Finding a Place to Stand:
Reflections on Discourse and Intertextuality in Counselling Practice

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Introduction

This paper provides an account of research into counsellor education conducted at the University of Waikato in Hamilton, New Zealand. The research drew on contemporary theory in discourse and discursive psychology in examining a counsellor education program devoted to narrative and social constructionist practice. Counselling models or theories were construed as discourses, and the research focused on what occurs when students accustomed to drawing on certain established professional and popular discourses enter into a range of alternative, postmodern discourses that turn many traditional counselling assumptions on their heads. This essay focuses on one particular issue associated with postmodern practice that emerged from the research dialogue. Specifically, it relates to the challenge, in practice informed by postmodernism's embrace of multiplicity, of not reifying one's theoretical orientation—which, in effect, promotes a grand narrative that duplicates the univocal tradition of psychology. A response to this dilemma that emerged from the study involved locating one's practice within an ethical domain, rather that identifying it with one 'pure' theoretical model. One participant called this working from 'a place to stand".

Discourse, Theory, and Practice

When one begins to regard counselling theory and practice as socially constructed discourses, some fascinating vistas open up in the exploration of the counsellor education processes. The study-in-progress I will be discussing in the following pages follows on a series of dialogues with counsellors-in-training informed by this discursive metaphor. Specifically, I will focus here on the manner in which counsellors-in-training may be constrained in the expression of their unique counselling styles by the perception they are "getting it wrong" when not adhering to the textbook version of a particular counselling model.

I will propose a means of engaging with counselling discourses that supports counsellors in expressing their values and creativity amongst the diverse values espoused by the myriad counselling discourses available to them. In effect, this can be understood as a positioning relative to counselling theory and practice characterized by neither blind

allegiance to a unitary counselling discourse, nor an eclecticism which draws on a variety of discourses in an undiscerning manner. One research participant described this as arriving at "a place to stand".

I use the term "discourse" here as a noun, to refer to any more or less coherent body of beliefs, values, and related practices that can be located in cultural and historical context. Discourses describe the world, but as Fairclough (1992), echoing Foucault, points out, the ongoing social process of generating discourses is an act of world-making: a "discourse constitutes the objects of knowledge, social subjects and forms of 'self', social relationships, and conceptual frameworks" (p. 39). Parker and colleagues (Parker, Georgaca, Harper, McLaughlin, & Stowell-Smith, 1996) put it similarly, describing discourses as "systems of statements about the world that create lived realities" (p. 10).   Some discourses are clearly identified with institutions, while others have wide popular currency. The discourses of counselling have emerged from a western context of institutional psychology. But there are many identifiable popular discourses, some of which can be traced to psychology, that speak to counselling practice as well. These may include discourses pertaining to "personal growth" and "self-actualization", the expression of emotion as a vehicle for "healing", and so on.

The curiosity propelling the study described here relates to the ways that various discourses intersect in the lives of counsellors as they formulate their theoretical stances, and indeed as they act from those values with the persons who consult them. The questions informing the study can therefore be traced to my own practice. In my work as a counselling psychologist, I constantly encounter moments in the midst of a therapeutic conversation where I am faced with a choice between responses (sometimes called "interventions' in other contexts) informed by many of these professional and popular discourses. In some cases, the discourses seem to be veritably at odds with each other. For example, when a person consulting me is tearful, I am sometimes aware of one "voice" that advocates "taking charge" and encouraging that person to slow down and stay with the feeling, while another voice suggests making space so they may pursue their own preferred direction, with no preconception on my part of what form that direction might take.

The first option might be understood as associated with discourses of catharsis and therapist-driven process, with the second more closely reflecting postmodern discourses about collaborative, non-hierarchical relationship. As counsellors, we encounter countless decision points like this. Practicing counselling (no less than living a life) involves an unending series of value-laden choices between discursive ideas that inform our actions. In the study I will discuss here, I applied these discursive metaphors to the process of learning counselling. Specifically, I became interested in the experience of counsellors-in-training as they attempted to act from a coherent value stance in the midst of their introduction to a range of challenging discursive ideas and associated practices.

The Domain of Inquiry

I chose the counsellor education program at the University of Waikato in Hamilton, New Zealand for the study. Waikato's program, housed in the Department of Education Studies, is rare among Masters programs of its sort in its almost exclusive emphasis on social constructionist and narrative postmodern counselling practices. The teaching staff has contributed significantly to advancing narrative ideas in the domains of clinical practice and supervision (Monk & Drewery, 1994; Monk, Winslade, Crocket, & Epston, 1997; Winslade, Monk, & Drewery, 1997).

Within the discipline of psychology, narrative theory assumes many guises (cf.

Bruner, 1987a, 1987b, 1990; Gergen, 1994; Held, 1995; Polkinghorne, 1988; Sarbin, 1986; Spence, 1982).   The counselling discourses at Waikato are most closely associated with the narrative therapy of Michael White and David Epston (cf. Freedman & Combs, 1996; White & Epston, 1990; White, 1995). They also reflect many of the theoretical assumptions of social constructionism (Burr, 1995; Gergen, 1985; 1994).

Narrative and social constructionism share a deconstructive impulse with regard to much entrenched discourse (both professional and popular) and turn the tables on countless widely held beliefs about human change and therapeutic process. Looking at counsellor education in terms of the meeting of discourses, one might expect some dramatic encounters between discursive ideas and practices in such a program. Consider the following liberal humanist premises versus the narrative/social constructionist with which they can be contrasted:

·   "Deviance" as indication of pathology vs. resistance to cultural prescriptions
·   Unitary self vs. multiplicity of the self
·   Problems located in intrapsychic domain vs. interpersonal domain
·   Emphasis on professional knowledge vs. emphasis on client knowledge

Over the course of a year, I resided as a post-doctoral fellow in University of Waikato's Department of Education Studies, joining counsellors-in-training in an exploration of the meeting of discourses.

Participants in the Dialogue

Participants in the dialogues ranged from beginning counsellors to experienced clinicians returning to school for upgrading and further training.   The largest group fell in the latter category, clustering predominantly in an age range from 35 to 50. Most were women, reflecting the demographics of many counselling programs in the 1990's. The vast majority were New Zealanders of European descent. I spoke with some counsellors just two months into the program, while others had completed a full year, and still others had finished two full years of training and were actively applying their learnings as paid service providers in the community. Because the information gathered (see below) involved multiple modalities, the counsellors involved had varying degrees of input into the study, and to supply a simple total of participants would be misleading. All told, I had contact in some fashion with upwards of thirty clinicians. I had one or two in-depth conversations with fifteen counsellors.

Exploring the Topic

The primary vehicle for exploring the topic was one-on one, open ended conversations. In addition, I conducted a series of conversations with counsellors in a group context. This group of six met several times over the course of three months and was structured as a reflecting team (Friedman, 1995). I first spoke with one counsellor while the others witnessed, then the witnessing team reflected on our conversation, following which the initial counsellor and I responded to the reflections, and finally the entire group debriefed on the experience. These

conversations and reflecting sessions were audiotaped and transcribed. Additional sources of material for the theorizing that emerged from this study include comments and discussion in classes, students' written assignments, e-mail correspondence, and informal conversations with counsellors over the course of the year.

Because the University of Waikato program is oriented towards a discursive view of counselling, much of the language and concepts I have drawn upon in this essay were familiar to participants. I opened conversations with a brief summary of the domain of inquiry, and began with open-ended questions designed to elicit dialogue about their experience of the discourses informing their work as counsellors. The material gathered here represents a portion of a substantial body of dialogue, interpretations, and theorizing that has promoted a number of ideas for further investigation. I certainly do not present it as a completed work, but something more akin to a stopping point on an ongoing journey.

Conflicting Discourses

At the outset of the research, I assumed counsellors at Waikato would experience what I called a "conflict" or a sense of "dissonance" (Kathie Crocket, personal communication, September, 1998) between the more traditional, liberal humanist counselling discourses most of them had been exposed to through prior training and work experience, and the narrative/social constructionist discourses they encountered through the program. I discovered this was not necessarily the case. Some counsellors were able to maintain a both/and relationship with bodies of discourse I perceived as founded on contradictory premises.

Despite this proclivity by a few to accommodate ostensibly contradictory ideas, most of the participants identified personally valued ideas and related practices associated with liberal humanism that appeared to be called into question by narrative/social constructionism. In some cases the postmodern discourses suggested alternative formulations; in others they appeared to offer an implicit critique by virtue of being mute on the subject. The four most prominently cited themes are listed below.

· Humanistic conceptions of unitary, whole self (vs. notions of multiplicity and subjectivity)
· Belief in moral foundations (vs. an anti-foundational, contextually-oriented ethics)
· Spiritual traditions of transcending discourse and perceiving non-constructed truth (vs. the notion of all experience being an outgrowth of language-based, culturally generated discourse)
· Emphasis on embodiment and materialism (vs. highlighting the human world as socially constructed)

Most clinicians reported some level of what might be called "conceptual dissonance" associated with embracing narrative/social constructionist values while being unwilling to part with some ideas and practices either critiqued by, or not addressed by, their new learnings. However, it was not immediately evident how this converted to practice or was perceived by persons seeking help.   I think it is fair to say there is often a yawning gap between the way counsellors describe their work and what appears to be going on in the consulting room. Argyris and Schon (1992) describe this as the distinction between "espoused theory" and "theory in action". And so I became interested in how this sense of

parts not fitting together played out in the counselling process. After all, theory should serve practice: conceptual dissonance is only a problem if it detracts from the helpfulness of therapeutic conversations.

The research therefore turned at this point to the dimension of discourse, not as a mere disembodied idea, but as an idea made manifest through action. As the research dialogue therefore evolved, I began to hear counsellors speak of impaired effectiveness in their work, which they attributed to the conflict of discourses. More specifically, counsellors described having allegiances torn between apparently irreconcilable counselling discourses. I call this predicament "practical dissonance".

Practical Dissonance

When it comes to situating themselves among other models, the dominant counselling discourses do not typically embrace a both/and perspective. Rather, they mimic the competitive impulse of western capitalism--each making claims for a more accurate representation of the way that things are as they strive for supremacy in an intellectual and economic marketplace. For many of the counsellors I spoke to, this notion that *either* one *or* another theory was correct or appropriate was carried into their learnings at the University of Waikato. The result, when they found themselves drawing from contrasting discourses, was a self critique more debilitating than facilitating in their work.

One counsellor described various discourses she had previously been exposed to but which she did not favor (Freudian or cognitive therapy ideas, e.g.) as being mostly "dormant" in her practice. But she said they would "wake up" from time to time in the midst of trying to do narrative work:

> *What happens to me is it undermines my belief and my confidence in my work. Because I sort of feel there's more <u>confusion</u>, really...It's just dissonance. Whatever it is, it has the effect of me questioning my work.*

This self-questioning would cause her to lose her way:

> *I think it makes me a bit "muddly". Like I try and grab little bits from everywhere...And also there's also very strong voices (like my supervisor's) saying I should go off and do RET training, and, you know, cognitive behavioral training, all that sort of stuff ...*

Another counsellor spoke of a similar erosion of confidence, using the term "lostness" to capture the experience of being caught between discourses, feeling the pressure to do a textbook version of one model, in this case narrative:

> *The more I know, the more I need to know...It has to be the most brilliant piece of work of significant value to the client.*

This counsellor concluded that lostness encouraged her to get more involved in thinking up the perfect question. The results, she said, were greater distance from and less availability to clients, reduced attention to cues, and a tendency not to check with clients on the progress of the session.

One counsellor indicated that self-judgement was a function of context: she described a sense of "relief" and clear-headedness when on campus which contrasted with her experience at her practicum placement. She portrayed contrasting discourses as

"picking away at her" in a workplace peopled by practitioners drawing on alternate, non-narrative models:

> *So say that I'm talking to my psychotherapist colleague who gives me an Oedipal analysis of what's going on for a little boy when I say, hey, what do you think's happening here? Then somehow, because I know this stuff, because it resonates with other stuff I've learned in ways that I've had of thinking about the world before...Do I just believe in it totally and think yes she's right, 'cause I have a lot of respect for her and her work, because she's held in a lot of respect. So that is, that's where dissonance happens for me now. It starts happening on the practical level.*

While a physical context (such as a workplace) dominated by a paradigm contrary to a counsellor's preferred way of working may exacerbate practical dissonance, we do not escape the influence of other discourses by cloistering ourselves away. In a sense, we all "carry" multiple contexts with us through the discourses we are born into: the immeasurable sweep of ideas and practices, symbols and rituals that inform our work and our daily lives. What seemed evident in my discussions with the participants in this study was the influence of a particularly powerful and ubiquitous discourse: mainstream science. In effect, I would like to argue that when we regard counselling discourses in logico-scientific terms, we are inclined to compartmentalize them--the result being that counselling practice which appears to cross a discourse's boundary may be regarded as "breaking the rules", or worse, *inept*.

Bruner (1987b) contrasts scientific discourse—which tends towards taxonomies of mutually exclusive, universal elements--with narrative meaning-making. Bruner's use of the word "narrative" is not to denote White and Epston's therapeutic approach; rather it depicts a mode of knowing that can be distinguished from traditional scientism. Of course, the narrative *therapy* associated with White and Epston shares a related epistemological stance.

The narrative perspective Bruner writes about is a multivocal, pluralistic view and is less concerned with the logico-scientific tendency to reconcile or reduce elements (Polkinghorne, 1988). It is interesting to note that even while immersed in a program much aligned epistemologically with this pluralistic view, counsellors judged their performance according to expectations more associated with univocal science. In other words, while being introduced to discourses that promote multiple meanings, participants nevertheless experienced self-criticism for mixing counselling discourses in their work. Put differently, they were subject to self-surveillance and the normalizing "gaze" so richly described by Foucault (cf. 1979) and echoed in the work of White and Epston (1990).

This leads to some interesting speculation about the ways in which counsellors may be constrained in realizing their preferred therapeutic modality and style by the perception that counselling interventions are either "right" or "wrong", with the conclusion dictated by rigidly defined discourses. When we view counselling models according to the parameters of an either/or logic, they appear as self-contained, encapsulated discourses, and work which crosses their boundaries is regarded as "bad" counselling. These admittedly preliminary observations lead me to conclude that it might be helpful to re-cast our view of counselling discourses in order to better represent the manner in which counselling is typically practiced. I will say more about this later; firstly, I would like to clarify the constraints I associate with an encapsulated view of discourses.

Encapsulated Discourses

Learning to throw a pot takes time and patience. At first, the apprentice potter is likely to move too quickly or too slowly, and the pot collapses on the wheel. But with time, the artist learns to keep the clay in balance, and sometimes there emerges a unique pot that defies categorization, but which others find aesthetically pleasing and functional. And so it is with counselling. Sometimes, the pot collapses; at other times a session may exhibit grace and artistry without being easily tied to a specific counselling discourse.

If we ask a painter about her style (i.e. her "discourse') and she says she imitates Picasso, we may well be inclined to admire her skill, but to seek out Picasso's work instead. We expect artists to develop their own unique styles. In the domain of counselling, however, we are less admiring of idiosyncratic practice, unless it bears the title of an identifiable counselling discourse.

Counselling discourses are largely encapsulated. They typically present themselves as mutually exclusive stories, staking out a territory based on what makes them *different* from other discourses. The overlaps are underplayed, the values and commitments shared by theories distinguished by different titles and different "leading figures". As mentioned, this dynamic is consistent with our competitive traditions, but I believe it also reflects psychology's historical alignment with a natural-science paradigm that views "theory" as a truth claim about the "real" world (Howard, 1991). If one theory is "true", then how can another theory *also* be true when it contains contrasting accounts? This positivist perspective is out of step with a discipline primarily concerned with meaning-making.

Staying true to the metaphor of counselling theory as discourse, one might say the *intertextuality* of the discourses is obscured by an emphasis on their mutual exclusivity. Fairclough (1992) defines intertextuality as "the property texts have of being full of snatches of other texts, which may be explicitly demarcated or merged in, and which the text may assimilate, contradict, ironically echo, and so forth"(p. 84). This description aptly captures the interplay between counselling discourses—an interpenetration typically downplayed by the proponents of any one approach.

This state of affairs leads many counsellors to reject potentially useful interventions or conceptualizations of counselling situations because they are deemed to be situated in a competing "camp". One participant I spoke to guiltily confessed having had a "Gestalt thought" while practicing in a narrative way. And yet there appear to be distinct overlaps between narrative and Gestalt discourses. For instance, narrative therapy promotes the discursive separation of persons and problems, usually known as "externalization". Though theorized very differently, an externalizing conversation is similar to a Gestalt parts dialogue in that it isolates a problematic discourse (a "part" in Gestalt terms) so that a person may experience themselves as separate from and in relation to it. The intertextual dimension of these discourses is obscured when they are regarded as encapsulated and distinct.

A second example of the possible intertextual application of counselling practices involves narrative and psychoanalytic practice. For instance, the psychoanalytic concept of transference is virtually absent from the narrative postmodern literature, unless in the context of a critique of Freudian theory. And yet one might characterize transference as the "problem" playing itself out in the therapeutic dialogue. For instance, a man who, in narrative terms, is "under the influence of machismo" may engage in a competitive relationship with his male therapist. In other words, the externalized problem (macho discourse) is manifest in the therapeutic relationship. Freudian discourse might construe the same phenomenon as transference, with the therapist substituting for the man's deceased, dominant father. While the two counselling discourses formulate these issues in different

ways, there is certainly room within narrative practice for discussing openly how a problem might be seen as influencing not only a person's life *outside* of the consulting room, but impacting on the counselling relationship as well. Johnella Bird (June, 1999) does this in her narrative practice, enriching her work in the process.

My conversations with counsellors immersed in narrative/social constructionist training suggests that even postmodern counselling is prone to the either/or encapsulating more typical of scientific discourse. True, postmodernism promotes a both/and perspective, but within a closed system: it does not advocate postmodernism *and* modernism, for example (Stuart, 1999). For most of the counsellors I spoke with, this tension between discourses was palpable. It may well be that the ensuing dissonance promoted useful reflection; however it also seemed to contribute to a self-monitoring that may have constrained their creativity.

In practice, no counsellor acts from identical discourses. They may share a label attributed to some identifiable model, but the only practitioner who performs the model precisely according to specifications is its originator—and readers who have witnessed prominent practitioners in practice may view even this claim as questionable. When we distinguish narrative, Gestalt, and psychoanalytic work, we are certainly pointing to many divergences in conceptualizing and practice. But the formal titles indicate broad domains of values at best, and any impermeable lines between the theories yield under closer scrutiny.

These issues raise important questions about how to support counsellors in "storying their professional development" (Winslade, Monk, & Drewery, 1997). If they are to identify their own unique positioning relative to the work of counselling, they may well identify concepts or practices that do not sit neatly within any one demarcated counselling discourse. My sense is that this process may be promoted by downplaying science's univocal view of "theory", and engaging with counselling models as intertextual discourses . However, I do not mean to advocate a simple eclecticism. Instead, I suggest clinicians in training should strive to identify the values that guide them in their negotiation of many possible counselling ideas and practices. One counsellor characterized this ethical positioning as "a place to stand".

A Place to Stand

The competent artist who does not adhere narrowly to one "school" does not merely draw arbitrarily on any and all techniques and modes of representation. Their work is guided by some form of aesthetic coherence. But counselling is not painting, or potting. A defaced painting or a collapsed pot do not typically harm persons the way incompetent counselling practice may. Counselling is a social endeavor and calls for greater attention to the impact of the "art" on the persons for whom it is intended. It should be guided by an *ethical* coherence.

The counsellors I spoke to provided some useful ideas for escaping the univocality of encapsulated counselling theory without replacing it with an undiscerning eclecticism. One spoke of "moving out from" a set of beliefs and practices generally associated with an established model. But her home base (as it were) was a cluster of core values, a site from which to extend the possibilities, rather than a line which divided competent from incompetent practice.

A second counsellor described seeing her work as *in relation* to various theories, as opposed to an exemplification of any one. But she also was clear that she stood by one. This positioning furnished her with an ethical mooring without constraining her mobility among discourses not commonly associated with her preferred model:

> *It gives me a place to stand I guess. That I can take a really, that I can take a stand on something: 'These are the ideas that I believe in and that I want to practice'. And if I can stand in those ideas, but not shut my eyes, and look out from those ideas, then it becomes an evolving and a growing thing. It doesn't become a closed entity that 'This is the way and this is the only way'."*

The theories and practices of counselling may all be traceable to culturally and historically situated discourses, but the counsellor who authors her own counselling story invariably draws from these in a unique manner. That intertextual narrative is more than "eclecticism" when it discerns between counselling constructs and practices in reference to ethical concerns. For instance, narrative practice eschews the conflating of problems and persons' identities, on the grounds that it pathologizes persons. The view of persons and problems as separate provides an ethically copherent place to stand—both in the sense of coherent as "united by some relation in form or order", and as "clearly articulated and intelligible" (Webster's, 1975, p. 352). From here, one might enact a range of practices not necessarily associated with "narrative therapy", but which share a commitment to the differentiation of persons and problems. As discussed earlier, this could mean working with both a Gestalt parts dialogue, and attention to "transference", in a manner that adheres to ethical assumptions that are wholly congruent with narrative premises. What distinguishes this from eclectic practice is a coherent account of the ethical assumptions undergirding the practice.

To make an idea of practice *ours* is to recruit it to our moral cause in much the same way that Bakhtin (1981) describes the process of languaging our experience in the face of a history of language that long precedes us:

> "...language has been completely taken over, shot through with intentions and accents. ...All words have the 'taste' of a profession, a genre, a tendency, a party, a particular work, a particular person, a generation, an age group, the day and hour. Each word tastes of the contexts in which it has lived its socially charged life...The world in language is half someone else's. It becomes 'one's own' when the speaker populates it with his own intention, his own accent...[this] is a difficult and complicated process." (p. 293)

In the realm of counselling and therapy, that intention or accent should favor the Other: our hard-won 'style" should be forged in service to the persons who consult us. The challenge for counsellor education programs is to support this quest for an ethical coherence, a place to stand.

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