

Psychological Perspectives on Storytelling and Narrative

A Hermeneutic Literature Review Lisa Beachman

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Abstract

Anthropologists identify storytelling as universal feature of human cultures, and theorists in a range of social sciences characterize it as a defining attribute of our species. But despite the fact that psychotherapy is a discipline predicated on sharing stories, relatively little critical attention has been directed at this core human behaviour from within our field.

By means of a hermeneutic literature review, this dissertation seeks to identify the conceptions of storytelling and narrative available within psychologically informed research literature, with the intention of forming a basis of understanding for further exploration of the function and uses of narrativity in psychodynamic psychotherapy.

My findings suggest that the ability to use narrative effectively is a strong indicator of psychological wellbeing, with implications for both intrapsychic integrity and interpersonal effectiveness. Research moreover suggests that storytelling may be an instinctive human drive with profound implications for our understanding of the world. Thus narrative may also offer insights into how an individual identity is formed, and how it may be transformed within the context of psychotherapy.

Current work in the field suggests the importance of further reflection on the epistemological and ethical issues raised by contemporary narrativist conceptions of psychotherapeutic engagement, with implications for both the development of psychodynamic theory and professional practice.

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To my children, who have had the grace to share my attention over a long period with an endeavour that is perplexing and frustrating to them.

To my husband, as always.

Attestation of Authorship

I hereby declare that this submission is my own work and that, to the best of my knowledge and belief, it contains no material previously published or written by another person (except where explicitly defined in the acknowledgments), nor material which, to a substantial extent, has been submitted for the award of any other degree or diploma of a university or other institution of higher learning.

A handwritten signature in black ink, consisting of several overlapping loops and a long horizontal stroke extending to the right.

Lisa Beachman 19.09.17

Contents

Abstract	i
Acknowledgements	ii
Attestation of Authorship	iii
Chapter 1 Introduction.....	1
Research question	1
My personal interest	1
Academic origins of my research question	2
My standpoint	3
Language and Lens	4
Cultural context.....	4
Structural Overview	5
Chapter 2 Methodology and Method	6
Hermeneutic Literature Review	6
Hermeneutics	6
The hermeneutic circle	7
Congruence with research subject.....	7
Rigour	8
Method.....	9
Chapter Summary	10
Chapter 3 Key Concepts	11
Narrative vs. Story.....	11
In literary studies	11
In social sciences	12
In psychological studies	12
The Narrativist Turn	13
Paul Ricoeur	13
Sigmund Freud	14
Jerome Bruner.....	16
Social Constructionism.....	17
Chapter Summary	17
Chapter 4 Psychoanalytic treatments of Narrative	19
Donald Spence.....	19
Roy Schafer.....	21
Robert Stolorow and the Intersubjectivists	23
Daniel Stern.....	24
Contemporary Approaches	27
Chapter Summary	29

Chapter 5 Neurobiological Approaches	30
Dysnarrativa	30
Narrative Integration	30
Narrative and the Right Hemisphere	31
Narrative and Attachment	32
Narrative and the Adult Attachment Interview	33
Narrative and self	34
Narrative and Real Life Experiences.....	35
Chapter Summary	36
Chapter 6 Narrative Psychologies and Narrative Therapy.....	38
Narrative Psychology.....	38
Narrative Identity	39
Narrative Therapy	41
Narratology	43
First story of self.....	44
Active listening	44
Reflective writing	44
Chapter Summary	45
Chapter 7 Discussion	46
Narrative gestalt.....	46
Narrative as a relational psychodynamic element	47
Truth, creativity and the role of the therapist	47
Narrative as coherence	48
Talk that sings.....	49
Enhancing practice	50
Self as a hermeneutic process.....	51
Narrative as a prism	52
Limitations of this research.....	52
Potential research development.....	52
Fallacy of ending.....	53
References.....	56

Chapter 1 Introduction

Research question

Psychotherapy is a discipline predicated on the sharing of stories. Yet it has seemed to me that surprisingly little research attention is given to what this practice might mean for psychotherapists, our patients and for our work together. Contemporary literary theory, on the other hand, is increasingly engaging with the psychological and sociological implications of participating in storytelling. Armstrong's (2013) exploration of the neuroscience of literary engagement, for example, demonstrates how this may increase our capacity to manage tensions between consistency and flexibility in a way that is analogous to the mutative potential of psychotherapy.

My aim in this dissertation is to explore the place of narrative in psychoanalytic theory, and how I might reconcile this with relevant insights gleaned from other discourses within the psychological field to enrich my understanding and practice as a contemporary, relational, psychodynamically-informed clinician. I have chosen to focus on research areas that I believe could offer valuable insights. Narrative psychologies and Narrative therapy have made significant contributions to conceptualizing this aspect of human behaviour, but these approaches may not necessarily cohere well with psychodynamically orientated approaches. Meanwhile, attachment theory related research, contemporary neuroscience in particular, has foregrounded the developmental, diagnostic and therapeutic significance of storytelling, indicating that further attention to this aspect of our relational lives might enrich contemporary psychodynamic thinking and clinical practice.

Thus I have formulated the following research question:

How have story and narrative been understood in psychotherapeutic and related literature in psychology?

My personal interest

My interest in the place of storytelling and narratives of self in psychotherapy has deep personal roots. Sensations of intense imaginative engagement with stories relayed to me by others are among my earliest memories. Throughout my childhood I identified strongly with characters I encountered in literature, and I became accustomed to

seeking self-understanding and connection in worlds I sourced from various narrative origins. I also listened to people around me a great deal (I was an inveterate eavesdropper), pondered how and why people talked about themselves and others as they did, and what this meant.

While these habits never faded entirely, it was only when I began seeing clients as part of my psychotherapy training that I began to reflect on this aspect of my psyche, its place in my own history and its role in my emerging identity as a psychotherapeutic practitioner. I observed that my previous academic studies had likewise been motivated by a deep-seated desire to understand how we, as people, might come to understand ourselves. When the abstract reductionism of philosophical inquiry failed to satisfy, literature study offered a more conducive forum for my preoccupations. It seems telling in retrospect that fifteen years ago I wrote a Master's thesis entitled "Narrating Self", which explored how nineteenth-century European women had contrived a narrative identity for themselves using the vehicle of their own travel writing about women in the Islamic East. This work made explicit my longstanding understanding that people, in written narratives and in all the everyday spoken narratives that are the currency of social life, use stories to explain themselves to themselves and those around them.

Parenting deepens my appreciation of the power of sharing stories in intimate relationships. I have relished storytelling in various forms with my own children, and delighted in their developing capacity and confidence to communicate their own narratives as they mature. Likewise, I have found that listening to my clients' stories moves me in a very particular way, and that this is intimately connected to the pleasure I take in psychotherapeutic work. In this context, seeking ways to better understand how my clients' autobiographical narratives (or indeed their struggles to represent themselves in this form) might be appreciated, interpreted and potentially utilized in the context of our work, has come to seem like a natural extension of this lifelong interest.

Academic origins of my research question

In the course of my psychotherapy training I developed an interest in how neuroscience might support my understanding of the nature of the psyche and its

potential for change. I found Interpersonal Neurobiology, a contemporary interdisciplinary field associated with neuroscientist/psychotherapist/psychiatrists Daniel Siegel (2012, 2007) and Allan Schore (2017) particularly resonant. In this context, the mind is defined as a relational process that regulates energy flow between and within individual psyches. Siegel (2012a) highlights the role of storytelling in this process, asserting “telling stories is the universal way we both communicate with one another and the way we make sense of our internal and external worlds” (p. 31). Similarly, Louis Cozolino (2016) characterizes the (re)construction of autobiographical narrative as a key way psychotherapy can enhance neuroplasticity, and thence therapeutic growth.

Inspired by these writers, I became increasingly cognisant of how powerful my own connection to stories and storytelling had always been, and moreover surmised that this was a significant driver in my interest in psychotherapy practice. I was coming to identify strongly with relational approaches to psychodynamic work and was drawn to further explore thinking that linked our identities as relational beings with our practice of trading stories. My initial research proposal therefore sought to explore these interconnections within the context of psychotherapy. While logistical restrictions have subsequently required that I narrow my focus to the role of narrative elements in psychic experience and change, my underlying interest in relationship as a factor in psychological health remains implicit in my study.

My standpoint

According to Speedy (2008), psychotherapy research tends to predominantly reference other texts from within the dominant psychological discourses. The evident value of locating concepts and arguments within the canon notwithstanding, Speedy suggests that the opportunity for creatively exploring intertextual links with broader popular and cultural markers is lost, and the resonance of imaginative literature is neglected. I find myself in broad sympathy with this view and my initial aspiration for this research project was to in some way bridge the discourses of psychotherapy and literary study as I understood them. I saw the landmark work of Bettelheim (1976) as an inspiring exemplar in this regard. However, as I embarked upon an initial survey of the relevant areas of interest, it became painfully clear to me that such a sweeping undertaking was well beyond the parameters of this research format. While I have become even firmer

in my belief that such interdisciplinary analysis would be richly rewarding at both the theoretical and clinical levels, I have found it necessary to confine my own field of inquiry here to work within psychological research.

Language and Lens

One of the first conundrums I encountered as I approached my research was a widespread ambiguity about what constitutes a story. Characteristically, when I described my project to people they seemed to see story and narrative as being interchangeable terms. My initial keyword searches suggested that this was also largely true in academic literature in psychology. This did not sit well with me; story to me suggested a more complex constellation of variables, of which narrative is just one component.

But my reading was leading to other potentially helpful ways of thinking about the relationship between narrative and story, and I became interested in exploring more capacious conceptualizations of narrative. I outline some of these differences in Chapter 3, but a comprehensive exploration of any approach has proven beyond the scope of my research project. My efforts to keep focus whilst employing distinct lenses have been an ongoing challenge. For reasons of scale, as well as most ready application to my professional interests, I have chosen to focus my research on those aspects and definitions of narrative that have most resonance in the context of psychotherapy.

Cultural context

I concur with Speedy's (2008) view that narrativist approaches are implicitly anthropomorphic in stance, and that a more universal, ecologically minded way of approaching knowledge may be the way forward in our understanding.

I am moreover conscious that although anthropologists identify storytelling as a universal feature of human cultures, the concepts of narrative, subjectivity and relationship I am using are western in origin and currency. The same could be said of the psychotherapy paradigm. I see a great deal of potential value in thoughtful exploration of the concepts underpinning culturally diverse forms of storytelling, both in terms of anthropological insight and for the ways in which this might broaden and/or deepen contemporary psychological views of the nature of subjective human

experience. Dwivedi (1997) and Gersie (1997) have drawn critical attention to the psychotherapeutic use of storytelling in non-western cultures. Likewise, the Maori concept of 'whakapapa' and the Aboriginal Australian use of 'songlines' strike me as two indigenous paradigms whereby a society orientates itself across time and/or space by means of a richly contextual narrative.

But I must also acknowledge that to express such a view is to impose my own western lens on a cultural practice that is foreign to me. Whilst the practice of storytelling may indeed be ubiquitous, it is also an inherently relational and socially co-constructed activity that requires narrator and listener to share complex, socially defined parameters of discourse and interaction. It is therefore culturally specific in execution and form. For the purposes of this research, I have accordingly elected to confine my inquiry to the historical development of narrative aspects of self and relationship within the western philosophical tradition.

Structural Overview

In this chapter I have introduced my research topic and outlined the academic and personal context of my interest. In the next chapter I discuss my research methodology and the method used in my search. In the following chapter I outline some of the key terms and discourses referenced in my study.

Chapters 4-6 are three separate but related discussions of narrative themes in the context of psychoanalytic theory, neuroscience-based research and narrative psychologies respectively.

Chapter 7 is a personal discussion of the main discoveries of my research with particular reference to how I might use it to enhance my psychotherapeutic practice. I also consider the limits of my study and an explore avenues for further potential research.

Chapter 2 Methodology and Method

Hermeneutic Literature Review

I have elected to conduct a literature review following hermeneutic principles. Initially this choice was based on my sense that the philosophical basis of hermeneutics was a good fit for the model of psychotherapy with which I identify.

Hermeneutics

Interpretative models, including hermeneutic research, seek to understand human experience by exploring what meanings people attribute to life events. The relationship between researcher and 'text' is intersubjective and reflexive. Thus the researcher in interpretive research may be likened to a therapist who does not so much reflect back what they see and hear as offer an interpretation of the "significance of their self-understanding in ways the participants may not have been able to see" (Grant & Giddings, 2002, p. 16). Likewise, Boell and Cecez-Kecmanovic (2010) characterize a hermeneutic process as one of "constant re-interpretation leading (ideally) to deeper and more comprehensive understanding" (p. 130).

Modern hermeneutics is based on the philosophical work of Heidegger, which rejects traditional Western beliefs that the mind and world are discrete entities, with truth equating to a formal coherence between them (Harman, 2011). For Heidegger, one's understanding of oneself and one's understanding of the world are inextricably intertwined, and truth is a function of 'unconcealment', so that the "essence of truth is letting things be, so that they can appear to us as what they really are" (Harman, 2011, p. 92). For Heidegger's student Gadamer, understanding is also seen as rooted in language. I shall return to this below.

In Gadamer's (2013) philosophy, understanding moreover emerges from the meeting of Self and Other to create a broader vision (Moules, 2002). Thus, Moules (2002) suggests that the role of the researcher takes on heightened significance in hermeneutic research after Gadamer, and asserts that "our strengths, as hermeneutic researchers, lie in a belief in the interpretability of the world and in a willingness to allow ourselves to be read back to us" (p. 12). As for therapist and patient, "hermeneutics demands that we proceed delicately and yet wholeheartedly, and as a

result of what we study, we carry ourselves differently, and we live differently” (Moules, 2002, p. 12). Likewise, I believe that rather than seeking to separate my own subjectivity from my clinical work or my research, I should acknowledge “how it translates into the way I listen to my participants, what I hear, what stands out to me, and how I interpret it” (Moules, 2002, p. 12).

The hermeneutic circle

Boell and Cecez-Kecmanovic (2010) use the metaphor of the circle to characterize the hermeneutic research process of recursive flow between reading and searching, between individual texts and understanding gleaned from other texts, the parts and the whole, and vice versa. Thus a literature review need not start with a search for all relevant texts, but proceed and evolve from careful reading of relevant material. This will lead to further reading, so that the researcher’s understanding will both broaden (in terms of the texts surveyed) and deepen (with regard to singular texts). Insight into the nature of the research question itself is moreover enhanced.

There is also a strong reflective dimension to this mode of research. Moules (2002) suggests that it involves “recognizing the particular, isolating understandings, dialoguing with others about interpretations, making explicit the implicit, and, eventually finding language to describe language.” (p. 15). Such a stance is a good match for my own style of working and I have found this model an effective guide to my research process.

Congruence with research subject

As my own research has developed, I have come to see that the hermeneutic circle is also congruent with my emerging understanding of the nature of human understanding of self and of the communication process. This affinity is reflected in the above quotation, as it is in Smith’s (1991) claim that “we find ourselves, hermeneutically speaking, always in the middle of stories, and good hermeneutical research shows an ability to read those stories from the inside out and the outside in” (p. 201).

Gadamer (2013) highlights the relationship between language and understanding. Moules (2002) represents this relationship as “a dialogical engagement between question and answer” (p. 10), determining language whilst being defined by it. As

Moules (2002) goes on to suggest, a hermeneutic stance “requires a tragic, loving relationship with language” (p. 15). For all that language is rich in possibility, the application of language must also restrict meaning. Thus she encourages the researcher to apply language in a way that supports the potential for meaning to reveal itself, “perhaps even allowing the thing to be read in a more generous way than it reads itself.” (Moules, 2002, p. 15). This aspiration resonates for me both as a new clinical practitioner and as a novice researcher. I am moreover struck by the aptly hermeneutic synergy that emerges from these two aspects to my emerging practice.

Rigour

Rigour is necessary to ensure a high calibre of research work in any discipline, but the criteria by which it is best assessed vary according to the type of study in question. De Witt and Ploeg (2006) identify five key factors determining the rigour of an interpretative phenomenologically based research project such as this.

The first is balanced integration. As suggested above, I have made efforts to consider and demonstrate that the metaphor of the hermeneutic circle has been a guiding principle of my research at the levels of both content and approach. Likewise, I have endeavoured to represent the positions of others as accurately as possible within the constraints imposed by the need to encapsulate complex and evolving thinking succinctly. Secondly, De Witt and Ploeg (2006) highlight the need for openness and accountability concerning the decisions made by the researcher. I have aimed to explicate the internal logic behind my (necessarily) selective use of material by signalling where choices have been made for reasons of relevance and/or economy.

The third criterion, of concreteness, has been challenging at points in this work. Much of the thinking presented has been of a highly philosophical nature and the limited scale of the project has left minimal space for interspersing it with more experience-near examples, even though I concede this would have been beneficial. It is my hope that my efforts to connect these abstract discussions with clinical applications in my discussion may go some way to addressing this aim. Likewise, the resonance of this research is difficult for me to assess. Having been guided in my own process by what most resonated with me, it is ultimately in the purview of my readers to judge its impact upon them.

Having been frustrated at having to reduce my research scope to match the scale of the project, it is my hope that its actualization, or value for future use, will be an asset. This is the last criterion. My sense is that I have stumbled onto a far bigger topic than I first appreciated, and thus I aspire to produce a piece of work that may serve as a foundation for future work in this research area, and I have endeavoured to indicate potential avenues for this.

Method

As I began to gather my research material, my first step was to collect together and review material I had already read which had informed my interest in the topic. I explored the reference sections of those texts to gather further related material. This produced a sizable quantity of reading. But I was concerned that in working outward from familiar texts I was inadvertently creating an 'echo chamber' in that the findings in one work would tend to reinforce the findings of others those authors cited or allied themselves with.

To counter this effect, I also conducted an extensive search of psychological and psychotherapeutic journals using the PsychINFO, PEP, and OVID databases available through AUT University. I generated a multi-field search using "" "story*" OR "stories" OR "narrative" AND "psycho*"". I reviewed abstracts, excluded literature that did not address my research question and collected articles that appeared to do so. Although this produced a large amount of material it became clear over time that some aspects of my research were better served by reading material in book form. This was my experience with older psychoanalytic writing in particular. While ultimately productive, this was initially frustrating as the material was sometimes difficult to access, and frequently challenging and time consuming to work my way through. Nevertheless, I endeavored to approach all material with an open mind and allow myself to be led in new directions by the material I was exploring. As I went on, I was fortunate to be referred to related material by my supervisor and others. This has been hugely beneficial. In later searches, I used Google Scholar to locate material relating to a subject area or question that emerged from my ongoing research, adjusting my search terms to reflect the areas I was targeting. All material is from academic, peer-reviewed sources.

Throughout this review, I kept detailed notes on the key arguments, themes uncovered, and my own emotional and critical responses. Initially I attempted to compile my research into categories according to theme, but this proved unsystematic and confusing. I found that when I sorted them by discipline instead, the various patterns emerged more clearly.

At times I have found it difficult to remain engaged with this project, and I have found the scale of my ambitions has far exceeded its parameters, and indeed my personal resources. To find my way through, and to retain a self-reflective attitude to what felt like an overwhelming project, I have used supervision and discussion with peers to help 'see the wood for the trees'.

A hermeneutic inquiry rests on the assumption that one must interpret in order to understand (Schwandt, 1999) and I accept that my identity, both personal and socio-cultural, intrinsically informs my understanding and my engagement with the concepts I explore. This is a literature review of how other writers have written about personal identity and narrative, but the interpretation throughout is my own.

Chapter Summary

In this chapter I have outlined the epistemological basis of the hermeneutic literature review and outlined my methods of collecting and searching the literature. I have specified my inclusions and exclusions, and described how my research focus evolved in the course of my reading. In the following chapters I will discuss my findings.

Chapter 3 Key Concepts

[N]arrative is present in every age, in every place, in every society; it begins with the very history of mankind and there nowhere is nor has been a people without narrative...narrative is international, transhistorical, transcultural: it is simply there, like life itself. (Barthes, 1977, p. 79)

In this chapter I outline the broad academic context of this literature review. I discuss some variation in how the terms ‘story’ and ‘narrative’ are used across different disciplines, and within the psychological field in particular. I then outline the main philosophical discourses I see as undergirding the discussions of narrative, meaning and self in subsequent chapters. I outline Ricoeur’s (1991, 1965) concept of narrative identity, and consider its implications for reading the work of Freud. (1939, 1933) I discuss some of the philosophical initiatives of cognitive and developmental psychologist Jerome Bruner (2002, 1986) whose influential approach to narrative and identity is discussed in a later chapter, and introduce the social constructionist approach to social sciences.

Narrative vs. Story

The ubiquity of narrative makes it difficult to contain within a succinct definition. Gottschall (2012) describes stories as being “for a human as water is for a fish — all encompassing and not quite palpable” (p. xiv). One of my first challenges in undertaking this research was thus to settle on a broadly consensual term to frame my research and writing. My initial preference was for the terms ‘story’ and ‘storytelling’. This was partly because they seemed to reflect the commonplace ordinariness of the activity I had in mind. They felt accessible in a way that ‘narrative’ did not.

In literary studies

But I quickly learned that although the terms seemed to be used interchangeably in much of the literature, and by the people with whom I originally discussed my project, narrative appeared to be the more widely-used alternative. This did not sit well with me. Upon reflection, I have come to see my resistance as an artefact of my training in literature study. Therein, narrative is generally treated as an aspect of a larger creative entity, intertwined but nevertheless analytically distinct from other aspects, such as character, theme and style. Oral and visual art forms are also understood to comprise

further elements such as tone and delivery, facial and body language, etc. Likewise, when I thought of listening to my clients' stories I noticed that I was at least as interested in their use of language, the metaphors that shaped their communication, their tone and expression, all the nuances and connotations of their speech, as I was in the events they narrated. I wanted my research to include exploration those attributes of storytelling.

In social sciences

As other potentially helpful ways of thinking about the relationship between narrative and story began to emerge from my reading, I was led to understand that the relationship between the two terms was more complex than I had initially appreciated. In political and sociological writing, as in other disciplines which explore how cultures work, for example, a story is considered an 'event unit': the 'who, what, where and how' of an event. A narrative is then a system made up of two or more of these story/event units. In the field of Strategic Communication, a culturally dominant narrative (termed a master or meta-narrative) is described as a "coherent system of interrelated and sequentially organized stories that share a common rhetorical desire to resolve a conflict by establishing audience expectations according to the known trajectories of its literary and rhetorical form" (Halverson et al, 2011, p. 14). I was struck by the resonance this construction has for the way in which people may be understood to assemble defining personal narratives from the building units of their individual life events.

In psychological studies

Ultimately, I have opted to conform with general preference by, for the most part, using 'narrative' in this work. But even within the field of psychological research, definitions of narrative cover a wide spectrum. Sarbin (1986) explicitly states that for his purposes, 'narrative' is synonymous with the everyday usage of 'story'. He characterizes this as a series of events featuring human predicaments and attempts at resolution that proceeds in a predictable pattern moving from beginning to middle, and to an end of some sort.

In practice, definitions range from the Aristotelian concept of plot, with a temporal progression from beginning through middle to end, through highly specific and

detailed sociolinguistic constructs, such as those of Labov (1972) who introduced considerations of meaning as well as time, and to the claims of narrative psychology, where Sarbin (1986) celebrates it as “the organising principle of human action” (p. 9). Whilst any narrative approach might be understood to work from the premise that “narrators make sense of themselves, social situations, and history” (Bamberg & McCabe, 1998, p. iii), in practice approaches differ even within the field of narrative psychology. Riessman (1993), McLeod (1997) and Speedy (2008), for example, all adopt broad, flexible definitions around relationships of sequence and consequence, whereas McAdams (1993) adheres to a format shaped by archetypal plots.

The Narrativist Turn

Psychotherapeutic discussions of storytelling and narrative take place within the context of the “narrativist turn” (Kreiwirth, 1995, p. 61) whereby disciplines of the humanities and social sciences have increasingly engaged with the extent to which story forms can be shown to underpin much human discourse and social action. In social history and anthropology, narratives are often understood to encompass whole lives; in sociolinguistics, the frame is more commonly defined by a single conversation. Most psychological researchers occupy an intermediate position, whereby a narrative is understood to play out over a series of events or conversations.

Traditionally, social science research has approached narrative in one of three defined ways. Formal structural analysis explores the relationship between language, syntax and meaning. Content analysis focuses on semantic content. Finally, narrative analytics is a hermeneutic approach that seeks to contextualize and interpret a narrative within a socio-cultural and intertextual frame. The first two methodologies are bottom up, positivist approaches that will not be explored here. The last approach has the most relevance to the present study, particularly to the Narrative approaches discussed in Chapter 6.

Paul Ricoeur

Ricoeur (1991, 1965) is a twentieth century philosopher who combined a dialectical, ever-evolving hermeneutic search for meaning with phenomenology; the exploration of experience and consciousness. His conception of narrative identity; “the sort of identity to which the human being has access thanks to the mediation of the narrative

function” (Ricoeur, 1991, p. 73) is based on the premises that “a) knowledge of the self is an interpretation; b) the interpretation of the self, in turn, finds narrative, among other signs and symbols, to be a privileged mediation; c) the mediation borrows from history as much as fiction...” (Ricoeur, 1991, p. 73). As such, his conception of identity suggests a third way between essentialist, Cartesian definitions of a rational human subject rooted in the ‘cogito’ and radical post-modern concepts of subjectivity as heterogeneous and situational, as found in the work of Foucault and Derrida.

Ricoeur’s narrative self is neither static and transparent unto itself, nor wholly lacking in coherence and self-awareness. Rather, personal identity is understood to emerge from the subject’s active interpretation; an evolving process whereby individuals internalize and incrementally integrate their life experiences to create personal meaning. This view is essentially intersubjective in nature; we come to self-knowledge through our evolving understanding of our relationships to others, in space and in time. I find this way of conceptualizing identity both intuitively apposite and theoretically productive. As such, it resonates throughout my research.

For Ricoeur, this is a hermeneutical enterprise shaped by narrative considerations; recollections of the past, perceptions of the present and projections of the future are narratively linked in pursuit of the unity from which one comes to understand oneself as the protagonist of one’s life story. Our understanding of the past in particular is subject to an internal process of ‘emplotment’; essentially a grafting together of discrete events by means of causal and symbolic connections to create a meaningful whole. Similarly, our future/s exist as ‘inchoate narrativity’; as potential narratives. Narrative in this context suggests more than story; it is the process whereby humans relate to time itself.

Sigmund Freud

By way of contrast, Freud (1933) describes psychic reality as a product of an objective reality that leaves “traces” of itself in the individual mind (p. 75). He is moreover adamant that the principles and techniques of psychoanalysis constitute a new science, able to illuminate the psychic world much as physics might our physical environment. But Freud’s commitment to the position that psychoanalysis is a natural

science notwithstanding, this view has been subject to extensive critique within both philosophical and psychotherapeutic circles.

The culture in which Freud conceived and articulated his thinking was saturated by a positivist certainty in the existence and decipherability of a physical, external world that functioned independently of human intervention and/or perception. Hard sciences, which appeared to access and objectively represent this world, enjoyed a preeminent status within the European intellectual milieu at that time, and within Freud's own training and thinking. Thus Schafer (1976) suggests that having assimilated the scientific rhetoric of his era, and in order to differentiate himself from the contemporary Victorian ethos of an omnipotent will, Freud chooses to represent his thinking by means of an impersonal, mechanistic lexicon of drives, forces and pressures. He describes the mind as if it were a physical entity much like the body, with defined spatiality, substance and boundaries. The unfortunate result, Schafer suggests, is that psychic processes came to be represented in terms suggestive of the bodily functions of elimination. Beyond the incongruity of such metaphors, he observes a further perverse effect whereby the conceptual thinking of psychoanalysis effectively comes to replicate the retrograde belief systems that many people seek analysis to remedy.

There is a black humour to Schafer's analysis that resonates with me. I moreover find myself in ready sympathy with his critique of the metaphorical framework within which Freud elaborated his vision of the psyche, which is an aspect of psychoanalytic theory with which I have never been comfortable. It has seemed bombastic and 'masculine' in a way that alienates me.

On the other hand, Schafer (1976) points to Freud's tacitly hermeneutic approach to work with patients, and his implicit use of proto-narratively influenced concepts in his writing about the mind and memory in particular. Other writers have likewise highlighted places in which Freud's own writing appears to suggest that his conception of truth, and its place within psychoanalytic work are more nuanced. In later work, Freud (1939) seems to contradict his previous contention that we have psychic access to historical truths by conceding that:

[I]t has not been possible to demonstrate...that the human mind shows any special inclination for recognising the truth...on the contrary...human intellect very easily goes astray without any warning, and that nothing is more easily believed by us than what, without reference to the truth, comes to meet our wishful illusions (p. 129).

In the same work he moreover suggests that the human mind is ill equipped to decipher the reality of events that occur outside it, because it is implicitly selective in the way it processes information (Freud, 1939). Such ambiguities lead philosophers such as Ricoeur (1965) and Habermas (1972) to dispute Freud's assertion that psychoanalysis is a science, each arguing instead that psychoanalysis has always been a narratively-based hermeneutic process.

To my mind, Freud does seem to be hinting at something akin to a narratively-informed process of constructing our own life stories. Likewise, his elaboration of the concept of *nachträglichkeit*; the continuous reprocessing of memories in light of subsequent events, indicates an understanding that autobiographical memory does not represent a mimetic record of past events so much as an open-ended "retranscription" or "retranslation of psychic material" (Freud, quoted in Masson 1985, p. 207). This strikes me as an intriguing precursor of Ricoeur's (1991) concept of 'emplotment', and thus in harmony with later psychological models of the narrative self accreting via continual reworking of past and present experience. But I find myself reluctant to wholeheartedly relocate Freud's work into the hermeneutic canon. I suspect it is rather a testament to the richness of his writing that it is possible to find such alternate perspectives within it. As with the Bible and Shakespeare, it is a mark of great literature that it continues to offer up new meanings, long after the era of its creation.

Jerome Bruner

From the 1980s onward, cognitive and developmental psychologist Jerome Bruner (1986) was developing his own theory of the narrative construction of reality. In a sense, he seems to be proposing a middle way between the wholly hermeneutic worldview of Ricoeur and more positivist scientific approaches, by suggesting that we can have both. Bruner differentiates two different ways in which the human brain processes information. In the 'paradigmatic' mode facts are connected via logical

language-based inference of cause and effect in pursuit of abstract truth. This is the domain of logic and hard science.

By distinction, in the 'narrative' mode (which Bruner shows to be culturally universal and to developmentally precede the paradigmatic) the mind processes data into stories guided by inherent coherence and/or plausibility rather than demonstrable truth. His later work (Bruner, 2002) also explores the extent to which this more imaginative mode of thinking, which is drawn to possibility rather than logical truth, undergirds much 'meaning-making' in science, literature, law and philosophy as well as everyday thinking.

Social Constructionism

By comparison, theorists adopting a social constructionist stance within the social sciences are more emphatically relativist. Heavily influenced by hermeneutic philosophy and the narrative turn in social science thinking (Lock & Strong, 2010), Leeds-Hurwitz (2009) characterizes this position as rooted in the belief that humans rationalize their experience by means of socially-constructed models that are communicated and reified through shared use of language. While its academic roots predominantly lie in cultural critique (Shotter, 2002), Social Constructionism informs the theoretical basis of some schools of psychotherapy, particularly for families. There is a focus on understanding how individuals function in relationships, their interactional patterns and dynamics (Stanton & Welsh, 2012). Narrative therapy, as discussed in Chapter 6, lies within this tradition. As I explore in subsequent chapters, I am personally uncomfortable with the extreme relativism of such a social constructionist stance, even while I acknowledge the value of the perspective this may bring to understanding my own psychotherapeutic beliefs and practice. On a personal level, one objective of this research may therefore be to clarify how my own understanding of narrative identity can be integrated with a more holistic view of the human psyche.

Chapter Summary

In this chapter, I have identified some concepts that inform the discussions of narrative in subsequent chapters, where I explore how the philosophical debates outlined in this chapter are expressed in the context of three different arms of psychological theory:

firstly in post-Freudian psychoanalytic literature, then in neuroscience research and thirdly, in narrative psychologies.

Chapter 4 Psychoanalytic treatments of Narrative

In this chapter, I present my interpretation of the work of writers within the psychoanalytic tradition who explore the place of narrative in their understanding of the human psyche. I chart the development of the discussion over the last thirty-five years, and explore my own shifting reactions to this work.

I start with theorists Ronald Spence (1982) and Roy Schafer (1992), who explicitly critique Freudian models of psychoanalysis, and interrogate the concepts of truth that shape psychoanalytic discourse. Both writers wrestle with the distinction drawn by Bruner between paradigmatic and narrative ways of knowing (see Chapter 3) and seek to locate psychoanalytic truth within this context.

Subsequently, Robert Stolorow (1992, 1987) and his collaborators introduced new intersubjectivist perspectives that shifted the locus of psychic narrative development from the individual into the interpersonal domain. The writing of psychiatrist and neuroscientist Daniel Stern (2004) builds on an intersubjectivist understanding of human subjectivity and productively shifts the focus from distinctions between subjective and objective truth onto dimensions of explicit and implicit knowing within the human psyche. Recent writing integrates much of this thinking, but assumes a different stance regarding the function of the therapist in the development of patient narratives, and highlights the extent to which culturally-dominant narratives may impinge on the co-construction of personal narratives within the psychotherapeutic context.

Donald Spence

Like Freud, Spence (1982) does not question the existence, and indeed primacy, of an objective, external reality. In his terms, this reality is the realm of “historical truth”; that which “is dedicated to the strict observance of correspondence rules; our aim is to come as close as possible to what ‘really’ happened.” (Spence, 1982, p. 32).

But although he does propose various measures to shore up psychoanalytic access to historic truth (which will not be discussed here) Spence (1982) contends that such truth is in fact beyond the purview of psychotherapy since internal, psychic reality can claim only ‘narrative truth’; that which depends on “continuity and closure, and the

extent to which the fit of the pieces takes on an aesthetic finality” (p. 31). He moreover suggests that “once a given construction has acquired narrative truth, it becomes just as real as any other kind of truth; this new reality becomes part of the psychoanalytic cure” (Spence, 1982, p. 31).

Even if we are to understand Spence to intend here not that narrative truth has comparable validity to historical truth, but rather equal *efficacy* within the therapeutic process, this position strikes me as both disquieting and problematic. Spence (1982) himself appears to acknowledge the potential for major divergence between the ‘truth’ generated within the therapeutic context and that which is considered valid and useful in the wider world.

Roth (1991) argues that Spence’s collapse of any ontological distinction between empirically verifiable facts and the implicitly speculative interpretations that may shape their significance within a discourse, has profound implications for our understanding of the relationship between psychotherapy and reality. In my view, such conceptions seem to be in marked danger of reducing psychotherapy to a deliberate, albeit well-intentioned, conceit formally equivalent to the ‘brainwashing’ for which various religious and political institutions have been pilloried. They moreover seem to reduce ‘the talking cure’ to a status equivalent to that of ‘the pharmaceutical cure’; its value deriving from the claim that it can make you feel better.

In Spence’s (1982) terms, credibility alone becomes the hallmark of psychological truth:

Certain kinds of interpretations –perhaps the majority– can never be validated because they represent a certain view of the patient’s life which has no confirmable referent in reality. But to the extent that they become convincing and seem to explain a piece of the patient’s life, they become true. (p. 466)

But he also raises concerns about psychotherapy’s capacity to deal with even experiential reality (Spence, 1982). The truth of experience, he suggests, is lost in its translation into words. The action by one party of putting their experiences into words and the other’s idiosyncratic reception and processing of those words inevitably involve a distortion of the original perception. Spence’s thinking here resonates with me, as it seems to have done with other writers. Intersubjectivist theorists such as

Stolorow and Atwood (1992) emphasize the ubiquity with which 'reality' is reworked, and Stern (2004) expresses a similar view of simultaneous loss and gain, as I discuss below. Lambie and Marcel (2002) explore the relationship between experience and awareness in detail. Noting that the "more analytic one's attention is, the more one's experience is abstracted and decontextualized" (Lambie & Marcel, 2002, p. 235), they suggest that the process of attending to something may implicitly distort its "holistic nature" (p. 237). I find Spence's writing dense and opaque, a flaw I unfortunately notice is reflected in my own efforts to describe it here. Overall, it seems to me that he raises disconcerting flaws in the psychoanalytic relationship to reality that his own work is unable to resolve.

Roy Schafer

Roy Schafer's writing can be read as an attempt "to re-establish the person as the agent of his experience – to reassemble the subject that had been dispersed in the creation of psychoanalytic understandings" (Mitchell & Black, 1995, p. 182) and to reinstate the power of psychoanalysis to recognize and deal in truth.

Unlike Spence, Schafer's (1989) view of the analyst's task is explicitly hermeneutic. His definition of narrative truth accordingly differs from that found in Spence's writing:

It is especially important to emphasize that narrative is not an alternative to truth or reality; rather it is a mode in which, inevitably, truth and reality are presented...We have only versions of the true and the real. Narratively unmediated, definitive access to truth and reality cannot be demonstrated. In this respect, therefore, there can be no absolute foundation on which any observer or thinker stands; each must choose his or her narrative or version. (1992, pp. xiv-xv)

Here, Schafer seems to be mounting an implicit defence against Spence's implication that psychoanalysis can yield only narrative truth, and that even in that, it is at the mercy of the limits of language. By way of alternative, he proposes a model of the mind constructed and organized through narrative (Schafer, 1992, p. 34).

By shifting the language of psychoanalytic therapy toward narrative, Schafer is seeking to reframe his thinking away from the mechanistic metaphors of the physical world in favour of a more accurate and effective language of intention and agency. As his critique of Freud (see Chapter 3) indicates, Schafer (1989) believed that the analytic

task had always been the construction of an alternate personal past; “not *the* personal past, but *a* personal past” (p. 16, original italics) by means of interpretations drawn “not [from] raw experience, but [the analyst’s] interpretations” (p. 27).

Although Schafer appears to have been an acute observer of the conceptual traps in which earlier psychoanalytic discourse had found itself, he seems to be less astute with respect to the pitfalls of his own theory. By his account, therapeutic change is achieved when an analysand comes to re-experience convictions previously held as objective facts (“my mother controls my life”, for example) as a narrative or version of the truth. That is, as a belief which he or she herself has constructed and maintained. As patients become able to experience themselves as exerting agency around undesirable aspects of their life, it becomes possible for them to imagine and instigate more attractive alternatives. But it is difficult for me to integrate the philosophical statements that underpin this view with Schafer’s depiction of its implementation by the analyst.

Schafer’s (1992) writing suggests that he views both the experience and communication of an individual’s psychic reality as simultaneous creations of language. Accordingly, he attributes to the psychoanalyst no privileged access to “raw experience” (Schafer, 1989, p. 27) of reality and repeatedly emphasizes his belief that the analyst’s insight is limited by his or her own subjectivity (Schafer, 1989).

But on the methodological level, Schafer’s (1989) model of psychoanalysis seems to rest upon the same analytic authority as classical theory. Rather than exploring the nature and function of an individual’s psychic narrative as a whole, the therapeutic emphasis appears to rest on identifying and ameliorating what the analyst considers to be immature and/or inferior versions of reality, and replacing them with alternate versions which mesh with the analyst’s own interpretations. Thus Moore (1999) argues that, in practice, Schafer writes as though the psychoanalytic narrative somehow enables the analyst to transcend the limitations of their own subjectivity.

As Moore (1999) identifies, Schafer resembles Spence in his desire to defend classical psychoanalytic method, but where Spence sees narrative truth as a necessary, if flawed, alternative to historical truth, in Schafer’s writing, narrative emerges as the only truth to which we can ever aspire. Even while stressing that “[t]his second reality is as real as any other” (Schafer, 1980, p. 50), Schafer’s representation of truth in

psychoanalysis suggests a body of knowledge that has no validity or status beyond its own highly specific domain. In my view, Schafer also resembles Spence in tacitly collapsing the notion of truth into that of efficacy. As I experience with Spence's writing, I find it hard to relate to Schafer's work, which feels lifeless and pointlessly academic to me. Schafer's vision moreover seems even more nihilistic than that of his predecessor. Ultimately, his argument fails to convince because it does not compellingly reconcile the analytic dominance implicit to the Freudian approach with a narrative metapsychology that is highly hermeneutic, socially constructive and relativistic.

I have struggled through reading and writing up this part of my research, and have regularly found myself irritated with it. It has felt dry and pointlessly academic to me, in a way that is highly reminiscent of my experience of studying Stage I Philosophy at university in my teens. As then, I suspect this sense of dissatisfaction originates in my frustration that questions that feel meaningful and real to me have been subsumed beneath the pursuit of pedantic and arcane 'knowledge'.

On one level, I guess I could have chosen to exclude this kind of theory from my study. But ultimately, I think it has been important for me to include it, as it does raise some significant questions about the value of the self-awareness that psychotherapy can offer. On a practical level, I am confident that few (if any) of my clients would be comfortable with the relativist stance that Spence and Schafer take, and it feels dangerous, even arrogant, for a psychodynamic clinician to hold themselves apart from the world in this way. For this reason, I find the historical shift in focus toward exploring the intersubjective dimensions of psychoanalysis more engaging and productive. They feel more alive to me.

Robert Stolorow and the Intersubjectivists

As with the philosophy of mind found in Schafer's work, Stolorow and Atwood (1992) distance themselves from classical Freudian ontology by aligning their thinking with an explicitly subjective, hermeneutic stance. Significantly, they also depart from earlier approaches that sought to locate the specificity of human experience within a concept of individual narrative context in favour of a focus on the relational context of personal

development, and the decisive role of this “intersubjective matrix” in the construction of personal reality/ies (Stolorow & Atwood, 1992, p. 27).

According to this view, new interactive experiences within this interpersonal matrix allow “archaic modes of organization” to be integrated with “more mature modes, thereby enriching psychological functioning” (Stolorow et al, 1987, p. 32). Thus Stolorow and Attwood (1992) critique the work of theorists such as Schafer for its preoccupation with a falsely individualistic narrative subject.

As Moore (1999) observes, Stolorow and his colleagues are emphatic in their rejection of any concept of external reality, which is treated as analogous with the longstanding fallacy of “the isolated mind” (Stolorow & Atwood, 1992, p. 11) whereby the intrinsically intersubjective nature of mind is not acknowledged. This is a constructivist position even to the extreme, Moore (1992) suggests, of *pathologizing* the belief that one’s personal experience may correlate to objectively verifiable events in the outside world.

But when seeking to differentiate between the (presumably infinite) possible interpretations of reality that might indicate either ‘archaic’ or ‘mature’ awareness Stolorow et al (1987) have recourse to criteria highly reminiscent of those proposed by Schafer. Thus, to my mind, the significance of this decisive step toward a more relational concept of human understanding is mitigated by tacit recourse to the same self-limiting definition of narrative truth that structures the arguments of earlier psychoanalytic writers.

Daniel Stern

Daniel Stern (2004, 1985), a psychoanalytic theorist who integrated psychoanalytic theory with observational infant research, notes that storytelling involves a specialized mode of thought. Although in *The Interpersonal World of the Infant* (1985), he is unclear how and why a child learns to co-construct narrative with a parent, Stern speculates that the universal function of narrative-making may reflect the design of the human mind. He moreover suggests that an individual’s sense of verbal relatedness might usefully be thought of as comprising a categorical self that actively interprets the world and narrated self that synthesizes information from the senses into the elements of a story. My sense is that, even though the terminology is more

suggestive of the historical/narrative dichotomy that informs earlier psychoanalytic writing, Stern in making this distinction is reflecting an awareness of the recursive synthesis of internal and external information that Bruner (2002) elaborates more fully (as I discuss in Chapter 6).

Subsequently, Stern (2004) takes up a highly relational position with regard to individual psychological development, and the primacy of the intersubjective matrix generated within the therapeutic dyad in effecting therapeutic change. At this point, Stern (2004) abandons distinctions between objective/subjective realities to focus instead on the dichotomy between implicit and explicit forms of self-knowledge:

[m]ost simply, implicit knowledge is non-symbolic, nonverbal, procedural, and unconscious in the sense of not being reflectively conscious. Explicit knowledge is symbolic, verbalizable, declarative, capable of being narrated and reflectively conscious. (p. 113)

According to Stern (2004), most of our implicit understanding of the self and world is not transposable into words, and we generally have no need to do so. As a result, Stern argues that the implicit sense of self has been largely neglected by psychoanalytic theory, which as a talking therapy, has focused on the verbal articulation of introspective or reflective awareness, and tended to regard language (a function of explicit knowledge) as an indispensable attribute of consciousness. Verbalization, and especially narrativization of self-understanding through interpretation and articulation of past experience, has dominated the therapeutic agenda.

Where psychoanalysis privileges the verbal (re)construction of past experience, the phenomenal aspects of reality are, in his view, lost (Stern, 2004). Thus, the eternal cascade of present experience, including that of the unfolding therapeutic interchange, is neglected and the significance of non-conscious “objects of experience” (Stern, 2004, p. 124), that is enactments and the implicit dynamics of the intersubjective field in which the therapy is playing out are ignored (Stern, 2004).

By way of contrast, Stern (2004) depicts a therapy understood as a progression of present moments in which the forward momentum is generated through a shared desire for intersubjective connection and enhancement of the intersubjective field.

Accordingly, he posits two complementary and interwoven agenda for therapy. The first is the traditional, or as Stern terms it, the explicit or narrative agenda in which therapist and patient explore the patient's preoccupations. Here they are standing metaphorically side by side with the intention of co-constructing meaning about a third entity, external to themselves (Stern, 2004). Stern considers the implicit agenda of therapy to progress alongside this activity. This is the development of the relationship between therapist and patient, which others have described as the therapeutic alliance, the transferential relationship or 'real' relationship. Stern describes this as accreting moment by moment as each party non-consciously assesses and refines their sense of the other within their common intersubjective field. Though clearly interdependent, Stern suggests that the latter agenda is more fundamental insofar as it determines what and how matters may be approached (Stern, 2004).

Critics have argued that Stern is too unequivocal in contrasting the narrative and the phenomenological domains of understanding in his work. Vivona (2006) contends that Stern's research background in infant experience causes him to exaggerate the disembodied nature of language and hence to minimize the capacity to represent lived interpersonal experience verbally. Similarly, Ramberg (2005) suggests that Stern makes an illustrative educational point at the expense of exploring the more subtle positions available along a continuum between these polarities. But insofar as he considers the role of narrative within his own conception of psychotherapy, I find Stern's view both nuanced and helpful.

Interestingly, narrative activity remains a central element in Stern's vision of psychotherapy, and he explores in detail the concept of micro-narratives, wherein mundane moments of experience are systematically sequenced in time, usually without reference to conscious attention. However, he reconceptualizes narrative as an intrinsically intersubjective practice. With reference to social theorists who have argued that language, meaning-making, personal identity and reflective consciousness all have cultural origins, Stern (2004) argues that even autobiographical memories should be understood as socially generated, intersubjective constructs.

I find Stern's vision of psychotherapy very appealing. As he identifies, there is both a loss and a gain when experience is transposed into language (Stern, 2004). However,

creating a narrative involves not only words, but also direct experiences in the implicit domain. Images and sensations in the realm of the implicit are rendered into explicit form by the act of speaking, and then reconfigured from words into phenomenological experience in the process of listening, so that from an intersubjective perspective, both acts may be understood as combining elements from each domain (Stern, 2004). In psychotherapy in particular, to tell a story is not only to narrate a series of events, but also to express or perform an emotional experience. Both elements warrant therapeutic attention. Hence Stern (2004) suggests that the process of creating and relating a narrative be understood as “a special kind of enactment” (p. 193) that calls for greater analytic consideration than it had heretofore received (p. 194).

However, I take issue with Stern’s (2004) characterization of the overt narrative content of the therapeutic engagement as merely “a convenient vehicle” for the “change in ways-of-being-with-others” (p. 227) through collaborative activity that he claims as the primary mutative element in therapy. The practical implication of this assertion is that a psychotherapist might just as productively discuss the previous weekend’s sporting events with their client as they might explore their intimate experience, provided they did so in an intersubjectively attuned way. I find Donnel Stern’s (2002) suggestion that “[a]nalyst and patient need to have a reason to be together. They find that reason in their curiosity about the patient, and more recently, about the relationship between the two of them” (p.518) far more resonant. I will pick up this argument in my discussion.

Contemporary Approaches

Recent psychoanalytic writing on the topic of narrative appears to have assimilated the insights of previous. Contemporary treatments seem to be implicitly intersubjectivist in approach and explicitly broad and inclusive in their definition of narrative.

The current Editor-in-Chief of the journal *Psychoanalytic Inquiry*, Joseph Lichtenberg (2017) a developmental psychiatrist with theoretical roots in Self Psychology, draws extensively from Stern’s work and likewise acknowledges the gains and losses implicit in rendering experience in language. Stern’s influence is further reflected in Lichtenberg’s (2017) recommendation that our concept of narrative be broadened beyond verbal storytelling “to encompass the experience of imagistic, auditory, body

movement, and body sensation stories for both the pre-verbal infant and the individual throughout life” (p. 6).

Lichtenberg (2017) also acknowledges the influence of Spence, suggesting that the empirical value of narrative truth as “a story created to give a portrayal of how whatever happened is being or was experienced” (p. 19), is evinced in the diagnostic efficacy of the Adult Attachment Interview (discussed in Chapter 5). He endorses narrative as the best paradigm for understanding how we give meaning to our experience (of self, other and our wider surroundings), and of how we communicate. Narrative, he moreover asserts, “is an optimal designator for the means by which implicit and explicit experience is organized” (Lichtenberg, 2017, p. 6). Psychotherapy, in this context, is understood as “a science of choice and of creation in the present and future” (Lichtenberg, 2017, p. 21) as opposed to an excavation of past realities. Lichtenberg (2017) emphasizes the creativity of this process, the analyst becomes “a poet, artist, and aestheticist” (p. 21). As a novice practitioner, I find this suggestion disconcerting. Although the creative attribution has charm, it also implies a power, potentially even a license that is in many ways alarming. I find it hard to conceive of my clients knowingly ceding me this responsibility for directing their ‘autobiography’. It also raises complex ethical issues that do not appear to be addressed in current discussions.

Cohler and Galatzer-Levy (2013) likewise link the creation of stories with the processes of identity and personal meaning-making. While other factors may impact our lives, they emphasize that “stories, in and out of awareness, being meaning, coherence, and judgment to lived experience” (Cohler & Galatzer-Levy, 2013, p. 1142). Even more emphatically than Lichtenberg, they stress the active influence of therapists, who may serve as “editors, sometimes even authors, of their patients’ life stories” (p. 1143). In particular, they highlight the impact of clinical judgments framed in terms of the normality and developmental appropriateness or otherwise, of patient narratives. The authors suggest that therapists commonly impose on their patients, assumptions about what represents a desirable narrative, and that this is particularly detrimental in work with clients who identify with minority groups (Cohler & Galatzer-Levy, 2013).

In such cases, Cohler and Galatzer-Levy (2013) argue, the patient's 'master narratives'; the overarching stories with which the client identifies, clash with the therapist's 'master narratives'; his or her beliefs about the nature of that identity, and/or the psychotherapeutic theory narratives with which they themselves identify. These authors moreover make a passionate case for considering the implications of this dynamic on the work of therapy.

Although their work is focused on the experiences of gay men in psychoanalysis, Cohler and Galatzer-Levy (2013) are, in my view, making an important connection with broad resonance beyond that clinical population. If current understanding highlights the creative, and therefore subjective and partisan, power of the therapist in the shaping of patients' narratives of self, then it becomes vital that the work of psychotherapy be understood to encompass the social and cultural narratives that shape the personal experience and identity of therapist and patient respectively. Consideration of how these nuance the intersubjective domain is vital. In my view, the socio-political discussions of metanarratives (discussed in Chapter 3) have much to offer here, as they too work from the awareness that, as Cohler and Galatzer-Levy (2013) suggest, "[t]he power of the various master narratives, the individual's effort to deal with them, and the responses individuals receive from society (including from therapists) is enormous." (p. 1145).

Chapter Summary

In this chapter, I have offered an overview of the dominant discourses concerning narrative within the psychoanalytic tradition, and drawn attention to areas I see as controversial and/or problematic. In subsequent chapters, my intention is to consider work in connected fields that may further or deepen the discussion of the issues raised here.

Chapter 5 Neurobiological Approaches

Contemporary neuroscientific research makes a strong case for the importance of narrative for the function of the human brain. In this chapter I will consider some of the evidence suggesting clear links between personal identity, psychological health and the functions of storytelling, with reference to research associated with modern attachment theory and neurobiology.

Dysnarrativa

Dysnarrativa is a neurological condition consisting of a severe impairment of the ability to process stories, caused by damage to discrete areas of the brain. Young and Saver (2001) explore various forms of narrative impairment corresponding to differing focal areas of brain damage, and conclude that these demonstrate “the inseparable connection between narrativity and personhood” (p. 78). Similarly, Sacks (1985) describes a patient suffering from Korsakov’s syndrome, a form of dysnarrativa in which memories cannot be retained beyond a few seconds, as obliged to “literally make himself (and his world) up every moment” (p. 105). He describes his patient as “scooped out, de-souled” (p. 108). Sacks’ experience of working with such patients leads him to conclude that each of us in the course of living constructs a narrative, and that narrative becomes our identity (Sacks, 1985).

Narrative Integration

More recent neuroscientific work supports such a conclusion. Thus Cozolino (2016) positions storytelling at the core of our evolution, claiming it is likely that narrative’s capacity for both intrapsychic and interpsychic integration is responsible for the striking complexity of the human brain. The practice of conveying personal experience through stories is widely understood to connect us to others, to social groups, and bring us into reciprocal engagement with the culture, thereby enriching the environment in which we are evolving. Cozolino (2016) suggests that an impetus for sharing stories comes from the need to secure the cooperation of others in the construction of new narratives, without which our personal stories can “become closed systems in need of new input” (p. 25).

Meanwhile, at the level of the individual, the production of an effective story combines the linear, linguistic capacities of the left hemisphere to generate a coherent verbal representation of a series of events with the right hemisphere's ability to infuse events with the sensory and emotional significance that gives this series meaning. This, Cozolino (2016) argues, provides the executive brain with optimal opportunities for oversight and coordination of cognitive function. This is particularly significant for the self-reflective function that underpins our capacity to understand the past, consolidate a personal identity and heal from trauma. Likewise, Cozolino (2006) links narrative function to emotional regulation, with the cognitive functions implicated in narrative formation stimulating hippocampal and frontal lobe activity whilst downregulating that of the amygdala, thereby activating the capacity for effective thought without undue anxiety.

Siegel (2012a) echoes Cozolino's arguments, but identifies further aspects of integrative potential. That is, temporal integration whereby the past, present, and projected future self, become integrated in a manner that facilitates self-knowledge and interpersonal aptitude. He cites research suggesting that narrative may play a crucial role in memory, by processing explicit memories through dreams so that they become part of permanent, cortically consolidated memory, and posits the operation of an "observing, narrating, aspect of mind – an observing self" (p. 33-3) that actively retrieves and processes the meaning of recalled events.

Narrative and the Right Hemisphere

Siegel (2007) emphasizes right hemispheric involvement in narrative production. He cites research by Damasio (2000) indicating narrative's nonverbal basis, and argues that the original impetus toward story lies in the brain's inherent predisposition to sort the vast amount of data it is continuously receiving from all its senses, including those designated to the processing of information from the muscles, bones, and viscera. Long before words, he claims (2007), the brain is assembling patterns of neural firing into nonverbal narratives in order to understand the world. Other research supports this claim. A study by Markowitsch et al (2000) indicates that the right hemisphere is fundamentally involved in autobiographical memory, and a comprehensive survey of the literature by Ross and Mannot (2008) leads to their conclusion that "the traditional concept that language is a dominant and lateralized function of the left hemisphere is

no longer tenable” (p. 51). Schore (2017) echoes this position, citing a growing awareness within the field of neuroscience that right hemispheric function is vitally implicated in linguistic proficiency and communicative competence through its ability to decode linguistic complexity, non-literal language use, thematic inference and the affective connotations of prosody and gesture.

As I understand him, Siegel (2012b) represents narrative integration as a form of ‘meta-integration’ that draws on all other forms of integration in order that we may make sense of our lives. He enumerates the various forms of lateral and vertical connection stories utilize within the brain, and proposes that narratives may be the means by which stable, nuanced connections are maintained between the brain’s various operations, though the mechanics behind this process are not yet clear. He stresses that overall “*coherent narratives are created through interhemispheric integration*” (Siegel, 2012b, p. 371, original italics).

Since they draw from both readily accessible explicit recall and non-conscious implicit memory, our stories are powerfully influenced by our interpersonal experience. Siegel (2012b) suggests that they may be the means by which we convey otherwise hidden aspects of our implicit beliefs to others and/or, as in the cases of dreams and journal writing, ourselves. This, he proposes, may be why these have such a potent therapeutic effect. Meaning-making, manifesting as narrative coherence, facilitates self-regulation. Trevarthen (1993) claims that the drive to share ‘emotional narratives’ with significant others can be observed in infants from birth, and contends that it is an important element in our ever evolving intersubjective understanding.

Narrative and Attachment

There is consensus between these writers that the qualities of our narratives are directly related to the nature of our attachments, our self-esteem and capacity to emotionally self-regulate. Cozolino (2016) attributes self-awareness to the understanding achieved through decoding narratives which express emotional states shared by others, pre-eminently caregivers. Siegel (2012b), as do others, sees nonverbal right hemisphere processing as the neurological basis of reflective function, and thence mentalizing. This mentalizing capacity is then synthesized with the interpretative skills of the left hemisphere to produce, or to interpret, a story. Likewise

Schore (2017) describes attachment experiences as imprinted internal working models within the right-lateralized implicit procedural memory.

The view that narrative function is a product of the individual's emotional response to the environment is moreover consistent with those of non-neurologically orientated theorists who have developed psychotherapy theory and practice aligned with the research findings of attachment theory. Like Siegel, Fonagy and Target (1997) link the development of reflective function of the self to the quality of the caregiving environment, and consider it a prerequisite for the eventual acquisition of effective self-regulation of affect. Fonagy et al (1991) moreover demonstrate that internal coherence in autobiographical reflection is the single most suggestive indicator of secure attachment status in adults.

Holmes (1993) likewise describes the capacity to self-reflect, or to hold oneself in mind, as the "nucleus of autobiographical competence" (p. 106), and as a product of the experience of consistent maternal care. Good caregivers help their infants toward personal meanings, which are both the foundation and markers of secure attachment. Material attachment in childhood becomes narrative attachment, or "possession as adults of a story" (Holmes, 1993, p. 44). Thus, he views narrative as "a key feature of psychotherapeutic process", since "the patient can begin to tell himself his own story undistorted by repression, splitting and affective distancing" (Holmes, 1993, p. 129). Distinct even from the opportunity to find new insight into one's symptoms, Holmes suggests, the evidence suggests that the growth of narrative capacity *in itself*, particularly with regard to painful experiences, is associated with psychological health (Holmes, 1993).

Narrative and the Adult Attachment Interview

The diagnostic accuracy of the Adult Attachment Interview, developed by Mary Main and colleagues (Hauser et al, 2007) for predicting the attachment style of children based on the manner in which their parents describe their autobiographical history, highlights the role of narrative as both an indicator and a causal factor in attachment. Structured as a semi-structured interview featuring a wide range of questions concerning early attachment experiences, interviewees are allocated to one of four attachment style categories based on the quality (as opposed to the content) of their

responses. The questions are designed to detect omissions, inconsistencies and conflicts in discourse and narrative style. Narratives are rated for how well the parts cohere into a whole as well as how well they are “adapted to context” (Main, quoted in Hauser et al (2007), p. 218); that is, how complete, succinct and orderly they are in style.

Respondents who are assessed as ‘Secure Autonomous’ produce narratives that are open, collaborative and cohesive with full range of expression and rich use of language. By comparison, ‘Insecure Preoccupied’ respondents are rated as verbose and rambling. Past and present appear confused in the retelling, and vagaries and incomplete phases suggest incomplete or unsystematic processing of information and emotional overwhelm. ‘Insecure Dismissing’ interviewees give excessively brief and generalized answers that tend toward contradiction and avoidance of emotional content. This is suggestive of a lack of interhemispheric integration, and the left-hemispheric dominance which Beebe and Lachmann (1994) have shown experimentally to be characteristic of this group. The narratives of ‘Unresolved’ respondents additionally exhibit substantial lapses in reasoning and/or discourse, and may suggest dissociation in the course of the interview.

Narrative and self

It seems to me that all these views share a conviction that, as human beings, we are biologically and environmentally compelled to forge the staggering volume of data we collect from our external environment and from within our own bodies into a cohesive, workable entity which we identify as a subjective self.

When parents articulate for their children the subjective qualities of their shared experience, they are inducting them into a co-constructive system of perceiving the nature of mind. Siegel (2012b) proposes that by engaging in ‘reflective dialogue’ in which the focus is on linking behaviours with mental states, as manifestations of feelings, beliefs and goals, a parent is fostering both a secure attachment relationship and the neural integration of a co-constructed narrative.

Moreover, secure attachment further promotes integration in the child in that it facilitates various systems of interpersonal integration; left hemispheric communication in the form of conveying sequential, logical information, and the

affective resonance of the right hemispheres as communicated through voice and physicality. In sharing a story, Siegel (2012b) affirms that narrator and listener are each engaged in “*a dyadic form of bilateral resonance*” (p. 374, original italics) that constitutes an interpersonal resonance in complement to the individual process of interhemispheric integration at work in each party.

Siegel (2007) suggests that this narrative process produces a “witnessing self” (p. 309) able to integrate and articulate a comprehensible and nuanced testimony to their experience, that is the hallmark of secure, or ‘Autonomous’, adults.

As I understand him, Siegel is proposing a form of consciousness quite distinct from the left brain interpreter function that Gazzaniga (2015) suggests “keep[s] a running narrative going on about why a string of behaviours [is] occurring...that leads us to believe...that we are a unified conscious agent”(Gazzaniga, 2015, pp. 360-1). Whereas Gazzaniga has demonstrated that this interpreter function is susceptible to formally consistent yet patently erroneous and irrational attributions, Siegel emphasizes that the qualities that distinguish the witnessing self are much more extensive and profound than cohesion. He points out that even negative or restrictive narratives (such as ‘I was not loved, I am unlovable and will never be loved’) may be logically consistent. A coherent narrative, by comparison, is open-ended and flexible.

Narrative and Real Life Experiences

Siegel (2012a) elaborates the attributes of a coherent narrative as:

connection, openness, harmony, engagement, receptivity, emergence (fresh unfolding), noesis (deep conceptual and nonconceptual knowing), compassion (for self and other) and empathy. (p.31-6)

Clearly, these extensive qualities imply a highly complex neurological process. But this is consistent with functional magnetic resonance imaging studies that demonstrate numerous areas of brain activation when subjects are processing stories. A meta-analysis of research conducted by Mar (2011) suggests substantive overlap in the patterns of neural activation associated with mentalizing and those linked with processing narrative. Interestingly, similar patterns are also seen in cases of day

dreaming, future planning and autobiographical memory, although the author notes that the relation between these processes is unclear.

Other studies have demonstrated that when subjects are listening to a linguistically rich narrative, the regions of the brain associated with decoding words (Broca's area and Wernicke's area) and regions associated with the words and activities *described*, also fire up. Accordingly, Gonzales et al (2006) have shown how reading words such as 'perfume' and 'coffee' causes the olfactory centres to activate, but 'chair' and 'key' have no such impact. Lacey et al (2012) demonstrate a similar effect with textural language, and Boulanger et al (2009) have shown that action language activates the cerebral regions responsible for the movements represented. Such studies have led Oatley (1999) to propose that a story "runs on minds of readers just as computer simulations run on computers" (p. 101), and that there is significant overlap in the mental processing of narratives and real life experiences, particularly those in which it is useful to be able to infer the inner states of others.

I find this research both charming and inspiring. Charming in that it suggests to me how intrinsically imaginative our ways of relating to our world are, and because it contextualizes my own experience of how deeply affecting a story can be. As Oatley (1999) suggests, with regard to how they activate the brain, stories are in some sense more *real* than facts. I think there is also enormous inspiration to be taken from the quantitative data produced by neurological studies. Although I have not seen this suggested in the literature, it seems to me that there are compelling parallels between the way in which the brain has been shown to respond to the story event 'the girl kicked the ball', for example, and the way in which mirror neurons are understood to produce a comparable simulation of the activity when one watches a girl kick a ball in life. This seems like a fascinating area for further study, with the potential to transform not only our understanding of the psychological functions of narrative, but also the way in which we understand the psychological relationship between self, imagination and other.

Chapter Summary

In this chapter, I have offered an overview of the neuropsychological literature and the physical scientific evidence for viewing narrative as a core feature of the brain's

processing of experience. Next, I look at the narrative-based theories of human psychology and psychotherapy.

Chapter 6 Narrative psychologies and narrative therapy.

In this chapter I present my findings from a survey of literature relating to the fields of narrative psychology, identity and narrative therapy. I offer a brief introduction to each strand focusing on both individual nuances and thematic links between theories. I also offer my own reactions to the ideas presented.

Narrative psychology

The field of narrative psychology covers a range of theoretical approaches that identify narrative as holding a central function in the processes of human identity, thought and life choices. Our life story and identity are understood as linked insofar as our interpretations of the events of our lives, and how we relate them to our selves and others, determine how we are. The discourse is rooted in a social constructivist understanding of human development and identity as proceeding from interactions with others. Thus the focus is on how stories impact the lives of individuals, relationships and whole societies. Researchers in narrative psychology commonly use interview formats to generate detailed information about how an individual understands aspects of his or her own life. This data is then transcribed and subjected to qualitative, or less commonly quantitative, analysis.

The term 'narrative psychology' was first used by Sarbin (1986), who identified himself with psychoanalytic thinkers Spence and Schafer in arguing against the positivist, mechanistic metaphors he believed had exerted a detrimental influence over a century of psychological thinking. In their place, he sought to locate narrative as the root metaphor for the discipline. It is narrative, he argues, that functions as the organizing principle whereby human beings "impose structure on the flow of experience" (Sarbin, 1986, p. 9), and narrative that is the "organizing principle of human action" (Sarbin, 1986, p. 9). Accordingly, he suggests it is also the means by which we understand others (Sarbin, 1986, p. 11).

Publishing at the same time, Bruner (1986) likewise explored the connections between narrative and identity. He argues that life experience becomes meaningful, when we interact with it as a story in progress, and when we begin to identify ourselves with (and through) it:

Accordingly, one deep reason why we tell stories to ourselves (or to our confessor or to our analyst or our confidant) is precisely to 'make sense' of what we are encountering in the course of living – through narrative elaborations of the natural arguments of action. (Bruner & Lucariello, 1989, p. 79)

In Bruner's (2002) view, self-narrating and self-making are mutually co-constructed in a continuous "dialectical process, a balancing act" (p. v). He moreover suggests that the self-narrative-making process is dialectical in other ways. He identifies a dynamic interaction between a series of events taking place in time, which he terms the 'landscape of action' within a narrative, and the 'landscape of consciousness', comprising the meaning-making functions that go on around it. I find this distinction helpful because it helps me conceptualize the interweaving of internal and external elements that I am coming to understand as central to my own understanding of story making.

Bruner (2002) also outlines an inside-out/outside-in dialectic in which internal experiences of self, such as feelings, ideas and sensations, interact with external sources of self-awareness assimilated from significant others, and from the broader environment. Thus a child's internal sensations of discomfort when exposed to strangers might be reinforced by a parental admonition not to be shy, which in turn contributes to that child feeling increased anxiety when next expected to interact with a stranger. This analysis is also helpful to me because it captures the recursive aspect of lived experience that is so elegantly described by the concept of the hermeneutic circle.

Narrative identity

A psychological researcher in personality, Dan McAdams (1995) identifies narrative identity as an internalized narrative of self that is one of three aspects of personality, alongside but distinct from the broad dispositional traits (openness, conscientiousness, extraversion, agreeableness and neuroticism) and the individual's characteristic adaptations (their desires, concerns and coping style).

Subsequent work by McAdams (2001) focuses on understanding how narrative is involved in identity formation by means of an individual's internalization of a story which furnishes them with a sense of continuity and purpose. Though shaped by the

opportunities for narrative expression provided by caregivers in early childhood, the capacity to forge an identity from one's life story is believed to emerge from the developmental processes involved in adolescence (Habermas & Bluck, 2000). In adulthood, this capacity correlates with generativity (Goldberg, 1993) and with resilience and meaning-making in later life (Staudinger, 2001). Taken together, these findings suggest to me that the formation and maintenance of a healthy narrative sense of self is a core function of a fully-lived life.

Narrative identity research focuses on the prevalence of designated thematic features, such as the extent to which autobiographical stories indicate themes of redemption, contamination, agency and communion. The extent to which the narrator engages in self-exploration (or self-construction) in the course of their narration, how satisfactorily they generate narrative closure and their degree of insight are also assessed. Life narrative analysis suggests the strong overall importance of coherence. This is evidenced by clear, chronological sequencing and thematic coherence within the narrative, as well as causal links between events and the narrator's sense of self (Pals, 2006) and consistency with the meanings attributed to it. Studies suggest that these factors are positively correlated with psychological wellbeing in general (Baerger & McAdams, 1999) and higher levels of ego development (Alder et al, 2007). A recent thematic analysis of the narratives of patients in psychotherapy (Adler, 2012) demonstrated a correlation between increased references to the theme of agency and improvements in mental health. The indications of increasing agency were moreover shown to precede the associated increases in wellbeing, suggesting a possible causal link. This is the kind of research finding I find intriguing as a novice practitioner, and narrative identity appears to be a vibrant research field with a large number of studies appearing over the last few years. Although it is beyond the scope of my present study, I believe there would be a lot to gain from work that explored the wider therapeutic implications of this research area.

McAdam's (2013) recent work has focused on the narrative of the 'redemptive self' as a dominant model for the beliefs about adult generativity in the contemporary USA. His detailed cultural study lays out the evolution of related tropes from foundational myths through to contemporary cultural influences showing how "self and culture come together through narrative" (p. 15).

Narrative therapy

Narrative therapy, which has been described as “postpsychological” (McLeod, 2006, p.211), is characterized by practitioners as an ethnographic or co-research process in which the therapist works alongside people to understand their lives. It is a therapeutic approach growing directly out of the social constructionist view that people construct their own reality through language, within the context of social and cultural interaction (Burr, 2003). An individual’s identity is therefore held to be inherently mutable subject to their life choices. Widely considered a branch of family therapy (Polkinghorne, 2004) as this is the background of many practitioners, advocates nevertheless suggest that it has broad applicability to work with individuals (Payne, 2006), particularly when they are strongly identified with a problem. For example, instead of seeing oneself as anxious, one might come to understand that despite experiences of anxiety, this need not define one as a person.

Narrative therapists define a narrative as a story told about an event, located in space and time and organized by a plot (Russel & Carey, 2004). People are understood as performing their own stories, in the sense that by choosing to express particular aspects of their experience, they are implicitly shaping their lives (White & Epston, 1990). The task of the narrative therapist is thus to analyze a client’s stories in detail, so as to illuminate how and why they have been shaped as they have, to establish how the client might prefer to see themselves, and to explore neglected elements in the client’s life story that might support change (White, 2007). Therapist and client work together to ‘re-author’ the latter’s identity through the creation of more constructive life stories.

The narrative therapist, in the style of an investigative reporter, asks many questions and encourages conversations in which the client’s presenting issues are externalized, so that they may become disidentified with them. In the example above, for instance, the client would be encouraged to see anxiety as an external force that periodically exerts an unhelpful influence over behaviour. Once the concern is understood as a separate entity whose power is contingent on the choices the client has made, the conversations go on to explore the ways in which the client’s relationship to the problem has been maintained and reinforced by the identity narratives they have internalized.

This work is characterized by a specific methodology for analyzing narratives, and prescribed techniques for working therapeutically with these. Particular attention is paid to the operation of 'dominant narratives'; narratives that reinforce negative self-beliefs that trap the individual in an undesirable self-image (such as, "I am an anxious person"). The object of the investigation is then to discover and flesh out 'unique events', exceptions which undercut the hegemony of the dominant narrative (that is, occasions when the client was not adversely affected by anxiety) and to use these as the basis of a 'solution story' that reframes the client's life stories in a more positive way.

White and Epston (1990) adopt Bruner's spatial metaphor to describe the narrative territory that people inhabit in their lives. They advocate the use of questions that help map out the terrain by 'zigzagging' through and between an individual's 'landscapes of action' and 'landscapes of identity'. Speedy (2008) suggests that while this approach is not rigidly prescriptive, the metaphor of 'narrative landscapes' offers co-researchers a useful tool for approaching challenging or previously unexplored material, and implicitly acknowledges the lacunae left by any story, the spaces in which alternative or under-developed narrative elements may hide. This image also resonates with my own clinical experience, where I have found that retracing a well-rehearsed anecdote with a client, and wondering aloud with them about the 'gaps' in this familiar tale, has been a helpful, even cathartic, experience for them.

A further goal is to help the client identify the values they identify with, and the means they have to shape their lives around those values (Brown & Augusta-Scott, 2006). A commitment to issues of social justice is considered implicit in this way of working, insofar as the goal is to empower clients to explore the relationship between dominant cultural narratives and the stories that have shaped their own identity. The collaborative and consultative stance of co-researchers is intended to deconstruct the assumed power differential between therapist and client. Furthermore, Combs and Freeman (2012) contend that the clear focus on discourses of power helps the narrative therapist be particularly attuned to issues of social equity.

I find that, while I applaud the political engagement and that much of the thinking underlying this therapeutic modality is congruent with my own experience of the

interrelationship of one's self-narratives and one's identity, I feel alienated from narrative therapy as a methodology. I notice in myself a wish to dismiss it, and an eagerness to search out critical responses. For the most part these seem to centre on the problems raised by its social constructionist foundations, and the potential for the therapist to idealize the client's values, or exert inappropriate influence through their own (Minuchin, 1998). Bragason (1999) suggests that such approaches neglect the impact of the body, the material world and institutions of power. My own reservations seem to originate more from a sense that the narrative therapeutic approach seems oddly simplistic, even mechanistic; as though people were automata who could be 'reprogrammed' much like a computer is given a software upgrade. It is difficult for me to reconcile this approach with my psychodynamically-informed understanding of the unconscious and resistance.

I find myself much more comfortably in sympathy with the richly dialectical description of narrative and identity production in Bruner's (2002) writing, which also seems to synthesize better with the research coming from neuroscience and narrative psychology itself demonstrating that integration between differing ways of understanding is a key feature of both narrative competence and psychological wellbeing. I want to find ways in which a narrative approach could enrich my psychodynamic training. Interestingly, some early work (Anderson & Goolishian, 1992) associated with the narrative therapy tradition promotes a 'dialogical mode' for the interaction, characterized by a therapeutic stance of 'not-knowing' that seems highly congruent with Bion's (1967) exhortation that a therapist listen without memory or desire.

Narratology

One particularly engaging approach to narrative practice I have found is in a single article by Noppe-Brandon (2015), a psychotherapist and former dramaturge, who describes herself as a narratologist. In the article, Noppe-Brandon (2015) explores the ways in which her previous experience working with aspiring playwrights to hone their craft has informed and enriched her current therapeutic practice. She makes the case "for the power of narrative construction as both a healing and meaning-making tool" (n.p.).

First story of self

Noppe-Brandon (2015) suggests beginning a first session with a new client by asking them to tell their own story, not necessarily the story of their symptoms, but rather the most important element, or “earliest defining factor” (n.p.), in their life as they understand it. She argues that what clients choose to present at this point is almost always revealing of how they frame their own experience, and see themselves.

Noppe-Brandon also suggests that when a person’s life has been impacted by trauma this is characteristically indicated by a narrative which begins at the point where the rupture occurred. As an extension of this technique, she sometimes encourages clients to prepare, in between sessions, an autobiographical time line of subjectively significant events for exploration together.

Active listening

Noppe-Brandon (2015) emphasizes the vital importance of active listening for psychotherapists, and characterizes active listening as a rhythmic interweaving of attention to the sense-making functions of one’s brain’s left hemisphere and the felt experiences held in the right. Speedy (2008) describes a similar process of “multiple listening” (p. 32), and likewise draws attention to the value of listening for both what is said and what is not said. Both characterizations moreover reflect Schore’s (2017) assertion that intersubjective, relational psychotherapy offers “not the ‘talking cure’, but the ‘affect communicating cure’” (p. 249).

Noppe-Brandon extends this listening practice by taking written notes to record the precise wording a client uses at key points, and quoting this back to them at the end of a session. She suggests that simply reading back a client’s words has often precipitated a significant breakthrough, and believes the power of this intervention to stem both from its ability to capture an aspect of the client’s implicit self-concept, and from the demonstration that their story is quite literally noteworthy.

Reflective writing

A further practice Noppe-Brandon recommends is the use of reflective writing as a therapeutic tool. Following research by Pennebaker (2004) indicating that the parts of the brain used to formulate thoughts into writing are better connected to brain areas where memories are stored than those used in speech production, she describes

encouraging clients to write about their experience between sessions. This optional exercise is sometimes linked to the ongoing narrative work by using a key phrase as a starting point.

Chapter Summary

In this chapter, I have offered a brief overview of the handling of narrative themes within the broad field of narrative psychologies, discussed some techniques and pointed to conflict I have around a narrative approach to psychotherapy. In my discussion in the next chapter, I consider ways in which insights from psychology and neuroscience into the interrelationship of narrative and self-understanding might be integrated into a psychodynamic approach to therapeutic work.

Chapter 7 Discussion

In my final chapter, I reflect on the learning I have gathered from this review of narrative as represented in psychotherapy-related literature, and offer some tentative observations on how I might use this to enhance my clinical practice. I also consider both the limitations of the study and potential opportunities it suggests for further investigation.

Narrative gestalt

My single most significant insight has been the value of understanding narrative as a gestalt. Whether working within a discourse that defines narrative as an element of a story or as a constellation of them, it is clear to me that neither can be reduced to the sum of its parts. Likewise, it seems that there is value in considering all approaches to understanding how narrative might inform the process of psychotherapy. It has moreover been encouraging to discover that theorists across the research spectrum place narrative meaning-making at the heart of psychotherapeutic practice. I particularly appreciate a recent suggestion by Trevarthen (2015) that “[h]umans have evolved to enjoy making meaning... I know it doesn’t always work smoothly, but isn’t this hopeful purposefulness, or fun, what psychotherapy should primarily be concerned to support?” (p. 410). Whilst different disciplines might appear to focus on different levels or components of storytelling, narrative is, as Angus and McLeod (2004) affirm, “so fundamental to human psychological and social life, [and] carries with it such a rich set of meanings, that it provides a genuine meeting point between theoretical schools of therapy that have previously stood apart from each other” (p. 373).

But for me, the most powerful perspectives on narrative come from thinking that is intersubjective and holistic in its grounding. Lichtenberg’s (2017) explicit inclusion of imagistic and sensation-based elements in his definition of narrative resonates powerfully with neuroscientific research, as well as my own desire to consider all aspects of my clients’ presentation as it manifests in their stories. This whole-brained conception of narrative is eloquently represented by Holmes’ (1993) evocation of the psychotherapeutic paradigm of narrative as “a blending of sensation and perception,

in which the inner world can be described objectively, while the subjective colouring of the outer world is also held up for inspection” (pp. 132-133).

Narrative as a relational psychodynamic element

In this context, using narrative psychotherapeutically calls for more than an ear for language. I find whole-brained definitions of narrative to be highly compatible with the assertion of the American Psychological Association Presidential Task Force on Evidence-Based Practice (2006) that clinical competence requires interpersonal skill which is “manifested in forming a therapeutic relationship, encoding and decoding verbal and nonverbal responses... and responding empathically to the patient’s explicit and implicit experiences and concerns” (p. 277). It also seems deeply congruent with my own training and orientation, insofar as the implicit knowing of the body and right brain can be understood as the psychodynamic unconscious. As Schore (2017) contends, all interactions take place in the context of a relationship, and include a nonverbal component transmitted outside conscious awareness. Thus “the ubiquitous expression of the relational unconscious...strongly supports psychodynamic, interpersonal models of psychotherapy” (p. 257).

Truth, creativity and the role of the therapist

The work of Spence (1982) and Schafer (1992) raises significant concerns around the psychoanalytic relationship to common-sense reality that to my mind remain unresolved. While I am in sympathy with approaches that are sensitive to the social allegiances and subjectivity of the practitioner, contemporary psychoanalytic representations of the therapeutic job description as a creative editorial or authorial role raise significant ethical and perceptual concerns that are difficult for me to reconcile.

As Cohler and Galatzer-Levy (2013) rightly identify, contemporary definitions problematize the unique social identity of the practitioner, particularly with regard to designating what is desirable and/or acceptable for their patients. My own sense, however, is that the issue of subjective bias is generally acknowledged within the profession and that collegial and educational measures are in place to mitigate its adverse effects. A categorical problem to my mind remains. To paraphrase Pinker (2002), we cannot come into psychotherapy, any more than life, as a ‘blank slate’. So,

for all that creative thinking may enhance our understanding and technique, it remains clear that the psychotherapist has a fundamentally different task to perform than the playwright who crafts characters constrained only by his or her imagination.

A detailed critique of the philosophical and pragmatic limitations of current conceptions of the profession I am entering is not possible here. But I would like to propose an alternate perspective of the psychotherapeutic role that has emerged from reflection on the research I am presenting. Siegel (2007) proposes that the narrative coherence achieved by the securely attached adult produces a “witnessing self” (p. 309) that is able to integrate and articulate subjective experience in an open-ended, nuanced and flexible way. I wonder how it might be if the psychotherapist’s role were modelled on the concept of a witnessing self as an interpersonal adjunct of this intrapsychic function?

Narrative as coherence

My current understanding of the narrative gestalt highlights the overarching significance of coherence. This is exemplified in both the dynamic integration of brain functions described by neuroscientific research and in the multiple dialectics Bruner (2002) teases out of the narrative strand, to which I would add interpersonal resonances explored in the work of Stern (2004) and later relational theorists. Coherence therapy (Ecker et al, 2012), a school that holds that all behaviours can be understood and treated as coherent products of an individual’s personal narrative is an area I would like to explore further, although it has been beyond the scope of this study. I wonder if it might offer a more nuanced, creative alternative to what feels to me like the restrictive binary thinking that informs interventions in narrative therapy. Likewise either the categorical determinism or relativism, exemplified in the classical Freudian model and the social constructionist model of the mind respectively, seem trapped in an intrinsically limiting way of thinking.

In my view, the research I have covered in this study shows that narrative is powerful, precisely because it transcends this kind of binary thinking. It is largely for this reason, I believe, that I have found the narrative theories of Spence and Schafer so alienating. They both seem to approach the subject from an epistemological position that is antithetical to it. Contemporary psychoanalysis has largely moved away from

mechanistic models. Mitchell and Aron (1999) describe a sea change away from Freudian drive theory in favour of object relations models and a more interactive, reciprocal clinical style. But binaries appear to be difficult to avoid in analytic work. Even Stern (2004), who so eloquently advocates for a less rationality-bound understanding of psychotherapy, himself seems to fall into this trap when he suggests that the narrative content of psychotherapy is subordinate to the relational context of the telling. Quite apart from the differing qualities of intimacy and connection that are involved in the sharing of personal narratives, physical evidence from the brain itself suggests that autobiographical narratives are processed differently from other information (see Markowitsch et al, 1999). Like Donnel Stern(2002), I would argue, therefore, that “[n]either the verbal realm of experience nor the nonverbal are meaningful apart from one another; they find their meaning only in their relation” (p.515). The tale and the telling are synergetic and interdependant.

Talk that sings

Intriguingly, it was in researching the idea of moving my own thinking beyond binary constructs that I recently come across the work of Johnella Bird (2000, 2004), an Auckland counsellor who describes herself as a relational narrative therapist. Bird has published on the subject of relational use of language in the therapeutic context, and advocates for this approach as a rich alternative to the binary thinking she argues hinders much contemporary psychotherapeutic practice. Although I find aspects of Bird’s writing difficult to assimilate, I am moved by her suggestion that a therapist cultivate a ‘feeling for words’ comparable to the complex, multifarious ‘feeling for snow’ that is attributed to the Greenlander in *Miss Smilla’s Feeling for Snow*, a novel by Hoeg (1983). Bird (2004) claims that her own therapeutic approach is to listen for “talk that sings” (p. 4), that is for language that “brings us closer to the experience of poetry” (p. 30).

Bird’s allusion to the experience of literature as a corollary to that of listening to a client’s narratives returns me to my initial intention of undertaking research into how some of the richness of my appreciation for fiction and creative language writing, might be synthesized with my fledgling psychodynamic practice.

Enhancing practice

In seeking to explore how to develop the creativity of my psychotherapeutic practice, I have been cautiously experimenting with the techniques introduced by Noppe-Brandon (2015) (see Chapter 6).

I have tried Noppe-Brandon's (2015) technique of inviting a new client to introduce themselves by way of a story-of-self, and found it interesting how each person has responded. But I have also had the sense that it has felt overly confronting to some. One middle-aged man who came to see me because he was frustrated that his mother would not let him live independently, for example, spent most of his first session describing her mother and her interfering ways. When I commented on this, he seemed affronted and became reluctant to continue. As Noppe-Brandon (2005) herself identifies, this technique can be "strong medicine" (n.p.), and in this instance I suspect I misjudged the dosage, or dispensed it prematurely.

This setback notwithstanding, Noppe-Brandon's suggestion resonates with my own experience that paying very close attention to the words that clients use, and the way in which they use them, is enormously revealing. I have also found that reflecting on the structural and stylistic qualities of their stories (in the manner of the Adult Attachment Interview) is useful. Even at this early stage, I am starting to become familiar with recognizing the characteristic 'tells' of the respective attachment styles, and this has been a helpful diagnostic tool insofar as it has allowed me to refine my therapeutic approach accordingly.

Contrary to Noppe-Brandon's suggestion, it has not been my experience that new clients generally lead with a narrative that begins at a point of trauma or rupture in their life narrative. Rather, I have observed it to be more characteristic that the painful plot points in a client's life story are avoided or obscured in their early discourse, but reveal themselves as trust in the therapeutic bond develops. At the point when a client does elect to relay such painful memories however, I am entirely in agreement with Noppe-Brandon (2015) that my spontaneous, heartfelt response may have been "the truest sense clients have ever had of what happened to them, and is almost always profoundly organizing" (n.p.).

I concur strongly with Stern's (2004) position that something is lost while something else is gained in the process of communication as experiences are coded into narratives then decoded back into experiences. So I am very drawn to Noppe-Brandon's therapeutic concept of active listening. Often, as Noppe-Brandon identifies, a defining narrative can be non-conscious and/or preverbal, so that it is held in the body, rather than in verbal memory. In such cases, she utilizes a focusing technique developed by Gendlin (2007) to work with somatic sensations. Although I find this approach intriguing given my enhanced appreciation of the significance of nonverbal elements of narrative, I have not been able to explore it here. Sadly, it strikes me as a gap in my own training and experience that at this point I feel seriously underequipped to address early traumas of this kind.

On the other hand, I do feel much better able to attune to the liminal aspects of spoken narratives, which Speedy (2008) describes as "the gaps and cracks that exist between... stories" (p. 32). These are the pivot points of new understanding and potential change. Although I have not made systematic use of note taking of the type Noppe-Brandon recommends, I have found it valuable to comment directly when I am particularly struck by the way in which a client languages an experience, and to ask them to reflect and elaborate on the significance of their own phrasing.

I am also considering introducing reflective writing into my practice, both for my clients and myself. Like Noppe-Brandon, Siegel (2007) emphasizes that in a suitably reflective state we are able to access autobiographical memory stores more fully, and that the "healing that emerges from this reflective form of memory and narrative integration from a mindful exploration is deeply liberating" (p. 133). I find this an interesting suggestion that warrants further research.

Self as a hermeneutic process

Each of the approaches I have explored in this study shares in an understanding that as humans we are predisposed to construct a narrative from the events of our daily lives, and that narrative shapes our identity. As such, they all approach the concept of 'self' as a process, and 'self-awareness' as a hermeneutic exercise in meaning-making. As such, I see some fascinating links with existentialist approaches to psychotherapy, such as those of Frankl (2006) and Yalom (2015, 2008), each of whom have used narrative

to explain their thinking and clinical approach. I think this connection would be an exciting opportunity for future study.

Narrative as a prism

Late in this research process, I found myself struggling to articulate my personal understanding of narrative, after months of reviewing and assimilating literature across a broad psychological field. As I grasped for words, I became aware of a clear visual image in my mind's eye. This was of the rainbow of light produced by a ray of sunlight traveling through a triangular prism. This strikes me as a beautiful and elegant expression of my felt experience of the relationship between identity and narrative. If the individual psyche is the 'light', narrative is the tool by which means that light can be refracted out to reveal its component parts, so that we may understand how it is constituted. This is how I understand narrative as a psychotherapeutic tool. But interestingly, the image can also be read in the opposite direction, so that the variegated spectrum of our subjective experiences might be understood to converge and coalesce through the prism of narrative meaning-making into a stream of light that is the self. This is how I am coming to understand myself, as an energetic expression of my own stories.

Limitations of this research

I have attempted to indicate throughout where I have intentionally conscribed my research field in order to do justice to the selected material. I am confident that numerous alternate paths could have been carved through the terrain. As befits both a hermeneutic inquiry and a review of literature that ranges across a variety of disciplines, I acknowledge that much of the meaning-making presented here is a function of my own process. In retrospect, it appears that the structure of my research has replicated my own academic journey from philosophy to psychotherapy by way of literature. Given the narrative content, it seems fitting that research imitates life in this way.

Potential research development

A hermeneutic research project aspires to develop both depth and breadth of understanding, and I see considerable potential for further work that enriches and/or extends the findings of my own research. The work of Noppe-Brandon (2015)

excepted, I have found relatively few resources for technical skill development from the perspective of a narratively-informed approach to psychodynamic practice. In my position as a novice practitioner, I feel the lack of such material.

The enhanced understanding of narrative as a holistic, synthetic discourse that I take from the present study reinforces my belief that exploration of creative literature, so much of which is narrative in quality, would have much to contribute to psychotherapeutic study. I regard it as an unfortunate limitation of this project that I have not been able to do so. Opportunities for future work in this area nevertheless remain. Although my own interest lies pre-eminently in integrating psychotherapeutic and creative literature, I also see value in a more thorough exploration of the philosophical, and particularly ethical, implications of contemporary narrative approaches to practice.

Fallacy of ending

I am conscious of an emotional pull to wrap my research up in a neat conclusion. After all, a desire to reach a decisive end-point is imbedded in my (our) relationship to narrative, from early assurances that 'they lived happily ever after' onward. However, no such tidy conclusion is available in this instance.

Nor does it seem fitting in this case to search for one. As the metaphor of the hermeneutic circle makes clear, "we find ourselves, hermeneutically speaking, always in the middle of stories..." (Smith, 1991, p. 201), and any putative ending could not be anything but an artificial imposition of my subjective will.

I have elected therefore to leave the last word to Michael Gazzaniga (2015), who concludes his own reflections on a life in brain research with the observation that humans have always pondered the mysteries of life, and that our understanding of how our own minds work is nevertheless still at the beginning of its narrative arc. In this light, Gazzaniga seems to imply that, inevitable as it is, the aspiration to reach a decisive conclusion in our understanding of ourselves is a poignantly human hubris:

It becomes obvious that all of us are just hopping into an ongoing conversation, not structuring one with a beginning, a middle, and an end. Humans may have discovered some of the constraints on the

thought process, but we have not yet been able to tell the full story
(p.361)

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