

# Re-Authoring: Some answers to commonly asked questions

compiled by

Maggie Carey & Shona Russell<sup>1</sup>

The understanding that our lives are shaped by the stories that we create about them underpins all narrative practice. This practice-based paper, which was created through collaborative processes involving narrative practitioners in a number of different countries, seeks to answer some commonly asked questions about re-authoring conversations. Practical examples are offered throughout, as are explanations of the thinking that informs re-authoring conversations.

Keywords: Re-authoring conversations, narrative therapy.

## 1. What are re-authoring conversations?

When someone comes to see a therapist it is often because terrible and/or complex circumstances have given rise to highly negative conclusions about themselves. This might include understanding themselves to be 'a loser' or 'hopeless' or 'deserving of unhappiness' or 'depressed' or 'crazy' or any other number of problematic identity conclusions.

Events happen in all of our lives that cannot be changed. People experience traumas and losses that cannot be undone. The ways in which these events are understood and interpreted, however, makes a considerable difference to their effects. For instance, if you believe you were subject to a particular trauma because it was 'your fault', because you have always been 'a loser' and that these sorts of events are going to continue to happen for the rest of your life, then this has a very different effect than if you believe what occurred was a singular, horrific, unjustifiable act of abuse or injustice.

What sort of story-line an event is placed into makes a significant difference as to the effects of that event in a person's life. People do not just make these story-lines up out of the blue. They are shaped by many influences, relationships, events and broader relations of power.

Re-authoring conversations take place between a therapist and the person(s) who have come to see them and involve the identification and co-creation of alternative story-lines of identity. The practice of re-authoring is based on the assumption that no one story can possibly encapsulate the totality of a person's experience, there will always be inconsistencies and contradictions. There will always be other story-lines that can be created from the events of our lives. As such, our identities are not single-storied – no one story can sum us up. We are multi-storied. Re-authoring conversations involve the co-authoring of story-lines that will assist in addressing whatever predicaments have brought someone into counselling.

These alternative story-lines are also not simply made up out of nothing. They are not invented. Just as the dominant problematic story will consist of past events linked into a theme that have been interpreted in a certain way, so too will alternative stories. Later in this piece, we will explain how alternative stories can be co-constructed through therapeutic conversations. First though, it is relevant to explore what we mean by a story.

David Epston and Michael White introduced the narrative metaphor and the re-authoring metaphor to the therapeutic field (Epston & White 1990; Epston 1992; White 2001a). One of the key considerations that their work introduced was to consider how stories shape people's identities. In turn this led to an exploration of what makes up a story. There are four elements that go into the development of a story-line. A story-line is comprised of:

- i) events,
- ii) in a sequence,
- iii) across time,
- iv) organised according to a plot or theme.

If any of these elements is missing then it is not possible to have a story-line. So, considerations of each of these elements are critical in re-authoring conversations.

For instance, Germaine may have come to the conclusion that she is 'a doormat'. Her therapist may want to understand this conclusion and may seek to explore its history. In doing so, Germaine begins to tell stories of how certain events that have occurred in a sequence across time have led her to believe that she is a 'doormat' and that she is therefore deserving of the hardships that she is currently experiencing. Germaine can rattle off any number of times that she has let others dominate her, when she has not stood up for herself, and she is quick to link these together in a theme of 'unworthiness' and 'being a doormat'. This is the dominant, problematic story of Germaine's life. It is one story of her identity.

Hearing this, the therapist, might begin by looking at the effects that this story is having on Germaine's life: how it is affecting her sense of self, her relationships, her dreams. She might also trace its history in some detail ... and discover that Germaine has not always felt like a 'doormat', in fact this was a term she was not familiar with until her ex-partner (who had been demeaning of Germaine) used it to describe her. While this historicising of the problem story and locating it within a history of inequitable gender relations may have

assisted Germaine to see the unfairness of this 'doormat' description, without an alternative story-line of identity Germaine would remain extremely vulnerable to negative thoughts about herself.

The therapist is therefore always on the look-out for moments, actions, thoughts, or stories that might contradict the problematic story-line. In this instance, the therapist was on the look-out for anything that contradicted the description of Germaine as a 'doormat'. A possible exception to the dominant plot, or what is known within narrative therapy as a unique outcome, was noticed when Germaine mentioned that she had recently made a decision to change her phone number. Germaine had reported that she had decided to start afresh. She didn't want certain people (her ex-partner included) to be able to call her any more and so she was only going to give her new numbers to those friends and family members who were supportive of her. While some of her friends thought this was an excessive step, Germaine had remained resolute and had carried through.

This sort of event could possibly become the catalyst for the co-creation of an alternative story of identity for Germaine. But initially it is only one event. It might not even be an event that Germaine initially thinks is particularly significant. A re-authoring conversation is required to make it possible for Germaine to attribute significance to this event and to explore whether this event can be linked to other events, across time, in a sequence and according to a theme (a different theme from the problematic story). Only this linking can enable the development of an alternative story-line. This is the role of re-authoring conversations.

## 2. How do you begin a re-authoring conversation?

There are many ways to begin a re-authoring conversation, but one key principle involves the therapist taking a position of inquiry and seeking to notice any event that contradicts the dominant story. If one is looking closely and carefully, these events are always apparent – even if they are small. There is always at least a glimmer of an action or of an intention that is at variance to the problematic story. We call these *unique outcomes* because they are unique to, and outside of, the territory of the problem-story (sometimes they are also referred to as 'sparkling moments'). We see it as our role as therapists to be on the look-out for these events.

For example, in consultations with Mary who has been experiencing anxiety, the therapist is on the look-out for

anything that Mary might have done which would run contrary to what 'the anxiety' usually dictates. It isn't the therapist's role to point out the contradiction, but instead to use this as a point of entry for the development of an alternative story.

For example, the therapist might ask: *Mary, I've heard you describe how hard it is for you to get out of the house, the obstacles that you face. In previous sessions, we have looked in some detail at how the Anxiety works and the times when you feel its presence most strongly. Today, you mentioned that you managed to walk your son to pre-school this morning. Can I ask you some questions about this? Was this the first time you have been able to do this? Is this a common phenomenon? Or do you think this could have been a significantly different event?*

If Mary stated that this was a new development, or at least something that is not common, the therapist might then go on to ask further questions about it. She might ask, for instance: *What do you think made this possible? Did you take any steps leading up to this event? Were there any preparations that you made? What were some of the things you were thinking about at the time that made it easier? What do you think spurred you on to make these preparations, and to take this step? What do you think was guiding you in taking this step – what was it you were hoping for, seeking out? What does it say about you, do you think, that despite the effects of the anxiety you were able to evade its invitations this morning?*

In asking these sorts of questions, the therapist is drawing out more information about the event and Mary's understanding of it. At the same time these questions are enabling Mary to imbue the event (of accompanying her son to pre-school) with meaning and significance. This is not imposed by the therapist but occurs through a process of questioning. If an event like this one can be rendered significant then the person's curiosity about it can be enlisted and harnessed. It then becomes possible to ask questions that lead to a fascination with these neglected events.

Once an event like this has been richly described, the therapist might then seek to link it with another event. This is because, no matter how significant a single event might become, no matter how strongly it may contradict the dominant problematic story-line, one event on its own will always be vulnerable. It is vitally important to link the unique outcome to other events, to link these into an alternative story-line.

So, the therapist might then ask questions such as: *Have you ever done anything like that before? Have you ever made similar preparations or taken similar steps? Have there been other times when your care and love for your son has enabled you to slip away from Anxiety? Have there been other times either recently or in the distant past when you have demonstrated a similar sense of strength of will, or a similar sense of determination?*

If just one other similar event can be located in Mary's history then these can be linked together across time in a sequence according to a theme, and this can be the very beginning of an alternative story-line. In this situation, Mary might remember a time when she was able to visit a friend who was in need. She was able to limit the influence of the Anxiety by talking quietly to herself and by breathing slowly and this meant that the visit was possible. Mary might identify that this was similar in some way to walking her son to school because it was another example of a time when she didn't let the anxiety stop her from doing something that was important to her. If the therapist asked her to name this other story that seemed to be taking shape, Mary might call it 'reclaiming my relationships and my life'. The next processes of re-authoring would involve 'thickening' this alternative, preferred story.

### 3) What is the re-authoring conversations 'map'?

To act as a guide to re-authoring conversations, Michael White has developed what is known as the re-authoring conversations 'map' (White 2003a). No two re-authoring conversations are the same, but the re-authoring conversations map can assist in understanding what directions we are taking in a conversation and why. Once a unique outcome has been identified there are a number of different places the conversation could go that will create an opportunity for the co-authoring of a preferred story of identity.

The re-authoring conversations map divides the questions that we ask as therapists into two categories. One category involves questions that inquire about the 'landscape of action' and the other category involves questions that inquire about the 'landscape of identity' of the preferred story. These two categories of questions are based on Jerome Bruner's description that every story consists of both a 'landscape of action' and a 'landscape of consciousness' (see Bruner 1986; Epston & White 1990; White 1995a).

Landscape of action questions involve inquiries into events and actions. Once a unique outcome has been articulated then the following sorts of landscape of action questions might be asked:

- *Can you tell me a bit about what happened there?*
- *Where were you?*
- *Who was around?*
- *What were the steps that you took to get yourself ready to do what you did?*
- *What do you think was the turning-point that led to you being able to do what you did?*
- *Was this event unusual or have there been times when you've done this sort of thing before?*
- *Have there been other occasions when you have managed to do this?*
- *How did you manage this then?*

As mentioned above, re-authoring conversations then assist people to link these events into an alternative story-line according to a particular theme or plot.

Landscape of identity questions encourage people to explore a different territory. They relate to the implications that this alternative story-line has in terms of the person's understanding of their identity. Landscape of identity questions invite people to reflect differently on their own identities and the identities of others. For instance:

- *As you have been describing these times when you have been able to evade the influence of the problem, or how you have been able to outsmart it, what do you think this says about you as a person?*
- *When you held firm to your views about changing your phone number, what were you hoping for? What does this action say about your hopes for your life?*
- *When you walked your son to school, even though this meant that you had to somehow evade the feelings of anxiety, why was it important for you to do this? What does this say about your values in relation to the care of your child? Why is this something that is important for you? What do you think it says about you that you care about this?*
- *If he was older, what might your son say this reflects about you as a person?*

Re-authoring conversations zigzag between 'landscape of action questions' and 'landscape of identity questions'. Let's look at an example: Tracey who is twenty-two years old

and has two children, Alex (4) and Melissa (2). Tracey has been separated from the children's father for about a year, and says that this was the best thing that she has ever done as 'he was becoming more and more aggressive and the children were starting to be afraid of him'. Lately, however, Tracey has been feeling really depressed, as though there's nothing to look forward to in life. She has started to feel worried when she goes to the shopping centre, doesn't feel like going out much, and is afraid that she's not being a good enough mother to the children.

Tracey used to spend some time going out with girlfriends but lately she hasn't been able to get anyone that she feels comfortable with to look after the children. Her mother, who has been a big part of the children's care since they were born, is away at the moment visiting relatives.

It was Alex's birthday a couple of weeks ago and Tracey organised a party for six of Alex's friends from the local kindergarten, and although she was worried beforehand, she found that somehow she managed okay and everyone had a good time.

Apart from this event though, there hasn't been much happening. Tracey says that she doesn't feel too bad while the kids are awake, but at night she can't help feeling bad about herself and worries about what effect her depression and worry will have on the children. Tracey says that she hadn't been keen to come for counselling because she thought that she would be judged as a bad mother and that she could have the children taken away from her.

Within this initial conversation there are a number of themes that Tracey is identifying as problematic for her, including 'depression', 'worry' and 'being not a good enough mother'. After some conversation, one or more of these might be externalised as 'the depression', 'the worry' or the 'not good enough mother voice'. The effects of these dominant plots might be thoroughly explored and acknowledged and their history detailed. In this conversation the effects of the current problems would be traced not only in Tracey's life but also in the lives of the children.

There would then be opportunities to return to the numerous unique outcomes or events that Tracey mentioned that contradict the problematic stories. One of these events was when Tracey managed okay with the birthday party even though the depression or worry could have had her not go ahead with it. Another involved Tracey coming for counselling even though the fear of judgement or blame could have had her stay away. Other openings to a preferred story

were implied by some of the statements that Tracey has made, and these could be other possibilities for beginning a re-authoring conversation. For instance there were a number of Tracey's statements that were inconsistent with her story of herself as a bad mother:

- i) her comment about not having anyone that she is comfortable leaving the children with;
- ii) her concern about the effect that her depression and anxiety are having on her children and seeking counselling as a result,
- iii) her action of leaving the children's father because he was starting to make the children fearful of him.

Within all these statements of concern and action are implied commitments to her children that are not present in Tracey's descriptions of herself as 'not good enough' and as a failure as a mother. Having noticed these unique outcomes, a re-authoring conversation could then begin.

It might begin firstly with some landscape of action questions:

*Tracey, can we talk a little about Alex's birthday party? You said that this was a time that you had kept 'worry' at bay. Can you tell me more about how you did this? What steps did you take? What name would you give to these steps? Were there any things that you said to yourself at the time? What was it that made the difference do you think?*

One of the key aims of these landscape of action questions is to enable Tracey to imbue these events with significance. Another key aim is to create the opportunity for Tracey to think more about the foundation of these events, including particular skills that she used in order to make the unique outcomes possible.

Tracey replied that she had put a lot of thought into the preparations for the party, that she had started some days before, and that she knew how much it meant to Alex to have this party and that she was just determined to do it for him.

This might then be an opportunity to ask some landscape of identity questions. These questions invite people to reflect on specific events of their lives to determine what these might say about their identity.

*So, Tracey, can I get this straight ... you knew that the worry would try to get in the way of the party organising, so you started earlier than usual and was more thorough than you once would have been. And that despite the effects of the worry, which we have talked about before, and which are sometimes quite overwhelming for you, you were nevertheless able to proceed because of how much you knew it would*

*mean to Alex ... what do you think this says about your care for Alex, what you want for him? What do you think it says about your hopes as a parent?*

Tracey then went on to describe her many hopes for Alex and also for Melissa. These were hopes that included a safe and loving home and a chance to build friendships and to have fun. When asked what the history of these hopes might have been, Tracey said that much of her childhood was not loving and that this was something she knew from the minute she was first pregnant with Alex that she wanted to be different for her children. When asked whether this determination was linked to the care that she takes in not leaving her children in anyone's company unless she really trusts them, and also how she had sought counselling because of her concern about the effects of her depression on her children at present, Tracey said that yes, these were all linked, they all have to do with her love and care for her children.

This is the beginning of the development of new conclusions about Tracey's identity – that she is someone who loves and cares for her children, despite obstacles that have at times been placed in her way. When asked what she would call this care and her hopes for her children's lives, Tracey decided to call it 'hopes for a better life'.

As these new identity conclusions develop, it then becomes time to return to the landscape of action:

- *Can you tell me other times that you have acted according to your 'hopes for a better life'?*
- *What would I have seen you doing in the past that would have told me that these hopes were important to you back then?*
- *If your mother was here, are there any actions that she might remember you doing that would fit with you being someone who holds onto hopes for the future?*

These landscape of action questions can also project the preferred story-line into the future:

- *If we look at these recent acts of caring that you have demonstrated for your children – leaving the past relationship; holding the birthday party despite the influence of the worry; not leaving your children with adults you don't completely trust; seeking counselling because of your concern for your children – what other steps do you think might be available to you in the future?*
- *How long do you expect to live your life according to these beliefs about what is important?*

After hearing responses to these sorts of questions it might be then be time to ask some additional landscape of identity questions in order to contribute further to new identity conclusions:

*Tracey, it seems to me that you are telling me various stories that demonstrate your care and love for your children and that also involve you holding onto hope that things can be different in the future. Are these things that are important to you? Can you tell me more about how you have come to believe in this? Have there been others in your life who have taught you about the love of children, and about holding onto hope even when things are difficult? If so, what do you think they would say about you and your actions at the moment?*

#### 4) How do you ask questions about people's identities in ways that will make a difference?

In thinking about the landscape of identity it is relevant to reconsider the understandings of identity that underpin this work. Narrative practices are interested in notions of 'intentional states of identity' which contrast with notions of 'internal states of identity' (White 2001b). In other words, we are interested in exploring the intentions, hopes, values and commitments that shape people's actions rather than any internal deficits or deficiencies, or for that matter any internal 'resources', 'strengths' or 'qualities'.

Locating identity as something internal to us generally limits the possibilities for re-authoring conversations. If you identify the reason someone acts as due to internal qualities such as their 'strength', their 'compassion', their 'determination', it can be difficult to know where to go next with the conversation. While we do not exclude conversations about internal 'strengths', 'resources' or 'qualities', as these are usually identified as positive elements of a person's life, we seek to trace the history of these qualities: explore how they came to be meaningful to the person; place them into story-lines; and link them to the person's values, hopes and commitments.

We are always interested in inviting people to speak about their identities in terms of 'intentional states' because this makes story-making more possible. If we seek out the values, hopes and dreams that are guiding someone's actions, there are ways to trace the history of these, to link them to the hopes and dreams of other people, and to forecast what future actions will flow from these commitments.

Intentional states of identity include:

- Intentions or purposes
- Values / beliefs
- Hopes and dreams
- Principles for living
- Commitments

The ways in which we engage with our commitments, purposes, beliefs, values and dreams shape our actions and how we live our lives. Inviting people to think about these intentional states and linking them to alternative story-lines (formed from unique outcomes) provides a fertile ground for re-authoring conversations.

Michael White describes a 'hierarchy' of these intentional states (White 2003b). It seems that it is easier for people to respond to questions about intentional states if we start by asking questions about:

- their *intentions* or *purposes* that shaped a particular action,
- then ask about the *values* and *beliefs* that are supporting these,
- then the *hopes and dreams* that are associated with these values,
- then the *principles of living* that are represented by those hopes and dreams,
- and finally the *commitments*, or what it is that people are standing for in life.

Looked at like this, each level encompasses the level below it and extends upon it in some way. There is a significant difference between an intention that informed an action on a particular occasion, to on the other hand articulating a way of being in life, or what you really stand for in life. The further you go up the hierarchy (towards commitments), the thicker the alternative story becomes. If someone can clearly articulate their principles of living and what it is they are standing for in life, the more likely it is they will know what future steps they can take in order to act in accordance with these commitments.

Re-authoring conversations are also relevant for us as therapists. In this next example, Joucquin has struggled recently with feeling a lack of confidence in his skills as a therapist. In a supervision consultation, the conversation initially traced some of the effects of this problem that included questioning whether he would continue in this line of work, and looked at the times when the problem was most present.

It seemed that a range of institutional practices (demands of seeing a certain number of persons in half a day, and some of the ways in which the people who consult the mental health centre were discussed in team meetings) were the triggers for increasing Joucquin's lack of confidence in his counselling abilities. It turned out that the reason he was thinking of changing careers was that he didn't know if he was offering enough to those consulting him.

In this same supervision consultation, a number of facts that contradicted the problematic story were identified. The one thing that Joucquin did feel confident about in his work was the time and care that he takes in talking with people. Joucquin was able to identify a considerable number of examples, both recently and in the more distant past, where he had gone the extra mile with those he was working with. He was also able to identify a range of times when he had received feedback from those he worked with that they had greatly appreciated his calm and measured manner.

While some institutional practices had led Joucquin to think that perhaps he was 'slow' because he was unskilled, an alternative understanding began to evolve that perhaps the time he takes was due to particular ideas and beliefs that Joucquin has about being a therapist. Gradually, Joucquin identified an alternative story about his identity as a therapist, that he is a 'good listener'.

The following questions aimed to thicken this story in ways that would enable Joucquin to become clearer about what he stood for in this work, as it was thought that this would then enable him to make clearer decisions about his work and career. These questions were informed by the idea of a hierarchy of intentional states.

*Supervisor:* When you think about 'being a good listener', how do you want to use this quality in your work? What is it that you want to do with it? (This will describe an *intention* or *purpose* that Joucquin holds).

*Joucquin:* Well, I want to use my good listening to make sure that the person that I am talking to feels that they have been heard.

*Supervisor:* Why is it important to you that people feel that they have been heard? What is it that you are valuing in having people be heard? (This will describe a *value*).

*Joucquin:* I guess it's important to me that they feel heard because I want them to know that I believe in them, and I think that it's respectful to listen well to people.

*Supervisor:* What hopes or dreams do you hold for your work in relation to people knowing that you believe in them and want to respect them? (*hopes and dreams*)

*Joucquin:* I hope that if people sense that I believe in them and I act respectfully, that they will start believing in themselves a bit more.

*Supervisor:* When you think now about your hopes that people will start believing in themselves a bit more, what does this reflect about the ways of being in the world that are important to you? (This will describe a *principle of living* that Joucquin holds)

*Joucquin:* Well I guess I've always thought that everyone needs to believe in themselves.

*Supervisor:* What do you reckon it is that you're standing for in your work in relation to everyone needs to believe in themselves? (This will describe a *commitment*)

*Joucquin:* I'm standing for people having the chance to be respected and believed in, and that everyone has the right to this.

Having articulated what he wishes to stand for in his working life, Joucquin then looked again at his current work and the institution for which he worked. In further conversations he was able to identify more clearly those times and ways in which the work he was doing was adhering to his commitment to 'people having the chance to be respected and believed in' and times where it was not. In meeting with colleagues in his workplace they were able to initiate some small steps that would lead to more flexibility in responding to those in their care.

Joucquin also decided that he would speak up in staff meetings whenever he believed that the ways of speaking were not fitting with a commitment to respect. Being able to articulate his commitments made it easier for Joucquin to determine what he wanted to do. It also greatly 'thickened' the notion of 'being a good listener' into something that was linked to much broader commitments.

The re-authoring of a story of 'lack of confidence' to one of 'a good listener' with a commitment to respect made a significant difference to Joucquin's understanding of his work and therefore to the ways in which he acted as a counsellor.

## 5. How does re-authoring fit with other narrative understandings and practices?

Re-authoring conversations are intimately connected to other narrative practices such as externalising conversations (Epston & White 1990; Morgan 2000; Carey & Russell 2002), re-membering conversations (White 1997; Russell & Carey 2002), outsider-witness practices and definitional ceremonies (White 1995, 1999), and the use of documents and letters (Epston & White 1990; Epston 1994).

Externalising conversations are often, but by no means always, the first step as they enable ways of talking about the problem and the problem story that have the effect of separating this from the identity of the person. For instance, it was only in talking about the effects of 'the worry' on Tracey's life (see above) that she was able to separate from the idea that she was a bad mother. Instead she came to see that the 'worry' was having powerful influences upon her life and her children's lives and that she was doing everything she could to address this. Externalising conversations involve naming the problem (as separate from the person), mapping the effects of the problem through various domains of a person's life, and also tracing the history of the problem in the person's life. This enables the problem to be placed into a story-line. This process makes it clearer that the problem is not something that exists within the person. It is instead something that has developed over time, a development that has been influenced by a range of factors. For example, externalising conversations play a key part in acknowledging that problems are often influenced by broader relations of power (class, culture, gender, sexual identity, etc). Placing the externalised problem into a story-line can be very freeing. In Tracey's situation, Worry began to influence her life after Tracey had left a relationship in which the man had been becoming increasingly aggressive and when she had become the sole carer for her children, and when her mother had left town for a period of time. Rather than Tracey seeing herself as somehow 'neurotic', the articulation of this story-line enabled Tracey to place the problem as something external to herself and as something which has a specific history and a broader context.

These sorts of externalising conversations are often the backdrop to re-authoring conversations. Often it is only after the problem has been externalised and thoroughly acknowledged that the unique outcomes, the contradictions to the dominant plots of people's lives, become noticed and significant.

Once the zigzagging questions develop the landscapes of action and the landscapes of identity of the preferred story, it then becomes possible to take up other options to further 'thicken' it. This process can take many forms. Re-membering conversations, documents and letters, and the use of outsider witnesses can all be extremely helpful in this process.

It is often not enough for an alternative story to be named. Even when it has been created from the linking of key unique outcomes, it will still be very fragile and tenuous. For instance, Mary's story of 'reclaiming my relationships and my life' could easily be shaken if an event occurred that sparked a reoccurrence of Anxiety. Tracey's story of 'hopes for a better life' could quickly be overshadowed by feelings of failure if another person expressed doubts about her parenting. And Joucquin's story of 'a good listener and a commitment to respect' could be at risk if an event occurred at work that led him to step back to a place where 'lack of confidence' got the better of him.

Re-membering conversations (White 1997; Russell & Carey 2002) are one way of thickening the preferred story. These involve the therapist asking questions such as:

- *Tracey, this commitment to holding onto hope that you've been describing, is there anyone who would not be surprised to hear you talking in this way?*
- *Is there someone who would recognise and appreciate what your commitment to hope means to you?*
- *Was there someone who introduced you to the idea of holding onto hope for a different future?*
- *If so, why do you think they chose you to share this lesson with?*
- *What do you think they saw in you that made them think you might be able to carry this commitment through in your life?*
- *Was there something they might have seen you doing in the past that would have told them that this commitment was important to you back then?*
- *What do you think it might have meant to them to be able to share this commitment with you?*
- *What would it mean to them to see you taking these actions now, that despite the effects of Worry you are finding ways to honour your commitment to love and care and also to hold onto hope that life will be different for your children?*

- *What do you think they would say if they were here with us now?*
- *How would they say it?*
- *Would there be some way of keeping this person's presence close to you in the coming days?*

These re-membering questions evoke the views and perspectives of people who can contribute to the further development of the alternative story – in this case, 'holding onto hope'. They link the newly co-authored story of identity to a sense of history and also to the stories of the lives of other people. Narrative practice is based upon the belief that our sense of self is socially constructed and exists in relationship to other people.

Another way of involving other people in the process of richly describing preferred stories is through the use of outsider witnesses to the therapy conversations. These might be friends or family members of the person concerned, or they might be other therapists. Chosen relatives, friends, acquaintances, peers can play a very powerful part in the re-authoring process.

For instance, Joucquin might have identified that it was from his relationship with his older sister that he learnt the value of 'good listening'. If so, then this might be an opportunity to invite Joucquin's sister to the next therapy session. Joucquin could then be interviewed and speak about his commitments to 'good listening' and what he is trying to achieve in his work, and his sister could be invited to offer some reflections as to what it means to her to know that something generated from their relationship is continuing to shape Joucquin's life in significant ways.

Finding supportive audiences who can witness and authenticate preferred stories is a vital element of this work. If Joucquin's sister wasn't available, it might be possible to gather together a team of other therapists to act as an outsider witness group who could offer reflections as to what it means to them as therapists to hear of Joucquin's commitments and how Joucquin's stories might touch their own practices. These sorts of 'definitional ceremonies' can make a profound difference to the richness of alternative stories and therefore the effects that these stories have on people's lives.

Problems are often extremely successful at separating and isolating people from others, and so a key aspect of re-authoring work is to open spaces of connection and reconnection. This means that others have a vital role to play in re-authoring stories of people's lives.

Sometimes therapeutic documents and letters can be co-written with the person concerned and these can then be shared with others, for example, friends and family members. These can act to catch people up on what has been happening for the person concerned and the steps that they have been taking. At the same time, these letters and documents can provide support to the person in between therapy sessions. They can be read and re-read and this can be a part of the re-authoring process.

## 6. When do we know if enough re-authoring has taken place?

When the effects of the problem story are no longer prevalent, then this is a sign that the alternative/preferred story of identity is beginning to take hold. So too, are any examples of times in which the person takes new initiatives that they identify as linked to the preferred story. Even when these new initiatives are plentiful and the effects of the problem story seem to be receding, it is often necessary to prepare for the comebacks that the problem-story might attempt to make. If preparations and plans can be made for these contingencies then this also reduces the risk of any experience of failure or disappointment.

It seems important to note that re-authoring does not only occur in the therapy room. We are all constantly writing and re-writing the stories that shape our lives. Re-authoring conversations seek to create the possibilities for the generation of alternative, preferred stories of identity. Once these have been co-created (between the therapist and the person consulting the therapist and the outsider witnesses), then the person concerned will have a foundation to continue to link events and meanings around this new story.

For instance, as Joucquin continues his work as a therapist he will now be more actively aware of the ways in which his actions are shaped by a 'commitment to respect' and being a 'good listener'. He will be seeking to further hone his skills and join with others in shaping his work context. It is our role as therapists to do enough in the therapy room (perhaps involving outsider witnesses, documents, re-membering practices) that will sustain the person in their own re-authoring practices outside the therapy room.

We are all constantly authoring and editing stories about our lives. This does not occur in isolation but in constant negotiation with others around us and within the

cultural context in which we live. Therapy consultations occur in this context. They are an opportunity for deliberate and focussed re-authoring practices that can then be continually taken up in the broader context of people's lives.

So in some respects, re-authoring never ceases. It is an ongoing aspect of all of our lives.

## 7. Are there any dilemmas to address when participating in re-authoring conversations? If so, how can we respond to them?

What would this work be without dilemmas to reflect upon? We asked a range of practitioners to be honest and share with us what they find most difficult about re-authoring conversations. Here are some of their responses and ideas as to how to respond to various dilemmas:

- *Co-authoring*

One of the biggest dilemmas I struggle with is how to ensure that I am not imposing my idea of what would be a good alternative story on the person who has come to consult with me. I always worry a lot about this, about my position of power as a therapist. I don't think this concern is ever going to go away and nor do I think it should. I have come up with some ideas though. I think it is important for me to acknowledge that this work involves co-authoring. As a therapist, I am involved in the process through the questions that I ask, the events that I pay attention to. But I am not the primary author of these alternative stories. Through my questions I invite the person to be the one who is doing the interpreting of the experiences of his or her life. These interpretations of what is important, what is preferred, are not up to me to make. I guess the other thing I am trying to do is to constantly question any assumptions that I might be making. Am I assuming what this person wants out of their life? Am I assuming that this was a significant event for them?

- *Talking about problems*

I've found it important to remind myself that re-authoring conversations are not linear, they do not follow a straight and narrow pathway, nor do they head in one direction! Even when I might think it's time to be talking about the alternative story, a session might occur in which the problem makes a comeback and we need to talk more about

this. When people attend counselling it is often in a state of some anguish about their lives and relationships. So, it really is important to spend a considerable time externalising the problem and mapping the effects of it, really acknowledging the effects the problem is having upon the person's life and their relationships. At these times I also try to consistently ask questions about how broader relations of power are influencing the situation. I see all of this as setting the foundation for re-authoring conversations.

- *Enthusiasm*

At times I have felt considerable excitement, hope, and enthusiasm in response to noticing some of the steps that people have taken in their lives. I've learnt in time that expressing this enthusiasm of mine can be fraught. Any expression of enthusiasm on my part puts my experience and perspective at the centre of the conversation when what is required are questions that explore whether the step is significant to the person concerned and why. I have learnt that I need to funnel my enthusiasm into good questions. This is also important because if we inflate the significance of a certain event then we run the risk of inadvertently setting a context in which people might experience a sense of failure if they cannot match these hard-won achievements. Now I have a keen ear listening out and taking note of actions that people take, whether they be very small or quite gigantic, and at the same time I am committed to asking questions about what these steps mean for them.

- *Significance*

Sometimes what I find the most difficult is asking the questions that will determine whether a certain event that seems to contradict the problem story is significant enough to be considered a unique outcome. I've found that if I don't ask these questions well, if I rush this part of the process, an event that could well be significant can be brushed over and forgotten. Then again, if I ask the questions in a way that implies I want the person to say it is significant to them, this can come across as condescending or directive! One hint that I've found helpful is to ask the person what they would think it meant if they saw someone else acting in this way, in this context. Rather than the person seeing the significance through their own eyes, it is sometimes easier to acknowledge it in this way. This sort of question provides a different place for the person to stand from which to view their own experience.

- *Pointing out positives*

When I first began this work, occasionally I would notice that, rather than engaging in re-authoring conversations, I was simply pointing out positives. But I know that when people simply point out positives to me I can feel really jarred and not listened to. To avoid this hazard, not only do I try to ensure that I am always acknowledging of the real effects of the problem story, I am also always trying to involve other people in the therapy process. I often ask whether someone wants to bring a friend, a partner, or a family member to the sessions. This way, I can ask this other person how they understand the steps that the person is taking, what they see as significant and why. This helps to de-centre me in this process and I find it a relief. It's not up to me to point out positives. My role involves asking questions!

- *Catching others up on the new story*

When someone is actively re-authoring their stories of identity, it can be vital to catch others up on the news! Otherwise friends and family members may not know how to respond to the new developments. In order to keep significant others up to date with what is happening in the therapy room, sometimes we have held celebrations, rituals and parties. These events acknowledge in a community-setting the new story of life that someone is stepping into and they are a chance to invite other people's support in this process. Other times we have used a letter for the same purpose, which simply states what has been taking place and clearly asks people to notice and respond to signs they notice that fit with the preferred story.

- *Reminders*

At times, I have sessions which the person concerned states have been really helpful, but when we meet up the next time it's as if everything that took place last time has been forgotten. I was puzzled about this for a while until I realised that we hadn't created any way to assist the person to stay connected to the new story between sessions. What's made the difference recently has been either writing a letter to the person concerned that summarises what we have discussed – and especially the developments of the preferred story – or creating some sort of document for people to take home with them. These act as reminders and when they are read during the week, or shared with others, they can make a real difference to the re-authoring process.

Well, that's all for now. In this paper we have just tried to introduce some of the practices of re-authoring and the understandings that shape this work. And we've tried to do so by sharing the stories of Germaine, Mary, Tracey and Joucquin. The understanding that our lives are shaped by the stories that we create about them is an exciting one to us. In many ways it underpins all narrative practice.

Developing the skills of questioning that contribute to the development of the landscapes of action and the landscapes of identity of the preferred story takes a lot of time and practice! So too does getting accustomed to noticing unique outcomes and finding ways to co-author these into alternative story-lines. The stories of our lives are rich, complex and so different for every one of us. Then again, that is what leads to the delicate beauty of this work.

## About this paper

This paper was created through collaborative processes. We sent off a list of questions to a range of narrative practitioners in Australia, Spain, Austria, Mexico and the UK. When people's responses came in, we compiled these and edited them and then sent them back to ensure that everyone was happy with the final result. Please note that the examples of practice used in this paper are composites, some details have been changed to preserve identity, and some literary license has been applied. They are, however, all realistic examples of work and based on real-life examples.

We would like to acknowledge all those who have been involved in this process: Rudi Kronbichler, Marta Campillo, Hugh Fox, Maggie Carey, David Denborough, Imma Lloret & Shona Russell.

We would also like to acknowledge those men and women with whom we have worked in therapy whose ideas, perspectives and challenges are represented in this paper.

## Note

1. Maggie and Shona can be contacted c/o Dulwich Centre Publications.

## References

- Bruner, J. 1986: *Actual Minds, Possible Worlds*. Massachusetts: Harvard University Press.
- Carey, M. & Russell, S. 2002: 'Externalising: Commonly asked questions.' *International Journal of Narrative Therapy and Community Work*, No.2.

- Carey, M. & Russell, S. 2003: 'Outsider-witness practices: Some answers to commonly asked questions.' *International Journal of Narrative Therapy and Community Work*, No.1.
- Epston, D. 1992: 'A proposal for re-authoring therapy: Rose's revisioning of her life.' In McNamee, S. & Gergen, K.J. (eds): *Therapy as a Social Construction*. London: Sage Publications. Republished in Epston, D. 1998: *Catching up with David Epston: A collection of narrative practice-based papers*. Adelaide: Dulwich Centre Publications.
- Epston, D. 1994: 'Expanding the conversation.' *Family Therapy Networker*, Nov/Dec. Republished in Epston, D. 1998: *Catching up with David Epston: A collection of narrative practice-based papers*. Adelaide: Dulwich Centre Publications.
- Epston, D. & White, M. 1990: *Narrative Means to Therapeutic Ends*. New York: W.W.Norton.
- Morgan, A. 2000: *What is Narrative Therapy?* Adelaide: Dulwich Centre Publications.
- Russell, S. & Carey, M. 2002: 'Re-membering: Responding to commonly asked questions.' *International Journal of Narrative Therapy and Community Work*, No.3.
- White, M. 1995a: 'The narrative perspective in therapy', an interview by Bubbenzer, D., West, J. & Boughner, S. In *Re-Authoring Lives: Interviews and essays*, pp.11-40. Adelaide: Dulwich Centre Publications.
- White, M. 1995b: 'Reflecting teamwork as definitional ceremony.' In *Re-Authoring Lives: Interviews and essays*, pp.172-198. Adelaide: Dulwich Centre Publications.
- White, M. 1997: *Narratives of Therapists Lives*. Adelaide: Dulwich Centre Publications.
- White, M. 1999: 'Reflecting-team work as definitional ceremony revisited.' *Gecko*, 2:55-82. Re-published in White M. 2000: *Reflections on Narrative Practice: Essays and interviews*. Adelaide: Dulwich Centre Publications.
- White, M. 2001a: 'The narrative metaphor in family therapy', an interview with Denborough, D. In Denborough, D. (ed): *Family Therapy: Exploring the field's past, present & possible futures*. Adelaide: Dulwich Centre Publications.
- White, M. 2001b: 'Folk psychology and narrative practice.' *Dulwich Centre Journal*, No.2.
- White, M. 2003a: Workshop notes. [www.dulwichcentre.com.au](http://www.dulwichcentre.com.au)
- White, M. 2003b: Intensive training in narrative therapy. Dulwich Centre. Unpublished.

### Other recommended reading in relation to re-authoring practices:

- Freeman, J., Epston, D. & Lobovits, D. 1997: *Playful Approaches to Serious Problems*. New York: W.W.Norton.
- Freedman, J. & Combs, G. 1996: *Narrative Therapy: The social construction of preferred realities*. New York: W.W.Norton.
- Payne, M. 2000: *Narrative Therapy: An introduction for counsellors*. London: SAGE Publications.

WE'D LOVE TO HEAR YOUR

*reflections*  
& *feedback*

We would love to hear from you any feedback, comments, suggestions, critiques you may have about particular articles and/or this journal issue as a whole. Being a small publishing house, we have the unusual possibility of being able to quickly respond to feedback and creatively experiment with future editions. We are very keen to know how you find the balance of papers ... would you like more practice-based contributions, more news and discussions, more theoretical articles? Were you moved by a particular article? Did a piece of writing make a difference to how you understand your work? What was the most relevant aspect of this issue for the work that you do? We'd love to hear from you! Please email us at:

[feedback@dulwichcentre.com.au](mailto:feedback@dulwichcentre.com.au)