

Chapter 9: Reflexive Conclusion – the learning journey.

9.1 A poem by me

Pulling some of it together

So, what have you learned from this research?
Well, I'll try and answer, off the top of my head.

Reluctantly

Why?

I don't want the work to be reduced
Or to obscure what has just been revealed.

To look at the *actual ways* of working
Does not lend itself to summary.

Of course, some themes stand out.

It is a lot about connection
and the links with
community,
place,
a sense of belonging,
and the importance of this to people.

It is something about a therapeutic approach
that can combine
counselling
and widen this
or open this
or blend this
to authentically linking people with others
into their areas of interest.

Not necessarily with other people,
may be it is books
or hobbies
or work
or art
or animals
or music.

Absolutely anything goes.

The research colleagues actually worked to do this
And I think this can be grown and developed further.

In some ways
Suicide
could be viewed as the end of the road.

but the research has shown me
more than ever
that there are many tributaries off that road
and we can gently show people these possibilities
yet we need to be prepared to hear about their roads.
We need to put on courage.

Because, I think,
sometimes
people think
they have run all the avenues.
perhaps re-running them with someone
by talking about them
they might notice something different
at least they might feel someone
has been on the journey, at least partly,
with them.
Listening, Understanding and looking out for Hope.

There are always more avenues to explore
they might have missed something
the territory has no map really
all things are possible
there are no limitations
lots of contradictions and
complexity.
Imagination is the journey's water.

Through a relationship
Perhaps a therapeutic relationship
People may get to find a different way forward
But sometimes people will
Be intent on ending their life
And they may decide to intentionally distance
themselves and disconnect
they may need to protest
it may be a testimony to their pain
to injustice
it may be really important to them
they may not be the ones we find in counselling
but for those who do it is an opportunity
a beginning.

Those who come to counselling must be looking for something.

Oh, the other thing
is the storying thing.
I think I have discovered

more and more
the importance of storying
telling it like it is
speaking out
having a voice.

Giving people a space
to do this without having to solve suicidality
or find solutions to problems.
Decentring
and allowing people to speak about life
does bring about a sense of lifting.
Well for me anyway!

And with narrative therapy
Suicide is not necessarily about
Internal
Mental
States
Processes
that tend to lead to pathologising
it is also
(language warning)
my life is fucked and *life itself* is fucked

I guess what I am saying is
the research pointed out towards
CONTEXT
And away from
individualism, essentialism, pathologism
I am now reminded of language
The importance of finding the words
The words that fit, that have resonance,
Surely this must assist with feeling you are being understood
With connection.

And
Deconstructing words and discourse that have eased people into a stuck
place.

I do think story telling
more than likely can assist
people to live and can belong people.
Narrative therapy is a fabulous therapy for this.
The research colleagues have affirmed that.

I have learned huge amounts,
huge amounts
about qualitative research methods.

I would like to delve deeper
into the understandings that I have gained.
Really
I have only learned about the tip of the iceberg in this regard.
Nevertheless, I wasn't aware that the iceberg existed
in quite the way that it does.
The developments excite me.

What else comes to mind is the training.
Experiential training stands out
and the giving of new therapists
opportunities to tell their stories
and for these to be honoured in a training setting.
I guess this is not that different
to giving opportunities for the voices
and the stories of suicide to also be heard.
I suppose that is part of the relationship
Between
Narrative Therapy and *Suicidality*.

9.2 Contribution of the Research

This research utilised different aspects from some of the major qualitative research methods, attempting to make 'links to life' and 'highlight relational aspects' (Clandinin & Connelly, 2000, p.17). The bricolage method appears to have put together the following contributions:

- (i) A contribution towards some of the actual practical knowledges around working with people who are in a suicidal context. Using in-depth interviews, the voices, the stories, the experiences and practice knowledges of six experienced practitioners, in particular narrative informed therapists, a body of ideas has been collected. This body of ideas can link practical ways of working with people who are considering ending their lives.
- (ii) A contribution towards some of the ways that narrative informed therapy is practiced in the context of suicidality. Increasingly, working with people who are in this context, is becoming a large proportion of therapy case loads (Trimble, et al., 2000). Also, it seems many new therapists and counsellors have received little or no training on the subject prior to registration (Trimble et al., 2000; Westefeld et al., 2000).
- (iii) A contribution in relation to narrative therapy generally. Narrative therapy has become a very popular approach to therapeutic work, both in Australia and

overseas (Etchison & Kleist 2000; Hevern, 1999). Further, there is very little published research about narrative therapy (Etchison & Kleist, 2000).

- (iv) A contribution for narrative informed therapists. Narrative informed therapists, may have an opportunity to reflect and make links with their own therapeutic work and development. Following on from (iii) above, because narrative therapy has become so popular, narrative therapists have an interest in reading research that has a narrative, post-structuralist, qualitative, and political flavour. Hence, there appears to be a market for research of this type (Clandinin & Connelly, 2000, p.19). It is my hope that this work may be placed in a format whereby it can add to the cumulative-evidence that is a testimony to the effectiveness of Narrative Therapy (see Speedy, 2004).
- (v) A contribution towards a thicker description of suicidality in relation to narrative therapy, as well as some of the meanings that this group of narrative informed therapists make about suicidality.
- (vi) The research shows some of the ways this purposive sample of narrative informed therapists work and how this fits with narrative theory. It also contributes ideas for training new therapists in this work.
- (vii) The research also contributes ideas in relation to taking therapy beyond the therapy room and connecting in creative ways around the issue of suicidality, links can also be found that relate to keeping people safe, collaborating with people and engaging with people.
- (viii) The research methodology also contributes an alternative way to some of the more mainstream qualitative methods and gives credit, hopefully, to the bricolage method.

9.2 *Men and Suicide*

A disappointment I hold with the research is that the whole issue of gender and suicide has scarcely been touched, yet I believe it is very important. At first I thought the topic of gender issues, as they link with suicide, too big. I was influenced by voices like: keep it simple, you can't include everything, it is only a Masters not a Phd, and, you only have certain resources. I do remember consciously putting it aside and breathing a sigh of relief. Every now and then it would pop into my mind but the other voices would jump out again. However, suicide does indeed affect men at a greater rate than women, as mentioned in

Chapter 2. Another limitation is that potentially important and precious insights have been lost by not having some male research colleagues. On re-reading the manuscript for the almost final time before binding, I noticed with regret, the absence of discussion on gender and suicide, especially as all references to those who had actually suicided, were men. So this is a limitation of the research.

9.4 *The Family Setting*

Doing research in a family setting, with small beautiful children, there really is no consecutive space. This was frustrating at times. I worked so hard to find a way to do this work in snippets of time. In tandem with writing, reading, and transcribing the research, I was feeding children, talking to children, reading books to children, cuddling children on my lap, yelling at children, explaining how to do 4/8 of 64, all in a way so that they got the message that they were more important than the research. I hope I succeeded in this. In the end, I must confess, I told them I would get them a new dog when the thesis is finished and the only way to finish it is if I get some time to do it. The older ones at least ran along, and tried to encourage the younger ones away from me too! The search for a dog is on, and somehow I think the anticipation of a new pet is great way to have fun to have hope. (The Labradoodle is ordered – it will take 6 months, we have 6 months to prepare and save). I think also it is important children learn to be patient and to wait for special things, to mark days off on a calendar, for the big event to arrive. Consumerism allows us to have anything we want almost now – the research has affirmed some values for me, values that I want to teach my children, to help them stay connected. The research has been a two-way street, I have influenced it but it has influenced me. Even in the actual doing of this research, I want my children to know, that in the midst of their lives, if they choose, they can also achieve a project such as this.

I lamented with a friend's husband, who had just completed his Phd – he said 'you need to be a man'. I said 'a man in the 50's with a traditional wife, because my partner's life has been no walk in the park'. But, really, I do not want to do detached research like that, (sure, fewer interruptions would be helpful). I want the research to blend with the everyday, influence me in the way I live and think about life on a moment by moment basis.

I haven't found this research to be difficult, really enjoyable. Sometimes I think, that because it hasn't been really difficult, the research is not valuable and worthwhile. I wonder where the idea I hold comes from, that anything worthwhile or of value must be difficult and involve blood, sweat and tears? I have been resisting this idea. Maybe I have inadvertently taken on the cultural stories, dominant discourses – no pain no gain, you have to suffer to be beautiful, protestant work ethic (even though my religious background is catholic). I do think the protestant work ethic has a lot to do with it. Perhaps it is childbirth experiences; I go through the pain because I know I will have a beautiful child at the end. I keep that fixed in my mind to get me through every contraction. I try to teach my children and my partner that 'work' can be fun and still be work. I think the word 'work' has 'yuk and pain' associated with it. The research has not felt yukky or painful. Although I am beginning to get a bit tired of it, as I get towards the end. Apart from the frustration of constant interruptions and the learning to work with this, or around this, or through this, I have felt so many contradictory emotions and ideas while doing this research. However, I have never felt put down or invalidated by my research supervisor or other academics or the university where I study, everyone has been really affirming.

9.5 *Ramblings*

“Therapist ...and it is the time pressure that stops us from even having the ability to say 'the people that come to consult you' because it takes more time to be respectful than it does to say 'my client'.

J: Yes, that's right, so even on that level, it is like I am trying to say things like 'people who are holding ideas about ending their life', I'd rather say it like that than just say 'people who are suicidal' it is more respectful.

Therapist: yes, exactly.

J: and in some of my putting together for the ethics report I just had to use those words because I know that that abbreviated way of speaking just fits for that culture

Therapist: yes because what you say might just look like ramblings”

I think research needs a place for 'ramblings'. I feel like I am more of a Rambler, rambling is fun, I think they are the stories, the life stories, that I do believe can add value and give the qualitative research more authenticity, transparency and depth.

Academic culture, generally, does not have room for ramblings, it seems to prefer well thought out backed up ideas and arguments presented in a certain linguistic style. Ideas and arguments that fit within a tradition, built up over the years – history. Often, herstory, is left out. But saying something as it is, as it feels, in one’s own voice is liberating, even if it is only temporal. It also helps me to understand a greater sense of where I am at this point in time in my life in relation to the research. I think I do story myself into existence, a relational existence. I think I know the value of it, so I am patient with people when they begin rambling, I ask them more questions about the ramble or the story, I try and take it even further. Reflexivity, what does it mean? I think it means reflective ramblings, it is subjective, multi-layered and ever changing. The purpose is to attempt to show me, to the research I think. I guess this can leave me open, to the evaluative gaze of others, but it is for the research.

Boucher (1995) raises questions about researcher reflexivity. For example, how can we know what part of a researcher’s class, gender, family setting is influencing what part of the research? I can put out some ideas about that, but in the end, readers make their own meaning, it is only ‘food for thought’. Perhaps it can provide some insight on the development of the research and possible influences upon it.

I am more interested in feelings and impressions than numbers, so is qualitative research. Is anyone else interested I wonder? Spiegelberg said “the genuine will to know calls for the spirit of generosity rather than for that of economy ...” (1965, p.657). So, I thank the reader, in advance for their generosity.

I have discovered I prefer a more tentative voice. For example, the literature suggests, seems, perhaps, I imagine, I wonder. The first drafts were much more tentative, embodied and reflexive. Margot, my supervisor asked me for a more certain voice and more analysis. I hope I have managed the analysis bit. I don’t like writing conclusions either and prefer not to traffic in certainty. (I ask myself, can I possibly carry out research?) Many times I looked the word ‘analysis’ up in the dictionary, it said: ‘1. The separation of a whole into its parts or elements: opposed to synthesis. 2. A statement of the results of this: logical synopsis. 3. A method of determining or describing the nature of a thing by separating it into its parts’ (Funk & Wagnalls, 1984, p.23). I also prefer a more questioning voice rather than an expert-like voice

that seeks strong arguments that usually lends itself to binary language and ‘othering’. This may be counter to some parts of academic culture, and some schools of psychology, but the culture of arguments and debate, making strong statements is not where I choose to position myself. This may mean parts of that culture may view me as ‘less than’ or reject me. It is just that I don’t really want to add more strength to that culture. I think it has been strong enough for too long, yet I am willing to negotiate a way, rather than opting out from certain places. I don’t mind what others think – but then again may be I will not be accepted for my tentative voice. I want the tentative voice, the uncertainty to find its political place within academia – but I understand that this can’t look wishy washy and like I don’t know what I am talking about. I don’t want to be putting down the strong argument, debating conversation style culture either. I want to join and find places that open up these ideas. I believe this positioning of myself has influenced the research style profoundly.

9.6 Class

Back in the 1980’s I completed a Diploma in Social Welfare Work. One of the courses was an Introduction to Sociology. One of the assignments was on the book, *Making the Difference*, (Connell et al., 1982). *Making the Difference* is about education and class and we had to write about our own schooling and class in relation to the book. It was, in doing the assignment, that I realized that my background was working class. Both my parents worked in manual labour and we lived on the outskirts of Sydney. Our home was not filled with books and we went to state schools. I was not encouraged to do my Higher School Certificate and left school in Year 10. However, I thought my family life, early child hood and education was fantastic. I was only slowly becoming aware of how much privilege other people had. I am not sure how this influenced the research but it certainly influences my work today with people from working class backgrounds or who are part of the welfare class. Some of my parents’ siblings live in Department of Housing residences, I never knew there was such a difference until I was much older. (My father has 9 siblings and my mother has 8 siblings, and pretty extreme poverty was familiar to both of them). Now I am part of the middle class, my partner (as I prefer to call him but we are married) was from a middle class background. My marriage to him gave me ‘upward mobility’. He was from a middle class family in Ireland, (perhaps even upper class), not a Catholic family. They grew up on a beautiful dairy farm in the most

picturesque place in West Cork. We met working together in social work roles with people who were HIV positive, this was in the mid 1980's. We worked in Kings Cross, Sydney and the agency we were working with was affiliated with the Anglican Church. (I remember my sociology lecturer, Linley Walker, saying something like, you can become upwardly mobile through education or perhaps slip under the door through religion). After we were married a few years, he decided that he wanted to be a Minister of Religion – that now has landed me with an identity as a 'minister's wife'. He works for the Uniting Church of Australia. I think I am in the middle class now, because of the marriage and academic study. I find it hard to think I am part of the professional classes. At times, I do feel inferior and that I don't really belong. The title 'Psychologist' is useful when I need to advocate on behalf of the people (clients) I work with. People (like psychiatric registrars, magistrates or funding bodies for example) seem to listen when I say I am a Psychologist. I try to resist the middle class values of individualism and consumerism, I suppose they are values of all the classes. It is a struggle, they are seductive values. They are values of counselling too, I think, and so I try and bring a collaborative and community focus to the work.

9.7 *Bricolage*

I think doing undergraduate statistics in psychology has frightened me off positivism for life, anything to do with numbers, or tables. At a University residential school, I found myself in a class, it was all about statistics for research, I was lost, I felt like I didn't belong, I felt physically sick, people were engaging actively and talking about p values and, well I can't even articulate what else. I thought why can't they talk about bricolage and multiple meanings. I noticed there were others who looked as nauseated as me but there were many who were very keen. My understanding of bricolage however, is that within bricolage methodology, positivist research can have a place. I like bricolage because it seems to be inclusive. I would like to use the bricolage method again, for another research project. I wonder what the examiners think about this as a methodology?

As for grounded theory, I could not really grasp that either, even the word 'coding' leaves me feeling a bit insecure. I had decided that if this research becomes too painful or too difficult I am going to give up. Fortunately, before much worry about grounded theory set in, I read McLeod (2000) and West (2001), I knew there and

then, that I had a way forward. Also, somewhere in my life, I had come to know what a bricoleur was, I don't know where my knowledge of it came from, perhaps from art, I do a lot of painting and collage and it is the bricolage approach that I adopt. I have done many paintings while doing this research, as a break from the computer screen. I think the bricolage approach has enhanced my artwork. (Just a quick aside: my brother, who is a High School Art Teacher, says he likes all the different layers in my work. And a local cafe has offered their space to hang my paintings, organised by a friend, so it looks like I may finish this thesis and have an 'exhibition'.) I also asked my dad if he knew what a bricoleur was, he didn't. He builds things out of all kinds of recyclable materials and so I think he is a bricoleur of sorts. For example, he will not go to the hardware and buy the bit he wants to finish the guinea pig cage, he waits until he finds it, and he always does. I asked my friends, and some of the research colleagues, when I was describing how I hoped to proceed but they hadn't heard of the word. Yet I had an affinity with the word, it fitted for me, it made sense. Perhaps if I had not grasped an understanding of the word I would have been blocked. Bricolage is like a way I live life, for example in parenting my children I follow ways that fit and feel right. My practice of therapy really is similar, having begun with some growing understanding of narrative therapy. Now I am comfortable just going with what feels possibly right. Of course that feeling is informed by my reading, poststructuralist thinking and experience. Also, a passion for justice. Bricolage for me has been a really helpful concept, it has helped me to make sense of a lot of things.

When I placed the transcripts of the narrative conversations into poems, I found it lovely to watch them unfold. In some ways the reflections after the poems parallel a similar process to outsider witness groups (White, 1997). This way of presenting the work fits with a Narrative approach to the research, or with 'being Narrative'. However, placing research findings and literature references within the reflections felt a bit uncomfortable for me as the reflections become a bit disembodied at times. I could have put more research throughout but I wanted to keep with the chosen style. My worry was that I had no one to look at them, others might have thought it was dumb and stupid, I had no 'sounding board'. I thought if the research colleagues think they are authentic and representative of what they said and a nice way to present their words – to me that is all that matters. I was delighted when Margot (my supervisor) seemed to like them.

I mostly read the literature after collecting the data. I am very happy that I did it this way around. I read some literature before collecting the data but it was very tokenistic. I believed that is what you had to do, but it made no sense to me. It lacked meaning, it didn't engage me into a relationship with it. Reading the literature, after the 'data collection' resonated better, everything I picked up and read relates to narrative therapy, ending life, writing research. It all came together. This might sound weird but I seem to be able to find a place in the literature analysis for any literature I read. People kept saying to write the literature review while waiting for ethics approval. I did not know how to do this, it felt an impossible task. (I think next time, however, this will be possible). Once I had my six rich and thick transcripts, the literature just tumbled out from everywhere. Everything related to something that a research colleague had said, whether it was in *Cleo* magazine at the hairdressers, the *Daily Telegraph* at mum and dad's or the news. This research has no ending it could go on and on forever. The work is about living life and ways to do that. It seems everything points in that direction.

For me it is pottering around the house that makes a house a home and it is those pottering days that I find so enjoyable. With four children, dogs, cats, hermit crabs, fish, tadpoles, frogs and hundreds of pot plants (made from cuttings) there is a lot of pottering to do (I wish it would rain more and I worry about our environment). There are children's bedrooms to tidy, children's paintings to hang up and de-cluttering – because, I don't like too much clutter and there are numerous birthday parties to organise and go to. So I guess what I am saying, is that bricolage, in some way fits my lifestyle. This study has felt like tinkering, pottering around, enjoyable – does that make it any less, of course not.

9.7 Gender

How has my gender influenced the research? I think gender has influenced my choice of work that I do, being in the 'caring profession', 'counselling' and 'psychology'. So, from that point of view, I think gender has influenced my choice of research topic. For me, gender is a huge subject and so is feminism. I think they are both complex and multidimensional. Even though I repel biological determinism, having four children, two born while doing this thesis, is something men or women without

children, might not be able to grasp. There is the physical upheaval that my body has gone through in childbirth and breastfeeding. I think it has affected the work hugely – like how much time I can spend on the thesis and this in turn may have affected the quality. My priorities are my children. (I keep noticing how much I mention them, in the reflexivity, they are so present). I think my gender, or is it parenting, that has provided me with the experience of sometimes feeling vulnerable, fragile and emotional. It takes energy to try and resist the experience of vulnerability, exhaustion, and feeling emotional. However, I believe, that having times of feeling vulnerable, fragile, overwhelmed with responsibility etc. does not make me any less, but makes me more. I think it gives me more insight for the topic of suicide and how hard life can be. I worry that my children may become disconnected from me, and engage with suicidal thinking. Sometimes, when I am counselling, my heart is heaving in my chest, I think, this could be my son or daughter in 10 years time. I think of the mother of the young person I am working with and sometimes it is the connection with her that keeps me present, focused, caring. It is for her that I am so present. Narrative therapy is able to honour this way of being with someone (see White, 2003 about *Folk Psychology* and White, 1997).

Feminist thinking has influenced my way of being in the world. I think this has bolstered me to understand the world by holding the knowledge that I am as important and as equal to others, and others are as important and equal to me, even if this is not always experienced. To be feminist is a privilege, a privilege I received through education. Being feminist has taught me that I can step out of stereotype roles and that is okay. It has taught me not to worry what others may think, it has helped me to be stronger and less afraid. Maybe this is why I have been able to consider suicide as a topic to study and why I am able to work with people who are deemed to be so at risk.

9.8 *Suicide was in the air*

When I was in kindergarten I made a best friend, who is still my friend today, anyway unbeknownst to me at the time, her father, a local G.P., committed suicide. He was married with three children under 6 years of age. As we went through life, also unbeknownst to our friendship we carried that grief, and my friend in particular carried that grief. We were best friends all through primary school and high school. In

our high school years and beyond we would talk about her father and wonder why he did it, how difficult it was for her mother etc. Then when she had children, she thought about it again. She says that she does not think she was affected much by his death but says that her younger sister has been much more upset by it. Has this influenced the research choice? I think may be it has a little.

My father has nine siblings, his eldest brother attempted suicide and survived (remarkably because he shot himself in the head). My father's brother-in-law completed suicide by shooting himself. I did not know these men, but suicide was in the air when I was growing up. So maybe, it is not surprising, that I chose the topic of suicide to study.

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INFORMATION SHEET FOR RESEARCH PARTICIPANTS

Title of research project: *Suicidality: Conversations with Narrative Therapists.*

The nature and purpose of the research project is to explore ways in which experienced narrative therapists have worked with people who are suicidal. This research is being undertaken as part of a Master of Counselling (Honours) award from the University of New England, under the supervision of Associate Professor Margot Schofield.

If you participate in this research you will be asked to have two conversations lasting from one to two hours. Each conversation will be audio-taped and transcribed. I may also take some notes during the conversations. The second conversation will take place one month after the first conversation at a location and time convenient to you. You are free to withdraw from participating at any stage.

Any information you provide will be kept strictly confidential and not stored with any identifying information. All audio-tapes, handwritten notes and transcripts will be destroyed in five years time. In the mean time they will be kept in a locked filing cabinet and electronically stored transcripts will be password protected on my own personal computer.

You will be given a copy of your transcribed conversation and, if you wish, you can add or subtract to it. You will also be given a summary report in 12 months time, if you wish.

The research data gathered may be published, all participants may read the final study, and if they so choose, will be acknowledged for the work they have contributed to the study.

Any questions concerning this project titled: 'Suicidality: Conversations with Narrative Therapists', can be directed to Julie-Anne Geddes of 39 Grand Avenue, Westmead, 2145. Telephone: 02 96870178. Email: julieanneged@optusnet.com.au

This project has been approved by the Human Research Ethics Committee of the University of New England (Approval No.HEO2/186.)

Should you have any complaints concerning the manner in which this research is conducted, please contact the Research Ethics Officer at the following address:

Research Services, University of New England, Armidale, NSW 2351.

Telephone: (02) 6773 3449 Facsimile (02) 6773 3543

Email: Ethics@metz.une.edu.au

CONSENT FORM FOR RESEARCH PARTICIPANTS

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I..... have read the information on the research project titled, 'Suicidality: Conversations with Narrative Therapists', contained in the Information Sheet for Participants. Any questions I have asked have been answered to my satisfaction. I agree to participate in this activity, realising that I may withdraw at any time. I agree that research data gathered for the study may be published, provided my name is not used.

.....
Signed

.....
Date