

# **The Therapist and the Postmodern Therapy System: A Way of Being *with Others*<sup>1</sup>**

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*“Your attitude towards your life will be different  
according to which understanding you have.”*

Suzuki

*“. . . not to solve what had been seen as a problem, but to develop from our new reactions new socially  
intelligible ways forward, in which the old problems become irrelevant.”*

Shotter

*“Problems are not solved but dissolved in language.”*

Anderson & Goolishian

Our world is shrinking as globalization and technology catalyze social, cultural, political, and economic transformations. Alongside these transformations is an ever-increasing spotlight on (1) democracy, social justice, and human rights, (2) the importance of the people’s voice, singular or plural, and (3) the necessity of collaboration. People increasingly want to have input into what affects their lives. People are losing faith in rigid institutions and their practices--where they are treated as numbers and where their humanness is ignored or worse yet violently violated. People are demanding systems and services that are more flexible and respectful of their needs. These contemporary local, societal and global shifts, the unavoidable complexities inherent in them, and the effects they have on our individual and communal lives and on our world challenge us as practitioners to reassess how we respond. This conference and today’s theme “Self and System” is a timely response to this challenge.

My response is situated in the broader dialogical movement in the social sciences and represents over 25 years of evolving thought and practice and a special interest in understanding the nature of successful therapy from the client’s perspective. Always on my mind is this question: “How can our theories and practices have relevance for

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<sup>1</sup> I dedicate this to the memory of Tom Andersen.

people's everyday lives in our fast changing world, what is this relevance, and who determines it?"

I situate my response in postmodern assumptions—and find that a growing community of therapists is increasingly becoming more curious about and interested in the usefulness of these assumptions for therapy. Other therapists in this community whose work you are familiar with and is somewhat similar are: Tom Andersen, Lynn Hoffman, Jaakko Seikkula, and Peggy Penn though they might not refer to themselves as postmodern. (As well, it shares common ground with narrative and solution-focused therapies).

Why do I favor the term postmodern and what do I mean by it? I use it because it as an umbrella term to cover a set of assumptions that I find valuable. Postmodern is a complex set of abstract assumptions that form a framework or perspective for the way we think about, create, use, and privilege knowledge. The central challenge of postmodernism is a call to reexamine and seek alternatives to the fundamentals of knowledge.

### **Assumptions**

- The importance of maintaining a skeptical and questioning attitude toward knowledge in the form of grand or meta-narratives and universal truths which we have inherited.
- The impossibility that grand narratives or universal truths can be generalized or have applicability across peoples, cultures, or situations.
- The importance of local knowledge – the knowledge, expertise, truths, etc. that is created within a community of persons who have first-hand, personal understandings of themselves and their situation.
- Knowledge is an interactive process in which all parties contribute and what is created is unique and has relevancy and usefulness for that community of persons.
- Knowledge cannot be literally discovered or passed on to another person.
- Language, in its broadest sense—any means we use to try to communicate, articulate with ourselves and with others--is the vehicle through which we create knowledge.
- Language, therefore, is viewed as active and creative rather than as static or representational.
- Knowledge and language are relational and generative.

- Transformation is inherent in the inventive and creative aspects of knowledge and language--dialogue. The transformation is unpredictable as dialogue itself is unpredictable.

These assumptions do not suggest that postmodernism is an oppositional perspective, for instance, that our inherited knowledge (e.g., psychological theories) should be, or can be for that matter, discarded. The emphasis is on not taking these for granted and not assuming they hold universal truth. Nor do they suggest that postmodernism is a meta-narrative or meta-perspective. Inherent in a postmodern view is a self-critique of postmodernism itself. Neither does postmodern define a school of therapy. Instead, it offers a different language, a set of assumptions useful for those of us whose work is often referred to as dialogical or conversational.(Andersen, Hoffman, Seikkula, Penn)

How do these assumptions influence the way that I think about the therapy process, and the client's role and my role in it?

### **Collaborative Relationship and Dialogical Conversation**

First, the assumptions that I mentioned about knowledge and language inform and form the kinds of relationships and conversations that I prefer to have with others. I refer to these as collaborative relationships and dialogical conversations.

#### **Collaborative Relationship**

- A particular way in which we orient ourselves to be, act, and respond “with” another person that invites the other into shared engagement, mutual inquiry, and joint action.
- The responses of people in conversation with each other create the context for their relationship.
- A relationship in which people connect and create with each other.
- A social activity—a partnership community and process—in which all members have a sense of participation, belonging and ownership.
- The “self” cannot be separated from the relationship systems which we are a part of, have been a part of, and will be a part of.

#### **Dialogical Conversation**

- A particular kind of talk in which participants engage “with” each other (out loud) and “with” themselves (silently)—in words, signs, symbols, gestures, etc.—in a

mutual or shared inquiry about the issues at hand: jointly responding (commenting, examining, questioning, wondering, reflecting, nodding, gazing, etc.).

- A process of trying to understand the other person.
- Understanding is an (inter) active process not a passive one.
- Understanding requires responding to connect and learn rather than knowing another person and their words from a theory.
- Learning about the uniqueness of the other and noticing the not-yet-noticed.
- Developing local understandings that come from within the conversation.
- Cannot know another person or their circumstances beforehand.
- Cannot know the outcome beforehand.
- Knowing ahead of time (i.e. categories, theoretical scripts) can inhibit our ability to learn about the uniqueness and novel—to see the familiar in an unfamiliar way.
- An always becoming, never-ending process.

### **Philosophical Stance**

Second, I view my assumptions about collaborative relationships and dialogical conversations as expressions of a philosophical stance: *a way of being*.

The philosophical stance is the heart and spirit of my collaborative approach. It is a posture, an attitude, and a tone that communicates to the other the special importance that they hold for me. Notably, it reflects a way of being *with* people, including ways of thinking with, talking with, acting with, and responding with them. The significant word here is *with*: a “withness” process that is inherently more participatory and mutual and less hierarchical and dualistic.

The stance communicates to the other that they are a unique human being, not a category of people, and that they are recognized, appreciated, and have something to say that is worthy of hearing. It invites the other to participate with them. In holding this belief, connecting, collaborating, and constructing with others become authentic and natural actions, not techniques. I am reminded that Imelda McCarthy asks us to always “treat the lives of those we work with as *precious*.”

In living the philosophical stance, connecting, collaborating, and constructing with others become authentic and natural processes, not techniques or methods. (say more here) And,

importantly, for practitioners, the philosophical stance becomes an expression of a value, a belief, or a worldview that does not separate professional and personal.

How do these set of assumptions about knowledge and language orient me and translate into my performance within and outside the therapy room.

### Conversational Partners

- A particular way in which we orient ourselves to be, act, and respond “with” another person that invites the other into shared engagement, mutual inquiry, and joint action—into dialogue.
- As Mikhail Bakhtin said dialogue is the condition for the emergence of new meaning: what is the condition for dialogue?
- The therapist invites the client into this partnership by taking a learning position through
  - Making room for and giving the client the choice to tell their story in their manner and at their pace.
  - Being genuinely interested and curious about the client’s story.
  - Listening and responding attentively and carefully
  - Responding to understand from their .
  - Trying to respond in a way that relates to what the client is saying (not what you think they should be saying).
  - Responding is an interactive two-way process.
  - Noticing how the other person responds to your response before continuing.
  - Paying attention to their words and their non-words.
  - Keeping in mind that we are always interpreting/translating another’s words and non-words.
  - Checking-out to see if you have heard what the other wants you to hear
  - Pausing and allowing silences—space for listening and reflecting.
  - Allowing each person to choose what peaks his/her interest and invites them into inner and outer conversation (not what you think they should choose).

### Story ball metaphor

- This therapist learning one-way process begins to slowly shift to a two-way process of mutual inquiry in which client and therapist begin to engage with each other in looking into the client’s story, their world, and their way of being/living in their world.

- Through this joint action, the client-therapist relationship and conversation determine the process or method, the process or method does not define the relationship and the conversation.
- Creating from within the present relationship and conversation in the moment, as each moment unfolds, not from outside it ahead of time.
- Experience the richness of different voices, and each as poly-vocal, holding multiple, and sometimes simultaneous contradictory thoughts.
- Not striving for consensus.

### **Relational Expertise**

- Both client and therapist bring an expertise to the encounter.
  - Client as expert on themselves and their world.
  - Therapist as expert on a process and space for collaborative relationships and dialogical conversations.
  - The therapist does not control the direction of the conversation.
  - Client and therapist together shape the story-telling, the re-telling, the new telling.
- The focus on the expertise of the client does not deny the expertise of the therapist
  - It is simply to call our attention to and not lose sight that the client has a wealth of expertise on his or her life and
  - To caution us to not value, privilege and worship the expertise of the therapist as a better knower of the client's life and how it should be lived than the client does.
  - We have far too long operated in a therapist-centered therapy world.
- The therapist of course has an expertise – it is however, from my perspective a different kind of expertise that many therapists value.
- A very difficult concept for some therapists to grasp because it is too different

### **Not-Knowing**

- The way that we think about the construction of knowledge.
- The intent with which we introduce
- The manner in which the therapist offers and uses knowledge.

### **Being Public**

- Inner talk is not invisible talk in the sense that it needs to be seen

### **Living with Uncertainty**

- Always speaking an ambiguous and different language that as Bahktin suggests always comes peopled with other's intentions and meanings.
- Spontaneous talk does not include pre-structured questions.
- Spontaneous, endless shifts and possibilities (thoughts, actions, meanings) emerge from the process.
- Striving for a goal or outcome is therefore not the aim.
- Transformation occurs in the space in between.

### **Mutually Transforming**

- In my early writings stressed the mutuality of the therapy process for both the "self" of the client and the therapist.
- The therapist is as much at-risk for change as is any member of the process – not passive – or one-sided – not a unilateral process.
- Therapy is an active process for both the client and the therapist. It is not passive – or one-sided – not a unilateral process.
- The therapist is as much at-risk for change as is any member of the process – not passive – or one-sided – not a unilateral process.
- A postmodern collaborative perspective is often missed-understood to inform a passive, receptive therapist position. This is not the case.
- The therapist is actively involved in a complex interactive process (of continuously responding)
- There is no such thing as a "no response" or "lack of response" – what may appear as such is simply one kind of response which like with any response, the receiver interprets, translate

### **Everyday Ordinary Life**

- Life is a social event.
- Therapy is a social event.

If a therapist assumes such a philosophical stance, they will naturally and spontaneously act and talk in ways that create a space for and invite conversations and relationships in which clients and therapists “connect, collaborate, and construct” with each other (Anderson, 1992, 1997). Because the philosophical stance becomes a natural and spontaneous way of being as a therapist, theory is not put into practice and there are no therapist techniques and skills, as we know them. Instead, the characteristics give emphasis to a set of values and their implications for action. In other words, the philosophical stance is the “tone” of collaborative relationships as suggested above: a particular way in which we orient ourselves to be, respond, and act with another person that invites the other into a shared engagement and joint action—the process of generative dialogue and transformation (Anderson, 1997, 2003).

“The concept of subjectivity refers to the way in which the person comes to be known and understood by others, that in turn affects the way in which we come to think about and understand our 'selves' in that relational context. If you like, subjectivity is the social category of personhood, and it is a multiple social process with each person coming to have many different and often fragmented subjectivities. The relation between different subjectivities, and the way in which powerful subjectivities may come to be a totalising description of the person, is a complex process. The concept of intersubjectivity refers to this complex relational field in which the subject and specific subjectivities come to be created and shaped, and as I noted in the last chapter, it is all in a territory that is irredeemably social.”

Hermans

## REFERENCES

Anderson, H. & Gehart, D. (2007) *Collaborative Therapy: Relationships and Conversations that Make a Difference*. New York: Routledge.

Anderson, H. (1997) *Conversation, Language and Possibilities: A Postmodern Approach to Therapy*. New York: Basic Books.

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