A good citizen: using narrative in contexts of trauma Hugh Fox

In this article I am going to recount a short piece of work that I did with a boy called Neil. Neil was 10 years old and was referred for this particular piece of work because of troubling behaviour at school. This behaviour seemed to relate to a traumatic experience he had been through, and I will be connecting the work I did with Neil with the ideas of Michael White on subordinate storyline development in the context of trauma.

I am not presenting this piece of work because it is a textbook example of using these ideas, which, alas, it isn't. Rather, I am presenting it because I find the ideas of Michael White in relation to trauma so exciting and so helpful, and it is my hope that those of you who are less familiar with these ideas may find them similarly exciting and helpful.

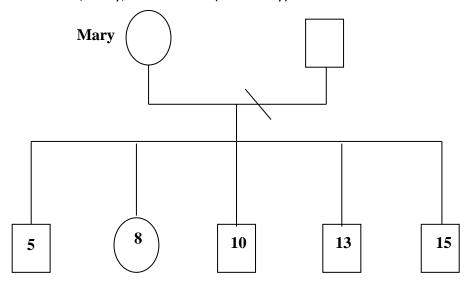
This short piece of work took place in the context of a much larger piece of family work with Neil's family. I will not say much about this family work as I wish to focus on the specific work in relation to trauma, although issues of trauma also occurred throughout the family work.

I will start by exploring the background of the referral, which was quite complex. I will then talk a bit about Michel White's ideas in relation to working with trauma, before going on to describe the work that Neil and I did together and its outcome.

background

Neil was first referred to me for family therapy in the context of a troubled family history.

He was the middle of five children, the three oldest being boys (see genogram). They had come to the attention of the Social Services Department after an incident where their mother, Mary, had stabbed (not fatally) the children's father.



The police had been involved and all five children had been taken into care. At that time, three years ago, they ranged from 2 years old to 12, and Neil had been 7.

They had been placed in three separate foster homes. Neil had initially been placed on his own, later been moved in with his two older siblings, and then been returned to his original foster carer.

Two years after the initial incident Neil's two older siblings and his two younger siblings had been returned home (not all at once), but Neil had remained in foster care. There were a number of rather circumstantial reasons for this, but also Neil's behaviour at school had been difficult, with some aggression to other children. Following the stabbing incident Mary had been very depressed and continued, so I was told at the point of referral for family work, to be depressed. It was felt that it might be too much for her if Neil was returned home as she already had the other four children to cope with.

Further, he was in a well regarded foster placement and it was feared that if he left and then things went wrong that this placement was unlikely to be still available. Due to the pressure to find placements, Social Services would have placed another child with the foster carers.

Now, a year after his siblings had returned home he continued in foster care, having two overnight stays at home each week. The next brother up in age was displaying difficult and aggressive behaviour at home in relation to both Mary, their mother, and to his younger siblings. The oldest brother was involved in attempts to control him through physical force, and this lead to some serious difficulties. It was now strongly feared that any return home by Neil would be too much for Mary to manage and the whole situation might break down. The position at home was seen as fragile and there was a family support worker visiting three times a week, as well as the visits of the social worker.

When I later met Neil I heard how bitterly unfair he thought it was that he was the only child not allowed home and how he constructed the situation as a deliberate attempt by Social Services to prevent his return home.

The request for family therapy came from a colleague in a Child and Adolescent Mental Health Team whose job was specifically related to looked after children. She had been providing consultation to the social worker involved with Neil's foster carers. My colleague expressed the hope that I could improve family relationships to the extent that Social Services would feel able to return Neil home.

Other background I heard related to the father who had been seriously and continuingly violent to Mary, the mother. He had also set the children to fighting

with each other, encouraging them to seek domination through violence. Following the stabbing he had left the area and there was no contact.

The family were fortunate to have a very conscientious and caring social worker, and it was he who later, in the context of the family work I was undertaking, rang and asked me if I could do some individual work with Neil. The school had had some ongoing concerns that Neil drew many images of knives, of blood, of stabbings. They were also concerned that he was not progressing satisfactorily with his work. And now he had been running up and down the school corridors blank faced and not responsive to staff. They had eventually contained him, and had contacted the social worker, who in turn contacted me. The request was for me to see Neil on his own.

When I met with Neil as requested it quickly became clear that he was responding to memories of the stabbing incident with what he himself called flashbacks.

I was fortunate to have read some articles by Michael White (2003, 2004, 2005) about working with trauma, and it was the ideas from these articles that informed my thinking during the conversation that followed and that shaped my responses to what Neil told me.

trauma and subordinate story line development

Michael White (2005) talks about the importance of 'repositioning' children in order to ensure that in talking about trauma they are not simply re-entered into the traumatic experience with the result that they re-experiencethe trauma in the present, and are thereby re-traumatised. This repositioning is in relation to providing a territory of identity that is different from the identity of which the trauma speaks. This is often an identity of powerlessness and victimhood, or maybe of failure.

It is in these sorts of contexts, where children may have had their sense of who they are negatively impacted upon by the trauma, that we should seek the rich development of subordinate story lines of the child's life. White's understanding is that once we are able to find alternative storylines, and once these subordinate story lines are described sufficiently richly, then this will provide an 'alternative territory of identity' within which the child can stand. Standing firmly in this alternative territory of identity will enable them to talk of the trauma without the memory of the trauma re-entering them into a problematic identity.

In thinking where this alternative territory of identity might be found White says:

'No child is a passive recipient of trauma.... Amongst other things, children take action to minimise their exposure to trauma and to decrease their vulnerability to it by modifying the traumatic episodes they are subject to, or by finding ways of modifying the effects of this trauma on their lives.'

He goes on:

'These responses to trauma and its consequences are founded upon what children give value to; upon what they hold precious in their lives.' (White, 2005)

The question is how to get on to these responses; and how to get on to what it is that that has shaped these responses in terms of what is given value to and what that is held precious.

It is likely that these responses will be relatively invisible to children who have been traumatised. Often there have been systematic attempts by abusers to belittle or denigrate any such responses. The problematic account of identity is likely to make these responses invisible to the child. Instead, White approaches this through finding what it is the child gives 'value to ... (and) what they hold precious in their lives' (White,2005) and then explores how these values shaped their responses at the time of the traumatic event(s).

White talks about three approaches to finding what is given value or held precious:

- Identifying the absent but implicit
- Reflecting on problem solving activity
- Direct observation of spontaneous interaction

In what follows I am going to focus on the first of these three approaches, the absent but implicit. To hear more about the other approaches please read White's article (2005).

the absent but implicit

The idea of the absent but implicit is that for any experience of life to be distinguished, it must be distinguished from that which it is not. 'Hot' cannot be distinguished without some experience of 'cold' (or maybe 'lukewarm' etc); 'failure' cannot be distinguished without some experience of what 'success' would be,; 'hopelessness' cannot be distinguished without some concept of 'hope'; etc. White draws on the work of Bateson and Derrida (White, 2003) in developing these ideas. He refers to Derrida's idea "that words are signs that principally function to frame, encase and demarcate". Words function to "construct boundaries between specific concepts and what these concepts are not".

On this understanding all descriptions are relational, being possible only in relation to what they are not. For example, if a person speaks of themselves as hopeless then this speaks of a hope that they once had. Or if they say they no longer care, then this lets us know that once upon a time they did care, and they are not strangers to caring. This leads on to the idea of double listening – that as we listen to stories of pain and distress we are also listening out for what the experience of pain and distress may be being perceived in relation to.

White develops these ideas in the context of trauma to rethink how we may understand the pain and distress associated with trauma. He moves away from the

idea that it is just natural to experience pain and distress in relation to trauma and instead considers these things to be responses to the violation of what is of value to the person or what is held precious.

In this understanding psychological or emotional pain can be understood as:

'...testimony to the significance of what it was that was that the person held precious that was violated through the experience of trauma. This can include people's understandings about:

- a. Cherished purposes for one's life;
- b. Prized values and beliefs around acceptance, justice and fairness;
- c. Treasured aspirations, hopes and dreams;
- d. Moral visions about how things might be in the world;
- e. Significant pledges, vows and commitments about ways of being in life; etc'

(White, 2003)

White continues that on this understanding then the intensity of experienced pain in relation to the trauma can be considered a reflection of the degree to which these purposes, values etc are held precious.

Equally, distress (the expression of psychological pain in day to day life) can be understood as

"... a tribute to their ability to maintain a constant relationship with all of those purposes, values, beliefs, aspirations, hopes, dreams, visions, and commitments held precious — to their refusal to relinquish or to be separated from what it was that was so powerfully disrespected and demeaned in the context of trauma, from what it was that they continue to revere."

(White, 2003)

On this understanding the intensity of the distress reflects the continuing importance of these values etc in the present to the person expressing the distress and reflects the strength of their continuing relationship with these values etc.

These then were some of the ideas that were present in my mind as I met with Neil and as I heard something about his current pain and distress and its relationship to past trauma. So let's go back to Neil and our conversations together.

working with Neil

When I met with Neil on his own he was quick to tell me that he was suffering from flashbacks (his word) in which he was remembering coming downstairs and seeing his mother stab his father. He particularly mentioned the large amounts of blood that he saw. He told me that these flashbacks were very persistent and dominated his time at school, where he found it impossible to concentrate on his lessons. They

could last, he said, for hours at a time. They gave him headaches and made him feel really bad.

As I listened to this account I thought about the absent but implicit and what might be absent but implicit in this account. It seemed that Neil was already very fully reentered into this traumatic experience in his daily life at school and I did not wish to replicate this further in our session. I therefore started to move the conversation away from the actual episode, and soon found Neil talking to me about his father who he had not seen since then.

His initial accounts of his father were that he loved his father and missed him and that when he grew up he wanted to be like him. I felt somewhat alarmed by this, given what I had been told about his father, and enquired what it was about his father that he loved and in what ways did he want to be like him.

He responded to this by telling me that his father had been a drunk and a bully who used to beat up Neil's mother, and that he hated him and feared that he would grow up to be like him, though he expressed a determination that this should not be so. This seemed more hopeful, and I asked about how it was he wanted to be when he grew up and he replied that he wanted to be 'a good citizen'. I invited Neil to give a more detailed description of what would constitute being a good citizen, and he replied that he would be someone 'who stood in line'. I was a little confused by this, but on further exploration it emerged that his hope was to be someone who would stand in solidarity with others who were experiencing difficult times.

I continued to think about the absent but implicit. I imagined that this wish to stand with others might be a precious value for Neil which, having been unable to protect his mother during the stabbing incident, he understood himself to have failed to live up to at the age of 7 years. And having heard about how the father had set the children against each other in practices of physical and emotional domination, I imagined that it might not only be in the stabbing incident that he felt he had failed to stand in solidarity with others.

I continued to explore the theme of being a good citizen with Neil and invited him to give me more details of how he understood this. Neil went on to paint a picture in which he worked hard at school, got a good job, and then married and had a family. In the context of this family he would not drink and would look after his wife and children, protecting them from danger.

We had some more conversation about his father and Neil imagined that he had had a difficult time as a child in his family, and that this would explain why his father was as he was.

We ended this first session by inviting his mother to join us and then running through what it was that I had heard from Neil during our conversation. I invited Mary's responses to what she had heard and she let Neil and I know that she was not surprised by what Neil had said about what was important to him as she had

known this about him for some while. She cited the way that he played with and cared for his younger brother, aged 5, and the way he was always eager to help her in the house.

I saw Neil two weeks later and he told me that since our meeting he had had no further trouble with the flashbacks. They simply had not presented themselves, and he reported he was now able to get on with his work at school satisfactorily.

We had further conversation on similar lines to the previous session, exploring how his vision of himself as a good citizen might affect his actions over the coming weeks if he kept it in mind. Neil talked about looking after his two younger siblings and being 'good' for his mother. He also talked about his efforts at school to be a good friend and also to work hard and be a good pupil. Once again we ended the session with Neil's mother joining us and filling an outsider witness role (White, 2000a). Neil told me that he did not feel the need for further individual sessions but that he would be glad to keep attending the family sessions, which were ongoing.

I remained in touch with the family for maybe another year after this. By now Mary was proving herself a very effective parent and a model in how she handled the difficulties with the older boys (Mary called this 'listening with patience'). All talk of her being depressed disappeared from within the professional network and was replaced by descriptions like 'calm', 'confident', 'firm' and so on. During family sessions I would hear about actions performed by Neil such as reminding his older brother to be respectful to his mother, and I would ask him if this was an example of him being a good citizen, and he would confirm this was the case. In time, he would tell me of an episode and then, without my asking he would comment 'Good citizen!' and give me a thumbs up sign.

I'm glad to be able to report that Social Services were persuaded to give up their anxiety about allowing Neil home*, and that over a short period his stays at home were increased until he was allowed to remain at home permanently. All reports I have heard are that this has been very successful.

theory and practice

Looking back on the work with Neil I am struck by the things I did not do as much as by what I did do. But most of all I am struck by how quickly, without revisiting the original traumatic incident, the flashbacks were resolved.

My understanding of this remarkable recovery is based on the ideas previously discussed about the rich development of sub-ordinate story lines.

The subordinate story line here was one of 'being a good citizen' and 'standing in solidarity'. My understanding is that through the traumatising experiences that have been mentioned, Neil had become separated from this account of himself. He had come to understand that the situations that had been visited on him meant that he was unable to live his life according to this vision he held precious. In our

conversations we had brought forward this account of what was precious to him. By hearing about ways in which he was living his life now that fitted with these aspirations, he was able to stand again in this preferred territory of identity. And from within this territory of identity the traumatic experience was no longer able to speak with authority on matters of his identity; and through this these memories lost their power to re-traumatise Neil.

On reflection, I notice that I did not explore at all how these aspirations for his life had shaped his response back then, both at the time of the stabbing and also in the context of the ways of being that his father had imposed upon the family. Maybe it would have been even more helpful to Neil if I had done this.

Also, I think about how others might have been recruited as outsider witnesses to Neil's preferred identity. These others might have included an uncle I heard about and also the social worker. This might have lead to an even richer account of 'the good citizen'.

But in fact, this was not necessary, and as far as I know the flashbacks caused no further trouble in Neil's young life.

I am also very aware that my confidence in leaving the original incident relatively unexplored, and in not visiting the circumstances of his father's violence at all, were underpinned by my understanding of pain and trauma as testimony and tribute to absent but implicit hopes, values and commitments. And that it was this understanding that led me to focus instead on what it was that was important to Neil as he reflected on how he would like to live his life.

For a fuller account of these ideas and practices I recommend the references below by Michael White, in particular the last piece (2005).

*An interesting aspect of this was that the foster carer, who had been caring for Neil most of the time for over three years, understood that if Neil returned home then Social Services would immediately place another child with her. In consequence, if anything went wrong, Neil would not be able to return to live with her. This was one of the main reasons that Social Services gave for not returning Neil home. The foster carer relieved them of this dilemma by announcing that if Neil were returned home then she planned to take a break from fostering for an unspecified period. I admired her finesse in dealing with bureaucracy!

I was practicing family therapy through the 1980s using an increasingly strategic approach in which the therapist acted on the family to change them whether they wanted to or not (families were seen as coming for help but not wanting to change). I and my colleagues noticed that although families often changed they did not seem to enjoy the experience. We were increasingly unhappy with this approach and were looking for something more open and collaborative. In the autumn of 1989 three of us attended a workshop by John Burnham based on the ideas of one Michael White,

of whom we had never heard. But the publicity for the workshop sounded like it might be interesting. The approach immediately appealed to us and the very next working day we started externalising and re-authoring. We found that families enjoyed this approach and that there was lots of laughter, fun, and poetry. We now seemed to be working with the families instead of against them. I have been passionate about these ideas ever since. We bought a book of Michel White's collected papers, no longer in print, and soon after were able to obtain a copy of Narrative Means to Therapeutic Ends. And what a journey it has been since then!

References

White. M. (2000a) Reflecting team work as definitional ceremony revisited, in White. M, Reflections on Narrative Practice: Essays and interviews, Dulwich Centre Publications, Adelaide

White, M. (2000b) Re-engaging with history: the absent but implicit, in *Reflections on Narrative Practice*, Dulwich Centre Publications, Adelaide

White, M. (2003) Narrative practice and community assignments, in *The International Journal of Narrative Therapy and Community Work*, 2, p 31

White, M. (2004) Working with people who are suffering the consequences of multiple trauma: A narrative perspective, *The International Journal of Narrative Therapy and Community Work*, 1

White, M (2005) Children trauma and subordinate story line development, in *The International Journal of Narrative Therapy and Community Work*, 3 & 4, p 12