Externalising stories: When research becomes therapy

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Abstract
Stories can be expressed in a variety of different ways: they may involve oral or written accounts of experiences or they may exist in visual form. Regardless of the medium, however, the story resides in a space that is external to the teller of the tale and accessible to interpretation by others. According to White (2007), this externalised space can become a productive site for collaboration between a therapist and client, resulting in therapeutic value for the storyteller. Researchers involved in narrative inquiry also negotiate this space as they encourage participants to tell their stories, blurring the boundaries between research and therapy. An awareness of the challenges faced by participants and the ability to respond sensitively and appropriately is necessary as the transition from research to therapy (and back again) occurs.

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Externalising stories: When research becomes therapy

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Abstract: Stories can be expressed in a variety of different ways: they may involve oral or written accounts of experiences or they may exist in visual form. Regardless of the medium, however, the story resides in a space that is external to the teller of the tale and accessible to interpretation by others. According to White (2007), this externalised space can become a productive site for collaboration between a therapist and client, resulting in therapeutic value for the storyteller. Researchers involved in narrative inquiry also negotiate this space as they encourage participants to tell their stories, blurring the boundaries between research and therapy. An awareness of the challenges faced by participants and the ability to respond sensitively and appropriately is necessary as the transition from research to therapy (and back again) occurs.

Introduction
Narrative or storytelling is a fundamental means of communication and of making ourselves intelligible to one another. Its existence across time and cultures in a variety of forms is well-documented and, typically, we acknowledge that stories may be expressed in oral, written and visual mediums (Riessman, 2008). From a narrative perspective, we live our lives by the stories we tell. They fashion our lives, providing structure for our day-to-day existence and they have the potential to propel us into a future that is shaped by our lived experiences of them. According to Arthur Frank (1997), the words we use do not simply reflect meaning but, rather, they are performative: words give shape to the meaning of experience in our lives. With each telling of a story, then, there is a possibility that we can become the authors of new and, perhaps, preferred stories for ourselves (Bruner, 1990). From this perspective, stories are powerful devices valued by researchers and therapists alike for their ability to convey detailed, complex and often intimate experiences whilst providing a foundation for change.

Whether through spoken words, text or images, when people provide accounts of personal experiences their stories become located in a space that is external to them. This externalised space is a dynamic and powerful arena in which the events and experiences that unfold can be examined and reshaped as the individual involved separates self from story (White, 1988; White & Epston, 1990). For the storyteller, an exploration of alternative understandings can be undertaken as disruptions or oppressive experiences become available for consideration. For an audience, the space that is created by a story provides access to information that can be negotiated in various ways. Therapists, for example, can encourage their clients to examine particular aspects of their experiences and, as part of a planned process, explore alternative understandings with them (White, 2007). For researchers, the space can be more difficult to negotiate if
they are unprepared for its dynamic nature and the effects that stories have for the narrators as well as their audience.

As researchers, we may walk a fine line between gathering data and engaging in therapeutic practice when we collect information through the stories of those who participate in our projects. Often, through collaboration with our participants we move much closer to therapeutic practice than we may anticipate. This can happen because of the personal nature of the exchange that may be involved in this externalised space. Providing the opportunity for another to tell a story about significant events is a little like opening Pandora’s Box: one is never sure of the content of the story or of the extent to which the personal experiences that are disclosed will affect both the narrator and the audience. Traditionally, researchers have been obliged to preserve boundaries that distance them from the participants in their projects. Yet a story that piques the listener’s emotions or entails further action on the part of the audience may lead to a blurring of these distinctions.

With an understanding of the significance that another’s story has for them, we need to consider how we can respond in an appropriate and sensitive manner to the stories we gather as part of our research. As we do so, we must also be concerned with the ways in which our research may be influenced in the process. In addition, as we negotiate this externalised space with our participants, we must be aware of our own vulnerability and the tensions that we may experience as another’s story unfolds.

Ways of negotiating the externalised space
At a personal level, the stories we tell can help us to construct accounts of our own lives that have validity for us (Neimeyer, 2000). In addition, with regard to an audience, we look for support or affirmation of ourselves in the responses of those who listen. In other words, stories provide us with frameworks for making meaning or sense of our experiences, both for ourselves and for others. This aspect of storytelling allows what some writers consider to be an inherent search for coherence in life (Gonçalves, Korman & Angus, 2000). As Robert Neimeyer (2000) suggests, stories help us to establish ‘continuity of meaning’ (p.212) and, it is in this respect in particular, that narrative holds important implications for counselling and therapy.

Michael White (1988, 2007), in an examination of narrative therapy, argues that externalised conversations allow people to examine issues that are often labelled by others as well as by themselves as problems. For many, these problems are seen as a reflection of their own identity, that is, they are viewed as being internal to the self. Through externalisation, the problem itself becomes an entity that is separate from and external to the individual and, as such, it becomes available for consideration in ways that may otherwise not be possible. The problem becomes objectified and the individual’s identity is then separated from the problem. In other words, “the problem becomes the problem, not the person’ (White 2007:9).

Locating the source of a problem outside oneself helps as stories are deconstructed, making it possible to identify the private stories and cultural knowledge that underpin them. Stephen Pearce (1996) has observed that stories are not passive but, rather, they provide a powerful basis from which the teller can ‘aggressively disrupt and even shatter accepted understanding and modes of behavior’ (p.xv). Working from this perspective, Michael White and David Epston (1990), concerned with the ‘politics of
therapy’, suggest that problematic issues involved in many of the stories people tell stem from power relations in society. In other words, the stories that are told are inevitably framed by dominant cultural and societal discourses. By separating the self from the story it is possible to create a space in which people become able to explore alternative and preferred knowledge of who they are and of how they might conduct their lives. A separation from dominant discourse makes it possible for people to orient themselves to aspects of experience that can contradict this knowledge. Narrative, then, can provide opportunities for creating and rehearsing potential solutions to problems, supporting the individual as a ‘protagonist’ in his or her story (White, 1988).

Michael White’s (2007) more recent work looks at the ways in which therapists can achieve these ends by ‘mapping’ therapeutic conversations they share with their clients. He argues that stories can be translated into visual charts that make their content, as well as the possibilities for change, readily accessible to both therapist and client. Part of this map-making process includes plotting the ways in which the therapist can scaffold or guide a client’s progress towards more positive and effective ways of living. In this manner the therapeutic process is made transparent. The work of therapists such as Michael White may be useful to consider when, as researchers, we engage in the externalised space created by our participants. Rather than implying that we engage in therapeutic encounters as we listen to our participants’ stories, my suggestion is that we develop an approach to our research that is informed by therapists’ work in the sense that it incorporates the high-level communication skills that are inherent in counselling.

Riding the boundaries
How can we respond in an appropriate and sensitive manner to the stories we hear, to those stories that touch our own experiences and to those that evoke emotional responses within us? Ann Oakley (1981) asked these questions of herself as she conducted her own research into the transition that women experience as they become mothers. She noted that when faced with women who asked urgent questions about aspects of pregnancy, childbirth and infant care, it was not possible to retain the distance that might normally be expected of a researcher. Instead, she found it necessary to respond to the women’s questions by providing information or suggestions about how relevant information could be obtained. By responding to the women’s questions, she was able to establish relationships involving trust and reciprocity, a hallmark of productive research (Franklin, 1997). Rather than silence or withholding information, Oakley’s responses facilitated an openness that otherwise would not have been possible.

Other researchers more recently have found themselves drawn to the stories of their participants in various ways. Wendy Luttrell (2003), for example, in her work with pregnant teenagers, explored the ways in which these young women viewed themselves and the particular life-choices they had made. In doing so, she found herself being challenged by their responses in ways that led her to question the manner in which she defined herself as a researcher and a mother. At times, the ‘emotional participation’ she experienced appeared at odds with the detachment typically demanded by research. In retrospect, however, she notes that her work encompassed both positions as the emotional engagement she experienced in particular instances led her to a more detailed understanding of the emotional complexities involved in race, class and gender-based relationships. Ultimately, both ‘ways of knowing’ were important in her fieldwork and in her analysis of the material she gathered.
I found myself in a similar situation in a number of interactions with participants in my doctoral research as I explored the experiences of women returning to study (Lysaght, 2001). As a mature-age student, I shared common ground with my participants and often found that the more personal aspects of their lives resonated with similar experiences in my life. In common with Wendy Luttrell (2003), I found that this situation was productive with regard to my research. Listening to elements of stories in which I became an “emotional participant” enabled me to bring an added dimension to my analysis of these experiences.

In this research, I compiled detailed case studies of six different women, with each case resting on lengthy interviews in which the women talked freely about many aspects of their personal lives and their hopes for the future. This information was then used by the women to construct individual intellectual profiles using a Multiple Intelligences approach to understanding ability and potential (Gardner, 1983).

In an early interview with Trish, she explained to me the circumstances under which her nephew, then aged fourteen years, had committed suicide. Although close to her sisters and parents, she had found it difficult to talk to them about both his life and death. As a relative stranger, I became someone who could listen and respond sensitively in a non-judgemental way. As a researcher I was aware that the story I was hearing would have a strong bearing in terms of the project in which I was engaged. Needless to say, however, during this interview my role as a researcher took a ‘back seat’ as I was drawn into a description of the sad events. Personal experiences of grief came to the fore but, at the same time, my training as a counsellor came into play. At a later stage in the research I was able to draw on aspects of Trish’s disclosure when collaborating with her on the construction of her intellectual profile. Importantly, however, the exchange that had taken place between us during that earlier interview helped to establish a relationship based on trust and reciprocity. This facilitated an openness that Trish later mentioned she only rarely shared with others.

Whilst the roles of researcher and counsellor were blurred in this instance, at other times I found myself assuming the role of a teacher. Given my training as a teacher and considering that all of the women with whom I worked were students, this is perhaps not entirely surprising. During interviews with Denise, for example, her lack of ‘voice’, in every meaning of the term, had been notable since our first interview and was a topic to which she returned frequently during our discussions. Denise was attending a course for women planning to return to the paid workforce, held at a local TAFE college. She spoke in a soft and hesitant manner, deferring to others when in class. During our interviews, initially at least, there were lengthy pauses in her speech before she would volunteer further information or extend a discussion. Gradually, as she gained confidence, our interviews became more detailed and she revealed much of herself and her personal experiences.

Through these interviews it became apparent that the lack of voice that Denise experienced extended to a feeling of being ‘invisible’ to others, whether relatives, friends or strangers, and of having a limited sense of agency in relation to her life circumstances. This sense of having no voice had led Denise to take elocution lessons a few years prior to our meeting but she explained that although enjoying the lessons, she had never had the courage to put the exercises into practice. At one of our meetings Denise explained that she was facing an essay and presentation task that required her to
focus on an issue related to women and that she was unsure about how to respond. I suggested she could explore issues associated with ‘voice’ in its broadest sense for the written paper, whilst considering a way that she could use this information creatively in her oral presentation. I referred her to some relevant resources and provided some feedback on her ideas at subsequent meetings. As a teacher, I was concerned that the area she chose for discussion would have meaning for her and that there would be some benefit in terms of practical outcomes.

For Denise, the written essay received an excellent mark because of the extensive detail and critical attention she had paid to the topic. In the oral presentation, she engaged her audience through a humorous play on words and her speech was voted the most outstanding in her class. Reflecting on the topic of ‘voice’, Denise noted the following:

I said we all had a voice, a different voice, and I said that we should be sensitive to the quiet people too, that they still have feelings and they mightn’t want to say things and sometimes they do want to say things but they don’t. It was mainly that we all had our own voice, sort of thing … I wrote something else too, about women being in high positions … When I was saying “there’s power in speech” I could see power in the written word too now.

The experience of researching this topic and of then applying some of the ideas that she had discovered to her own situation enabled Denise to develop a greater degree of insight into herself. This productive outcome resulted, at least in part, from our discussions together as I navigated the blurred boundaries that I experienced as a researcher, teacher and counsellor.

**Conclusion**

The power of narrative, of telling one’s story, lies in the external space that is created by the storyteller and negotiated by the audience. The story itself may be expressed in many different ways. It may be couched in words, either spoken or written, or in images such as photographs or artworks. It may be expressed through constructions such as sculptures and sand play or through performance, in fact, in any other medium that enables the individual to convey particular details and to engage another in the fabric of the story.

Navigation of the external space created by personal stories in research ventures requires a sensitive and informed approach to the needs of others. At times, this means that as our participants’ stories involve us emotionally, we have to be prepared to acknowledge these experiences and draw on them in order to enrich an analysis of the material we gather. To this end, there are valuable lessons to be learned from counselling techniques in relation to listening and responding to the stories of others. Although the stories of our participants will continue to surprise us, an informed and responsible approach that is supported by relevant skills will benefit both parties. Our challenge is to navigate this space in ways that are productive for both the participant and the research project with which we are engaged.
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