

Vancouver School for Narrative Therapy

INTRODUCTION TO NARRATIVE THERAPY QUESTIONS HANDOUT

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Hello Everyone: Welcome!

*** When I was living with Michael White in Adelaide and beginning to sit in on all his sessions – I developed a practice of writing down every question he asked in therapy. Then at night, after we'd discuss the sessions and theory and he'd go off to bed - I'd stay up trying to categorise all his questions he'd asked that day – trying to figure out what type of questions they were and who got with who. I went through 3 notebooks doing this exercise and these became a series of Narrative Question Notebooks. I still have the notebooks and refer to them all the time (in fact you'll see a few of them below). I think you may find this practice of jotting down, studying, and getting to know the family of origin of where these questions come from - quite helpful.*

Short Story: Stephen Madigan's VSNT training handout offers a brief introductory tour through a few basic understandings when developing therapeutic questions from a narrative therapy perspective.

Back Story: Each and every veteran narrative therapy trainer has a handout somewhat similar to the one below. Stephen's handout represents a partial plot on how to listen and respond to the story being told. The questions outlined originated from his session out takes (and Michael's early handouts). The questions represent an 'actioned' relational response to an interactive story. The questions are a telling within a participatory dialogic and not a linear process of listening (nor do the questions represent a 'map' of how to listen). The sections of questions sketched out below assist in the consideration of how post-structural theory fits within your Narrative Therapy practice.

Questions act to open space for new descriptions, exceptions, and information previously restrained by the problem.

The intent of the questioning is to include news of information and difference (Bateson, 1980, White, 1988) that weakens the problem's version of the client and their family.

Questions are grammatically designed to unpack the politics of the problem and predict possible futures, moments of freedom, and victories across the temporal plain (past—present—future.)

Questions asked (and not asked) can never be neutral since:

- a) they state a particular political ideology and location.
- b) they stand behind a particular psychological/theoretical position.
- c) they are active and push towards preferred directions

d) they are shaped through the trinity of power, knowledge and rhetoric.

e) questions are not viewed as solitary structures but as historical texts.

f) they are influenced by communities of discourse.g) they are culture specific.h) all questions are interpretive and do not hold a truth status. i) they do not solely belong to the questioner.

DEVELOPING RELATIONAL EXTERNALIZING CONVERSATIONS;

- Relational externalizing conversations establish a context where people experience themselves as discursively separate from the problem. That is, separate from problem-saturated descriptions that have encompassed and become their identities. This changes a persons' relationship to problems, and shifts the conversation to a focus on the relationship between the person and the problem context instead of a focus on a problem-person.

- The discursive context of the problem is of central investigation.
- The therapist orientates themselves to the discursive context of cultural restraints that are supporting the problem's career and life support systems of influence.
- The therapist is not interested in the etiology of the problem (cause) and - nor are they interested in finding a 'cure'.
- They key question is: How is it that this person has come to know and perform themselves in this way at this particular time?
- Relational externalizing of the problem counteracts the effects of individualism, universalism, humanism and being pinned down under a labeling discourse.
- Externalizing enables people to work together to re-understand, re-author, re-contextualize and resist humanist understandings of problems.

MAPPING THE INFLUENCE OF THE PROBLEM IN THE PERSON/FAMILY'S LIFE AND RELATIONSHIPS.

- That is: How does the demands of the problem influence the person(s) and how do these people respond?
- Helps to mutually develop an understanding of the experience-near problem-saturated story. It is crucial to take enough time to develop thicker descriptions, to develop context, history and future preferences and - for persons to feel their experience is "known" and for them to "know it" in a way that offers a different, more detailed perspective on the problem's discursive influence on their lives.

- A problem's practices and rules are widely discussed as well as the losses experienced while involved with the problem relationship.
- A broad orientation of questions at this stage opens multiple opportunities for exploring alternative stories and unique outcomes/exception moments. This conversation explores a rich sampling of people's language habits around the problem.
- Does this fear hold certain demands of you that are featured in your work life? Rules that influence how you are in your life beyond work? Your relationships with people you love?
- When fear is calling out for you to hide away from life, what seems to happen to your relationship to dreams and possibly hope for the future?

MAPPING THE INFLUENCE OF THE PERSON/FAMILY IN THE LIFE OF THE PROBLEM

- Through this process of interviewing people begin to realize and experience a broader story about their resistance to the problem. Viewing themselves as authors -- or at least having abilities as co-author's of their preferred stories often left out of the problems' totalized version of who they are as persons. They can begin to move toward a greater sense of accountability and becoming in their lives.

Unique Outcome Questions

- These questions invite people to notice actions and broader intentions that contradict the dominant problem story. Contradicting the stories' dominance is a professional, societal, cultural etc- context needing exploration. These can pre-date the session, occur within the session itself, or might happen in the future. Unique Outcomes are always present.
- Given perfection's influence on women's lives and relationships have there been any times when you have been able to rebel against perfection training and satisfy some other of your desires? Was this a good experience or a not so good experience? Why?
- (If there have not been such times) Have there been times that you have thought it possible -- even for a moment -- that you might step out of anorexia's demands for living?
- Is there any memory of you giving anorexia the slip (for a moment free) to indulge yourself in an anti-anorexic pause? Or -- what rules of anorexia did you have to break in order to come to therapy today? How was this made possible?
- Can you imagine a time in the future that you might defy anorexia and give yourself a break? Do you know any other women who have done this?

Unique account questions

Conversations develop more fully following the identification of unique outcomes. How can these become features in a preferred counter story?

- Unique account questions invite people to make sense of exceptions brought forward into the counter-story that may have not been registered as significant. They act to hold counter-stories and help these stories endure as part of an emerging coherent narrative – over time.
- These questions employ a grammar of influence and preferences in one's relationship to their lives and relationships.
- By locating unique outcomes in a historical frame they are linked in some coherent way to a history of struggle/protest/resistance to oppression/struggle with the problem relationship or an altered relationship with the problem.
- How were you able to defy anorexia's body prescriptions? Is there a history that goes alongside this telling of defiance?
- Given everything that anorexia has got going for it, how did you figure out a way to stand against its pushing you around? Did you plan this step out beforehand or was it just invented on the spot?
- How do you explain this standing up for yourself and away from anorexia's pressure to get you exercising again, and refuse its requirements of you torturing your body?
- Was it easier than you thought, doing what you did? How do you make sense of this interesting realization? Do you feel this was a step towards another anti-anorexic step?

Unique Re-description Questions

These questions invite people to develop (landscapes of) meaning from the unique accounts they have identified as they re-describe themselves, others, and their relationships.

- What does this tell you about yourself that you otherwise would not have known? Why do you think this new development is not that surprising to your family but a little surprising to yourself?
- By affording yourself some pleasure, do you think in any way that you are becoming a more pleasurable person? Or are you merely returning to a pleasure relationship with yourself and others that you've known before?
- Of all the people in your life, who might confirm this newly developing picture of you? Who might have noticed this? Who would support this new development? Who would have known of this about you all along?

Unique possibility questions

Next step questions. These invite people to speculate about the personal and relational futures that derive from their unique accounts and unique re-descriptions from re-authoring.

- Where do you think you will go next now that you have embarked upon a relationship to health and care for yourself and your relationships? Is this a direction you see yourself taking in the days/weeks/years to come?
- Is this a series of steps you've encountered before? Do you think it is likely that this step might revive your flagging relationships, restore your friendships, or renew your vitality? This can lead back to unique re-description questions.

Unique circulation questions

Identities tend to be in a constant state of negotiation and distribution – that is to say these emerging favored stories need to be put into Circulation.

- The inclusion of others in the newly developing story is crucial to anchoring and continuing the development of the alternative story. (see my letter writing campaigns).
- Is there any one person you would like to tell about this new direction you are taking? What story can you tell me about them that lets me in on why you chose them?
- Who would you guess would be pleased to learn about this new development? Why do you believe this? Would you be willing to invite them into this new description/reputation of yourself? Are there others that may eventually join you in these new developments?

Experience of experience questions

These questions invite people to be an audience to their own story, by seeing themselves, in their unique accounts, through the eyes of others.

- What do you think your friends/family/partner here today most appreciates about you as they hear how you have been leaving a bit of fear of getting fat behind and have taken up with a bit of relaxation and pleasure building?
- What do you feel this indicates to Judy (best woman friend) about the significance of the steps you have taken in your new direction?

Questions to historicize unique outcomes

- These are key types of experience of experience questions. They serve to develop the nascent counter story, to establish the newer telling as having a memorable history.

- These questions act to increase the likelihood of the counter story and performance of this story being carried forward into the future. The responses to these produce "histories of the alternative present"
- Of all the people who have known you over the years, who would be least surprised that you have been able to take this step?
- Of the people who knew you as you were growing up, who would have been most likely to predict that.....?

Following this a whole series of questions can be asked about the historical context.

- What would X have seen you doing that would have encouraged him or her to predict that you would be able to take this step?
- What qualities would X have credited you with that would have led her to not be surprised that you have been able to?

These are the main classes of questions described according to their purpose and temporality. However, many other formats for the construction of questions are available to this work.

Preference questions (also known as evaluative questions)

These are asked all through the interview. It is important to intersperse many of the above questions with preference questions so as to allow persons to evaluate their responses. This should influence the therapist's further questions and check against the therapist's preferences overtaking the clients' preferences.

- Is this your preference or not? Do you see it as a good or a bad thing for you? Do you consider this to your advantage and to the disadvantage of the problem or to the problem's advantage and to your disadvantage?

*Consulting your consultants questions **

These questions serve to shift the status of a person from "client" to "consultant," The person who, due to experience, has special relevant insider knowledge to make available to others struggling with similar issues. As well as informing the therapist of what to do and how best to work with the problem.

- Given your expertise in the life-devouring ways of anorexia what have you learned about its rules that you might want to warn others about?
- As a veteran of anorexia and all that this lifestyle has meant to you, what counter-practices in support of pleasure would you recommend to those in the service of business.

- Whole sessions can be spent on the resurrecting of these insider knowledges. They can then be documented and circulated.

Below is an outline of a few other ideas and specific understandings of narrative therapy questions. The questions written below have been taken out of my therapy sessions.

Beginning Questions

- Why is it at this time that you have come to see someone like me at this time?
- Do other people's description of the problem have any fit with your description of yourself?
- What name might we come up with to describe the current situation?
- Has the problem in any way taken things from your life that you value?
- Are there specific ways the problem has affected your relationship with yourself; friends; family; counselors, etc.
- What have you been led to believe about the causes of the problem?
- Have you been led to believe that you are the sole cause of this problem?
- Why do you feel professionals blame people as the cause of the problem?
- What sorts of worry and worst case scenarios do you get captured by when you consider your current struggle?
- Do you have any reason to believe that you will someday go free of the problem? Or is this a life sentence?
- Are there ever times when you are able to see and/or remember your relationship free from the problems conflict?

Discourse, Politic and Questions

- a) Scaffolding of presuppositions – what constitutes what it is that is said to be “normal” - who is saying this and – who supports this saying?.
 - Could you give me an idea of what ideas/experiences support this idea of your self as a less than worthy person?
- b) Systems of knowledge supporting this view of what is said to be “normal”.
 - Have there been persons and/or professionals in your life that have in some way helped this less than worthy view of yourself along? How strong are these persons past views of you influencing you in today's version of yourself?
- c) Institutional structures supporting a view of what is normal (genealogy).

Do you think that there are any larger societal values (in our culture) that you have been influenced by that in some way encourage a less than worthy view of how people see themselves? What is your relationship to these values today?
- d) Performed affects of this problem?
 - Are there ways that this view of yourself as a less than worthy person influences your relationships with other people in your life? Or their relationship with you?

Reflexivity and Questions

Reflexivity is a practice of asking ourselves (as therapists) questions about our questions and therapeutic beliefs.

Reflexivity enhances an ethical accountability to the client and allows the therapy to remain flexible.

- In what ways might I get trapped into reproducing the most common misconceptions of child rearing in the session?
- In what ways can I avoid getting caught up in anorexia's trap of pitting the client against all those that wish to help?
- In what ways can I attempt to understand the unique relationship this person has had with anorexia, or heroin or sadness?
- In what ways can I be aware of my professional position, sexuality, gender, and class to acknowledge my social locations as a therapist?

Deconstruction of Problem Recruitment Tactics

- In what way has the problem influenced your relationship with yourself by telling your self that you are not worthy? That you are only a problem person?
- Do you believe that you are only just the person shame tells you that you are ?
- By what means did stress entice you into isolation and despair?

Situating the Problem in Alternative History

- Were there factors in your life beyond your control that made the problem look like an attractive option?
- What do you remember in your life that most helped perfectionism along?
- Did the abuse you suffered at the hands of ____ help along this feeling of being a less than person?
- Does the culture of perfect parenting sway people's thoughts away from other unnoticed parenting qualities in themselves?

Re-remembering Counter Identities

- Can you remember qualities of yourself prior to the problems onset that you would like known?
- Have their been stories told about you that help you to forget your finer qualities?
- Has there ever been a time during your in patient treatment that you disagreed with the popular and professional version of you?
- How were you able to keep your own positive thoughts of yourself alive despite what others were saying?

Experiencing and Appreciating Freedom

- At which time of the day are you most problem-free?
- How are you able to find this freedom?
- Do you ever find other people enjoying your own mind instead of them only experiencing the mind the problem gives you?
- What rules of depression did you have to breach in order to attend this meeting today?

Deconstruction of Culture Questions

- Can you think of ways that men are trained into violence?

- Can you identify anything in popular culture that feeds into a 'not measuring up to' lifestyle?
- Is the violence that anorexia perpetrates on your body similar to or different to male violence against women?
- Do you have a sense that being poor assists depressions take over of people?
- Do your religious beliefs support you in the face of these troubles?

Family Questions:

- Has the problem made attempts to divide and conquer this entire family?
- As a parent how has the problem turned you against yourself?
- Are there ever times when you are able to see your daughter/sister/mother/wife etc. free from the grip of anorexia/bulimia? - what is it that you notice about them during these times of freedom?
- What effect do you think the letter writing campaign to ____, would have on the problems hold on your son? Would you consider these letters to be a counter document in opposition to what his professional file has to say about him?

Group Questions:

- During the group talk were there ever times that you felt inspired enough to consider leaving the problem behind?
- I wonder if there are sometimes qualities that you notice in one another that you may one day begin to notice in yourselves?
- Do you think it is right that the problem forces the members of this group into lives of isolation, perfection, subordination and suffering?