The Healing Power of Telling Our Stories: Introduction to Narrative Therapy

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Introductions

Bob Carty

- 38 years in AODA/MH counseling in various organizations
- Currently Director of Clinical Services at Hazelden Chicago

Participants

- Work venues treatment centers, private practices, schools, hospitals, criminal justice, others?
- Any previous training in Narrative Therapy?

Learning Objectives

- Describe Narrative Therapy as a post-modern clinical approach
- Highlight its key concepts, such as circular questioning and definitional ceremony
- Identify how a person's past relapses increase the likelihood of future relapses
- Discuss a counselor's role in helping a client re-interpret one's life
- Explain the therapeutic value of a person telling his/her story to one's peers

Meet Keith

- 27-year-old, white male; works at Best Buy; married; 2-y/o son; "tough childhood;" mother "kicked my dad out when I was 9...she couldn't stand his drinking and abuse;" older sister helped raise him; little contact with father, who "died a drunk 3 years ago;"
- Keith's first IOP at 22 following a DUI (ETOH and THC); used right after treatment; second IOP at 24, urged by his mother; diagnosed with depression, too; on meds briefly; sober on and off, occasional AA, no sponsor; use escalated in past year and now using opioids from a co-worker; recently completed detox and is in IOP
- He feels "ashamed and out-of-control" and sees himself as a "born loser;" lost some buddies in recent years (one OD and others "moved on"); wife threatens to move back to her parents if he does not stay sober; Keith reports that his in-laws always interfere

Overview of Narrative Therapy

What Is It?
Benefits of this Approach
Key Concepts

What Is Narrative Therapy?

- Post-modern, clinical approach, focusing on a person's life story as a means to promoting change
- "Modern" = approaches that emphasize scientific objectivity, such as behavioral modification; "just the facts"
- "Post-modern" = approaches that emphasize subjective realities that individuals experience; live life according to one's perceived life script; not just the facts of one's life, but one's interpretations of those facts and assumptions built on those interpretations

Michael White

• "...human beings are interpreting beings...the meanings derived in this process of interpretation are not neutral in their effects on our lives, but have real effects on what we do, on the steps that we take in life...we live by the stories that we have about our lives...these stories actually shape our lives, constitute our lives, and they embrace our lives"

Benefits of this Approach

- Helps clients to get un-stuck from the challenges they experience
- Tends to be strengths-based
- Generates hope
- Helps to empower people for ongoing change
- Can be used in both individual and group counseling
- Fits well with 12-step recovery and the power of telling one's story to others

Key Concepts

- Thin descriptions
- Clues
- Unique outcomes
- Circular questioning
- Re-membering
- Definitional ceremony



Thin Descriptions

- Many people over-simplify their narratives, especially clients who are stuck in trying to resolve their life struggles
- With little or no resolution of these struggles, negative self-talk patterns emerge
- Examples:
 - "I can never catch a break"
 - "The cops are out to get me"
 - "If people really knew me, they wouldn't like me"
 - "I can never stop drinking"
 - "I'm not like the others in group"

Thought to Consider

•Never be a prisoner of your past. It was just a lesson, not a life sentence.

Clues

- As the counselor listens to the client's story, s/he listens for evidence of details that may contradict problem-saturated, thin stories
- These exceptions will be useful in raising the client's self-awareness and adding new depth to one's story
- Examples:
 - "I never was good in school...well, I really liked art and music classes"
 - "I drank a lot last weekend, but stopped to sober up before seeing my kids on Sunday."

Unique Outcomes

- The counselor can offer these clues back to the client
- If the client accepts how these exceptions change his/her initial story, the story has to be revised -- a new interpretation begins to emerge
- Examples:
 - "Yeah, I suppose that I met some good people in AA."
 - "Sure, I've been selfish throughout my life; but you're right, there were times that I was even generous."

Circular Questioning

- An effective technique to expand a client's perspective of oneself
- Counselor asks questions that require clients to describe how others may see them or their situations
- This expanded view can improve one's self-identity and may generate new options in resolving a problem
- Examples:
 - "Whose opinion do you value in your life? What would this person say is your good qualities?"
 - "What do you think your sponsor would suggest regarding this issue?"

Re-Membering

- Counselor tries to reduce the client's dependence on the counselor by increasing the client's ability to build a support network
- From clinical management to self-management
- Examples:
 - "In the meetings that you have been attending, who looks like a good choice for a sponsor?"
 - "Who in your life may be thrilled that you are making these changes in your life?"

Definitional Ceremony

- When a person tells his/her story in front of peers, it becomes even more powerful
 - Decreases secrets and denial
 - Strengths one's bond to the others
 - Creates an opportunity for feedback and for deeper understanding
 - Helps others (especially newcomers) see themselves in the story
- Example:
 - In AA meetings, giving a lead is more about sharing to bear witness, and less about confession

Power of Story in Shame Resilience

Wired for stories Empathy and Shame The Rising Strong process Rewriting False Stories

Wired for Stories

- Brene Brown (Rising Strong): "We feel most alive when we're connecting with others and being brave with our stories"
- Telling our true stories in a group generates cohesion and fellowship; the deeper we go, the greater the connection
- "The difficult thing is that vulnerability is the first thing I look for in you and the last thing I'm willing to show you, In you, it's courage and daring. In me, it's weakness."

Empathy and Shame

- Shame is like mold, spreading and deepening in places that are dark and damp
- AA slogan: we are as sick as our secrets
- Helping people to tell their stories
 - Brings light to the darkness
 - Encourages connection with others
 - Opens the possibility of empathy, understanding, new awareness, and healing

The Rising Strong Process

- According to Brene Brown, there are 3 phases of this process
 - 1. The Reckoning: when a certain emotion is surprisingly triggered in us, we need to get curious to understand what happened; identity the story that we tell ourselves
 - 2. The Rumble: examine the story more deeply; ask these questions
 - What do I know objectively? What are my assumptions?
 - What more do I need to learn about the situation, about others involved in it, and about myself?
 - 3. The Revolution: by answering these questions, we can gain a new awareness, which transforms our thinking, our feeling, and our self-identity

Rewriting False Narratives

- Repeating our negative self-talk generates false narratives that distort who we are, creating a "trance of unworthiness" (Tara Brach, Radical Acceptance)
- Journaling is valuable in heling us tap into our semi-conscious thoughts, especially when writing raw, unfiltered stream of consciousness ("hot-penning," or SFD)
- Journaling exercise: complete these statements
 - The story I'm making up is...
 - My emotions are...
 - My body is...
 - My thinking is...
 - My beliefs are...
 - My actions are...

Quotes to Ponder

• "Men are not free when they are doing just what they like. Men are only free when they are doing what the deepest self likes. And there is getting down to the deepest self! It takes some diving."

D.H. Lawrence

• "It always comes back to the same necessity: go deep enough and there is a bedrock of truth, however hard."

May Sarton

Relapse and Narrative Therapy

Person in Relapse Thin Stories and Relapse Patterns

Person in Relapse

- Individuals who have tried to stay sober and return to treatment following a relapse experience many painful emotions
 - Shame
 - Guilt
 - Embarrassment
 - Remorse
 - Depression
 - Frustration
 - Despair



Discussion: What thoughts may accompany these feelings?

Thin Stories and Relapse Patterns

- With painful emotions and negative self-talk, these clients tend to see little hope of change
- Their stories may focus upon...
 - Blaming others ("my wife kept on me ever since I was discharged")
 - Excuses ("things were too busy at work to get to meetings")
 - Delusional thinking ("I thought I could use a little pot")
 - Self-blame ("I screwed up again, like I always do")
- · All of these are thin stories, failing to address deeper truths
- For those with numerous relapses, there is major doubt regarding future ongoing recovery

What About Keith?

 Let's return to Keith who is now in treatment for the third time and carrying around his painful emotions, negative thoughts, and a thin story about himself

Discussion Questions

- How can we use Narrative Therapy concepts to promote change this time in treatment?
- How can we help Keith change how he interprets his story?
- In what stage of change might Narrative Therapy be most useful?

Using Narrative Therapy in Addictions Counseling

Therapeutic Metaphors
Telling a Drug History
Writing Assignments in Narrative Therapy

Use of Narrative Therapy

- In both individual and in group counseling sessions, the counselor can engage the client in ways to re-examine the meaning of one's life
- Counselor may offer some interpretations, but needs to do so cautiously, not as a final conclusion – the client has the final say
- Engaging group members to offer their impressions gives additional perspectives
- "There is nothing so dangerous as an idea when it's the only one you have" (Emile Chartier)

Therapeutic Metaphors

 Part of helping someone to re-interpret one's life frequently includes symbols that can be used to highlight an aspect of the story

- Examples:
 - Hitting bottom
 - Learning how to use recovery tools
 - Working the steps
 - Getting back on the right path
 - Breaking the chain
 - Others?



Telling a Drug History

- In many treatment centers, clients are assigned the task of reporting their drug history in group
- Benefits include
 - Decreasing one's denial
 - Getting feedback from other clients
 - Clients recognizing similarities in their stories
- Also can be used to assess how open or closed a client is in the telling of one's story; counselors typically have more info than what was shared...sometimes not

Writing Assignments in Narrative Therapy

- Writing is also a clinical technique in Narrative Therapy
- Clients may write the following:
 - A good-bye letter to one's drugs
 - A certificate of completion for the first phase of one's recovery journey (what was learned in treatment)
 - List of WWMSD
 - If God could text, what message would God send to me?
 - Any other story-related, writing assignments?



Recommended Readings

- Jonathon Diamond (2000). <u>Narrative Means to Sober Ends</u>. New York: Guilford Press.
- Brene Brown (2015). Rising Strong. New York: Spiegel & Grau.
- William Cope Moyers (2012). Now What? Center City, Minnesota: Hazelden Publishing.
- Martin Payne (2006). <u>Narrative Therapy: An Introduction to Counsellors</u>. London: Sage Publications.
- Gerald Corey (2005). <u>Theory and Practice of Counseling and Psychotherapy</u>. Belmont, CA: Brooks-Cole.

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Closing Comments

- In his book, Now What?, William Cope Moyers writes about his recovery
- He mentions a discussion with a WWII veteran who flew 44 combat missions; he asks this 93-year-old friend in recovery why they found recovery when so many others have not. His friend replied, "God saw us through it all so that we can tell our **stories**."