those experiences, and perform those practices that fit with their preferred ways of being as therapists.

These communities can be created in a variety of ways. University or agency training programs can invite new students to create and participate in such a group. We have participated in the creation of our own communities of concern and found them to be an absolutely vital part of our development as therapists. We have experimented with creating communities of concern on a very local level (a small group of therapist friends in the community) and also created more global communities via the Internet (we have used e-mail; other ideas would include list-serves, news groups; and live chat-rooms).

CONCLUSION

In this paper we have explored some of the potential pitfalls in current raining/supervision approaches, and we have offered an alternative approach for training/supervision that is founded in an ethic of care, relationalism, and mutual respect which invites us to honour and privilege the personal experiences, knowledge, desires, skills, motivations and so on of new therapists. We are not saying that training should be void of theory or that professional ideas should not be taught to new therapists. With regard to teaching theory, it is our belief that a very clear and cogent understanding of theory is critical in the development of new therapists. Nor is it our intent to advocate that only personal experiences are important. It is our belief that as theory and practices are experienced and incorporated in personal ways by new therapists, this offers a context for understanding the theories and practices more completely and more usefully (see Carlson & Erickson, 1999). The originators of MFT theories were primarily acting out of their personal experiences, unique contexts, knowledge, values and skills that were then constructed into clear theories and practices; the ideas we have presented encourage new therapists to follow a similar rigorous course. The importance of helping new therapists construct stories of themselves as therapists based on their preferred ways of being with others in ways that are relationally and morally reflexive is central to this process. This training encourages new therapists to experience personal agency in the creation of their stories as therapists and as persons; stories which are rooted in their lived experiences. It is our belief that when our knowledges, skills, beliefs, values, commitments, and desires as therapists are intimately connected to our personal lived experience this allows our work and our personal lives to be mutually beneficial and sustaining of one another.





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Narrative Supervision as a Counter Story Development

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When I set my heart and mind to start a doctoral program in 2016, I wasn't seduced by the legitimate benefits of having a few letters after my name or the titles that represent a level of notoriety. You see reader, I redesigned my life to make space for the ideas and practices I was longing for since I immigrated from Brazil to pursue a master's degree in counseling. Part of making space to be all in for this adventure included resigning from a job that helped develop so much of my identity as a therapist and packing up all my belonging to live in a city and a culture that I knew nothing about. The excitement of being around other students and the opportunity to dedicate time to immerse myself in different ways of thinking about supervision had me sold even before orientation day.

Remembering the years of supervision I received during my master's program at San Diego State University, I was inspired by the ways my supervisors/mentors honored my lived experience and personal knowledge by allowing me to develop a practice of therapy that was more aligned with my own values and beliefs as a person. I believe I have been able to remain close to the spirits that helped guide those supervision meetings. In particular, the spirits of narrative practices. As a result, my desire to recapture the essence of a supervision approach that was based on relational ethics has been a powerful force in my journey as a supervisor.

During my master's training, I was given the freedom to explore and embrace my own knowing when it came to my work as a therapist. This experience was so meaningful to me that it became the center of my hopes when working with graduate students during my doctoral training. However, in contrast to my previous narrative supervision, my doctoral training followed a more traditional and expert-based approach to supervision. I grew more and more disheartened during my weekly supervision of supervision meetings, as it became clear that there was very little room for the personal knowledges and lived experiences of supervisees, and even for aspiring supervisors like myself inside this expert-based supervision context – it honestly made it painful going to classes so much so I could feel the effects of this despair in my body.

In the midst of this despair, I sought counsel in my 'secret' collection of writings on alternative supervision ideas and practices that were more in line with my own hopes and desires as a supervisor. In particular, the writings of Christopher Behan on examining the contradictions of inherent power arrangements in traditional supervision (Behan, 2003); the writings of Sarah Kahn and Gerald Monk on examining social justice initiatives that inform narrative practices applied to supervision (Kahn & Monk, 2017); the writings of Marcela Polanco on knowledge as a fair trade applied to decolonizing framework in response to the effects systems of power have on people's lives (Polanco, 2015); and the work of Pilar Hernandez-Wolfe and Teresa McDowell on exploring the issues of social privilege and accountability among MFT educators (Hernandez-Wolfe & McDowell, 2011).

Longing to return to my home of understanding, I sought out relationships with former supervisors and colleagues who served as a life-line - or perhaps an IV infusion of the spirits of narrative practices - to resist being further recruited into traditional supervision practices. I found much inspiration and solace in the mentorship and support of Jan Ewing - who more than anyone else embodied the spirits and





relational ethics of narrative practices. Undeterred in my desire and commitment to make narrative practices the center of my supervision work, I searched high and low for any readings I could find on the matter. My searchings led me to an article written by Tom Carlson and Martin Erickson titled "Honoring and privileging personal experience and knowledge: ideas for a narrative therapy approach to the training and supervision of new therapists add (Carlson & Erickson, 2001). It felt like I won the supervision lottery! Their ideas became a refuge to me during the ever-present recruitment of traditional supervision ideas that were surrounding me.

What I appreciate most about Tom and Marty's writings were the radical ways in which they centered the therapist's knowledge, experience, and preferred relational ethics during supervision and sought to situate them in a rich counterstory of their lives. With my heart now light and open, I read and re-read that article countless times. Ultimately, in their words, I found refuge and an emerging sense of belonging that perhaps I was not alone in my searchings. With each reading of the paper, I found myself feeling more and more inspired – as I was being rescued from drowning in the ocean of graduate despair. One quote was particularly meaningful to me:

"We support an approach to training/supervision which seeks to bring forth the personal knowledge, skills, hopes, and so on which are central to the new therapist's desires to be a therapist. This approach is centered in a belief that, as persons, trainees have valuable lived experiences, knowledge, skills, and desires that have invited them into this helping field. It is also centered in the belief that trainees have sincere and genuine desires to help and care for others, that they probably have special skills in caring for others, and that these skills and desires should be explored, brought forth, and made more primary to their work as therapists. We also believe that for new therapists to develop confidence in their abilities, they need to experience personal agency in regard to their work, to experience themselves as having an active role in the shaping of their lives as therapists, thus experiencing what Harre (1983) refers to as "self-knowledge." (Carlson & Erickson, 2001, p. 204)

Finally, feeling as if I had some ground to stand on, I took their ideas and tried them everywhere. I even designed a two-page summary handout of their article whenever I had the chance to present my work during my supervision of supervision meetings. These handouts became a sort of political leaflet that I spread wherever I went (which may or may not have contributed to my reputation). In hopes these leaflets would bring some legitimacy to ideas and practices I held dear in my work as well in my life, I would present case after case armed with renewed confidence.

As luck would have it, I attended a special narrative conference in honor of the 10th anniversary of Michael White's passing in San Diego. During the opening keynote, David Epston instructed the audience to find someone who had known Michael and speak to them about his influence in their lives and their work. To my surprise, when I turned around Tom was standing right in front of me. Before I could collect my thoughts to say something clever, I blurted out: "Wow I can't believe it, Tom I cite you all the time in my school assignments." I told Tom about my interest in narrative supervision and the ways I have been sneaking his ideas into my work at every opportunity. Tom, with a look on with surprise and with a bit of a humble laugh said, "That article was written a long time ago and I would be very interested in knowing how you have been taking up the ideas in your work." Our conversation led to the agreement that supervision has been a neglected topic in narrative therapy and that it might be worth our while to study these ideas together and see if they are still relevant to contemporary supervision practices.





After several conversations over email, Tom proposed that might work together using a bit of an apprenticeship approach where I would send Tom transcripts of my supervision meetings with a student while trying out Tom's and Marty's ideas some 15 years later in my context. We decided that we would make this an informal research project from the outset by inviting one potential supervisee to serve as a co-researcher along the way. There was one twist to our project that Tom wanted to try out. Tom wanted to work with a student who was not a narrative therapist to see how narrative supervision as counterstory development might benefit someone who was not a narrative therapist. After enthusiastically presenting this opportunity to a group of graduate students at my university, Dahlia (who identified as an Emotion-Focused Therapist) excitedly agreed to join us. Dahlia and I agreed to meet for narrative supervision once a week for a year focusing our work exclusively on developing a counterstory of her preferred identity as a therapist. Rather than focusing on teaching narrative practices and skills, our approach to supervision would center on Dahlia's own values and ethics in regards to how people should be treated and the history of how these knowledges emerged throughout the living of her life. To help me learn how to better situate supervision in a counterstory context, I sent a transcript to Tom once a month and Tom, following the apprenticeship model that he learned from David Epston, would write in questions to Dahlia as if he were the therapist. Tom and I would then meet to review a transcript of my supervision conversations with Dahlia and read the proposed alternative questions for Dahlia and myself to consider that might further the development of her counterstory as a therapist. Dahlia and I would then review these questions in the subsequent supervision meetings. Just to give you, reader, an example of what supervision conversations that are centered around therapist counterstory development might look like, we offer you the following excerpt from a supervision meeting between Danna and Dahlia. I sent the below transcript to Tom and waited anxiously for his reply with his proposed questions that were included directly into the transcript in italics.

Danna: Dahlia, I'm thinking back and remembering the first article that gave me hope about supervision that was written in 2000 by Tom. It really inspired me to start this process of learning and how I preferred to be with others. I know that when we started this supervision project we were talking about relating to people, right? Is it fair to say that that's true?

Dahlia: Yes!

Danna: Now that we were able to re-visit your own history about what you already knew about being with others and how to help people and how to relate to people. In many ways, what we re-discovered about your story being a dancer and how much you bring from that experience when you meet with others...

Dahlia: Right, that's right.

Danna: That's exciting. Now, believe it or not, Tom in 2000 wrote about these processes in terms of stages. If you think about what Narrative Therapy it's, it sounds like, we're open to anything and it may look like there's not much structure.

Dahlia: Right, right. That's what I heard. I don't think (there is a structure) so.

Danna: But, now that's the fun part of what we are doing. I think we're ready to move forward with the





next stage based on the work we have been doing together. Just looking back at our next few months and what is ahead of us, graduation, clinical work ...what a gift. I had an idea and I thought about interviewing you about your own hopes. I believe it would help me to understand your moral preferences and what has inspired you to pursue this work. David has been talking about something we call *moral ethics* and *moral character*... I believe that we have been exploring these ideas in which we started to really honor the relationships that you described having with the children you work with... and how you have always been a rebel refusing to believe that life was either black and white, but rather shades of gray. Right?

Dahlia: (laughs) Yes!

Danna: Would you help me understand what are your hopes about how others experience themselves when they are in your presence?

[I think it might be important to do a little more leading into this question. Something that might prepare her for the idea that we are accountable for the way that our thoughts, actions, inactions, etc. shape the stories of the people that we are with. Here is a quote from Michael to help situate this idea: "If we acknowledge that is the stories that have been negotiated about our lives that make up or shape or constitute our lives, and if in therapy we collaborate with persons in the further negotiation and renegotiation of the stories of person's lives, then we really are in a position of having to face and to accept, more than ever, a responsibility for the real effects of our interactions on the lives of others" (White, 1995, p.14-15). The reason that setting this up is so important is that it is critical that Dahlia (and all therapists) appreciate the gravity of this idea so that she can really weigh into this conversation with everything that she has.]

Dahlia: One of the children I work with yesterday was telling me about the two different versions of herself, the version at home, the perfect daughter, and then like the version of her that's herself with her friends. And I said, "Do they really have to be these two versions of yourself? Would you like to be one version? Or do you like being two versions of yourself? And which one do you choose to be here?" We explored all those things. So I think I want people to experience themselves the way that they want to see themselves.

Tom: *And how is it that you would hope that they see you seeing them? What kind of person would you hope that they see when they look into your seeing eyes?*

[I return here to another way of asking the question because her answer is about how she wants people to see themselves rather than how she wants them to see how she sees them. This is a rather unusual way to think and it requires some care to help a person make the shift.]

Danna: Do you have any ideas about why experiencing themselves in such a way that they feel safe with you might feel like...for example, in the body?

[I like the idea of going back to the body to help give her moral preference more substance. It is just a little early to do since her preference needs more development. It still hasn't reached the level of a moral preference.]





Dahlia: I do, I guess like warm would be one but the warm for lots of different things. You can feel warm if you're angry when you experience it as a shift. If you feel like things are out of place and get that feeling in your stomach. I'm hoping that when they feel safe with me, that it feels more like coming together like a key fitting inside, or like peace instead of feeling like the grinding.

Tom *If we return to this idea of a moral preference, the idea of your own best hopes for how others feel about how you feel about them when they are with you, is safety one of those things? When a person comes into the room for the first time, is it your hope that they might somehow hear, in a feeling kind of way: "You and your life and your words and your feelings are safe with me here?"*

Danna: Dahlia, I am curious... if we were to invite the person you are talking about into this room. What would you say that...if you were to ask her about the way that they felt
[Tom: About how you feel about them as a person] in your presence?

Dahlia: I feel like they would say just being me, and that everything's comfortable. And I'm just who I am, instead of trying to be this person or that person.

[By adding the phrase that I did above, it allows Dahlia to move more into the realm of relational or moral preference. Here Dahlia is talking about what she wants for the person she is working with, to feel comfortable, which limits Dahlia's accountability in terms of the part that she plays in shaping the person's experience of herself.]

After receiving Tom's proposed questions and meeting with him to study them, I brought the questions back to Dahlia in the subsequent supervision meetings for both of us to evaluate and consider as to their usefulness in extending our supervision conversations. This new apprenticeship pedagogy to supervision was liberating as it reversed all hierarchies that were so familiar to me in traditional approaches to supervision – as Dahlia and I were now in a position of evaluating Tom's proposed ideas and questions rather than the other way around.

For example, in one of our individual supervision sessions Dahlia and I discussed noticeable ways she had claimed and relied on her own personal knowledges – that often times was subjugated in preference of professional knowledges – in her clinical practice. In this conversation as we talked about pressures of therapeutic performance, we storied her previous experiences as a dancer and an entertainer for children's events and how she could rely on these talents in her work as a therapist. Despite her extensive experience handling the pressures of performance as an accomplished dancer and professional fairy, these knowledges were never considered as a potential abilities to draw on when relating to her clinical work. Throughout our supervision sessions, through a careful storying of these talents, Dahlia came to understand the value of bringing these experiences with her as soon she would be graduating and flying solo as a therapist. Here is an example of one of these conversations:

Danna: Dahlia, I am curious to know since we started supervision if you have noticed any differences between what you know now and what you were asked to know? Would you say your understanding of being with others has changed?





Dahlia: I think there is difference between pressure times and no pressure times. If somebody was asking me a question in front of a patient, I felt like I was supposed to give the “right” answers from the book. Now, if I am sitting in an office talking about a case, I will just use whatever language I have and be okay with it. I've learned patience, which is funny, because that is time where you should feel less pressure because patients usually do not know the clinical terms that you're supposed to be using.

Danna: Would it be fair to say that you work well under pressure? You have shared with me that you had so many personal moments thinking back to your history... you told me you had to ‘*handle a lot*’ in your dancing and performing. Are you starting to look back and claim those historical moments?

Dahlia: (Smiling in agreement) Now it’s almost like I have to!!! I mean, I have been trying to put language to it... unless you know terms from both disciplines (dance and therapy). Also, I noticed people have been asking a lot of me recently. Did I tell you that I will be in the Nutcracker this year and in 7 months I'm going to graduate? And it's going to be awesome!!!

Danna: Did you just say you are graduating in 7 months and it will be awesome?

Dahlia: (laughs) YES!!!

Danna: Will you be crossing the stage as you graduate with your fairy wings and all?

Dahlia: (Laughs) Yes!!! With wings and all. I will be flying.

Danna: Or dancing ? Do you have a preference?

Dahlia: Both (laughs). A lot of people have been asking me if I am still dancing? Or if I have anything to do with dance world? They ask: When did you stop dancing? All of those kinds of questions. When they ask me, “when did you stop dancing?” I have a visceral reaction on the inside. I firmly answer: “Well, *I never stopped dancing.*” I don't like saying it that way. That language of “stopped dancing.” No, I haven't stopped dancing. There is a side story when I was younger, growing up, a teacher had told me once: *There are dancers and there are pedestrians.* And that always stuck with me. And my parents would think it was so annoying, because I'd be walking down the street and I would say: “Oh, that one’s a dancer and that one's a pedestrian.” And they'd be like, “Well, why?” And I said: “I never... I'm not going to cross that threshold. I'm still going to be a dancer.”

Danna: Have you been refusing to be pedestrianized as a therapist?





EFFECTS OF NARRATIVE SUPERVISION

Tom, Dahlia, and I met on two occasions throughout the year to interview Dahlia about her experience of narrative supervision and to help us better understand the effects of these conversations in her personal and professional lives.

One of the unique propositions about this narrative approach to supervision is the focus on rich counterstory development as opposed to skill development. In speaking about her experience with Tom, Dahlia commented on the uniqueness of this way of engaging in supervision and its effects on her sense of self as a person and a therapist. Dahlia also spoke about how seeing her values and ethics as tied to a rich and long counterstory offered her a sense of hope that she could carry these values and ethics forward into her future work with clients and potential supervisees. The transcript below offers an example:

Dahlia: I know if I ever become a supervisor, this experience will influence the way that I would supervise a student. It was meaningful. Throughout my academic journey, I had to write all of these essays about who I am as a person and it requires thinking about yourself, but this has been completely different than any of those times I've sat down and would think about writing an essay about myself.

Tom: I wrote a paper a long time ago, called "Recapturing the person in the therapist." In the paper, I was saying is that in traditional self-of-the-therapist work, we are asked to think about ourselves and our lives and our histories as barriers that get in the way of our work—our lives and our histories and our relationships with our families of origin are deficits. But what if our lives and histories are much more than that. What if they are rich in knowledge and experiences that might makes us uniquely capable of working with people in their suffering. Might our histories create particular sensitivities or knowings about how to be with people in ways that might be healing or un-suffering? So then the idea is that narrative supervision would look a lot less like teaching how to do narrative therapy, but focus on maybe helping you kind of develop your own your own story about who you are, as a therapist about what matters and that comes from the whole stock of your lived experience as a person—and for you as the dancer, right?

Dahlia: Right.

Tom: And how that can kind of come to life in your in your work in the present. So I guess what I am really curious about is... what it's been like for you to be involved in supervision that's not about how to do therapy but more about who are you as a person and if you can connect with that and story those experiences and knowledges they will show up in your work more freely.

Dahlia: I thought that on many occasions... it looks a little bit more like e therapy and it is definitely been a challenge but in a good way. For me, I'm trying to figure out places where I can privilege myself and honor myself in a way that I wasn't doing before. It's given me a little bit more opportunity throughout my experiences with my clients that I don't think I would have gotten in





another form of supervision, because I'm able to see myself and my strengths in a different way than I was before.

Tom: I'm interested in that. I'm interested in how you said that, that it allows you to see yourself differently, but also see your clients differently?

Dahlia: Yeah. I think I see myself and what I have to offer in a more positive way, instead of seeing myself through things that I don't know yet. I'm able to see what I do have to offer. So instead of always having to focus on well, wherever did I find this [intervention] in a textbook? Have I seen this in a textbook? I'm able to be: "Okay, well, maybe I don't know exactly how to approach the situation. But, you know, I've approached situations like this before, as a dancer or through doing birthday parties and I can just live through it." And maybe it doesn't go the way that I wanted to, but I can learn from that experience nonetheless. So, I bring everything from the past into my experiences with clients, instead of just being like, "I have this textbook knowledge that you don't really know how to use yet and I don't feel like it always fits for me." I struggled with a lot of those things before.

In addition to these more general effects of narrative supervision, I also reviewed our supervision transcripts with Dahlia to identify other possible effects. In reviewing the transcript of our final interview, we identified four primary themes related to the effects of our conversations throughout the apprenticeship. The themes are (1) Narrative freedom, (2) Narrative integrity, (3) Narrative embodiment, and (4) Narrative self-knowledge.

1. Narrative Freedom

Narrative freedom, a term developed by Freeman (1993) refers to the need for the story to be open-ended to invent new ways of being. Particularly, a good story begs the question: What will I do next? How will I invent new ways of being? Given the foundation of narrative therapy is to create opportunities for people to have more options and more say as they go about living their lives (White, 1995), this idea becomes extremely valuable during supervision as well.

Tom: I'm interested in the difference between having to rely on what you don't know yet—the book knowledge versus relying on the things that you might know quite intimately—things like dance and the other experiences that have come up in your conversations with Danna—your history of knowing how to be a particular kind of person?

Dahlia: Yes.

Tom: And what has that been like for you to, in your work, to not have to just rely on the book knowledge that's maybe up here? [pointing up to ceiling] And now to be able to act with what you already know because it's already part of your life history, like the dancing and the and the birthday parties?

(laughs)





Dahlia: It's been freeing in a way because I can be more of myself and I can see myself more in my work. There's a way of being with people and experiencing them through sitting with them and breathing the same areas that I think sometimes I would miss when I was thinking about what I don't know, or what I wish I knew in the moment. Sometimes I can from doing this work...I can breathe in the air and just be like, "Okay, I'm with you and I'm going to use myself and what I know."

2. Narrative Integrity

Another theme that emerged in our study of the supervision transcripts was the concept of narrative integrity. Freeman and Brockmeier (2001) refer to narrative integrative as not only to the harmony of proportion or beauty of form as principles of narrative of proportion form as principles of narrative composition but to the coherence and depth of one's ethical commitments, as evidenced by the shape of one's life." (p.76). In our work with Dahlia, it was our hope to situate her own ethical commitments related to her work with clients within the rich history of her own actions throughout the course of her life. By linking Dahlia's current ethical commitments to a long history of principled action in the world, it makes it more possible for Dahlia to call on these commitments and intentionally center them in her work. The following excerpt from our interview with Dahlia offers an example of narrative integrity:

Tom: Okay so, in isolation these different events from your past might have been used as material for you to feel shame or to feel bad about not doing the right thing. But when they were strung together or threaded together, as you said, what did that make possible for you?

Dahlia: It put them together in a way that it's like, these weren't just random coincidences that happened. I wasn't just rebellious this one time. And this one other time, I was staying true to myself all along.

Tom: So, one of the hopes in my conversations with people is to create a counterstory that has an "all along" quality to it—that if you put them together it wasn't a random bunch of incidents, has there been an all alongness that's been behind your rebellion? Is that fair to say—that it hasn't just been rebellion, but it's been rebellion on behalf of something. What would you say?

Dahlia: In a way sticking true to my values and what's important to me. Even if that's not what other people tell me, I'm supposed to think is important.

Tom: Yeah... and if you look at the moments that you have, maybe most fiercely rebelled against, I know that it's on behalf of you? But is it also on behalf of something more than you?

Dahlia: Yes (with a smile that you can hear through the audio recording).

Tom: Is there some kind of greater good here? Is it about some kind of moral principles that you might have about what life ought to be?

Dahlia: Yeah (timid with the smile)... I get if I think of some of the more difficult times for me to rebel or





the times that have been, bigger. I think a lot of it was more for well, even if this hurts me in the process, hopefully, the other person learns something so that others don't have to go through what I've gone through. So yeah, in a way it's been, maybe I can use myself to teach the other person so that I can better others experiences,

Here is another example that illustrates how Dahlia was able to develop a sense of narrative integrity as a result of our supervision conversations:

Tom Is that an example of the effects of your conversations with Danna... that you can just trust that knowing? If you look back on before...would you have just trusted it? Or do you think you might have thought it through like, "Okay, "I might have this inclination to do this, but I need to think about what the books say?"

Dahlia: Yeah, I definitely would have thought that through and be like, I don't really know if that's the thing, I'm going to stay over here where I am. Then if I had have decided to do it, I probably wouldn't have told my supervisor that I did it. And if he questioned me about it, if he just was in the room and he saw it and he questioned me about it, I would have been: Well, I don't really know.

Tom: Okay, so is that part of the part of the freedom? I was struck, Dahlia, by a lot of the different stories that Danna told about you ... about your life about some of the ways that you have been willing to kind of carve your own path in life. And I'm wondering if there's anything in particular, from the conversations about your life that has stayed with you the most?

Dahlia: Yes, I think, putting together and looking back at the stories ... really kind of tying together those stories of the times where I stood up for myself, or I went against what I was supposed to do are now tied together in a way that I didn't put them together before. I know that sometimes I go against what people say. But it's always been something that I've been a little bit more shameful. I didn't do what I was supposed to do. But I think through like, teasing them together, and threading them together with Danna. I've put them together in a way that kind of makes me proud of them. A lot of people would have just abandoned themselves in the situation, but I stood up for myself in a way that I'm proud of. Now, when I look back on it now.

It seems important to highlight here the effect that the "threading" together seemingly random events into a coherent story had on Dahlia's sense of self as a therapist. Freeman (1993) talks about the importance of re-collection, "the act of gathering together what might have been dispersed or lost... selectively and imaginatively, into a followable story". Without linking these past events through "an act of historical imagination... there would be no past and indeed no self, but only a sequence of dispersed accidents."

This in turn implies at least two things. First, without a trail of past events, there would be no story to tell. Second, without an act of the historical imagination, designed to give meaning and significance to these events and to glean the possible nexus of their interrelationship, there would be no past and indeed no self, but only a sequence of dispersed accidents."(Freeman, 1993, p. 47).





3. Narrative Embodiment

While the interest in how stories both influence and are influenced by the body has piqued in recent years, the idea of narrative embodiment has a long history in narrative therapy and can be found in Foucault's earliest writings (Foucault, 1980-1981). Foucault argued that dominant discourses in society have a way of inscribing themselves into our bodies and thus have a literal shaping effect on how our bodies express these discourses over generations. A primary example of this, according to Foucault, is the way that discourses around gender have literally shaped women's bodies over time as they strive to conform to ideal beauty standards. If dominant discourses do indeed have a shaping effect on how our bodies express themselves, then it would go without saying that problem stories over time have a felt effect on our bodies. Elsewhere, I have argued (Carlson & Paljakka, 2017) that felt the effects of the problem story can give problems a staying power if left unattended. While externalizing conversations can have an undoing effect on these felt bodily effects of the problem story, it is equally important in reauthoring or counterstory work that we provide opportunities for the new story to find its way into people's felt experience of their bodies, that the new story takes root both in the realms of meaning-making and embodied experience.

In our conversations with Dahlia, we were interested the possible ways that her emerging counterstory was entering into her felt and bodily experience of herself. This was particularly important to us, given the central role that her bodily experience of herself as a dancer played in her preferred expressions of herself growing up. The following excerpt from our interview with Dahlia offers an example of how the counterstory conversations in supervision found their way into her felt experience of herself as a person and her body.

Dahlia: This is going to sound so cheesy, but it's like embodying myself in a different way. It's much more than just talking about myself.

Tom: Embodying yourself? Say more about that. That's really interesting. Not cheesy, but interesting.

Dahlia: Accepting myself and make making meaning of myself in a completely different way. Sometimes they feel like, we talk and I externalize things... then I have to hug it all back inside. So I'm like, embodying it in a new layer. I'll get all back inside.

Tom: Hugging all back inside?

Dahlia: Yes, I got to hug it all back inside and embody it in a new way.

Tom: Is that what your conversations with Danna did? Is it the effect of hugging yourself back inside?

Dahlia: Yes!!! (laughs)

Tom: That's great. I like it... the embodying of yourself didn't give your (pause)... I'm reading somebody who's informed me of my question here but did it give your life, your story of yourself, some substance or a graspable form? Or that maybe somehow your convictions became more tangible to you?





Dahlia: Yes. I think a lot of the time things that I do things that I say happen, and then they go away. Digging some of these things up to honoring them, and make meaning of them brings them back up. I have a new way of embracing that story or embracing that part of me that I hadn't done before. So that's made it tangible and I realized that this one random story that I haven't thought about in a really long time now has a meaning and a purpose, and I'm incorporating it in a new aspect of my life. I think it just makes everything that I've experienced in life so much more important.

4. Narrative Self-knowledge

Carlson and Erickson (2003) state that one of the hallmarks of narrative supervision is that should it create a means for therapists to experience self-knowledge. According to Harre (1983) "Self-knowledge requires the identification of agentive and knowing selves" (p. 260). One of the key distinctions that we make here is the importance of relying on the history of a person's self-knowledge as an antidote to the often paralyzing effects of relying on professional knowledges. One of the effects of narrative supervision that Dahlia highlighted in our interview was that it legitimized and restored her sense of already knowing how to be and relate to people.

Tom: Would it be fair to say that you're pretty well acquainted with how to be with people in ways that might honor them? And you said that that kind of got lost along the way as you had to assume a professional role? Or were considering ideas about being a professional in some ways? Is that something that has been maybe restored to you a bit in your conversations with Danna?

(quick reply)

Dahlia: Yes, definitely!!! Yeah, yeah. Even I was having a conversation with my supervisor last night about how I was just sitting in the room. And then I was trying to regulate the kids in the room because they were all over the place. And I just went and I sat with them. And here's like, well, how did you know that it going and moving yourself and sitting with them? I'm like, well, because that's just what I knew...And then I just owned it.

Dahlia: I think I see myself and what I have to offer in a more positive way, instead of seeing myself through things that I don't know yet. I'm to see what I do have to offer. So instead of always having to focus on well, wherever did I find this in a textbook? Have I seen this in a textbook? I'm able to be like, Okay, well, maybe I don't know exactly how to approach the situation. But, you know, I've approached situations like this before and dancing or through doing birthday parties, that I can just live through it. And maybe it doesn't go the way that I wanted to, but I can learn from that experience nonetheless. So I bring everything from the past into my experiences with clients, instead of just being like, I have this textbook knowledge that you don't really know how to use yet. And I don't feel like it always fits for me. And I struggled with a lot of those things before.





Reflection and Theorizing:

One of the more radical departures of this approach to narrative supervision is its focus, at least in the beginning, on therapist counterstory development as opposed to the more common focus on therapist skill development. This is in no way meant to say that there are not important ideas and practices associated with narrative therapy that students need to learn, practice, and master. What we are proposing here is that these practices, if they are to have life, need to be situated in an experience-near and richly described story of the values and ethics that the therapist holds most dear. While the exploration of these closely held values and ethics begins in the present, in their hopes for the people with whom they work and for who it is that they want to be as therapists, it is critical that these current hopes, values, and ethics are storied into a long history of the development and enactment of these hopes in therapists' own lives and relationships.

In Dahlia's case, some of her hopes went against traditional expectations about therapist-client relationships and it was important to her that these hopes belonged to a long history of acts of rebellion to normative and authoritative standards in her life. Another important aspect of this storied process for Dahlia was how her history of a dancer or her work with children as a clown, brought with them many knowledges and practices that she could draw on in an experience-near way in her work with clients. When these "insider" knowledges are storied into her life, it elevates them to sit alongside or even above the more professionalized knowledges that she felt was so distancing and quieting of her voice in her work up to this point. With her knowledges, values, skills, and abilities, now storied into her lived experiences of life, it made it more possible for Dahlia to more immediately access them in work with clients. We believe that this is what Harre meant by self-knowledge. Rather than having to rely exclusively on outside knowledge, like a map or manual, which are often experience-distant, Dahlia's preferred practices and ethics can now come from the foundation of a rich experience-near story that is rooted in a long history of how she has enacted these hopes, values, and ethics in her life. In Dahlia's own words, "honoring them... and embracing that story... made it tangible" to her.

Having engaged in many supervision conversations over the years, while it is quite common that the hopes, values, and ethics expressed by my students were closely aligned to the values and ethics of narrative therapy, especially once they are given the freedom to separate from the professionalized accounts of what it means to be a therapist, it has been important to them that these values and ethics not be seen as belonging to narrative therapy, but that they have an intimate history in their own lives and relationships. Once this counterstory has taken hold in their lives, it provides a "welcome home", as one student put it, "for the questions and practices that I later learned as a narrative therapist."

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Walking hope-lit paths to new doorways: A letter about my experience as an apprentice in narrative therapy.

Bevan Kovitz, M.Sc.

Dear David, Tom, and Kay,

I have been thinking for quite some time about what I might put together for the “final show,” finding myself fretting about the idea that after a year of your mentorship, guidance, education, and encouragement, I somehow do not have any new practices to share. I spent hours talking to (exceedingly patient) friends and loved ones about my worry that I might fail all of you in not coming up with some brilliant idea, wondering how it was that I could honour the gift of this opportunity without a shiny, clever, and well-articulated final project to offer at the end. (Surely after a year I could come up with something that warranted the use of even one of these adjectives!) As the anxiety grew and invited its friends (blame, shame, panic, and feelings of failure), I experienced a tidal wave of crushing familiarity: I have been here, in the dark, before.

I know this territory, and its damp air and sharp corners and cold, unforgiving surfaces.

In returning to this familiar place, I remembered that one of the things I was given in the apprenticeship was a candle. It was a light that not only illuminated a path through the dark, it also enabled me to see possibility in places that felt scary and uncertain before. For my final project, I would like to tell the story of how the apprenticeship taught me to ask new questions that invited me to experience myself and my work differently and re-introduced me to the ethics that drew me to narrative therapy to begin with. In doing this, the apprenticeship showed me the seeds of intention in my work that have been there all along, and how to nurture these into more generative, hope-informed questions.

In Solidarity Against Assholes

In September of 2018, I submitted a transcript to the apprenticeship as I had every month since the previous March. In an effort to shine a bright light on all of my doubts about my ability to “do” therapy, I had challenged myself to primarily submit transcripts of sessions I found challenging or felt I had somehow failed in. I thought that this would be the best solution to a fear that breeds itself in the dark: push it into the light, let it be seen by others, and discover that it was not quite so menacing as it seemed when it had me alone. The dark though, is a slippery thing, and it found a way to seep between my best efforts to illuminate it, trying to disguise itself as humility, or candidness, or something vaguely virtuous. As a part of the introduction to my transcript, I wrote the following:

I feel pretty flat-footed in our conversations, and re-listening to this session was uncomfortable as I felt like I could hear myself floundering and picking up on all the wrong things, keeping us going in a circle instead of somewhere new. I noticed myself doing a lot of parroting and ushering the story along rather than finding new doorways for us to walk through. I am at a loss for what a counter story might be here in terms of the relationship; with Rachel as an individual, we have explored her growing clarity around the wrongness of Joshua’s abusive behavior and her valuing family, honesty and openness, and living a happy, healthy life with her children. I





think I get stuck wondering where I am “supposed” to go without this man in the room (not that I would be even remotely comfortable with him being there!) I am feeling stuck in terms of how often our dialogue leads us to a “her versus him” kind of place, which, as Kay pointed out when I submitted a transcript of another conversation with Rachel, is not a helpful place to be if she is wanting the relationship to work. I am not sure how to reposition them (or us) in relation to the problem, perhaps in part because I am uncertain of what exactly we are calling the problem at this moment. I am muddled! I know Rachel finds our sessions helpful but I am increasingly feeling stuck with where we are right now...

It felt honest. It was uncomfortable listening to the session. I *did* feel flat-footed, and stuck, and muddled, and uncertain. But writing this led me to travel in the same circles I felt I saw in the transcript. And it was still dark.

A few days later, Tom wrote me an email:

Hi Bevan,

I wanted to touch base with you about our TTT meeting on Wednesday. I will actually be in Calgary on Wednesday so I was thinking that it might be nice to meet in person instead of over zoom. Let me know what you think.

I was reading over your transcript in preparation for the meeting and was really taken by something Bevan. As I was reading your introduction, I couldn't help but notice how most of what you wrote was focused on you and your struggles and perceived failures. I know that you have been struggling in your work lately, but I could definitely see, hear, and smell what seemed to be an asshole at work here. I think it might have been you who famously said, “If it looks like an asshole, and sounds like an asshole, and smells like an asshole, then we are probably dealing with an asshole.” The reason I was thinking this is that in my experience assholes tend to make us focus almost entirely on ourselves in hopes that it might induce feelings of shame and defeat. This self-focus can work both ways and results in a terrible loop of self-blame and recrimination. For example, if it can successfully get us to over focus on our failures in our work, it presents an equally problematic solution (supported by the entire positive psychology movement) to shift our focus to things like positive self-talk, self-care and the like. These efforts of course are doomed to fail and we are sent back into feelings of self-blame and recrimination and on it goes.

*For me, narrative ethics has also been a critique of this self-focus way of thinking and being. It seeks to place others and our concerns for them squarely at the center. By focusing and centering on our thinking and writing on them and their lives, on our hopes for them, and what we admire about them, I believe it can reverse the effects of the asshole and the self-blame and defeat that comes with it. **So, I have an idea; an experiment of sorts. Would you be willing to re-write your introduction and focus entirely on the person, what she has been up against, what you admire about her because of that, what the problem story might be, possible counterstory lines (even if they are just guesses), and what your particular hopes are for this person's life? And anything that situates this particular session. Nothing else.***





Would you be willing to do this before we meet on Wednesday? I am hopeful that it might reveal some of the tactics and effects of the asshole.

I look forward to our meeting Bevan.

In solidarity against all assholes,

Tom

Initially this felt like a blow: I have failed at humility, I have failed at focusing on my client, I have failed at understanding or expressing narrative ethics. Darkness, again. But Tom's experiment offered a way through: it didn't matter if I had "failed" at any of these things, or even if I was still in the dark; it was entirely irrelevant. My "failure" was not the focus of this particular exercise, and besides, all of this failure talk did certainly seem like the work of an asshole. (As an aside, the story of recognizing a problem as an asshole is a bit of wisdom taught to me years ago by a client who was also followed by a problem that tried to dress itself up as something helpful). So I took Tom up on his invitation, and wrote the following (which I have shortened here for clarity):

Rachel has been up against a lot in her life, much of it (in her words) making "the story all about [her]" – something being wrong with her, or not [X] enough [X shifting and morphing back and forth all the time between adequacy or thinness or intelligence], or being held to different standards than her siblings because she is the only one of the three of them who has children. She has also lived through a family legacy of sweeping things under the rug, particularly with regard to abuse.

In spite of what she has been up against, family is extraordinarily important to Rachel. In the time we have been speaking to one another, she has been resolute in her desire to have a happy, healthy life for herself and her children. She often speaks in terms of what she desires for them: to know they can talk to her about anything, to feel safe, to feel loved, to have special memories of their time together, and to remain children as long as they are able. She also deeply values honesty and fairness; while she will sometimes say she is "honest to a fault," or that it "gets her into trouble," I see it as a resolve to live a very different kind of life from the one she was introduced to growing up: one where nothing gets shoved under the rug, and instead is pulled out into plain sight, for better or for worse. When she discusses her challenges (particularly with Joshua), I always notice her efforts to be fair to him (e.g, the stress he is under, ways she may have been hurtful to him). She is thoughtful, spirited, and passionate. I so admire her commitment to a different kind of life, and her tenacity in finding a way to "fix" things.

My hopes for her are to have the life she imagines: one where she AND her children feel safe and loved and able to live out her values of honesty and openness with her partner (whether or not that continues to be her present fiancé).

Possible counterstory lines have to do with kindness, honesty, and safety in her relationship.





This felt *different*. It had me looking somewhere else with such intensity and hope that I almost didn't notice I was no longer in the dark. I saw things that weren't visible before; the counterstory I thought I didn't see came into sharp relief. The question of whether or not I had failed dissolved in the face of my hopes for this person and my admiration of her. It was in this moment that I felt a lightness that I had first been introduced to by Michael White (1997) in his writing about the ethic of collaboration and decentred practice, "practice considerations that assist therapists to break from despair, and that are reinvigorating of their work and their lives" (p. 193). I returned to literature that drew me to narrative work to begin with, reminding myself (as Tom had) of how these ethics undermine and turn inside-out what White (1997) identified as the pitfalls of therapist-centred work ("fatigue, exhaustion, and burnout," p. 201) While White had been talking about therapist-centredness in the context of the risks of centring therapists' knowledge(s), I experienced those same pitfalls in what Tom referred to as "self focus," or tactics of an asshole hard at work.

In thinking of this experience, and what we have learned about counterstorying over the course of the apprenticeship, I became curious about whether or not I might see a throughline of this hope-guided-practice in my work dating to the beginning of the year. I wondered if the asshole had been working at something of a long-term cover-up, as my experience as a therapist so far and my learnings in the apprenticeship have taught me that problems have a vested interest in blinding us to the ways we may have been undermining them all along.

I searched my emails, remembering the sour, palpable anxiety I felt at submitting my first transcript last March, and my attempt to unseat the isolation the anxiety was feeding off of by sharing my transcript with colleagues. I sent it and shared the gnawing fear that the transcript was an embodiment of the "feeling of just throwing narrative spaghetti without an idea of what I'm trying to do." Anxiety labeled my work as random, intention-less, "narrative spaghetti." *Asshole*. My loving colleague, Sanni, in her reply, offered this:

"It is possible that this is much more than spaghetti my dear!!! You had hopes for her, followed them along and saw and celebrated her being able to say something so bloody surprising for herself."

and

"I was thinking in relation to this transcript whether you know more than the feeling allows you to know."

The first time I read this, I cried. I felt relieved and joined and seen, yanked out of the dark and landing softly into a place where the not-knowing felt more like evidence of curiosity than failure. Upon re-reading it for the purposes of writing this letter, I was astonished that the Asshole had hidden this moment from me so cleverly and so effectively that only six months later it was rendered nearly invisible, hidden in the dark again. I think of this now as a kind of field research – an embodied investigation of how problems can (and need to, for their survival,) work to cover up the portals we move through to more enlivening spaces, and the incredible importance of establishing the history of a counterstory that goes farther into the distance than the moment of "aha" - that without seeing a through-line that goes into the past, there is a short-cut available to problems: it's easier to cover up an "aha" than a history that stretches far out into the distance.





I have been following my hopes all along. The apprenticeship did not teach me how to do this, but it *did* teach me to do this more artfully, more carefully, and with increasingly more drama, carrying the story-so-far along in the hopes that the people who come to speak with me can step into the hope I have for them. The apprenticeship taught me that my work has *always* been more purposeful and intentional than the Asshole let me see, while providing me with ways to use this purpose more powerfully. The apprenticeship taught me the value of searching for history, and led me to experience firsthand what it is to challenge a gnawing, hungry problem with a story that goes back in time. The apprenticeship taught me ways that I might, through my hope-guided questions, “better story counter-stories into being” (Ingamells, 2016, p. 59), and provided me with concrete examples of what this might look like as I grow, learn, and develop in this craft.

With these ideas in mind, I pored through my transcripts throughout the apprenticeship, beginning with the very first one where Sanni saw me “follow my hopes along,” and plucked out examples of questions I saw as being informed by my hopes for the people speaking with me. These questions include several of the question practices we were taught over the last year (particular question practices, close questioning, gathering questions; for more on these practices, see Ingamells, 2016), and were ‘built up to’ in the context of the therapeutic conversation. In the interest of space and time I have listed them here removed from their conversational contexts in an effort to chart how the questions have changed over the course of the apprenticeship. These questions stood out to be because I believe that each one embodies the spirit of “following my hopes along,” inviting the people consulting with me to more keenly see themselves through the lens of my hopes for them. I see each question as an attempt to render visible the skills, hopes, beliefs, and values, and intentions that terrify and diminish problems. Following each question I will note what I was hoping for in the asking of it, and why it is that I feel proud of the particular question.

More Solidarity Against Assholes: Questions Informed by Hope(s)

Example #1:

In response to a person saying that even though she does not like herself at times, she has an idea of her worth as a person and knows she is deserving of respect, and is angry for not having received it...

- Yeah! So how are you holding onto that, do you think? Or how is it that you’re keeping some of this stuff, that seems pretty ripe for the picking in terms of some of the problems that like to occupy your life and pick at your sense of worth...how do you keep it from grabbing onto this, and instead, hold onto being angry?

In this question I am inviting the young woman I am speaking with to see two things: first, that it is an accomplishment for a person with a problem that tells them they are worthless to be angry about the injustice of being mistreated. Second, that this anger may be testament to her having held onto a deep sense of her own worth in spite of the problem’s years-long efforts to the contrary. I am proud of this question because it creates a space for this young woman’s anger to be honoured, rather than allowing the problem an opportunity to twist her anger into evidence of any deficit.





Example #2:

In response to a person entertaining the idea that they have been strong their whole lives...

- Yeah! I am so curious about this idea that you've shared, that maybe you've always been such a strong person; maybe you've always been such a strong person. Is this wisdom that's feeling closer to your mouth, and maybe closer to all the organs that make you feel like you're in touch with it – is it showing you some of the all-alongness of your strength? Is that part of what this wisdom is doing? Or would you credit that to something else?

In this question I am trying to loiter in the space this woman has created for hope in wondering aloud with me if she has always been a strong person; this was of particular significance as the problem story had been one of weakness. I am proud of this question because it attempts to weave together threads she has offered in our conversation (of feeling strong, of feeling more in touch with her own wisdom) into a tapestry that tells a counterstory compelling enough to pull the rug out from under the problem.

Example #3:

In response to a person describing how she is continuously making a difficult decision to abstain from alcohol to care for her child...

- Yeah, yeah. Am I right in thinking that the decision comes less from a place of feeling guilty or hard on yourself, and more from a place of knowing what you want in your life?

In our dialogue leading up to this question, the problem in this woman's life had her focused solely on the guilt she felt over *wanting* to drink, reminding her often of the possible consequences and shaming her for her desire, without leaving any space for acknowledging the fact that she had successfully abstained for the duration of her pregnancy. I am proud of this question because of how it undermines the problem's version of this woman's decisions (one borne of recrimination and criticism) and invites her to see how, through her actions, she has been following her own hopes for herself and her child.

Example #4:

In response to a person who has described taking some significant stands against anxiety...

- I'm thinking, you were saying just a moment ago that part of what makes it scary to do these things by yourself is that in the past you've often had people holding your hand through it. And I'm wondering, when you're telling yourself things like, "You know what? You're scared, but it's always better for you, you might get more work," and even things like, "What if it *does* work?" Are you holding your own hand, a little bit?

In this question I am inviting the woman I am speaking with to see that she is doing for herself what Anxiety needs her to believe only other people can do: hold her hand, and, more pressingly, unseat Anxiety from her life. I am proud of this question not only because of its poetics, but because I was able





to share her own words in making a case against the problem's version of her, and a case for my hopes for her: that she sees how capable she is in pursuing and living the kind of life she wants.

These questions are not perfect by any means, and I see them as developing over a longer trajectory that stretches into the future as I learn to let my hopes, and all I have learned about counterstorying over the last year, guide my conversations. To me, they exemplify how the apprenticeship has provided me with the guidance to find doorways out of darkness and into brighter, more enlivening spaces.

At the outset of the apprenticeship, when I e-introduced myself to the group, I said:

As a new therapist, I experience a lot of doubt about my practice and whether or not I am doing right by the people who come to share their lives with me. My hopes for the apprenticeship are to grow more intentional in my practice, to feel more purposeful and skilled in asking questions, and to diminish (or at least dial down the volume) on this doubt. I cannot think of a more fitting opportunity to pursue these endeavours.

A year later, I see the wisdom in these words and realize more than ever that this journey has illuminated a pathway that has me purposefully (and sometimes poetically) following my hopes for others, only to realize that along the way I have come to meet many of my hopes for myself. For this, I cannot thank you enough.

In solidarity with walking hope-lit paths to new doorways,

Bevan Kovitz

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This Girl Is on Fire: A Feminist Narrative Supervision Story

Sanni Paljakka, M.Sc., Director Calgary Narrative Collective

Note: This paper represents a real-time account of feminist Narrative supervision practice in the form of an email between therapists at the Calgary Narrative Collective. This email conversation took place after the regular supervision meeting over zoom earlier that day. This expansion of the spoken supervision meeting into written emails over the following days is a common practice at the CNC.

On Tue 2020-09-08 2:23PM, Sanni-Ilona Paljakka wrote:

Dear everyone, near and far!

I think I'll die happy now, thank you very much. We had a bloody marvelous intelligent conversation today! This is a recap for everyone, but especially keeping 2 of you in mind who missed out. Crys said at the outset that our "love wasn't wasted on her." Was it ever not wasted, y'all - see below: Crys came fucking prepared, having read and studied Sarah's first-session-transcript as well as the written Crash Course. Based on these readings, her dramatic question, which, Crys said had arisen "in her body," was this:

"How do I find the story to get lost in?"

This was a bigger question set against the backdrop of the idea of being "decentered but influential." Crys had wonderfully surmised that "finding (or discerning) the story to get lost in" is apparently part the "influential-ness" that is the particular challenge set in front of a Narrative therapist. - Other therapists might puzzle over other influential-nesses, for example how to navigate "medical histories" and "depression inventories" (which Crys had some experience with in her psychology training) at the outset of conversations, but since we have done away with those puzzles of influential-nesses by purposefully dismissing these tools as guiding our influential-ness and attention in unwanted, distracting, and even - as Crys suggested- "violation-of-privacy" ways, we don't have to start our challenge there. But neither can we, as Narrative therapists, run away from taking responsibility for our particular influential-ness either. So Crys had brightly puzzled it out: "uh-huh, I see what's going on here. You are apparently putting your power, attention, and influence behind stories." She went one giant leap further to describe it poetically: "uh-huh, I see. It's stories to get lost in that y'all are looking for, hey." And so it is. And of course, Crys wasn't to be appeased easily, so hence her question was: How do I find the story to get lost in then?

At this, there was general talk of influence and power, and how we all have a lot of those two things, and have to decide how to strike our irons then, with all that influence and power in relation to our clients that our profession has murkily bestowed us. But there wasn't an answer to Crys' question. So she quietly wrote some notes, but then came back with the next question:

"-So this is my great task then: How do I ask questions that pull out stories to get lost in?"





At this, there was laughter, - because "great task" indeed! Tom amended the question to say "How do I think in ways that can help me ask questions that pull out stories to get lost in and resist unstories?" We spoke in general again about investing in thinking (rather than perfect questions), in thinking-out-loud-in-front-of-our-clients-practices (for example: "because you said this, I am now wondering how to ask a question about this, I am thinking I could ask you this way, or this other way, and – which of these is better, you think?"). Perhaps these are more correctly wonder-out-loud-practices, or thinking-together-with-our-clients-practices but what they have in common is the practice of learning to respond to the query of "the reason I am asking you this is because..."

These are coincidentally also practices to cede more power to our clients rather than hogging it all to ourselves (by being willing to "embody" our questions, meaning to explain the hope of the question, the why of the question, the context of how the question arose and thereby inviting a client's response, not just to a question, but to the thinking of the question...).

Crys again listened thoughtfully at everyone talking and laughing. But she was undeterred. She tried a third time:

"-Okay fine. Then tell me this, all you talking heads (I am paraphrasing, she said no such thing about "talking heads," but the rest of it is all true and reveals the relentless bright curiosity here, which perhaps is our first indication of one of Crys' wonderfulnesses, but that remains to be determined -by her, not me):

"-How do I begin to think in ways that helps me ask the questions that pull out the stories to get lost in?"

See? How joyful is all that? But it gets better, just you wait.

We basically told Crys that she is asking us to "tell her all the thinking in the world" - which is exactly the kind of impossibly curiosity that is rare but wonderful.

In fact, it reminds me very much of our former student when she first started her practicum with us and asked, "where is the book in which all Master Narratives are written out? Where is it, because I would like to read it now, please" (I paraphrase liberally again, for effect purposes). I am still thinking about that question, about the book of Master Narratives, a flippant answer would be "the Bible." Or "all of Shakespeare." Or "the DSM." Or the entire "self-help section of the local bookstore." That's where these things conglomerate and have tea parties and decide to hook up with each other and have questionable pregnancies. But I'm only partly serious. The question was good, because the work of seeing the master's narratives in any given moment is to see the wind, or to see that thing called "power." The less-well understood point is that every idea, I repeat, every idea, however radical it was meant to be at its inception, can be used for the oppressive restriction of the movement of a person. So it is with Narrative therapy, for example. Narrative therapy was conceived as a liberatory idea, an anti-therapy, a strong response to the usurping of control of people's lives by medical ideologies. But Narrative therapy turns into an oppressive idea if handled in a dogmatic sanctimonious manner as a machine of truth that dictates what can be said and what cannot. You see this when students self-consciously focus their attention on the vague but totalizing question "is it Narrative?" than about the ways justice can be sought inside a story, with a particular person. Another idea that was liberatory in its inception is the





concept of trauma that was meant to give another shape to the language of suffering and the contexts of its creation. But the concept of trauma can also be used to steal other vocabularies, to usurp understandings of what happens to people's bodies in particular moments, and to hold imaginations of the present and future still and captive. We shall undoubtedly return to the ways in which even our most favourite and precious ideas can be used for the congealment of the leaps of human imagination and their original proposals.

But to return to Crys's curiosity about "tell me all the thinking in the world..." – I read a fascinating essay this morning about wisdom and embitterment. In this essay, "wisdom," or the "capacity for wisdom" or even the "achievement of wisdom" were partially defined as the "curiosity to think things I have never thought before" – this could happen because life serves me up an unforeseen complication or in our case, our client speaks to us of things we don't know anything about, – like their lives! This is part of the reason I think that being a therapist is the richest goddamn job in the universe because we get to hear stories of experiences that can smash all the conventions of thinking we have held up until this point! But only if we invest in thinking "when it gets complicated." Which is precisely the moment when many therapists sadly but very understandably want to invest in advice or something "easy to follow" – the moment when it gets complicated.

So needless to say, the response to Crys to "tell her all the thinking" had a lot to do with "we need a particular client story to start thinking about thinking" instead of trying to do thinking outside of client stories in generalities (just like we need particular client story to think of Master Narratives involved instead of thinking of all Master Narratives to be pulled out of Bible in one standing, although there are 5 or 25 that immediately come to mind there :)).

Wonderfully, Crys put this, the "thinking inside a story," to the test and returned to Sarah's transcript and the question Sarah had asked of her client in their first session as almost the first question out (after hearing that this young man had been in a controlling relationship, so controlling in fact, that he was at times required to be naked until his partner gave permission for him to get dressed and had a hunch that he might suffer from trauma and "co-dependence" now years later. This was Sarah's question after hearing the above details:

Sarah: "How did it go down when you left him? Can you tell me the story? Was it sunny? Or was there a big storm happening? Did you have, like, a big dramatic yelling match and then leave, slamming the door? Did you kind of quietly leave without fanfare and never talk again, or did you have texting conversations for years afterwards or did you just somehow sneak away?"

Crys highlighted this question because it had moved her to think that Sarah wished to convey her "real interest" and "care" in the story of the "day of leaving" to client and had done so convincingly. Crys said, if someone asked her that, she would somehow immediately know that the person really wanted to know and hear and care about this.

We talked about Sarah's question for the remaining conversation as a formidable example of a question to "find the story to get lost in." First of all, can you all easily defend Sarah's decision to let this be one the questions to invest in? Why is it important to ask this young man about the "day of leaving" and invest in this story first above other possible stories to tell in a first session? Remember the young man's





un-story proposal: that this relationship had left him with a serious case of “co-dependence.” Can you see why Sarah might want to invest in the story of the “day of leaving” as a possibility for counter-story work to begin?

Y'all will of course think your own thoughts, but 2 things beyond the above un-story-counterstory work that Sarah embarked on struck me as wonderful about Sarah's possible thinking behind the question were these things:

1. How do we convincingly let a client know that we are looking for a story (instead of an unstory, a label, a one-sentence response, a descriptor, a conclusion)? Well, this is how Sarah did it in the first part of her question: *“How did it go down when you left? Can you tell me the story? Was it sunny? Or was there a big storm happening?”*

See how well that works? Sarah asked specifically for a story, but as if to further clarify to the client that she really was looking for a story about the “day of leaving” rather than a thin conclusion or a one-sentence answer, she asked about the weather on that day. She proved her interest in an actual story, did she not?

2. And how do we convincingly let a client know that we are looking for a story and are not too delicate to handle the damn story whatever it's going to be? Sarah had a hunch from the earlier conversation that the colonizing of this client by pathologizing un-stories had had lasting effects on his words and ideas, and therefore set out to help in the following manner: *“Did you have, like, a big dramatic yelling match and then leave, slamming the door? Did you kind of quietly leave without fanfare and never talk again, or did you have texting conversations for years afterwards or did you just somehow sneak away?”*

Put another way: sometimes, when our clients struggle to tell their own stories, we cannot just torment them with quizzical series of “what happened?” and “why?”-questions. Sometimes, the best way to help in finding stories is to create options as lively “reflecting surfaces” for the client. These options are not meant to be true or colonizing of the client as clients rarely pick any of these options, and neither did Sarah’s client. These options are meant to show the client something else: *“look I'm not going to hang you, whatever you say, I'm not too delicate, I've done some living of my own, and I'm a little tough too, so be at ease, if you want, and feel free to actually tell me your story because I'm not a fucking princess who was raised in a glass castle with golden plates and bows in my hair, I'm an actual human who knows that life is wonderfully complicated and sweaty and messy.”*

Vikki Reynolds once wrote or said something about “clients constantly assessing in their own way, whether they can trust us.” I imagine that clients sometimes sit there and cock their heads a little and wonder to themselves: *“man, can I tell this person that I just had sex this morning, or haven't had sex ever, or that I was stoned or furious, or struggling to put pants on this morning, or can I tell her that my partner and I licked chocolate off each other's bellies and then got into a fight about feeling fat? Can I tell her any of this?”*





If you want your client's answer to be YES, about telling you their stories in ways that were actually messy the way life was, then show them so! Prove to them your trustworthiness and that you're not going to turn into Prissy Mc-proper by making your proposals of options of what someone might have felt or how a break-up might have gone lively and human. Show your allegiance and admiration for ways of human living and your condescension for the conventions of Master Narratives by the ways in which you speak. This is a way of resisting Master Narratives on the slant: make sure none of your examples of options are quite proper, ever. (For example, consider the effect of the particulars of my "options" when a client of mine struggled to say "what happened next" after their partner stormed out of the house after a 3-hour yelling match: "What did you do? Did you stare at the wall, all vacant, or did you mindlessly turn on the TV to drown out the shit in your ears that just happened, or did you want to smash things or cry until the world ends, - or what did you do?" Consider this in relation to the proper-ness of asking "What did you do? How did you care for yourself when he left?" Remember here that our questions can open portals to worlds untold, and if our imaginations are limited to imaginations of "self-care," or other proper-life-options, we can lose our clients' trust in the process!)

Here's how Sarah proved herself trustworthy y'all: "*did you have like a big dramatic yelling match and then leave, slamming the door? Did you kind of quietly leave without fanfare and never talk again, or did you have texting conversations for years afterwards or did you just somehow sneak away?*" I'd tell this therapist what really happened. I wouldn't tell the therapist who asked me, all proper, in a yoga voice, "and how did it feel to say goodbye?" or whatever.

By the way, Sarah just laughed about all this wondering about her thinking, and said, laughing, "look, I just thought: *give me the good stuff, because I have to write a poem about this to you.*" So there we go, "thinking like a writer" is helpful!

So then, based on above conversation about Sarah's question, and the consideration of why it was important to raise the story of the "day of leaving" as opposed to other stories for now, Crys went all the way back and answered her own question:

Crys: "So basically, it's: ask about the revolution?"

I rest my case. So it is. You're on fire, Crys.

(Only teeny-weeny caution: there are about 2 thousand ways of revolution, so get ready to hear about the ways of revolution that you've never ever even imagined. But other than that. Yes. This is perfect. Be beset with revolutions and ask about all the days of the revolution and tell those stories. YES!)

Lovely revolutionary Tuesday y'all,

Sanni





let me bitchsplain this to you

*here, let me bitch-splain it for you:
i mean, i am asking for the real story.
tell me the story as if we were two, full blooded humans
because i am sure as hell full-blooded
tell me the story, i can take it, i want it.
give me the tele novella of it all
-well, how do i do that?
i'll let you in on a secret:
look for the revolution.
shhhhhh....
it's not always loud
sometimes, it's a velvet revolution
an act of defiance
an exasperated "fuck you!"
silent tears
or finally looking back at him, straight into his eyes
don't fool yourself into thinking you know what revolution looks like for her or him or they
or me
but, if you are curiouser and curiouser
think the thoughts that lead to questions that lead to stories
and look for the revolution
put that on your fucking form!*

class dismissed.

By Crys Vincent,
after day 1 of Narrative therapy practicum training

