

Chapter 2

Stories in the therapeutic context

Let us think about some of the stories that are brought into the context of therapy. Most commonly, when people decide to consult a therapist it is because they are experiencing a difficulty or problem in their lives. When meeting with a therapist, they will often begin by telling the therapist about many events in the life of the problem for which they are seeking help. Commonly they will also explain the meanings they have given to these events.

The Craxton family sought my assistance when one of the members of the family, Sean, was caught stealing. As I heard about the problem of stealing, Sean's parents explained:

We are really worried about Sean because he is stealing and we have tried to stop him but he just won't. He's always been a problem child from the time he was little. He didn't get much attention when he was a small boy because Anne [his mother] was ill. Since then he always gets in trouble at school. He didn't toilet train himself and is always starting fights with his brothers. Now he's stealing to get people to notice him.

Within this story, Sean's stealing was interpreted as meaning he was 'attention seeking'. This particular meaning (or dominant plot) occurred through a gathering together of many other events in the past that fitted with this interpretation. As Sean more and more came to be seen according to this

story, more and more events which supported the story of 'attention seeking' began to be selected out, and the story was told and re-told. As more events were added to this plot, the story of Sean as an 'attention seeker' became stronger.

To tell this particular story, certain events from the present and past were selected out and explained to fit with the meanings that his parents had arrived at. In doing so, certain events were selected and privileged to be told, as they were interpreted to fit with the plot of 'attention seeking'. Therefore, other events (that didn't fit with Sean as seeking attention) remained untold and unrecognised. The exceptions to this story of 'attention seeking' or times that might not fit with the 'attention seeking' story became less visible. So too, the broader cultural understandings of Sean's actions become obscured – including the fact that stealing is a common act by young men of Sean's class background in his neighbourhood. All the complexities and contradictions of Sean's life had been simplified into the understanding that Sean was an 'attention seeker'.

Thin description¹

Early in their meetings with people, therapists often hear stories, like the one above, about the problem and the meanings that have been reached about them. These meanings, reached in the face of adversity, often consist of what narrative therapists call 'thin description'.

Thin description allows little space for the complexities and contradictions of life. It allows little space for people to articulate their own particular meanings of their actions and the context within which they occurred. For example, in the story above, the description of Sean's behaviour as 'attention seeking' was a thin description. It was generated by others (as is often the case with thin descriptions) and left little room for movement.

This thin description of Sean's actions (attention seeking) obscures many other possible meanings. For all we know, the last thing Sean wanted may have been for his stealing to be given attention! Perhaps these actions had more to do with making a stand for belonging with peers, with acquiring something for his sister, with standing up to the bullying of others, or with establishing himself as

¹ The term 'thin description' is borrowed from the ideas of Gilbert Ryle - see Geertz 1973.

a leader in a neighbourhood where leadership for a young man means leading break and enters (robberies). A thin description of 'attention seeking' has the potential to leave Sean isolated and disconnected from his parents and his peers, whereas alternative descriptions may open other possibilities.

Often, thin descriptions of people's actions/identities are created by others – those with the power of definition in particular circumstances (e.g. parents and teachers in the lives of children, health professionals in the lives of those who consult them). But sometimes people come to understand their own actions through thin descriptions. In whatever context thin descriptions are created, they often have significant consequences.

Thin conclusions and their effects

Thin description often leads to thin conclusions about people's identities, and these have many negative effects. For example, as Sean's actions were thinly described as 'attention seeking', he quickly became seen as 'an attention seeker'. This thin conclusion about Sean as a person was having negative effects, not only in relation to Sean's experience of himself, but also on the relationships between Sean and his parents.

Thin conclusions are often expressed as a truth about the person who is struggling with the problem and their identity. The person with the problem may be understood to be 'bad', 'hopeless', or 'a troublemaker'. These thin conclusions, drawn from problem-saturated stories, disempower people as they are regularly based in terms of weaknesses, disabilities, dysfunctions or inadequacies. I can recall many of these thin conclusions that people who have consulted me have been invited into: 'It's because I'm a bad person' or 'We are a dysfunctional family'.

Sometimes these thin conclusions obscure broader relations of power. For example, if a woman has come to see herself as 'worthless' and 'deserving of punishment' after years of being subjected to abuse, these thin conclusions make invisible the injustice she has experienced. They hide the tactics of power and control to which she has been subjected, as well as her significant acts of resistance.

Once thin conclusions take hold, it becomes very easy for people to

engage in gathering evidence to support these dominant problem-saturated stories. The influence of these problematic stories can then become bigger and bigger. In the process, any times when the person has escaped the effects of the problem, any times when they have not been 'bad', 'hopeless' or 'a trouble maker' become less visible. As the problem story gets bigger and bigger it becomes more powerful and will affect future events. Thin conclusions often lead to more thin conclusions as people's skills, knowledges, abilities and competencies become hidden by the problem story.

Alternative stories

Narrative therapists, when initially faced with seemingly overwhelming thin conclusions and problem stories, are interested in conversations that seek out alternative stories – not just any alternative stories, but stories that are identified by the person seeking counselling as stories by which they would like to live their lives. The therapist is interested to seek out, and create in conversations, stories of identity that will assist people to break from the influence of the problems they are facing.

Just as various thin descriptions and conclusions can support and sustain problems, alternative stories can reduce the influence of problems and create new possibilities for living.

For Sean, for example, an exploration of the alternative stories of his life might create space for change. These would not be stories of being an attention seeker or a problem child. Instead, they might consist of stories of determination throughout his history, or stories of how he overcame troubles in earlier times in his life, or ways in which he gives attention as well as seeks it. All of these might be alternative stories of Sean's life. Or, alternative stories might be found in other realms entirely – realms of imaginary friends, histories of connectedness with his mother or father, or within special knowledges that Sean might possess through his relationship with his beloved pet dog Rusty. In any of these territories of life, through therapeutic conversations, alternative stories might be unearthed that could assist in addressing the problems Sean is currently struggling with. The ways in which therapists and those who consult with them can co-author alternative stories will be described in following chapters.

With these ideas about stories informing their work, the key question for narrative therapists becomes: how can we assist people to break from thin conclusions and to re-author new and preferred stories for their lives and relationships?

As Jill Freedman and Gene Combs describe:

Narrative therapists are interested in working with people to bring forth and thicken stories that do not support or sustain problems. As people begin to inhabit and live out the alternative stories, the results are beyond solving problems. Within the new stories, people live out new self images, new possibilities for relationships and new futures. (1996, p.16)

Towards rich and thick description

To be freed from the influence of problematic stories, it is not enough to simply re-author an alternative story. Narrative therapists are interested in finding ways in which these alternative stories can be 'richly described'. The opposite of a 'thin conclusion' is understood by narrative therapists to be a 'rich description' of lives and relationships.

Many different things can contribute to alternative stories being 'richly described' – not least of which being that they are generated by the person whose life is being talked about. Rich description involves the articulation in fine detail of the story-lines of a person's life. If you imagine reading a novel, sometimes a story is richly described – the motives of the characters, their histories, and own understandings are finely articulated. The stories of the characters' lives are interwoven with the stories of other people and events. Similarly, narrative therapists are interested in finding ways for the alternative stories of people's lives to be richly described and interwoven with the stories of others.

The ways in which alternative stories are co-authored, how they are told and to whom, are all relevant considerations for narrative therapists. In the following pages, ways to co-author conversations that engage people in the 'rich description' of their lives and relationships will be more fully explored.

Further reading

- Freedman, J. & Combs, G. 1996: 'Shifting paradigms: From systems to stories.' In Freedman, J. & Combs, G., *Narrative Therapy: The social construction of preferred realities*, chapter 1. New York: Norton.
- Epston, D. & White, M. 1990: 'Story, knowledge, power.' In Epston, D. & White, M., *Narrative Means to Therapeutic Ends*, chapter 1. New York: Norton.
- White, M. 1997: 'The culture of professional disciplines.' In White, M., *Narratives of Therapists' Lives*, chapter 1. Adelaide: Dulwich Centre Publications.