

Our Life Story is the Source of Trauma Narrative Therapy



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Submission: April 12, 2023; **Published:** April 19, 2023

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Abstract

Narrative therapy, which has started to develop since the 1980s, is not a well-known and applied psychotherapy method in our country. In this context, the main purpose of this article is; Our aim is to introduce narrative therapy, which is one of the approaches that have become important in the field of psychotherapy, in the field of psychological counseling in our country as a general framework. First of all, in this article; In the introduction part, the historical development of narrative therapy stemming from constructivism, which emerged as a result of postmodern approaches in psychological counseling and psychotherapy, is discussed. Then, by mentioning the theoretical framework of narrative therapy, under this title, the philosophical foundations on which narrative therapy is based, and the names that this therapy is affected by, the story metaphor and psychotherapy method are mentioned, and the therapeutic process, purpose, environment, therapist-client relationship are discussed in the sub-titles, the therapist's position, how the sessions are. The therapy techniques used were mentioned by giving information about the need for therapy. They are the stories that clients brought to the therapeutic environment, which are taken to the center in narrative therapy. Since these stories are directly internalized by individuals or they have to internalize them without criticism and they see these stories as their destiny, individuals always evaluate their self-perceptions as an inadequacy based on these dominant stories, and they come to the therapeutic environment to get rid of this feeling of inadequacy. In this therapeutic process, the most important task of the counselor is to listen to the client's story effectively and to assist the rewriting of the story by giving new meanings to the stories in the deconstruction and reconstruction process of the client's stories in cooperation with the counselor. Change is the re-creation of the client's perceptions of their personal stories and stories in the therapeutic process. In this respect, it differs from traditional psychotherapy methods due to both the philosophical and theoretical principles it is based on and the therapy methods it uses. As a result of the review of the literature, it was found that the number of studies investigating the effectiveness of narrative therapy is quite limited in our country. Despite this, the results of these limited studies have shown that narrative therapy is beneficial for reducing the symptoms of various psychological problems. This article is important in order to provide information for those working in the field and to satisfy the curiosity of the readers in this field.

Keywords: Narrative therapy; Therapy; Therapeutic techniques

Introduction

In the 1980s, very interesting things were happening in Australia in family therapy. At that time, it didn't matter what the problem was in the family, because whatever the problem was, the reason was always the same, according to experts. Specialist therapists in the 1980s only saw themselves as justified. No matter who, the only source of trouble for all Australian families has always been the mother. Whatever the cause of the problem, the culprit was always the mother because the mother either did nothing or did too much. Since this was so common in the 1980s, this information was also included in books on psychology and psychology in Australia. In the face of this, they argued that a new perspective, a new method, a new approach should be introduced that does not blame women, arguing that it is not fair to attribute

the source of the problem only to their mothers. As a result, a new transformation began with an approach that blames no one, which is described as a new era in family therapy.

As a native of Australia, Artiv Barbirilingay gave the easiest definition of Narrative Therapy for everyone to understand: Telling our stories in a way that empowers us. There are traditions of this kind of storytelling in different cultures as well. There is this kind of similar storytelling in our culture. Michael White and David Epston, co-founders of Narrative therapy, did not come from wealthy families. White came from a poor family that was not wealthy. Michael's mother was trying to help those in distress in the neighborhood where she grew up. When Michael completed his education and started working in the mental health

field, he encountered people who had little money and struggled with various difficulties. And he has witnessed many times that these people do not get the respect they deserve in psychiatric hospitals. He wanted to create a therapy that flatters people and elevates them, and in this way, he wanted to reveal the inequalities in the face of injustice caused by people's respect for money.

David Epston was an anthropologist. Of course, his experience in this field contributed to therapy studies. Narrative therapy was influenced by the Post-Structural Approach. However, colonialism is a questioning approach to colonization [1].

Basic Theoretical Framework

The theoretical infrastructure of narrative therapy is fed by post-modernism, poststructuralism and hermeneutics. From the point of view of postmodernism, there is a common reality that people agree on as an idea. According to this view formed in this direction, they oppose pre-existing reality and argue that reality will change according to people's perceptions, time and place. In this context, they argue that there is as much reality as the number of people, and they object that there is no one absolute reality [2].

Post-structuralism argues that everything consists of a structure and that this structure does not have a framework, and states that language is an open and flexible system [3]. In this context, the post-structuralist approach focuses on the text. This point of view puts the reader in the center and states an opinion against the structuralist view, which claims that there is a structure behind the text and ignores the reader. The reader determines the meaning of the text. As long as there is more than one person reading this text, its text will have multiple meanings [4]. Hermeneutics is the ability to separate the meaning of the object we choose from its own explanation. In the process that can reveal whether the interpretation is made correctly or not, epistemological prejudices can be an obstacle. Successful interpretation is based on making an explanation by showing the contrasts and changes in the original text. Saying(s) is needed for comment. The expressions that a text or person wants to say, which everyone accepts as discourse, are interpreted and made comprehensible. This process bridges the gap between the interpreter and the interpreted [4].

Names Affected by Narrative Therapy

Micheal White, one of the pioneers, brought many concepts to narrative therapy. It was named after Geragory Bateson. Referring to Bateson, White and Epston argued that people tend to act in society through the ideas and values they develop about the world around them. These beliefs and values create various rules that include the understanding that each individual has the ability to live, to perceive, comprehend, understand, interpret (information processing processes) the events occurring in their environment, and to separate themselves from the outside world [5].

Edward Bruner is another person who made important

contributions to narrative therapy. According to Bruner, people learn about their lives through their experiences and derive meaning or meanings from their lives through stories or stories [6,7]. Bruner also argued that people create "dominant stories" to "make sense" of the events they experience. Although the dominant story may seem to envelop the lives of people or individuals like a vine, in fact, not all the lives of people, individuals, are composed of dominant stories. Dominant stories are stories that are formed by people living in a period of their lives and are shown as the source of certain activities that are still being carried out in the lives of individuals [6].

Apart from these, another influential figure in narrative therapy is Michel Foucault. Starting from Foucault's concept of power and knowledge, they produced the concept of "dominant discourses" by White and Epston. The influence of dominant discourses or societal beliefs and norms on the majority population is masterfully crafted, and this effect is very difficult to notice by the population in question. Individuals continue to live without realizing how they affect their lives as a result of this internalization by internalizing many social discourses as if they were their own ideas without questioning. These views of Foucault led White and Epston to develop the idea of "structural solution" and "separating dogmatically accepted norms and realities that have an overwhelming impact on society" [5].

Story Metaphorus

One of the basic assumptions of narrative therapy is that people shape the meaning of their lives through the stories that organize their lives. In line with this view, people share different life stories that have important effects on the construction of life by gaining different experiences in order to express themselves. Creating stories is the main issue for individuals who want to make sense of their lives by finding the meaning of these life experiences. However, people are not only content with their own life experiences, but also form their identities through stories and expressions (stories about gender formed by social norms and discourses, etc.) by external stimuli [5]. At this point, the story or stories appear as a concept representing the "special meaning/s" that people attribute based on their own experiences. Emphasis on personal stories, how expectations are formed by experiences, and how different understandings and interpretations lead to formulations of specific stories is a key point in therapy. In the narrative therapy literature, stories are also shown as a method used to maintain a sense of harmony, coherence, continuity and meaning at a certain level, and they are also conceptualized as an effective coping system used to cope with negative life changes and losses. From this point of view, stories, which are very important in social life practices and clinical practices, play a very strong role in understanding human existence [5].

Narrative therapy refers to the importance of personal life stories and the therapeutic value gained as a result of the telling

and retelling of stories. Rhodes (1996) defines the story as a form of meaning making in relation to the storyline. The therapeutic process seeks to gain insight into personal stories, and this process provides the therapist with the opportunity to become a co-author of the client's story [8].

In narrative therapy, the story or stories are basic metaphors, and the therapeutic process is defined as the process of creating a meaning. Stories reproduce themselves through discourses both within and outside therapy. In therapy, the main themes in the stories of individuals are tried to be clarified. Therapeutic discourse, outside or inside the therapy session it occurs. Stories are remembered, recalled, misremembered, rewritten, and assisted as part of the change process [9].

Considering that each individual's story is unique and unique in the therapy environment, it should not be judged or ignored in any way, on the contrary, an environment should be created that will ensure that all stories are equally legitimated. The therapy environment should be created in such a way that the clients are given the freedom to tell their own story in their own language only. This only occurs when the client is given enough time to listen carefully by the therapist and to tell the client his or her story. Apart from this, it is very important for narrative therapy to acknowledge and acknowledge the fact that clients come to therapy with multiple stories covering their lives, or with various stories that provide an opportunity to construct stories [10].

Narrative Therapy as A Psychotherapy Method

The narrative therapy process is based on the idea that a person cannot define himself/herself only through this story, in a way that summarizes his whole life and by including the person in this story; moves [11].

According to Epston and White [12], there are 4 elements for a story sequence to occur:

- a) events,
- b) sequence/sequence,
- c) time span and
- d) being organized according to an outline or theme must coexist.

The absence of any of these prevents story formation. Therefore, care should be taken to include these elements in the rewriting process, which is also created in the therapy process [11].

Therapists always act on the idea that there can be change under any circumstance, as opposed to the dominant stories, and there may be too many alternative stories. Narrative therapy is not only the process of describing the events by interpreting them, but also reconstructing the meaning by reconsidering

these events (White, 1995). However, this therapy method deals not only with the deconstruction (structural analysis) and construction of stories, but also with story interactions that are hierarchical, paradoxical, ironic and deeply embedded in each other and become representative of each other [13].

It is very important to be aware of the existence of multiple histories, selves, families, societies and nations in the narrative therapy approach. The therapist is aware that every client comes to therapy with storylines (acquired through discourses and experiences, transmitted from generation to generation and/or acquired through one's own experiences), which are sources of strength, boundaries, and adaptation. This historicity and multiple selves are not only experienced in person, but also deconstructed (deconstructed) and reconstructed in the therapy setting. Changes and differences that exist through multiple identities are the basis of the client's future lives [9].

According to narrative therapy, people go through different experiences throughout their lives. Thanks to these experiences, they form a dominant story in which they express themselves, which includes their own lives as time passes. But people are often unaware of the vague gaps, inconsistencies and contradictions in their lives that affect their lives. Narrative therapy also comes into play here and helps clients to create more realistic, acceptable, consistent and meaningful alternative stories about their lives by making the client realize how these gaps and inconsistencies in their lives have an impact on their lives, using different therapeutic methods. And the result is a person who rewrites the whole story instead of the person stuck in the problem-focused story [14].

Therapeutic Process

The therapeutic process provides clients with insight into personal stories, and the therapist takes part in this process as the co-author of the client's story [8]. The co-author therapist assumes the following responsibilities in the therapeutic process:

- a) Collaborating with the client to find a name that is valid for both parties (both himself and the client) for the problem brought by the client.
- b) Ensuring the externalization of the problem in order to move the named problem beyond internalization.
- c) Research together to find alternative stories and situations to replace this dominant story of how the problem took over your life.
- d) Discovering alternative meanings and stories, enabling the client to develop different perspectives.
- e) Researching unique results.
- f) With this new perspective, to reconsider the past, present and future, to determine their relations with each other and to reconstruct the story.

g) Receiving the support of acquaintances such as families and friends

h) Ensuring the continuation of these new experiences outside the therapy room [15].

Therapeutic Purpose

It is to enable clients to re-tell their experiences in a new, lively and socially detached language, thus creating new horizons, new meanings and new stories. In this way, reaching people who are at peace with themselves is the main purpose of narrative therapy [15].

Therapeutic Environment

In the narrative therapy process, it is essential to create a therapeutic environment so that clients can create healthy alternative stories instead of their dominant stories. In the therapy setting, creating healthy alternative stories promotes the idea that clients have control over their own lives. The therapist directs the client's attention towards "unique results" in order to change the client's story. This process usually allows the client to reconsider and reconsider the problem-focused story of helplessness, helplessness, and powerlessness at its core. The stories that clients bring to therapy are not only determined and structured through their experiences and interpersonal interactions, but also influenced by the prevailing cultural beliefs and practices in the society [5].

Therapist and Client Relationship

The concept of self-determination, which is associated with the famous philosopher Immanuel Kant and means that the individual determines his own law about his own life, decides what to do, how to behave, what his own future will be, is the concept of self-determination used in narrative therapy to change the client's own story and perspectives on himself. It's a very useful way of thinking. In narrative therapy, the goals are created in therapeutic cooperation and the client takes an active role in the construction of the new story. In this respect, narrative therapy differs from the view that the therapist should be an expert and directive, which is advocated by traditional therapies. Unlike traditional approaches, the narrative therapist acts as a guiding, supportive and guiding person as a co-author in the re-creation of the story. When compared to traditional approaches, there is a relationship system in which the relationship between the client and the therapist is more equal, there is no hierarchy, and the therapist is in a listening position in general terms [5].

Therapist

The therapist assumes the role of a complementary piece that disintegrates the story, which is the dominant story of the client and therefore makes him perceive his life as a negative life [5]. The most important effect of the therapist in narrative therapy is

to help the client discover different stories in his life. Narrative therapists do not describe themselves as professionals or experts in the therapy process, accepting that all individuals are experts in their own lives, and externalizing the problem from individuals as if the problem is something separate from them, not as a part of people [8]. Narrative therapy focuses on the client's relationships with themselves, with others, and with clients' problematic and alternative stories. However, he is also aware that all these relationships have gone through countless renewals in the course of time and can mean many things. The therapist is the person who creates space for the client to tell the history of the whole person and story that enters the client's network [9].

Client

Narrative therapy defines clients as individuals who are resourceful, competent, capable, and have the thoughts, values, determinations, and abilities that help them overcome the problems they encounter in life [8]. In addition, narrative therapy sees the client as a person who is generally reliable, well-intentioned, and constantly striving to improve and improve his/her life situations [5].

Organizing Sessions

There is no common idea about how long the therapeutic process takes in narrative therapy. Payne [16], one of the names who use the narrative therapy method, has determined the length of the sessions as generally 50 minutes. On the other hand, White et al., one of the pioneers of this approach, stated that the session length can be 2 hours or longer depending on the situation, whether it is a family, couple or individual interview. There is no definite information about how long the time difference between the sessions will be in this way. Some sessions may be one week apart, or longer or shorter. There is no clear statement, no definite opinion about it. According to White (1995), when narrative therapy is compared with traditional therapy methods, the techniques and applications of narrative therapy are shorter.

Therapy Techniques

Using Questions: As in other therapies, the questions asked during the therapy process are important in narrative therapy. The questions asked are important in terms of identifying the problems of the individual and finding resources that help them cope with these problems. The exception questions used in solution-focused therapy are also important for this theory. The purpose of the exception questions is to determine the situations in which these situations do not occur, based on the idea that the problems in the dominant story are not always present. For example, "Can you tell me about a time when you prevented the problem from occurring?" A question like this can be used to reveal exceptional circumstances. The purpose of such questions is to weaken the core beliefs of the clients and to instill hope in solving the problem [17].

Externalizing the Problem: The externalization technique of the problem, conceptualized as a phase of the therapy process by Semmler and Williams (2000), is one of the most unique methods of narrative therapy [18]. The problem-externalization technique allows clients to redefine themselves with alternative stories, apart from the dominant story, by giving individuals the chance to create a new story from a problem-oriented perspective. Thus, neither the people themselves nor their relationships are seen as a problem [19]. Externalizing the problem helps people separate themselves from the dominant stories. Besides, problems are not conceptualized as part of individuals but as things that try to invade them. In this way, it is tried to prevent individuals from blaming themselves for the problems they experience [20].

Awareness of Who Is Responsible: The important thing here is to realize whether the problem has an effect on the client or whether the client has an effect on the problem [12]. First of all, the problems are externalized and the effect of the problems on the client is investigated in order to increase the awareness of the client against these externalized problems. In addition, it is also investigated how people cope with these problems and how they affect them [17].

Using Letters: The fact that written things are more reliable, easier to accept, less prone to misunderstanding, and can be read repeatedly – compared to verbal interactions – encourages narrative therapists to use written materials [21]. Letters are used in the therapeutic process so that the therapeutic process can be easily remembered after therapy and to ensure the continuity of the effect of this process in real life, as well as for the therapist to use these notes as clinical notes in the future [17]. It is thought that letters will reduce the distance between the therapist and clients and thus facilitate therapeutic cooperation [22]. When writing letters, therapists focus on establishing a connection with previous sessions, the interaction between the problems and the client, and specific client-specific outcomes and situations [23].

Celebrations and Certification: In the narrative therapy process, different documents and activities are used in addition to letters in order to maintain the developments in the therapy room in real life in order to maintain the progress covered [16]

. These certificates, prepared together with the client, include the client's problems, the strategies used to solve these problems, and the gains gained as a result of therapy. In addition; There is also information such as the name of the institution where the therapy is held, the name and signature of the therapist. These certificates are given to clients at celebrations attended by clients' friends and families [16,17].

Rewriting the Story: The main purpose of the therapy process is to deconstruct the dominant stories that constrain clients and

to develop stories that better reflect clients' experiences [17, 20]. The dominant story, which is seen as a problem, and the client are separated from each other by the technique of externalization of the problem, and the ground is prepared for the creation of a new story. According to this understanding, unlike the internalization of the problem in traditional therapies, the problem is questioned by externalizing it. Thus, people can see their alternative stories alongside their raid stories [24]. Such a perspective paves the way for new story writing. The dominant story is not always in our lives every minute. Exceptional situations in which these times are not experienced are called unique outcomes and support the client's process of writing a new alternative story [16]. When looking at the whole therapy process, narrative therapy is actually a work of rewriting life [25-29].

Conclusion

From the moment they are born into the world, people try to define themselves by attributing events and experiences in their life processes to themselves. In return for these efforts of self-identification, they create a dominant story for themselves. People introduce themselves to other people with the dominant stories they create for themselves and evaluate themselves through these stories. While these dominant stories are being formed, people define themselves as worthless, bad, unsuccessful, based on their previous experiences. These negative definitions, which are generally caused by the way they perceive the events, are handled in the therapeutic process and the problem is externalized with the questions asked by the therapist, and it is ensured that these definitions, which the person internalizes and labels himself, are handled independently as an object or a person. It is tried to create different alternative stories to the stories. As a result, the person's perspective is changed and a mutually supportive letter is written by cooperating with the therapist and the client for this change. Witnesses are invited to the therapeutic environment so that this change can be sustained and the person's change can be noticed. In the last session, celebrations and certificates are given to the person, and it is aimed to continue this change in the person's life outside the therapeutic process. In summary, narrative therapy is the rewriting of one's life story.

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DOI: [10.19080/PBSIJ.2023.20.556041](https://doi.org/10.19080/PBSIJ.2023.20.556041)

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