

# **Influencing Social Work Practice With Narrative Ideas**

## **A Narrative Approach**

One way to describe Narrative therapy is to think of metaphor of the traditional fruit and vegetable dish the *Rojak*. Imagine you are blindfolded as you tuck into this delicious (albeit spicy) dish for the very first time. You use a fork and first choose a slice of mango, followed by a slice of lime, and then a piece of green apple. If you are eating *Rojak* for the very first time, you might then decide that this is a sour dish. You might miss out the fact that *Rojak* is also made of sweet fruits such as pineapples, and savoury delicious treats like *youtiao* (fried fritters) and *taupok* (deep fried tofu).

The above illustrated experience represents the essence of narrative practices. The *Rojak* can be seen as the collection of our own life stories, and the different bits and pieces of food in it are like the stories we tell ourselves. These stories influence our understandings of who we are and what we do. Someone may see his/her life story as a sour experience defined by events such as being bullied by peers in school, being seen to be a disruptive teenager by teachers, and feeling worthless after being punished by the discipline mistress.

Imagine if this same person were able to plot new events in her storyline, where she stood against bullying and responding in a creative manner by courageously informing her teacher about it and perhaps finding an ally in her mother who believed in her. Then, these new storylines may aid in the creation of new meaning for her, who was affected by previous difficult life situations.

The illustrated story is an example of the work of a narrative practitioner who explores with his/her client on alternative perspectives to his/her problem saturated life situations. The essential purpose of a narrative approach is to build and thicken “preferred” storylines that exist beyond the problem story (transformation of problems through the re-storying of problematic stories).

## Talking about Talk: Centering our clients in our practices

### Talking about talk: Negotiating relationships in the case management process.

(Mohamed Fareez, Anny Rodjito, Paul Teo, Soo Hong Ling, Raudhah, Sheean Chia, Alvin Tay, Unpublished)

#### Pre-Session (Beginning) Inquiry

- Inform client about ethics of care and organizational processes of helping relationship.
- Identify expectations of working relationship
  - What are your hopes for this discussion with me?
  - How can I be of value to you?
  - Have you spoken to anyone else about the issues that are affecting you? Was it helpful?
  - Are there ways of how I can respond to you so that I could be useful for you?
  - Would you have any ideas about where these conversations might take you?
  - How do you think this talk about your problem can be useful for you?
  - What are your expectations of this talk?
  - Have you spoken to anyone else about this issue? Was it helpful or unhelpful?
    - What was helpful about your previous conversation that you think I can continue?
    - What was not helpful about that previous conversation that I should not follow/replicate?
  - Are there any questions that I might ask about this problem that might be useful/not useful for you?
- Identify goals of working relationship
  - What were you hoping to see from our work together?
  - What vision do you have for yourself or your family?
- Addressing power and privilege
  - What concerns might you have in sharing your problems in front of us, especially since we might not have shared the same experiences that you had? *To make known issues of gender, class, and culture.*
  - As a man/person from a different class or culture, what are your suggestions about how we can be respectful of the stories that you tell us?
  - What were some difficult experiences you have had in sharing your concerns with someone from a different gender/class/culture? What steps can we take to avoid such difficulties?

## In session Inquiry

- Identify problem and mapping its effects
  - o What name might you have for the difficulties or problems that brought you here today?
  - o When did this problem start becoming a problem?
  - o How has this problem affected you and your family?
  - o What are your hopes about how you would want to address this problem?
- Explore responses and actions against the problem
  - o What actions have you taken to reduce the effects of this problem? What has been useful? (probe to thicken stories where actions have been able to reduce the effects of the problem.
  - o What has not?
- Identify skills, knowledges and abilities (can also be derived from past responses against the problem).
  - o What resources would you be able to use to achieve your goals?
  - o What resources would be helpful in helping you reduce the effects of the problem?
  - o What is the history of this resource? Did something pass it on to you, or did you learn it from a certain experience?
  - o Who would be least surprised to know about this skill, knowledge or ability?
  - o How would this resource or skill help you address any challenges you might face in achieving your goals?
- Crafting a collaborative action plan based on information gathered
  - o What actions can we take in order to help you achieve your goals?
  - o How can we use the skills, knowledges and abilities you mentioned earlier to help you achieve what you want?
- Negotiate working relationship (what can the social worker do?)
  - o These are things that I would be able to provide you support in, but there are expectations that might be difficult for me to fulfill. Shall we discuss more about how we can support you?
  - o It might be difficult for me to do what you requested, but these could be potential alternatives:

## Post-session inquiry

- Evaluate experience
  - o How did you find today's discussion?
  - o What was helpful about our discussion?
  - o What was not helpful?
  - o Is there anything I did today that you would hope for me to continue doing when we meet in the future?
  - o Are there things I was doing which you hoped that I would do less off?
- Preference questions
  - o What are some things you hope we could talk more about in the next session?
  - o What are your thoughts about the plans we have for our next session?
- Addressing power and privilege

- How was your experience in talking about these many issues to someone from a different gender/class/culture? Did any of these experiences come across as what you had expected? Were any of these experiences surprising?
- Were there times where you felt that we could not understand you due to our different gender/class/culture? What steps could we take to address this in our future sessions?

## **STRENGTHS PERSPECTIVE: Rethinking Problems and Strengths**

From Bill Madsen (2014:125):

“...Strengths based service planning has become somewhat of a cliché in health and human services. Too often the person completing the intake is prompted to list strengths as an addendum (almost as an afterthought to a long list of problems and afflictions... balancing a focus on challenges with a process that elicits abilities, skills, and know-how at individual, relational, and sociocultural levels is profoundly important. Strengths are more than a cliché. Strengths represent a way forward.”

(2014: 139)

“We want to suggest the usefulness of a shift from viewing strengths as characteristics to viewing strengths as practices (i.e. things people do in their lives). The shift from viewing strengths as characteristics (something a person is) to viewing strengths as intentional practices (something a person does backed by intentions, values and beliefs, hopes and dreams, and commitments in life) can lead to more poignant conversations about strengths, and assist people in cultivating and further developing those strengths. “

### **Bringing forth the Narratives of Strengths in Interviews (Epston and Ingamells, 2012)**

In pairs, one person to become the interviewer and another person to become an interviewee.

Interviewer to ask the following questions (remember that it would be useful to go in depth):

1. Identifying the event
  - a. Think about an event in your life (can be a personal or professional situation) where you felt particularly proud of yourself. <interviewer to go into the details of the event, when was it, what did you do, why did you feel proud, what were your feelings when this happened?
  - b. If interviewee chooses a card: Tell me more about the skill, ability or strength? When were you able to show this skill, ability or strength? (Go into details)
2. Identifying the skills, abilities and strengths
  - a. As you are telling me about this event, what were the skills or abilities that you were able to use? <what name do you have for these abilities?>
3. History of the skills, abilities and strengths
  - a. When you look back at your life, when did you start becoming aware of \_\_\_\_\_(Name of strength, skill or ability)?
  - b. Are there times in your past that you were able to use this skill of \_\_\_\_\_? (go into specifics)

4. Legacy of skills, abilities and strengths
  - a. Was there anyone in your life that helped in the building of this strength? How did this person contribute?
  - b. Of all the people who know you in your life, who will not be surprised of this skill of \_\_\_\_\_? Why wouldn't they be surprised?
  - c. How do you intend to pass on this skill of \_\_\_\_\_? Who can benefit from it?
  
5. Future of the talent
  - a. Has talking about this skill led you to think differently about yourself?
  - b. How can this skill, ability or strength be useful for you in future situations?
  - c. Are there any upcoming situations that you will be facing in the future where this skill is going to be used? How will you use it?
  - d. How would using this skill make a difference to the situation?

### **Madsen's Map for conversations about strengths**

1. Identifying Strengths as practices (things people do in their lives)
2. Eliciting possible intentions, values and beliefs, hopes and dreams, and commitments in life that might stand behind those practices.
3. Developing a community that can support people in those intentional practices.

### **Fareez's map of working with strengths.**

1. Identifying something that can be called as a strength (ideally from the words of the client, or observed by the worker), and exploring it from an intentional state discourse (as opposed to internal state discourse). It could also be described as a value, skill or ability.
  - a. "When you say that you are doing this for your children, what kind of ability is this?"
  - b. "How were you able to overcome and survive the "weird thoughts" this past week?"
  - c. "You said that your manager saw you as a potential leader, what did you do that made him
2. Thicken the strength through story development.
  - a. Can you share more about how you were able to use this skill?
  - b. Were there other situations in the past where you were able to practice this skill? Can you share more?
3. Explore origin of the strength, and thicken any turning points.
  - a. How were you able to develop this ability? Did it come suddenly? Or did it happen over time?
  - b. How did you make the decision to use this skill at this point of time? What difference did you see when you use this skill?
4. Link strengths to current obstacles faced, towards meeting vision.
  - a. How would this skill support in helping you achieve what you want in your life?
  - b. How would this skill or ability be useful in removing any of the obstacles you discussed before?
  - c. How has anything we discussed made any difference to how you are viewing the problem right now?

### **Personal Life Certificate – List of questions**

- What are some qualities (knowledge, skills and abilities) about yourself that you want to be remembered for by others?
  - What name would you have for these qualities?
  
- How did you come to have these qualities?
  - Did someone pass them to you;
  - did you get them after experiencing something?
  - Any stories that you can share which describe how you developed these qualities?)
  
- How have these qualities (can be skills, knowledge and abilities) helped you in the challenging moments of your life?
  - Are there examples that you can think of?
  - Can you share stories of such experiences?
  
- Who wouldn't be surprised that you had these qualities?
  - Why wouldn't they be surprised?
  - How have they experienced these qualities, skills, knowledge and abilities?
  - How have they been moved or affected by this experience(s)?
  
- Do you remember times where you have been able to pass these qualities down to others?
  - When? Where? To whom did you pass these qualities?
  - How did you know that they were able to pick up these qualities
  
- How else would you want to be remembered?

### Definitional Ceremonies

1. Term based on the work of Anthropologist Barbara Myerhoff (1982)
  - a. Barbara Myerhoff studied a group of elderly Jews living in Venice, California, most of whom lived in poverty. These were people who were somewhat isolated, in the 80s and 90s. Having a past devastated by the Holocaust, these people found sustenance through their connections with each other and participation in the Israel Levin Senior Centre.
  - b. They chose to relive parts of their traditions and culture that were important and valuable to them, ignoring aspects of American practices that did not appeal to them.
  - c. Members of this group were able to revitalise their lives through the recounting of their life histories and stories within the context of collective performances.
2. Creation of a “social arena” where preferred story could be thickened and given an audience.
  - a. “Such performances are opportunities for appearing – an indispensable ingredient of being itself- for unless we exist in the eyes of others, we may come to doubt even our own existence. Being is a social and psychological construct; it is something that is made, not given. Thus it is erroneous to think of performances as optional, arbitrary, or merely decorative embellishments as we in Western societies are inclined to do. In this sense, arenas for appearing are essential, and culture serves as both stage and mirror, providing opportunities for self and collective proclamations of being.” (Kaminsky & Weiss, 2007: 31)
3. Definitional Ceremonies
  - a. “When cultures are fragmented and in serious disarray, appropriate audiences may be hard to find. When natural occasions are not offered, they must be invented. I call such performances “definitional ceremonies”, i.e. collective self-definitions specifically intended to proclaim an interpretation to an audience not otherwise available...socially marginalised people, disdained, ignored groups, individuals with what Erving Goffman calls “spoiled identities” regularly seek opportunities to appear before others in light of their own internally provided interpretations. “
  - b. Michael White (2007) discussed this in the context of therapy where individuals, through definitional ceremonies, are able to re-author their experiences through the lens of other community members, and have their identity claims validated and acknowledged. Definitional ceremonies enable participants to be seen on their own terms, and hence be rendered “visible” (Myerhoff, 1986).
  - c. When I pondered on the intent of maintaining confidentiality at all costs, I began to find this issue more relevant in the context of preventing shame, especially when problems are viewed pathologically (e.g. this person is depressed, has a mental illness etc). However definitional ceremonies are different in that they instead focus on bringing to light preferred views of the self, which would include stories of strengths and competence in responding to an externalized problem (Lobovits, Maisel, & Freeman, 1995).
  - d. At the same time, there is an empowering effect in the process of creating documents that enable contribution and social action on the part of the client. Within this perspective, the clients we work with would be more inclined to share these stories of

their preferred selves. This act of sharing and retelling would serve to thicken these preferred stories.

#### Relational Identity (Combs and Freedman, 1996)

1. Life and identity are shaped by relations.
2. Stories of those who we have been, and who we can be, wouldn't exist outside our relationships with others and our sense of how they perceive us.
3. The notion of relational identity alerts us to find ways of including other people in the therapeutic conversations.

#### Outsider witness groups in narrative therapy

1. Outsider witness groups create a context where people can tell their stories while a group of outsiders listens to them
2. Outsider witness groups then amplifies and thickens the preferred stories they witnessed for rich identity claims

#### Michael White, 2007

- In outsider witness retellings, what people give value to in their acts of living is re-presented in ways that are powerfully resonant and highly acknowledging
- Additionally, it is through these retellings that people experience their lives as joined around shared and precious themes in ways that significantly thicken the counterplots of their existence.

## **Being an Acknowledging Witness (HANDOUT)**

1. Identifying expression
  - a. What parts of the sharing/song/conversation did you connect with?
  - b. What words caught your attention or captured your imagination?
  
2. Describe image(s)
  - a. What kind of image do you have about what this person values in his/her life?
  - b. Are there any thoughts and feelings that come to you when you are hearing the story?
  
3. Connection and Resonance
  - a. Why do you connect with what was said?
  - b. What parts of your own life connect with the person's story?
  
4. Transport
  - a. What are you inspired to do because hearing this person's story/sharing?
  - b. How did this story move you emotionally?
  - c. How did it move your thinking?
  - d. What are some steps you would take in your life because you have heard this story?

(Adapted from Denborough, 2014)

## Using Documents as Case Recordings: Guidelines

### On the written word

- “Sometimes the written word can be a witness. The written word has power. It lasts. Often, unfortunately it’s used in negative ways. For instance, in psychiatric hospitals there are often huge files about the lives of patients. Sometimes every word in these huge files is negative and not one word has been written by the person. They are demeaning accounts of people’s lives written by so-called “experts”. (Denborough, 2014: 71)

### Nylund and Thomas (1994): conceptual framework in structuring letters to clients

1. Introductory paragraph reconnects client to previous therapy session.
2. Statements summarize the influence the problem has had and is having on the client.
3. Questions the therapist thought about after the session that pertain to the alternative story that is developing may be posed to the client.
4. Letter documents unique outcomes or exceptions to the problematic story that emerged during the session.
5. Where possible, the client's words are quoted verbatim. Using the client's words enhances the therapeutic relationship, resulting in the client feeling empowered and understood. This connection leads to a more comfortable opportunity for the client to rethink descriptions and stories, and to create new images, leading to change.

## The Narrative Non-Suicide Contract

The practice of getting our clients to fill up a non-suicide contract is common in risk management work. Whenever there is a risk of suicide, we tend to be compelled to get our clients to fill up this form, which states that they would not be attempting suicide as it is illegal in Singapore. Often, there is a generic form that social workers would be able to use.

My grouse with the non-suicide contract is that it seems to be a practice that is more focused on "covering our backsides" as opposed to ensuring that our clients are safe. We work towards filling up the forms, and then develop a false sense of safety as long as the form is filled up, because we feel that we have done our part. If anything were to happen, at least we can show others that a non-suicide contract had already been done between the social worker and the client.

Frequently, I also find that a lot of my clients hesitate in filling up the form. One response that I had from a client was particularly significant:

"Here I am, really feeling shitty about myself; and here you are trying to force me to fill up this form"

The process of building rapport and assessing risk with the clients, to a large extent (for me) faces a rather jarring ending, when we try to convince our clients to fill up a non-suicide contract. I realised that the focus should instead be on fostering a collaborative plan of safety that was resonant in the conversations we were having with our clients surrounding risk.

At the same time, the collaborative safety plan should also identify the skills and values of the people that we work with. These are important resources and anchor points that are resonant to our clients' experience, as opposed to strengths that are practitioner defined.

Examples of questions that I begin using to identify such skills and values include:

**"When you were able to prevent yourself from going up to the 10th floor and jumping, what value or belief stopped you? Where does this value come from"**

**"This thing (The precipitating event/stressor) happened last week; so how were you able to keep yourself alive and safe until now? How would you name this ability?"**

**"Seems like your friend here wants you to be safe, why do you think he wants you alive? What about you is important to him?" (I find it useful to bring in key allies and supporters of my clients in our sessions).**

Of course, as a social worker, I also believe that we should not shy away from questions that would help us identify the nature of the risk. I will not go into detail about that aspect much, but suffice to say that the following CPR model is one that I have been using for quite some time:

**C - Current situation** (which also involves reflecting about our client's immediate affect following a traumatic stressor)

"What plans do you have now about ending your life?"

**P - Past attempts / History**

"Have such thoughts disturbed you before? What happened then? What did you do? How were you able to refrain from hurting yourself?"

**R - Resources (and alternative storylines)**

"Who are the people who would be upset should anything happen to you? What do they value about you?"

"What were some things that you were able to do, that have been helpful in keeping you safe?"

Through a process of identifying risk and alternative storylines of responses to risk, we can also express curiosity about situations which need more attention. For e.g.:

"Looks like you know what to do in the day when these thoughts bother you, and usually you are able to keep yourself busy in the morning. But you mentioned that the thoughts come and bother you when you are about to sleep. What are possible ideas you have about responding to these thoughts at this time?"

"What has been useful? What are some new ideas that you would be open to try?"

In these situations we can also provide suggestions or creative ideas that may be resonant to our clients' unique worldviews. E.g.:

"You earlier talked about how your religion has been keeping you going; would prayer be useful for you at this time when the thoughts could get overwhelming? What are some prayers you might recite?"

A collaborative safety plan should place importance on resources and responses that are identified by our clients, and resonate with their unique perspectives. We wouldn't push for someone to write a journal, if this is a practice that is totally alien to him. It can involve efforts not only by the client, but also other important allies in the family ecosystem, as well as the helping professional.

The following is a safety plan that might be developed in the process

We have all decided that Henry should keep himself safe for the following reasons:

1. \_\_\_\_\_

2. \_\_\_\_\_

This safety plan is drawn up because we are all concerned about Henry's safety, especially when these thoughts of "worthlessness" and "pain" come to disturb him. We have all agreed on the following points and will review them again by \_\_\_\_\_.

1. Henry would call his brother John, should the thoughts come and disturb him. John is aware of this and would be extra vigilant in answering these phone calls.
2. Henry has found it useful to keep his morning busy. He is able to do this through exercise which include morning walks and runs, and also doing pushups at the exercise area. He would be doing these exercises and will update about its usefulness when we review the plan.
3. The thoughts come and bother Henry the most when he is about to sleep. We have identified some possible ideas to manage these thoughts. e.g. drinking a hot drink before sleep, watch a youtube comedy video one hour before sleep. If the thoughts become overwhelming, Henry is able to call John immediately. He can also contact the SOS hotline at \_\_\_\_\_. We will review the usefulness of these strategies in the next meeting.
4. We have discussed the possibility of hospitalisation should the thoughts be overwhelming. We have also come to an agreement that this is a last resort and requires further discussions between Henry and John. Henry and John are confident that hospitalisation will not happen due to Henry's value of "wanting to make a difference in others' lives". Henry wants to make sure that he can contribute to the lives of others, and would remember this value should the thoughts be overwhelming.
5. The social worker would also be making "check-in" calls at the following times: \_\_\_\_\_. The purpose of these calls is to ensure that Henry is safe. Henry will also tell us the extent of how the thoughts have been disturbing him, and any useful strategies that have been identified.
6. The following team members are committed to support this safety plan: (Names and signature of all involved.)

## Identifying Sparkling Moments

Date/Year

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### Timeline Exercise:

On the above timeline identify 3 to 5 significant events in your life that you feel could be considered important sparkling moments that have contributed to you being the person that you are.

Sparkling moments can include

1. Moments where you did something different in your life that led to a positive outcome (for example, deciding to change your job, leaving a difficult relationship, etc).
2. Moments where you felt particularly proud of yourself and you were able to develop new skills, values or abilities. (e.g. Taking a leadership role, doing a project at work, etc)
3. Moments where you were able to overcome life's challenges (e.g. being able to grow after resolving a conflictual relationship, being able to survive a difficult period of your life)

## **An Inquiry process for Sparkling Moments**

**Identify one sparkling moment to thicken, taking note of the rites of passage metaphor (of separation, liminality, and Reincorporation). To share in pairs.**

**Interviewer to ask the following questions:**

1. Can you share about the sparkling moment?
  - a. When did this happen? (go into detail)
  - b. What exactly did you do?
    - i. Do you remember how you decided to do it?
    - ii. Did you do it intentionally?
  - c. Where were you?
  - d. Who else was with you?
2. How was it possible for you to take this action?
  - a. What were you hoping for when you took this action?
  - b. What does your action say about what you are planning or hoping for in your life?
3. What did it mean for you to be able to do this?
  - a. What was going through your mind when you were doing this?
  - b. How was your response different from how you might respond to other situations?
  - c. Have you done anything like this in your life before?
    - i. Was it recent or some time ago?
    - ii. How did the previous times build up to this current experience?
4. Did anyone notice you when you were able to do this?
  - a. What did they do or say to you?
  - b. Were they surprised to see you doing it? Why?
  - c. If they weren't surprised, how come? (did they already feel that you would be able to do what you did? Or something else?)
5. What name might you have for the skill or value that you used to carry out this activity?
  - a. Is this a new skill or value?
  - b. Or has it been something that you have used in your life?
  - c. What is the history of this skill or value?
6. Is there any upcoming event where the skills or values you picked up or used from this experience would be useful?
  - a. What is the event?
  - b. How will you be responding to it?
7. What difference did this conversation make for you?
  - a. Did it make you realise any new things about yourself?
  - b. Are there things that you would continue doing? Or new things you would undertake?

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