# Making the exotic ordinary

## **Sharon Bond**

I first heard the expression "making the exotic ordinary" as a trainee family therapist at Kensington Consultation Centre (KCC). Our supervisor, John Burnham, was helping us to think about how we *join* (Minuchin & Fishman, 1981) with our clients. He invited us to think about how what to us seemed *normal* in the way we worked (i.e. screen and team etc), to some of our clients might seem strange and exotic. This thought really captured my imagination and became an important part of my thinking as a practitioner working in various settings and using the systemic ideas I had learned during my training and after.

The ideas presented in this article are ones that I have been developing over the years and presented in a workshop at the KCC Women's Conference in May 2009 under the title *Helping systemic ideas come out of the closet* where my intention was to foreground the portability of systemic ideas and techniques for use outside of clinical settings.

For example, in a recent piece of court work where I was asked to comment on a client's ability to work with professionals, I invited the professional system (including solicitors) to a meeting. Working with a systemic psychotherapist colleague, we used the 'reflecting team' (Andersen, 1989; Lax, 1995) process to facilitate their thinking about 'stories' (Bateson, 1972) that informed how they positioned themselves in conversation with this client and how that influenced patterns of relationships and behaviours. It was effective in bringing forth different narratives (White & Epston, 1990) about this client, which, in turn, had an impact on the decision-making process about her parenting abilities.

However, where I have experienced the use of systemic ideas having the most dramatic effect outside of the clinic setting is in schools, working with families and teachers.

In this article I want to share the conceptual principles that organise the way I work as a family therapist outside the clinic setting, drawing on examples from my work in schools.

## Theoretical concepts that organise my work

There are four – what I call – conceptual organising principles that I keep in mind:

'Entering the grammar' (McAdam, 1995)

'The difference that makes a difference' (Bateson, 1972)

'Joint action' (Shotter, 1993)

'Positioning' (Harré & van Langenhove, 1999)

## **Entering the grammar**

By 'entering the grammar' (McAdam, 1995, p. 182) I mean understanding the coherence and logic of the system in focus in order to 'join' it. When I go into a school to work as a family therapist, I am aware that I am joining a system with a logic of its own. That is to say, it has a 'grammar' that enables it to be recognised as a school that is different from, for example, a bank or a hospital. Wittgenstein says, "We can investigate the 'grammar' of words, emotions, pictures and the like. In doing this we come to an understanding on what anything is" (Wittgenstein, 1953, p. 373).

In a school, we would expect to see children playing in a playground at specified times; sitting at a desk in a room with

a teacher and other children; copying from a blackboard (or whiteboard). We might notice them putting their hands up to answer a question and waiting their turn to get the teacher's attention. Some things, like sitting on the carpet, will tell us this is a primary school rather than a secondary school. You could say that we expect certain rules to apply with regard to how people interact with each other, what they can say and do and so on. The activities, roles and rules together form the 'grammar' that we need to understand in order to successfully act into a school context.

Each family system coming to a therapeutic encounter will bring its own unique set of rules. Some of these rules might come from cultural stories about how children and adults should interact. Some families have a rule that if an adult asks a child a question she or he must answer. Or, children must sit still and not touch anything until they are given permission to do so. In some families, the rule is that the person who shouts loudest gets what she or he wants. In others, the rule might be what happens in the family stays in the family. People develop their grammatical abilities to manage relationships in their family to varying degrees. It is often when these abilities are out of place in other contexts, like school, that they become the focus of attention and when demands for change might be voiced.

The challenge for any family therapist going into a school is to find ways to 'enter the grammar' (McAdam, 1995) of the school and that of the family but also to be able to perturb these systems if change is to happen. Finding a way to be different but not too different, so that you have an impact on the system is part of the challenge.

### The difference that makes a difference

Tom Andersen says, "A helping team has to find a not too unusual setting in order to talk about not too unusual issues in a not too unusual manner" (Andersen, 1987, p. 417). School is a place with which we have all had a relationship of one sort or another. There is, however, a general consensus that school is a place where children go to learn and be educated. In recent times, counselling in schools has become an accepted activity, particularly when there has been a traumatic event. However, it is not generally seen as a place to go for family therapy. The provision of family therapy more usually takes place in a clinic setting where there is a oneway screen or video link and maybe a team of therapists working together.

The families that come to see me in school are families who, for a variety of reasons, choose not to go to the local child and family consultation service. The concerns they bring include difficult behaviour at home and in school. Some of the behaviour might be as a result of bereavement, family break-up or parental mental health problems. Many of the children have had a number of fixed-term exclusions.

In the primary school where I provide a family therapy service, I use a room that is usually used for teaching and allocated for my work with families on the days that I am in the school. It has child-size chairs, class room tables and a white board. I carry with me

what I call my toolbox (*Little Red Riding Hood* style picnic basket), which contains the resources I need. The most popular item in my box is a Barnardo's board game called *All about me*. I tend to use the cards that come with the board game separately. I also carry finger puppets, small animals and people for sculpting, playdough and coloured pens and papers (It's amazing the amount I get into that basket!).

One way in which I use the cards is to select about 20 of them which I spread out face up on the table. The cards have statements that act as an invitation into a conversation. For example, they might say: "adults say confusing things like..." or "sometimes it is hard to keep my temper when...". I invite one family member to pick a card and answer it as though she or he was another family member. For example, if I am working with a family of three or four, where there are two children, I can ask one child to complete the statement on the card as though they were the other (or one of their parents). This represents the kind of mind-reading questions that Milan systemic therapists like to ask (Palazzoli et al., 1980). I can then go on to ask other questions like: "What marks, out of ten, would you give to your brother for his answer?" "Does he usually know what you are thinking or was that a lucky guess?" "Who else is good at knowing what you're thinking?" I might then go on to ask the parents questions related to the answers given by the children. Conducting the session in this way mirrors the pattern of turntaking behaviour and the giving of marks out of ten that is familiar to a school context. It also allows me to involve all family members in the conversation.

In the one hour that the session lasts, we may get through five or six cards out of the 20, and would have created opportunities for the family to begin to know and interact with each other in ways that are different to their usual pattern of relating.

For some children, where reading is a problem, using the cards enables them to ask a parent or sibling for help. How they negotiate getting help is useful information for me as a therapist.

The Jones family (All names have been changed and some details have been altered to protect the family's identity) was one family with which I used the cards. Mrs Jones is the mother of several boys of a number of different fathers. Two boys attended the primary school in which I worked. They were referred because of their behaviour generally, but especially their behaviour towards each other. I used the cards to get them to speak from each other's perspective, but also to get them to talk about the different alliances in the sibling group. One card: "I wish I could tell dad this...." brought forth an emotional conversation about the different experiences of the boys with regards to their father, and also with regard to their colour. Gerry, the older of the two by 18 months, was dark skinned; he was, in fact, the darkest in skin colour of the boys, all of whom I had met. He knew his father and, of all the boys, had the most regular contact with his father. Adam, on the other hand, was light skinned, had no knowledge of his father and felt particularly hurt whenever Gerry went off to spend time with his. He told us that the best way to get back at Gerry was to make fun of his colour as he knew this would upset him.

This was a surprise to their mum and it enabled us to talk about her experience of living with difference. She had grown up in a multi-racial household. However, from her perspective, she was managing these differences much better than her mother had done.

Adam's quest for attention and acceptance showed itself in a number of ways in our sessions but sometimes he forgot to hide how able he was. When I shared my observation about his reading abilities, it allowed a story to emerge in which he talked about the benefits he got from having his peers and teacher think he was not a good reader.

As a result, we were able to have a conversation about what would need to happen for him to be able to show the abilities he had, of which he wanted to be proud, while improving on his relationships in the classroom.

I have even been known to give 'homework'. If a family is keen, I will give them the cards to take home and *play* in between sessions. This was something I did with the Jones family as they thought that using the cards enabled them to talk differently with each other.

'Positioning theory' (Harré & van Langenhove, 1999) and Shotter's concept of 'joint action' (1993, p. 38) are the other two principles that inform my thinking when working outside of a clinic setting.

## **Positioning theory**

Harré and van Langenhove (1999) define positioning as "a discursive practice in which people position themselves, position others and are positioned by them" (p. 22). Positioning offers us identities and it confers on us, rights, responsibilities, entitlements and obligations. When I'm working in a school, I have to consider, seriously, the question "who is my client?" The school, as commissioner of my services, has particular expectations of me which may or may not fit with the expectations that the family have from coming to see me. These are explicitly spoken about and routinely revisited in meetings with an identified senior management staff member.

Confidentiality is particularly pertinent. To avoid being 'triangulated' (Minuchin, 1974) between school and family, the position I adopt with the school is that conversations with families would not be shared with them. Families can choose, however, to share what they wish with the school. Where the issues are relevant to the child's behaviour or performance in school, parents are encouraged to invite either the class teacher, or the school's special educational needs co-ordinator (SENCO) to at least one session but more if that would be helpful. Part of the school's responsibility is to make this possible by arranging for the teachers to be released from their usual class-room duties. In managing this, I am aware of positioning myself as a facilitator, positioning the school as enablers and the parent(s) as the one who makes the choice about how the teacher is invited into the conversation about their/his/her child.

### **Joint action**

'Joint action' is a term coined by John Shotter (1993). Barnett Pearce (1994) says that, "joint actions are those that we do that are produced by the intermeshing of your acts and mine". In their book Relational Responsibility (p. 75), Sheila McNamee and Kenneth Gergen (1999) also foreground the relational nature of action, commenting that it is never independent, but acquires its meaning by virtue of others in interaction and engagement.

I have been doing family therapy in one school for about six years now. What I think has contributed to the effectiveness

of providing this service is that the school and I share a belief that seeing families in school can help strengthen relationships between home and school, child and teacher, and parent and teacher.

This shared belief has allowed us to create an ethos within the school that shows family therapy to be a fitting and appropriate activity to take place in that environment. This is communicated in the welcoming attitude of the teaching and non-teaching staff whenever I go into school; the whiteboards in the office and staff room announcing when I am coming into school; a secretary taking responsibility for letting me know when families arrive and escorting them to my room. It is also communicated in the way I am introduced to parents via the school's newsletter so that they have *news* of me before they meet me.

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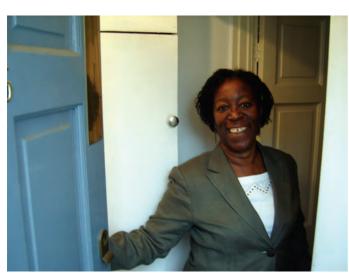
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Sharon Bond qualified as a social worker in the 1980s. She worked as an education social worker and as a psychiatric social worker in a child and family consultation service. She qualified as a systemic psychotherapist in 1993 at Kensington Consultation Centre and completed her doctorate in systemic psychotherapy at the Tavistock Clinic. Sharon is currently director of Chiron Consultation & Therapy Services, an independent agency based in East London. Website: www.chironconsulting.org

#### The tools of the trade











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