Message in a Bottle - Collective Narrative Practice as Critical Pedagogy in Counselling Education

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Narrative Therapy and Collective Narrative Practices provide distinct methods through which local knowledge, skills and salient experiences can be evoked and shared with others in ways that support the development of preferred identities and overcome the isolating effects of problems. Furthermore, narrative practices also share a similar ethical stance with the critical pedagogy of Paulo Freire and Henry Giroux and Bell Hooks. Given this, many parallels can be drawn between narrative practice and the collaborative, power-sensitive and social justice focused practices of the critical educator. It is at this intersection between narrative practice and critical pedagogy; that the practice Innovation described in this paper lies. This practice innovation sought to use collective narrative practices to develop a rich and vibrant community of practice that supported collective learning, the development of critical consciousness and the storying of course participants professional identity as counsellors and family therapists.

The individualising force of post-industrial society and the social inequity evoked by neoliberal ideology has significantly impacted the tertiary education sector. Counselling education is in no way spared this. The same forces that influence the profession and practice of counselling and the subjectivity of those who receive its services are equally at work in developing pedagogy in academic contexts. The academy can be understood to be not only subject to economic and cultural forces such as those outlined above, but also to play a significant role in the production and maintenance of these structures as outlined by Saunders (2007):

'Colleges and universities occupy a special role in the hegemonic project as they have become one of the few legitimate knowledge producers and disseminators. As such, they are extremely powerful actors in the creation of hegemony (and at the same time could have immense power in a counter-hegemonic movement).' p4.

Given this, in the same way, counselling and psychotherapy can be understood as a site of resistance to hegemony or maintenance of the status quo (Pavon-Cuellar et al., 2017; Lamarre et al., 2018; Rustin, 2015). So too can tertiary education and, in particular, counselling education, be seen as a location in which the gears of social change can be oiled and put in motion, or instead brought to a grinding halt. This is particularly the case when we think of the experience of learning and the pedagogy that informs this as a mechanism through which not only skills and knowledges are shared and developed, but also a process that facilitates the construction of both personal and professional identities that privilege particular knowledge's, and inevitably marginalising others. As such, we can begin to see that counselling education in both content and process can act powerfully to maintain and replicate dominant discourses and power relations. Or conversely, open up spaces in which taken for granted assumptions can be explored in critical and context informed ways, where the specific individual and collective knowledges of both students; and in the context of counselling education; clients, can be uncovered and richly storied to form a central element in a therapists clinical training (Giroux, 2011).

It is this that the present paper intends to explore, turning its gaze specifically towards the way in which collective narrative practice methodologies might be used to develop learning communities that act to privilege the multiple and often marginalised knowledge of both clients and trainee therapists and do this in ways that highlight the unique experiences, skills, and preferred identities that emerge in response to the challenges that arise in this particular practice context.

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The Traditional Model of Counselling Education – Who's Voice is Privileged?

Through the work of critical educator Paulo Freire (1993, 2001), we will begin to explore some of the traditional or structuralist accounts of learning and education. These accounts have provided the discourse from within which much counselling pedagogy, both past and present, has been developed.

Central to Paulo Freire's work is a critical examination of how both the content and form of pedagogy can maintain and reinforce structural oppression by replicating the wider community's existing power relations within the educational context. More specifically Freire (1993) outlined, what he termed, the *'banking model of education',* which he understood as an inherently authoritarian and hierarchical educative process by which learning; and education are seen as an activity by which a teacher inserts, or somehow implants their knowledge directly into a passive and somewhat vacuous student. This process was seen as inevitably privileging the singular knowledge and voice of the educator, which were often sanctioned, produced, and in service of existing social structures and institutions, but also fundamentally ignoring the existing knowledge and voices of the students, as outlined by Freire below:

'In the banking model of education, knowledge is a gift bestowed by those who consider themselves knowledgeable upon those whom they consider know nothing. Projecting an absolute ignorance onto others, a characteristic of the ideology of oppression negates education & knowledge as processes of inquiry' (Freire, 1993, p45).

Moreover, this 'Banking Model' of education is strongly supported by other mainstream accounts of education and learning, which are, according to Wortham & Jackson (2012)

'…. individualist, in that the individual is seen as the object and locus of educational enrichment…' p6.

This, according to the authors, is due to certain assumptions about the individual and knowledge itself, and directly informs the nature and type of educational practices privileged and valued within any individual institution. More specifically, these assumptions are commonly grounded in empiricist epistemologies that highlight the idea that universal truths can be found, known and transmitted directly to the student. Hence positioning the educator as the 'holder of legitimate knowledge, expertise, and subsequent power' (Nelson & Neufeldt, 1998; Jaeger & Lauritzen, 1992).

Furthermore, these epistemological positions tend to privilege particular 'ideal' forms of knowledge, which are seen as relatively stable, able to be decontextualised, and assume a fundamental separation between people where each mind acts as an essentially sovereign and autonomous unit. (Wortham & Jackson, 2012). These bodies of legitimised knowledge which assume a self-contained individualism emerge, according to Gergen (2001) within communities of knowers, and *'favour particular visions of the good'* which can act to reinforce existing power relations, in terms of both pedological practice and the privileging of dominant discourses.

As such, in the context of counselling education this often leads to educators positioning themselves as not only the holder of legitimate knowledge and skills regarding the correct practice of counselling and psychotherapy based in both professional experience and relevant empirical research, but also as those who are singly qualified to be able to evaluate the

practice competencies and quality of trainee therapists work with their clients, inevitably marginalising the voice of the clients who are the centre of the endeavour.

It is these power relations that provide the foundation from within which dominate therapeutic and psychologising discourses regarding function, dysfunction, change and pathology can be uncritically transmitted from educator to student and from student to the client, influencing the subjectivities that are developed in both and providing the frames from within which practice itself and reflection upon it can occur, as outlined by Hare-Mustin (1994):

'Both the process and content in the mirrored room are limited by the discourses that are brought into the room. Thus, there is a predetermined content to therapy – that provided by dominant discourses. Conversations can be oppressive, not so much by what it includes, but by what it excludes.' p33.

As such, these authoritative and individualistic models of education tend to replicate dominant ideology and therapeutic practice and impede the active interrogation of it. This can occur through the marginalisation and devaluing of both clients and student's unique perspectives and experiences, minimising the generation and appreciation of multiple perspectives, and a subsequent reduction in the relevance of collaborative and relational pedological practices. Limiting both educator and student's opportunity to participate in the fundamentally relational, dialogical and constructivist pursuits of:

'socially considering, questioning, evaluating and inventing information' (Nelson & Neufelt,1998, p79).

These pursuits being essential in the process of exposing the operation of power embedded in assumed and singular truths across both counselling and educational contexts; and the development of the critical consciousness, sociological imagination and learning communities that are required to evoke multiple voices and advance an active promotion of social justice and social change. Furthermore, as stated by Giroux, 2011;

'Pedagogy must address the relationship between politics, and agency, knowledge and power, subject positions, learning and social change, while always being open to debate, resistance and a culture of questioning'. p147.

Responding to Traditional & Structuralist Models of Education – Making Space for Multiple Voices

This 'culture of questioning' to which Giroux (2011) refers is one of the central tools that educators have in resisting dominant discourse in counselling education and the subsequent marginalisation of local client and student-generated knowledge. Furthermore, the dialogue that this creates can also be seen as a primary mode through which learning can occur (McNamee, 2007). This same 'culture of questioning' is also the ground upon which narrative practice builds conversation intended to deconstruct dominant and often thin problematic discourse and develop richer, multi-storied and often preferred descriptions of peoples, lives, and identities (White, 2016). Then, we can see that there are relevant parallels drawn between a critical pedagogy such as the one that Giroux (2011) describes above and the various principles and methods of narrative practice . To explore some of these parallels further, we will begin with a quote from Epston & White (1992):

'Training and Supervision has raised dilemma for those

teachers/supervisors who have concerns that the training context might encourage participants to surrender hard-won knowledge's and submit to the authority of the teacher/supervisor, concerns that participants could be incited to discipline themselves and shape their 'life as therapist' according to certain specifications, concerns that participants might fashion their lives as recruits....' p84.

Posture & Relational Positioning

White's quote above speaks to an important parallel found in the relational positioning or 'posture' of critical educators, narrative therapists, and community workers. This begins with a shared willingness to become aware of and transparently acknowledge the privilege and power that their role, and broader social position, might assign them. This acknowledgement of these relationships' politics can then make space for an awareness of how they may act to privilege or marginalise specific knowledges and begin to take actions to reduce this power gradient.

Many Narrative practitioners have written about this process of positioning oneself in relationships in ways that do not impose dominant knowledge upon those who consult them. None more clearly than White (1997), who explores 'decentring' as an ethical practice of accountability that seeks to resist the replication of power relations and a tendency for these to be 'rendered invisible', making them difficult to address. White (2005) further outlines decentred practice as a relational stance that centres the knowledge and stories of those with whom we work, rather than that of the therapist or, as the case may be, educator. This decentred position can include the telling and re-telling of the stories of people's lives, re-authoring conversations, practices of transparency, structuring forms of acknowledgement, and taking it back practices (White 1997).

When we take these ideas into the context of Counselling education, we can see the importance of Counselling educators being willing to decentre their knowledge to create a collaborative, relational context where power is as much as possible distributed among all parties involved and unexamined social discourses that are present in the teaching context can be openly explored. What this can then make possible, via carefully scaffolded practices, such as those outlined by White (1997) above, and the practice example provided below, is the collective generation of diverse knowledge and skills that can be applied to the relevant learning domain (Reynolds, 2014; Giroux, 2011).

A Context of Opportunity, Constraint, and Ethical complexity

Before I offer an account of the practice innovation itself, I wish to situate myself and my practice context. This is, in my view, particularly important as the specific context and the related roles and relationships it entails act as a source of opportunity, unique constraint and ethical complexity, all of which have coalesced into the specific form of this practice innovation. As alluded to above, I find myself in the privileged position as a Counselling Educator in a Master of Counselling program and lead supervisor in a Counselling and Family Therapy teaching Clinic. This Clinic is unique in that each year we have our course participants break up into several 'therapeutic teams' who then go out into diverse community contexts to engage in collaborative, constructionist and reflecting team-based therapeutic practices. This is at odds with the more traditional and individualised approaches to counselling placements where course participants work in isolation with clients and use individual clinical supervision as the primary approach to evoking learning and reflection on this experience.

This team-based approach to practice, as outlined above, provides a small group, led by a team supervisor, who work together across the year, engaging in therapeutic conversations with clients that attend each team's respective location, and a community in which collective and reflective learning can take place, much like the practices as outlined by White in 'training as co-research' (White, 1997). With these small teams practising in diverse locations, much rich learning unique to the specific context can occur with various client groups. Yet this diversity of location and practice context provides a unique learning opportunity for each team and brings unique constraints.

The Genesis of a Project

In my role as lead supervisor, I have the unique opportunity of working with up to five therapeutic teams across a year. As part of this role, I have always appreciated being able to listen to the numerous rich stories of learning and practice from each of these teams. As an audience to these stories, I have often experienced a sense of excitement regarding the possibilities that these stories of learning represent. How might they contribute to the learning and practice development of others via the sheer diversity of experience and in terms of the commonalties that emerge across what is often a challenging yet rewarding year for course participants? Yet this excitement has often been tempered by the constraint that both geographical distances between teams and the time available across the year have placed on the advent of these possibilities. It is, however, not only me who has been subject to the effects of these limitations. Course participants have also experienced these effects and have in prior years expressed a sense of disconnection from other course participants and a feeling of loss regarding the collective and collaborative learning they have experienced in the program when more regularly connected with the larger group.

In late 2019, the current practice project had its genesis via several consultations with course participants. These consultations explored course participants knowledge regarding responding to the challenge of *'distance, separation and isolation'* in their learning and how therapeutic teams might in the future, stay more connected with each other, share their diverse practice experiences, and maintain a supportive learning community which privileged the voices and local knowledge of course participants and the clients with whom they were in service. In these initial consultations, we began to explore how course participants might share some of the knowledge generated from these conversations with those in the program's future years.

Generating an initial Collective Document – Voices from the Past

Collective narrative Documents have a rich history of use across various context and practice domains. Central to these documents is the collective articulation of a group's diverse skills and knowledge in response to particular problems that they are facing (Denborough, 2008). These practices are embedded in the broader tradition of Therapeutic Documentation

in narrative practice, where they have commonly been used as a process to thicken preferred stories and identity conclusions (Fox, 2003). Additionally, there exists a significant literature regarding the many creative ways in which these documents can be shared between clients, intending to reduce the isolating effects of problems and share unique and local skills and knowledge's regarding responding to these problems (Gerlitz, 2015; Denborough et al., 2006; Hernandez, 2008) Furthermore according to Handsaker (2012) this process of sharing or joining stories is understood as a political act:

> 'of resistance to the damaging effects of individualism and isolation' p3.

While Handsaker (2012) is writing here specifically regarding counselling practice, it can be easily argued that the same politic of isolation and separation are at work across various domains, none more so than in the context of tertiary education. So, with this in mind, an initial collective document was crafted to share across time to future course participants as a small act of resistance to both the effects of isolation and the tendency of structuralist models of counselling education to marginalise the knowledge of both clients and course participants. The course participants collaboratively decided that this collective document would take the form of a fifteen-minute recorded conversation from eight willing participants, exploring the following questions:

- *What has been the biggest challenge or constraint to their learning and practice throughout the year?*
- *In what ways had they been able to respond to these challenges and constraints and maintain a connection to the ethics of postmodern practice?*
- *What were some of the most important things that they had been taught by the clients with whom they worked?*
- *What did they learn regarding working as a therapeutic team across the year?*
- *What other ideas did they want to share with future course participants, and what questions did they have for them?*

Importantly these questions were left with the group who were invited to develop the document in their way, with the invitation that all group members voices be present in some form within the recording. The intention here was to scaffold a document in a way that evoked what may be shared experiences between those making the document and those who would be witness to it. This ensured that a diversity of experience and narrative was represented, valuing multiple perspectives and the subsequent stories; a central aspect of narrative practice and critical pedagogy.

Responding to voices from the past.

To stay connected to this ethic of accountability referred to earlier in the paper, from the first meeting with the new year's course participants, my intention was to decentre my knowledge regarding what the upcoming year would be like; my expectations of them as practitioners; and the shape their learning experience could take. In previous years, I would have provided my accounts of the year ahead. This time, I was gifted with the rich knowledges and stories of the previous year's course participants in the form of a 15-minute recorded collective document. The presence of this document allowed me to act as a messenger for these voices from the past, who offered a warm welcome and rich description of relevant knowledge and skills for the year ahead. As such, early in our first meeting for the year, this document was shared with the new year's teams, who were asked, in collaboration with their colleagues, to listen and collectively respond to this message regarding what had resonated with them and the curiosities that this evoked. Each team was asked to develop a response that could be forwarded back to those graduates from the previous year if desired.

A Commitment to Collective Ethics – Whose ethics are these anyway?

Following the sharing and witnessing of the above-mentioned collective document, we set about exploring the ethical commitments that might inform course participants therapeutic practice across the year ahead. This notion of ethical commitments acting as guidelines for practice has been articulated clearly in the work of Madsen (2014) in addition to Reynolds (2013), who explores the relevance they have to not only our relationships with clients but also our relationships with our professional colleagues. Reynolds (2019) explores the importance of developing collective ethics to support practices of accountability and safety to foster cultures of critique. A prerequisite for the critical pedagogy that this project was striving to evoke.

While in previous years, I may have outlined the 'ethical expectations' I had of the teams and reinforced dominant discourse regarding the 'practices of professionalism' that they were to follow. On this occasion, grounding myself in a commitment to scaffolding spaces in which diverse course participants knowledge could emerge, I invited each team, initially in pairs and then as a whole group, to explore those ethical commitments that they were hoping to stay connected to across the year. These conversations were scaffolded via several questions informed by Vicki Reynolds (2011) work, to richly describe and trace the history of the ethical principles that each person brought with them and how these might be enacted within the context of the therapeutic team. These questions can be seen below:

- *What are the ethics that drew you to this work?*
- *What ways of being with others do you value and hold close to your heart?*
- *What ethics are a necessity regarding this work, and which would you be unable to work* without?
- *What are the ethics or values that are present in our work when we are doing work that clients experience as most useful?*
- *What is the history of your relationship with these values, and how have they shown up in your life?*
- *Who are the people in your life that have been instrumental in the development of these values?*
- *What are the Ethics or values that you hold collectively as a group, based on the conversations you have had so far?*
- *How can we support each other to maintain a commitment to these collective ethics both in our work with clients and interactions with each other?*
- *What do you think a commitment to these collective ethics will make possible for your team across the year?*

The intention here was to begin the process of evoking and storying a diverse range of ethical commitments, both between and within teams, to further assist in the generation of a sense of 'communitas', which, while difficult to define, is pointed

to by Buber (1961) as cited in Turner (1969) as:

'…. being no longer side by side (and, one might add, above and below) but with one another of a multitude of persons. And this multitude, though it moves towards one goal, yet experiences everywhere a turning to, a dynamic facing of, the others, a flowing from I to Thou'.

This process was further extended and deepened via an invitation for each team to develop a collective document of the ethical commitments discussed that could be shared with other teams and referred to later in the year.

Definitional ceremonies and Therapeutic Documents

Following course participants spending time exploring the ethical commitments that they were hoping would guide them across the year, and the subsequent development of collective documents that could be circulated. Each team was then invited to share this document with the other four teams acting as outsider witnesses. Through this both the preferred stories and related identities relevant for the team at the centre of the 'definitional ceremony' could be acknowledged and a re-telling of these stories experienced (White 2000; Russell & Carey, 2004). This was achieved through the witnessing teams being invited, in small groups, to openly reflect on what the collective document had evoked for them, how it had resonated with their own experience and the way they had been changed by hearing it (White, 2007). Following this the team at the centre of the process was then asked to extend or elaborate regarding what they had heard and anything that had emerged from this re-telling. These definitional ceremony and outsider witnessing practices were relevant in acknowledging and thickening each team's preferred stories and commitments and allowed each team to begin practising the reflecting team processes they would be using to engage many clients throughout the year ahead.

Following this definitional ceremony, the facilitator decided to offer a therapeutic document in a narrative letter to each course participant. Therapeutic Documentation, which we have briefly explored previously in this paper, has, according to Fox (2003), a rich and diverse history of use in the context of narrative practice. Ranging in purpose from acting as case notes or a record for organisational or group consultation, enhancing the therapeutic relationship, offering a re-telling of the client story in new words, positioning the client as a witness, and extending the conversation to thicken the clients preferred stories and support the 'maintenance' and 'endurance' of the stories told (Douglas et al., 2016). As such the above-mentioned therapeutic document was written intending to acknowledge and extend upon both the shared and, diverse knowledge's the teams had expressed regarding the ethical commitments that were to guide their therapeutic practice across the year. A printed copy of this letter was handed to each student with some modifications made to each letter, based on individual input from the course participants. The generic version of this letter is outlined below:

2nd March 2020

Dear 2020 Reflecting teams

Firstly, I just wanted to say thank-you for your engagement and participation in our orientation workshop a few weekends ago. I was inspired by a sense of excitement and enthusiasm that

seemed to be present in the room. Additionally, while there may have also been some understandable anxiety or uncertainty loitering around, I was struck by the clarity and detail that each team brought to the question of 'our collective ethics' and by the rich and diverse responses that were offered. This had me wondering how this clarity and diversity regarding the ethics guiding your work might serve you across the year. It also had me wondering about the way that this might also help us be of service to the people with who we will be working?

Any way as we discussed I wanted to provide the following document as a summary and extension of the work you began at the orientation. As I mentioned above, I was struck by the diversity of ethics that were outlined by each group and the different metaphors that were used to express these.

One group choose the image of a tree as a metaphor for their group ethics, another chose a rainbow, another a mind map, and others. This sense of creativity had me wondering about the ways that this might make itself present in your work with your clients, and how this might bring a particular and unique flavour to each of your teams. Extending this, I wonder if I were to interview some of your clients at the end of the year, what you would hope they would tell me and others about their experience of working with your team? What, if they could remember only one thing, would you hope they took away from spending time with you all?

While I was struck by the richness of ideas offered by all groups. I was also interested in the collective ethics that seemed common to all teams. I wondered what this type of unity and diversity could make possible across the year for our collective learning, and individual development as therapists?

Anyway, with that said, there seemed to be among others, four primary shared ethical positions that were as follows:

- *The importance of vulnerability*

This had me wondering what vulnerability might make available to us in our groups and what supports we might need to engage in it? I also wondered what vulnerability might make possible in our relationships with our clients?

- *The importance of accountability*

This had me curious about what we are individually and collectively accountable for in regard to our teams, our clients, and our own inner world?

- *The importance of Fostering nurturing relationships (this was called many different things by different people)*

This had me thinking about how we might do this? What are I wonder the small acts that can support us to develop these types of relationships and what might they bring to our experience throughout the clinic year?

- *The importance of a sense of hope & believing change is possible.*

This had me wondering how we maintain this sense of hope

and belief in change? What do you think might come and try and steal us away from this position? And how might support each other and our clients to hold this position even when the going gets tough?

I think this might be an appropriate place to leave this document for now. Please know I am very much looking forward to hearing about how your relationship with these ethical position's changes over the year. As well as the diverse ways they will be enacted in service of the people with whom we work.

Warm regards

To enact this and the other practice examples articulated above, the methods engaged in must be positioned based on principles that allow for the existence and valuing of multiple perspectives and interpretations of experience, rather than any sense of a singular or correct knowledge. This then brings us into the realm of epistemological positioning and its fundamental relevance when creating learning contexts, which can act to support collective learning and invite questioning of the existing status quo, and in the context of therapy, the evocation of double descriptions or multi-storied accounts.

Narrative, Learning & the Construction of Knowledge

'to teach is not to transfer knowledge but to create the possibilities for the production or construction of knowledge' (Freire, 2001 p30)

In the epistemological position alluded to by Freire (2001) above, we find a further parallel between approaches to critical pedagogy and narrative practice. This is a position that understands knowledge as something that is not 'out there' to find and that can be 'transferred' between minds, but rather something that is communally and collectively constructed through language and in dialogue or, socially constructed. As such this position invites a questioning of taken for granted assumptions and truths as it understands knowledge as time, place, and context dependant. This then makes space for valuing multiple perspectives, or interpretations of experience, bringing into question assumptions regarding the hierarchy of knowledge that provides an educator or therapist their traditional position of expertise (Gergen, 2001, Freedman & Combs, 1996, 2002).

With this in mind, the interactional process of questioning and dialogue, and the subsequent community-based production of knowledge, can in and of itself, be understood as a pedological or learning process (Vygotsky, 1978; Gehart, 2007). Additionally, closely related to these concepts is significant literature that explores the connection between these ideas and narrative processes, which are understood by Fisher (1984) and Clarke & Rossiter (2008) to be a primary way in which we make meaning from our everyday experience and develop coherence from what would otherwise be isolated and random experiences. Furthermore, according to Scherto (2014), given that narrative always involves an audience, how we make this learning visible to others also becomes salient, returning to Clarke & Rossiter (2008):

'…conversation is where the learning is happening. The telling of stories makes the learner not the receiver but the actor,

moving from a cognitive understanding of an idea, principle, or concept and linking it to their own experience'.

Extending on this is the notion of re-storying, which takes these ideas of narrative learning and explores the value of inviting learners to share personal stories or narratives in ways that emphasise particular aspects of their experience. Slabon et al. (2009) define a re-storying process as:

'…. learners re-writing or re-telling of a personal, domain relevant story based on the application of concepts, principles, strategies and techniques covered during the course of instruction' p9.

This definition of re-storying also emphasises the process of these student-generated stories, being shared with other learning participants and subsequently reflected upon, modified, and developed with the intent of generating learning that is domain specific, yet also personally relevant to the learners and as such more easily internalised (Slabon, et al., 2014).

While this definition of re-storying does have a somewhat different emphasis to the practice of re-authoring provided by Russell & Carey (2004) and Freedman & Coombs (1996), It does clearly have parallels in that it includes the notion of the re-telling of relevant stories that are witnessed and responded to by others, with the intent of generating reflection, re-descriptions and diverse knowledge grounded in the local experience of participants. It is these ideas regarding the use of dialogue, narrative learning, and re-storying, when combined with a number of narrative practices as outlined by White (2007), Denborough (2008) and Freedman & Coombs (1996), that form the heart of the next phase of this project.

Messages in a Bottle

'walked out this morning I don't believe what I saw, a hundred billion bottles washed up on the shore, seems I'm not alone in being alone, a hundred billion castaways looking for a home'.

Sting – message in a bottle

The best laid and most elaborately scaffolded plans to continue the exploration of course participants ethical commitments and clinic learnings, using a variety of in-person community forums and narrative practices, were, along with all client work and life, as usual, to quickly take an unexpected turn. The presence of COVID-19 and its varied effects brought about the need for much reflection, revision and consultation regarding the process and content of the practices previously planned. If this project were to stay in line with the changing context, energy and needs of the community it was developed to serve, one needed to let go of current expectations regarding the process and engage with an ethic of responsiveness. Central to this ethic of responsiveness was an individual consultation with each of the teams regarding their knowledge of how best to maintain and use the community of practice developed earlier in the year.

Emerging from these consultations was the development of a number of questions that would be distributed to each group, with the intention of supporting the authoring of a collective document that represented what each team would like to share with others regarding their experience of learning and life so far throughout the year. These questions were framed to evoke stories of practice that highlighted both the constraints to this process and the ways that each team had found to respond to these challenges, both individually and collectively. These

questions are outlined below:

- *What is an image or metaphor that you might use to describe your journey as an individual and as a group so far in your experience working in the Clinic?*
- *What have been your greatest learnings about yourself and your group?*
- *What have been the greatest Obstacles that you have faced individually and collectively so far in working in the Clinic?*
- *What have you done to overcome or resist the influence of these obstacles so far?*
- *How have you managed to stay connected to the collective ethics you expressed earlier in the year and how has this shown up in your relationships with each other and with your clients?*
- *What has been the greatest challenge in maintaining/ developing post structural positioning in your work?*
- *How have you been able to overcome this challenge and what skills, abilities, intentions, and values have you drawn upon to do so?*
- *What are some of the histories of these skills abilities, commitment, and values and when else have they made themselves present in your lives?*
- *What is one significant thing that you have learnt about counselling, people, relationships, and change?*
- *What questions might you like to ask another one of the Clinic teams?*

Based on these questions some teams chose to develop a PowerPoint presentation, another a poster and others choosing to engage in a recorded team conversation which I was invited to facilitate. These collective documents, some excerpts of which are provided below, were then made available in a shared online space so teams could witness and respond as per desired. This was done with each group's consent and the intention of 'enabling the contribution' of each team to the others in the cohort and supporting the maintenance and continuation of collective learning through the community of practice that we had begun to form earlier in the year. Notably, the 'contribution' referred to above is outlined in detail by Denborough (2008) below:

'The difficulties that people are facing, however will not be theirs alone, and their experience of hardship can offer a contribution to others in similar or related situations' p3.

It seemed that this process of sending messages in a bottle, and contributing to others, in the context of COVID-19, took on even more importance than it may have in previous years. At this time, course participants were not only isolated due to geography, but many were also struggling with the experience of multiple losses and disappointments due to the expectations that many had carried with them into the year, both in terms of their learning but also in terms of their life outside of the academy. The common nature of these struggles can be seen in the two excerpts of the recorded collective documents below, with a common exploration around the effects of 'expectation' and 'unpredictability' in both life and therapeutic practice. Additionally, what can also be seen is the richness and diversity of each group's unique responses to these struggles both as individuals and as a group. It is here, at the intersection of both shared experience and a diversity of response, that novel dialogues and subsequent learning can emerge.

Excerpt 1.

S. So if there was a metaphor or an image for your experience of learning so far in the Clinic what might it be?

L. the idea of a journey and in the past the journey has been like climbing up and mountain, but this time I thought of a river or like we are on a sailing trip, all of us, in our sail boat, and we have this destination and this plan of how we are going to get there, and the things we are going to need to do to get there, but all of a sudden we hit dead water, no wind…we couldn't go anywhere, and you know just the challenges that we all had to face with this COVID Stuff and how we navigate this dead water…and how we create momentum and work together to get moving, rather than stay still and wait for the winds to blow again…and try and reach our goal…

S. that's a beautiful metaphor, is it ok if I ask you a little bit more about it….?

L. Yeah Sure

S. So you mentioned dead water, so I'm interested in what dead water invited for you individually but also for you all as a team, I guess I'm curious about that…

L. I think initially despair.

S. Sure

L. um you know, just the question of how do we keep going in this situation? but then I suppose it's around determination that we were just not going to sit here and wait for the wind to blow let's see what we can do and come up with creative ideas…I guess the practice way was to do some supervision with each other that helped at least keep us buoyant….and keeps that learning process going so we weren't just stuck waiting for things to change….

S. It's interesting as you said that there was despair and then determination kicked in, like it was a response to despair and I'm interested in that because for some that may not happen, and I'm interested was that something that you personally brought or that happed in the team as a whole that you supported each other to develop?

L. I think it was a collective thing…it was our combined efforts, and I suppose there is some personal stuff as I suppose I'm not one who will you know, sit a wallow for too long, and I guess that's part of who I am, but I think that's part of who all of us as a team, we are not just going to sit here, were going to make the most of what we have, which I think is a credit and testament to us as a team,

S. so there was s shared commitment to agency in this…

L. Yeah, yeah

S. So I want to make a link here, and it might be a stretch, but I will ask, and we will see how we go…so given these learnings across the year in the context of Covid-19, I wonder what it is that this has taught you about doing therapy?

L. Well, for me it's taught that therapy can be really clunky and unpredictable and its really good learning to sit in the uncomfortable and unknown and I think probably that it might feel like you're struggling against the current, but this doesn't mean you're not moving forward.

Excerpt 2.

S. If there were some things that you wanted to share with the other teams regarding your learning both as a team and individually what would those things be….?

D. I think for me one of the biggest findings is that counselling is messy, what I watch is not how it is in real life, just like life I guess, it is messy, and maybe not resisting this?

S so therapy is messy like life is messy. So, what does learning that do for you…what does it make possible for you….

D. I guess surrendering and just accepting some things are the way they are…things are going to come up and there not going to fit with my expectations of how things will go, and I know the COVID- 19 situation is probably a perfect example of this with you know, expecting to be in Clinic, not meeting face to face, and yet here we are meeting together anyway contributing to each other….

S. yeah yeah for sure, so I'd like to come back to this idea of one of your responses being surrendering to the way things are, and I'd love to hear how you and maybe others do this, or if there are other responses to a similar experience in the group? I'm also interested in what I hear is a commitment to contributing to each other in the group and what others experience in this regard? what about others in the group and this experience of messiness in life and practice?

R. Yeah, well even the construct of messy is positioned against a pre-existing notion that things should be a certain way. You know life is just life, um the expectations that we attach we have been born into….and then when it doesn't fit with this our upset arises you know…You know if we could simply see life as it occurs, then things would be different. But there is this sea of expectations, you know discourse…

S. So, what other ideas are floating around in this sea of expectations….

R. One for me was about ten years ago recognising I didn't have to be like all other men, you know like the expectation was that men were macho, the provider, the protector, these sort of expectations that were reinforced by other men, women, and the media in my life…

S. so, these notions that we are expected to live up to in some way shape or form and if we don't, we tend to judge ourselves….so I'm interested in you J, what are some of the expectations that might float   around you guys in terms of your work as a person or as a counsellor or therapist.

J. So I think for me one of these was that there was a responsibility for me to be the one to create change in the session…. maybe an over responsibility…

Returning to the Beginning & Paying it forward

'We shall not cease from Exploring, and the end of all our exploring will be to arrive where we started and know the place for the first time'.

T.S Elliot

In service of nurturing our learning community, further opportunities for the circulation and sharing of practice stories were sought as the year progressed. Once COVID-19 restrictions began to soften, the idea of a coming together for in-person community forums was readily offered and taken up by several course participants, with the understanding that these could be at any stage the last time they could meet as a broader group for the rest of the year. While not all team members were able to be present, there were representatives from each team in attendance. Allowing a diversity of voices and experiences to be shared and expressed.

This meeting was structured as a *definitional ceremony* where a small group of course participants took turns being interviewed regarding a number of questions which scaffolded the collective document developed the year prior. These questions are included again below:

- *What has been the biggest challenge or constraint to their learning and practice throughout the year?*
- *In what ways had they been able to respond to these challenges and constraints and maintain a connection to the ethics of postmodern practice?*
- *What were some of the most important things that they had been taught by the clients with whom they worked?*
- *What did they learn regarding working as a therapeutic team across the year?*
- *What other ideas did they want to share with future course participants and what questions did they have for them?*

Furthermore, there were a series of additional questions utilised to engage in an exploration of relevant learnings and narratives regarding professional identity, ethics, and the relationship these had to participate in ongoing community dialogue. These questions included the following:

- *What do you think your clients and teammates have appreciated most about your contributions across the year?*
- *How have you been able to stay connected to your ethical commitments across the year?*
- *Who do you think would be least surprised that you were able to stay connected to these commitments?*
- *What are the most important things you have learnt about yourself as a result of your participation in the therapeutic team?*
- *What might these learnings make possible in your practice as a therapist in the future?*

This notion that there is a connection between identity, community participation and learning is an interesting one. According to Wenger (1998), when we understand learning as the social and communal construction of knowledge, what also becomes salient is the ongoing negotiation of both individual and collective identity that this entails. More specifically:

'Learning[thus] implies becoming a different person with respect to the possibilities enabled by the systems of relations…. learning is not merely a condition for membership, but is itself an evolving form of membership…Thus identity, knowing and social membership entail one another.'(Lave & Wenger, 1991, p 53).

Taking this a step further, Winslade (2002) and Winslade et al. (2000) outline the notion of counselling training itself being able to be conceptualised as a process of storying professional identity, and through which the process of counselling education becomes the co-authoring of preferred identities. It can then be seen that the educator's responsibility is to offer methods of inquiry and practices of acknowledgement that develop particular and preferred professional subjectivities, as stated below:

'We believe it is possible to structure a context that provides opportunities for the storying of professional identity, and this keeps us, as practitioners of counsellor education, alert to the moments that can arise for story development.' (Winslade, 2002, p 35).

With this in mind, the stories told, circulated, and

witnessed within a learning community and the questions and rituals that scaffold such a process have significant potential to facilitate the construction of particular forms of personal and professional subjectivity. This then raises an important ethical question regarding whether the identities or subjectivities that are produced in course participants include a valuing of and willingness to deconstruct and evaluate the dominant socio-political discourses that are impacting both themselves and those with whom they are in service, and as such, engage in a critical and anti-oppressive approach to therapy. This is the 'critical consciousness' or 'conscientisation' which a truly critical pedagogy aspires to evoke (Waldgave et al., 2003; Freire, 1993).

While this process begins with minimising the supremacy of the educator's voice and assumptions and facilitating contexts for the voices and knowledge's of course participants and those they serve to move to the centre of the dialogue, it also requires an active engagement with other intersections of power, not only that between 'teacher' and 'student'. The following quote from Freire(1993) highlights the issue to which I am referring:

'Discovering himself to be an oppressor may cause considerable anguish, but it does not necessarily lead to solidarity with the oppressed… true solidarity requires fighting at their side to transform the objective reality which has made them beings for the other' p23.

This quote underlines that for therapy or education to be transformative on both an individual and collective level, those discourses regarding gender, race, class, sexual orientation, and other similar sites of oppression which are often present but hidden, need to be made visible. This is one way in which a therapist or educator can remain accountable to those human begins who are the most marginalised in our society. This is outlined clearly by Waldgrave et al. (2003) below:

'we are talking about ways of working that seek to give space to the marginalised, that seek to create the possibility of meaningful, respectful dialogue across power differentials. We are trying to speak the language of partnership…. what we are seeking are partnerships of accountability which facilitate the responsibility of dominant groups to deconstruct their dominance.' p101.

While this practice project did act to engage collaboratively and respectfully with course participants and privilege their knowledges and skills throughout. In the early stages, what was *not* done adequately was the active deconstruction of discourses that maintain the structures of oppression that make themselves present in therapeutic practice and our world. Simultaneously, dialogue regarding power, gender, race, different abilities, and sexuality did make themselves present at times. This needed to have been centred more throughout the process via additional questions that invited course participants to reflect on these aspects of their experience and learning. Subsequently facilitating the production of personal and professional identities that are preferred by course participants and can oil the gears of social change in the world outside of the academy.

So, with this critique in mind, following the final definitional ceremony and community forum outlined above. Each team was asked if they would be interested in developing a collective document for those in the forthcoming year. To this invitation, each group readily agreed and provided several further questions that could more directly address the various intersections of power in their practice experience and invite reflection around this in the next years clinic cohort. These questions included the following:

- *What do you see as the most important thing that you have learned across your clinic year regarding the role of power and privilege in counselling practice?*
- *What is important about this learning in particular, and how might it be sustaining as you move forward into your post-graduation future?*
- *What do you see as the most important thing that you have learned regarding the effects of your own position of power and privilege in the role of Counsellor?*
- *In what ways do you see your gender, Culture, Class or age or ability context as relevant to this position of power and privilege?*
- *In what ways have you learned to respond to this particular position of power and privilege in your work with clients?*
- *How might these learnings make possible both personally and professionally as you move into your post-graduation future?*
- *What is one thing that you wish you had known at the start of your clinic year that you know now?*
- *What Questions do you have for next year's Course participants?*

So, with the theoretical and practice-based examples outlined above, it seems clear that narrative practices developed with therapeutic intent, grounded in rituals of inquiry and dialogue, could also be utilised as a critical pedagogical approach to learning, both in individual and collective contexts. It is here then that I wish to return to the initial purpose of this practice innovation and paper; finding ways to develop connection between disparate counselling students and to foster a context where the diverse experiences of course participants and their clients could be shared and reflected upon, opening space for local and unique client and student knowledges and identities to be storied, critically explored, and the subsequent fostering of a *'supportive generative learning community'* (Gazzola et. al. 2018 p 44).

In conclusion, I would like to offer a quote from Hooks (1994), a prominent academic, theorist and social activist, whose work has invited me to question the view of counselling education as simply a process of training therapists to be successful within the limitations and injustices of the neoliberal marketplace. Additionally, it has also functioned to reminded me of a potentially an even more critical goal as a counselling educator. The practice innovation described in this paper has sought to achieve must produce counselling graduates who can work well within the existing systems, but those who also can question the status quo and courage to change it:

'The Academy is not a paradise, but learning is a place where paradise can be created. The classroom with all its limitations, remains a location of possibility. In that field of possibility, we have the opportunity to labour for freedom, to demand of ourselves and our comrades, and openness of mind and heart that allows us to face reality even as we collectively imagine ways to move beyond boundaries, to transgress. This is education as the practice of freedom.' p207.

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