

Systemic ideas

- We are immersed in communication, in every way we are the communication.
- Every communication is an invitation.
- People are primarily influenced by relationships.
- People mutually influence each other through interaction processes.
- The concept of feedback (and ‘information’) makes better sense than causality.
- People respond in diverse and unpredictable ways.
- Living systems are dynamic and circular (systemic), whilst European languages are ‘linear’.
- The verb ‘to show’ helps us work with interactional processes (unlike the verb ‘to be’).
- An ‘ecological’ model suggests that people (and everything in the world) are mutually influential.
- Descriptions (such as ‘dependency’, ‘depression’, ‘love’ and so on) are communications, not ‘real things’.
- ‘Positively/ logically connoting’ the client, significant others (and their ‘symptoms’) enables clients to feel understood and avoids blame.
- When we meet a client we become inextricably involved in their meaning system.
- The therapist’s ways of viewing the world, our talk and ways of acting powerfully affect the therapeutic conversation and the client.
- Longer intervals between meetings can create change more quickly than more frequent ones and minimise dependency on the therapist.

SOCIAL CONSTRUCTIONIST APPROACHES TO EMOTION AND THE SELF

3

Let the use of words teach you their meaning

Wittgenstein (1953)

Language is the most powerful tool that humans have ever invented
Pearce (1994)

In this chapter I explore some inspirational aspects of systemic social constructionist practice:

- (1) feelings and emotion;
- (2) the ‘self’ and identity;
- and more briefly:
- (3) ‘position’ and our right to speak;
- (4) social, cultural and economic factors.

Boscolo and Cecchin (the post-Milan team) began sharing their rigorous and imaginative ideas with practitioners around the world in the late 1970s and embraced social constructionist ideas.

Around the mid-1980s ‘exciting developments in ethnomet hodology... feminist social science’ and so on ‘burst across the sundry disciplines of science and the humanities... (stirring) enormous controversy’, says Gergen (2001: p. ix). Questioning the ‘positivistic’ paradigm in the social sciences, these ‘social constructionist’ dialogues created very different ways of thinking, talking and acting; and they have now entered the mainstream (p. 1).

Social constructionism suggests that meanings are socially constructed within ordinary conversations. And feelings, emotions, the self and all aspects of our social worlds are culturally and historically constructed. We share some meanings with others of our gender and culture, but there may be other more relevant 'local' meanings/stories that have developed within our particular family or personal experiences.

However, we do not aim to create a universal or 'new foundation for therapy', write Gergen and Warchus (2001), since this is precisely what these approaches challenge. A unitary theory that holds true in every place and every historical context would be 'antithetical to social constructionist dialogues ... (as this would) freeze cultural meaning ... across time, circumstances and context of interpretation' (p. 97). Indeed constructionist thinkers even question the traditional notion that 'theory' precedes action. Cronen (2000), drawing on Wittgenstein, says theory does not so much *guide* what we do, but is '*meaning in use*': theories are actually created within our conversations and actions (15, 25–6). A better way of talking about 'theory' says Shottter (1993) is to use Wittgenstein's idea of a 'toolbox' of concepts, ideas, skills and practices: some of which are useful in one context, some in another context.

Controversy around social constructionism continues to rage. Indeed, there is no agreement about whether to retain the term: Rom Harré (1995) prefers 'discursive psychology', Pearce (1995) describes a range of perspectives, and Bernstein (1991) talks about 'a constellation': '... we can no longer ... claim that there is or can be a final reconciliation ... in which all difference ... and contradiction are reconciled' (p. 8).

However, it is Wittgenstein's (1953) highly influential later work that unites those who question 'foundational', 'essentialist' and 'positivistic' approaches (Gergen 2001; Harré and Gillett 1994; Pearce 1994). Although in the *Tractatus* (1922) he attempted to 'prove' the existence of an underlying essence, Wittgenstein later made a complete about-turn, fiercely challenging this. He spent the rest of his life struggling to articulate the way language (verbal and non-verbal) and common agreements create meanings and 'reality'. Language, he says, plays a vast variety of tricks on us: misleading and bewitching us (Finch 1995, pp. 42–3). Wittgenstein's work shatters any illusion that a therapist can be an expert on what a client *really* means, what is going on 'inside' their 'minds'. Systemic 'constructionist' therapists explore the way language 'bewitches' us and constitutes our realities, by constantly scrutinising our own use of words and non-verbal language.

More importantly, since therapists are afforded a more powerful position in our culture, therapists' own stories and 'theories', ways of feeling, talking

and acting, will have a powerful impact on the way that 'reality' gets constructed within the therapeutic conversation. In other words, the way we talk with clients affects how they come to describe themselves (and others).

Emotions are socially constructed

People generally come to therapy to talk about their feelings, so appreciating the complexities of emotion-talk is crucial. Radical developments in psychological research and anthropological psychology have led to a transformation in the psychology of the emotions say Harré and Gillett (1994: p. 144). Seen in our culture as internal, private, abstract, primitive, and belonging more to women than to men, all these taken-for-granted notions are now disputed.

Cheryl, a 27-year-old white British woman, went to see a GP-based systemic therapist to make sense of 'a minor breakdown'. She had 'gone mad', screaming and shouting at her husband and becoming so hysterical that she could not remember much of what she had said or done.

We are beginning to recognise that feelings and emotions, like any other aspect of our social lives, invoke *local* moral values, which we learn within our family, community, society and culture (Averill 1982, 1992; Lutz 1988; 1996; Harré and Gillett 1994; Harré and Parrott 1996).

Cheryl said she had discovered that her husband had 'cheated' on her with two of their female friends. She was shocked and ready to end the marriage. The therapist explored Cheryl's local stories about how a woman should respond to the discovery of her spouse's infidelity. Also, the family cultural and personal identify stories that had influenced her responses.

Emotion is 'a master cultural category in the West' says Catharine Lutz (1988), in her groundbreaking study of emotions on a South Pacific island. For the past 2000 years in the West we have talked as if emotions have an inherently unchanging nature and an essence: emotions have been 'sought in the supposedly permanent structures of human existence – spleens, souls, genes, human nature and individual psychology'. But Wittgenstein challenged this (as did Rousseau to some extent), showing how emotion is 'constructed primarily by people rather than by nature' (Lutz 1988: pp. 53–4).

Cheryl had begun to search for reasons for her 'hysterical breakdown' in her early life; she wanted to remedy this 'flaw' in her personality.

In our culture we 'usually think of emotion as a physiological or intrapsychic state that happens to us' says Pearce (1994: p. 178). But Averill (1982, 1992), also following Wittgenstein, says that these ideas are embedded within the language that we use in specific situations (what Wittgenstein calls 'language games': contexts in which we use particular words, concepts and so on).

The 'language game' that Cheryl used [an explanation based on personal flaws] shows that she views her emotions as internal, individual and originating in the past.

But emotions are short-lived 'roles' that we 'play'; Averill suggests that they come into being in the interaction between actual or imagined persons in well-structured episodes and in specific situations.

During her 'hysterical outburst', Cheryl's husband had pleaded forgiveness. She had accurately conveyed the full force and strength of her shock and revulsion for his actions.

Using Averill's ideas, Cheryl was 'sending' her husband a clear 'message' that no 'calm rational' discussion would have done. He was left in no doubt about her feelings.

Cheryl had then vacated the marital bed. These communications were inviations to her husband. He had responded by being more considerate and by having individual therapy.

The way we 'do' an emotion is partly related to our gender, culture, ethnicity and so on, partly specific to the context and partly a wish for a particular kind of response. Systemic therapists are curious about the person's ideas: exploring how they came to feel an emotion, and express it in that way.

Emotions are culturally specific

Feelings and emotions invoke local moral values, which we learn within our family, community, society and culture (Averill 1982, 1992; Lutz 1988; 1990, 1996; Harré and Gillett 1994; Harré and Parrott 1996).

In this context [because of Cheryl's preference for personal therapy as a way of making sense of her actions] one idea is that her husband showed his emotional reaction by communicating in a way that fined Cheryl's moral values.

Emotions are not universal, not necessarily transferable across cultures, but are culturally constructed and culturally specific. This is 'not simply a claim that emotions are universal experiences that take on cultural particularity through variation in the situations that come to elicit them' says Lutz (1988: p. 210). She quotes DeRivera: 'it would be incorrect to say that a situation causes an emotion or that an emotion causes a perception of the situation. Rather the person's situation is always interpreted by some emotion' which has been socially constructed within a specific language (p. 47). Emotions are not always culturally interchangeable; for example, one of five kinds of 'anger' Lutz identified on the Pacific island was *song*, a kind of 'justifiable anger'. A person who claims *song* is referring to a violation of a taboo or law, which must be dealt with by the chiefs. It is taken seriously and shows that the speaker is 'someone with a finely tuned and mature sense of island values' (Lutz 1990: pp. 206–7). But she says, unlike 'anger' in the American context, *song* aims to restore peace and well being.

So far we have not explored Cheryl's husband's emotions. But a systemic therapist would try to understand both her and his meanings.

Emotions are historically specific

Emotions are historically specific. Even the meaning of the word 'emotion' has changed in the Western world since the 17th century. From meaning the 'agitated behaviour of a crowd... people running around' without any reference to private individualised feelings, 'it came to mean extravagant individual behaviour of an emotional kind' and expanded to include bodily feelings say Harré and Gillett (1994). By the beginning of the 19th century 'emotions became feminised and sentimentalised. Men had rudimentary emotions or none at all' (p. 153). Of course, they continue, 'we don't know what anyone was feeling in a family fracas of 1860, but we do know the rules of use for the words they would have used to describe it.'

Some emotions, such as *accidie* (a familiar emotion in the 17th century meaning bitter melancholy) have disappeared. Many have altered significantly over time: grief, which seems so deep and central an emotion, has undergone several historical transformations, varies greatly from culture to

culture and may even be absent in some say Stearns and Knapp (1996: 132–50). This demonstrates the degree of plasticity in human emotional nature.

How do we learn to 'do' emotions?

If we accept that emotions are socially, historically and culturally constructed we must explore the specific stories, communication processes and contexts in which our clients have developed their ways of feeling.

Elisabeth, a 43-year-old black woman from St Lucia, came to therapy to 'sort out her life'. She talked rapidly, telling her therapist Helen (a white British woman) that four of her six children had been put into care against her will; relatives were caring for her two youngest children. She now lived alone and was working in an office. Elisabeth showed great distress.

We learn ways of 'doing' emotions: they are not innate. Therefore we are curious about where and in which contexts a person has developed their unique ways of 'doing' particular feelings.

A story emerged in which Elisabeth, trying to make a life far from her own country and family, had been let down by 'everybody' and had tried to bring up her children under severe financial constraints. She felt overwhelmed by a sense of failure, deeply ashamed, angry at the unfairness of life, and talked of being seen as a 'bad mother'. At this point she cried.

Judgements are often made about the 'right' way to bring up a child; in Britain where the nuclear family is still the norm there is an expectation that the main caregiver will be the mother; the father is normally the main provider. These cultural and gender discourses mean that a mother is deemed to be a 'good' or a 'bad' person depending on how she brings up her child, whilst a father's behaviour does not carry the same sanctions.

Helen asked 'What's distressing you so much now?' Elisabeth continued to cry. 'Are you more distressed about the shame, the unfairness, or is it that you are missing your children? What's the strongest feeling?' Helen asked. 'I miss Rory' she sobbed. 'And I feel bad about letting him go.' Elisabeth had consented to her first child being fostered to give him a 'better chance in life' as her circumstances at the time made it difficult for her to cope. 'I'm a bad mother' she reiterated.

Helen knew that historically, because of economic pressures in the West Indies, men were not involved with childrearing as they were forced to seek work away from their wives and children. And it was normal for a grandmother, aunt, or sister to take care of a woman's child. Therefore the idea that a woman was a 'bad mother' because she could not personally care for her children may relate more to the British culture than the West Indian one.

'Who would agree (that you are a "bad mother")?' Helen asked. 'Everybody' Elisabeth said, but could not name anybody. 'Who would not agree?' Helen asked. 'My mother and Auntie Jeannie' Elisabeth said. They would call it 'bad luck' and 'circumstances'.

Emotional feelings and displays, say Harré and Gillett (1994), function as 'psychologically equivalent to statements . . . a kind of "vocabulary" of sign forms' (pp. 145–6).

Helen wondered what 'statement' (intentional or unintentional) Elisabeth's distress was making, and to whom this was a communication. But first she wanted to make sense of Elisabeth's particular story.

When we use an emotion concept this evokes a particular social interaction says Lutz; and this 'is done in particular contexts for particular ends, to negotiate aspects of social reality and to create that reality' (1988: p. 10). This is not to say that a person 'intentionally' sets out to achieve all this when they are expressing an emotion; nor, conversely, are they 'unaware' (unconscious) of their actions. It may simply be because, like the fish that does not notice the water in which it is swimming, we do not notice the many complex issues involved when we are feeling and expressing emotions.

Helen wondered about the accompanying emotions linked to Elisabeth's distress; what stories and scenarios did she connect to when she described herself as a 'bad mother'? Maybe she was demonstrating to the therapist (a white woman) that she did care about her children.

As noted, in Western culture a 'good mother' must under all circumstances continue to take care of her children. However, there may be other influential family, religious or cultural stories.

'What comes to mind when you call yourself a "bad mother"?' Helen asked. Elisabeth cried copiously and could not speak. 'If your tears could speak,

What might they be saying? Helen asked. 'Shame', Elisabeth said. 'I feel ashamed.'

To some extent emotions fulfil 'the social purposes of the person' says Pearce (1994: p. 178). What are the social purposes of Elisabeth's 'shame'? In experiential terms shame, compared to guilt, notes Demos (1996), means 'I am weak, inadequate, inferior' (p. 75). Did 'shame' have these connotations here?

When do you feel most ashamed? Helen asked. Elisabeth was ashamed of the unsuccessful relationships she had had with the various men who had fathered her children. Each one had eventually left and had not supported her or the child. This was useful information, but instead of exploring these relationships (which could have led to even more 'shameful' details) Helen asked 'Is this the only way you feel ashamed?' 'No', Elisabeth said; she felt deeply ashamed of having 'lost control' of the four older children who were now living with other families.

We may make the assumption that 'of course a woman would feel ashamed if she has had to give up her children,' and/or 'of course a woman who has been abandoned many times by her partners would feel ashamed.' But neither may be the case for this *particular* person. We question our taken-for-granted prejudices and explore the specific conversations and relationships in which a person has developed that emotion.

Do you recall when, and how, you first felt ashamed? Helen asked. Elisabeth remembered the first Social Services case conference, about Rory her eldest son, when she had felt 'judged' as being a deficient mother. She also recalled her older sister's scorn at the time [Elisabeth was bitter that her sister had not helped to prevent these difficulties].

Emotions are not abstract entities, say Harré and Gillett (1994), although they are often thought of as such. They are 'actual moments of emotional feelings and displays', moments in which we are 'feeling annoyed' or 'displaying our joy' in particular circumstances in a definite cultural setting (p. 146).

Helen heard the details of the case conference; now she had some idea about how the emotion of 'shame' came to be attached to Rory being fostered (and the idea that Elisabeth was a 'bad mother').

But understanding the connection is a long way from appreciating the force that emotion words have for both the speaker and the listener. The human body has the potential for being 'moved' says Lutz and 'the relationships among the physical, the mental, and the emotional are some of the strongest tangles in our conceptual forest' (Lutz 1988: p. 9).

Now Elisabeth says, more passionately, that she was angry with the 'unfair treatment she had suffered at the hands of Social Services who had taken three of her children away against her will. She becomes upset, talking loudly and rapidly. 'I've got so much shame and anger inside me' Elisabeth says. 'I've got to get it out.'

Lutz says that emotion words are seen in Western language as 'concretized psychophysical states or objectivized things' (Lutz 1988: p. 9). We tend to 'reify' words, to see concepts and words as *labels* for 'things'. An emotion such as 'anger' is therefore seen as an entity, a thing. This leads us to think in terms of quantity: 'how much' anger, shame or love does a person feel? Where do they feel 'it'? (in their body) and so on. Using the word 'it' indicates that an emotion has been reified.

This familiar way of talking about feelings leads us to believe that our emotions reside inside us. But, as Wittgenstein shows over and over, language 'confuses' and 'bewitches' us, which generates numerous problems. Pictures, words and grammar 'force themselves on us' (1953: nos 397, 178, 304). 'As long as there is a verb "to be" that looks at as if it functions in the same way as "to eat" and "to drink" ... as long as we continue to talk of a river of time or an expanse of space, etc. etc., people will keep stumbling over the same puzzling difficulties and find themselves staring at something which no explanation seems capable of clearing up' (1984: 15c).

In therapeutic conversations we can attempt to overcome these confusions by exploring the *unique* context in which the person feels an emotion and uses an emotion word. And if, as Averill says, an emotion is short-lived and is linked to a unique, specific set of circumstances and relationships, it is likely that there will be other contexts in which the person does *not* feel that emotion.

When do you feel least ashamed? Helen asked. Elisabeth surprisingly says that she doesn't feel ashamed about sending the two younger children to live in St Lucia with relatives (to give them a better chance in life). In fact she feels proud of the way she foiled Social Services.

Therapists' own emotions are powerful

As well as exploring these discourses systemic therapists also appreciate that our feelings and emotions profoundly influence the way we listen to, and talk with, our clients.

An experienced therapist, Helen nevertheless felt overwhelmed with the abundance of details, events and people that Elisabeth kept adding to the conversation. She struggled to make sense of it all. Afterwards she felt dissatisfied with her part in the conversation.

Averill (1982, 1992), following Wittgenstein, says that the words and phrases we use when we talk about feelings actually create the way we feel. For example, when we say that we have 'fallen in love' or are 'overcome' by rage or jealousy, we imply that our feelings are not rational or intentional. And this creates reality.

Helen had made an audiotape of the conversation, which she took to supervision. As they listened they heard Elisabeth repeatedly saying that her renewed faith in God was giving her strength.

Our own feelings, emotions and stories which we connect with are crucial in what we 'hear' (and what we miss) when we listen to and talk with our clients.

What was happening to you during the conversation? the supervisor asked. What were you feeling? Helen suddenly realised that she had been annoyed and indeed very angry with Elisabeth for her 'irresponsible behaviour', bringing numerous children into the world by different fathers and not caring for them properly. She was shocked by her strong emotions, judgmental attitude and the fact that she had been unaware of all this during the conversation. It had prevented her hearing the important information about Elisabeth's faith in God.

Now, using a method calling 'mapping personal and professional stories' (Hedges and Lang 1993) her supervisor explored the way that Elisabeth's stories had resonated with Helen's.

As the eldest girl in a large family, Helen's childhood was filled with chores. Her mother had been, to some extent, 'irresponsible' for having such a large

family. When faced with a woman who had produced numerous children without taking adequate care of them, her personal story came to the fore along with powerfully visceral feelings. Helen's strong feeling of outrage had made her miss the small but significant detail that God was giving Elisabeth hope and comfort.

Emotions are discursive acts

Emotion displays are communications and discursive acts say Harré and Gillett (1994: p. 153). But in our society emotions are assumed to be non-rational 'primitive' internal states and bodily reactions to external events. A distinction is typically made between cognition (intellect) and emotion: thoughts versus feelings. But this totally misconstrues the complex role of emotions in our life and the way that bodily reactions, the social context, thoughts, meanings, 'judgements', rules/conventions, 'displays' (action), and language are all involved in the construction of emotion. In particular we must explore the local rules (conventions) of a person's feelings and emotion vocabulary. The therapist's job is to help a client 'deconstruct' their feelings (and those of others in their life), making sense of the social and moral rules/conventions involved.

Alistair, a 36-year-old white man from Scotland, told Tom, his therapist, that he became inexplicably angry in certain situations. He was always sorry afterwards. The most recent time, he said was when he had smashed his fist into the wall whilst doing some DIY. 'A red mist came down; I just snapped' he said.

The 'rules' (conventions) for the correct use of an emotion, Harré and Gillett (1994: pp. 149–50) say, fall naturally into four groups:

- (1) felt bodily disturbance;
- (2) characteristic display (how we 'do' the emotion);
- (3) the word we choose to describe the emotion;
- (4) the social act (communication).

(1) Having a strong bodily reaction when we feel an emotion gives it powerful emotional force. However, things are more complex: not all bodily feelings are called an emotion: neither feeling, nor displaying, tiredness (groaning, stretching and saying 'I'm going to bed') is seen as an emotion (Harré and Gillett 1994: p. 146). Conversely, some

emotions have a very weak bodily component. Hope, says Averill (1996) seems to lack the bodily symptoms typical of emotions. Yet, 'like anger and love, it is . . . believed to alter one's thinking and behaviour, to be out of one's control, to serve as a source of energy and sustenance, and to be part of human nature' (Harré and Parrott 1996: p. 3).

Tom explored Alistair's 'felt bodily disturbance': 'What was happening to you in the moment before you saw the 'red mist'? I felt a kind of buzzing in my head, a kind of jangly irritated feeling . . . I wanted to run away' Tom says.

(2) The 'rules' (conventions) for a display of an emotion depend on the context. When we are angry in a church service or a committee meeting, grinding our teeth may have to suffice. In other contexts the rules allow us to be more expressive. So therapists must explore the local rules/conventions involved.

In the home that Alistair shared with his partner Marion the 'rules' allowed him to 'display' his anger by throwing down the hammer, hitting the wall, swearing loudly and exiting the room.

(3) The choice of an emotion word is a judgement about what the feeling, disturbance or display expresses.

Alistair described what feelings his actions expressed, he said he was 'pissed off'. This choice of emotion word/phrase describes his bodily disturbance and display: frustration/anger.

(4) The emotion display (what is said or done) performs a social act.

Alistair's actions 'tell' Marion that he is not happy with the work of putting, pounded the wall up the shelves.

'Anger' in our society is seen as a natural event, something that happens to us, not something that we make a choice to 'do'. This allows diminished responsibility and this idea is framed in the language we use.

Alistair had felt the 'red mist' come over him. He threw down the hammer, punched the wall and stormed out of the room swearing. He 'had to' get out. All his actions can be excused if he is seen as being 'overcome' by anger, not totally responsible for his actions.

However, 'we "do" emotions, such as anger, in recognisable "episodes" that have beginnings, middles and ends which are learned, not innate . . . different among cultures, and fulfill the social purposes of the angry person with suspicious regularity' says Pearce (1994: p. 178).

Tom explored the episode with Alistair: as he threw down the hammer the word 'spazzer' came to mind (an insult meaning spastic).

When we are angry we need others to help us 'enact' it (whether they are present or imaginary). And these are 'initial acts in a sequence of acts . . . held together by the conventions and rules of our society' (Harré and Gillett 1994: p. 154).

Where did this insult come from? Fellow schoolboys on the football field at school yelled it at him, when he had played badly. When the 'simple' job of putting up some shelves turned into a nightmare, Alistair connected to the frustrated, inept feeling he had had as a boy.

Instead of viewing names, concepts, words and feelings as having some kind of metaphysical essence and searching for conceptual similarities (in this case Alistair's 'anger') Wittgenstein (1953) offers the liberating idea of family resemblances.

Tom noticed that Alistair had seen/felt a 'family resemblance' between being on the football field and how he felt when putting up the shelves, exemplified by the word 'spazzer'.

A family resemblance is more like a thread, made by twisting fibre on fibre. 'And the strength of the thread does not reside in the fact that some one fibre runs through its whole length, but in the overlapping of many fibres' (Wittgenstein 1953: no. 67).

Tom, the therapist, may have also had an experience of frustration and 'anger', but this does not mean that the concept 'anger' has an essence that is shared by himself and Alistair.

We can easily see what Wittgenstein meant by 'family resemblances' says Finch (1995) by looking at the famous painting of six or seven members of the same family by Hogarth (one of Wittgenstein's favourite painters); 'we do not see a common feature in the faces, but there is nevertheless a marked . . . similarity between them all' (p. 38).

Alistair may feel the same way he did when he was a boy but this is not the same 'thing'.

Sometimes a person thinks they have encountered the same 'thing' (such as 'being bullied' or 'falling in love') but when we explore each 'fibre' there are often as many differences as there are similarities between the one event and the other.

Alistair now recalled the way that his father valued prowess in sports. As a boy he wanted to live up to these expectations, but he always failed.

Therapists ask questions that help identify who else is involved in the communication (present or imaginary), and similarities and differences between that episode and previous ones.

After the match his father would often make a disparaging remark. As a rather bookish boy there seemed to be no way that Alistair could please him. This was very different from the current episode of putting up shelves although it felt the same.

What we tend to forget is the enormous amount of 'stage-setting' that occurs in everyday life: we are born into a pre-existing culture with its rules and conventions for talking and acting. Whenever we speak we are responding to an enormously rich set of stories says Pearce (1994: p. 250). Every utterance contains traces of meaning from other utterances spoken in other social contexts, and is 'a response to a preceding utterance ... (it) refutes, affirms, supplements, and relies upon the others' (Balktin 1986: p. 91). And all this is usually invisible to us because we take it so much for granted. When someone says that they 'had to' behave as they did, this is a very good indication that they are following or 'obeying' a particular 'rule'.

Alistair was guided by rules/conventions from his father and familiar in the Scottish working-class culture where he grew up) that a man must be sporty and practical.

We make sense of the emotions the person experiences by exploring their local conventions (the 'rules'), values and moral orders (in family, community and culture).

These 'rules' also allowed Alistair to express his frustration in a specific way. Asking what certain people would say about this helps identify his local conventions and moral orders.

In Western individualist societies, Averill (1982) says, the usual function of anger is seen as readjusting the terms of social relationship.

By expressing his feelings in a particular way Alistair showed Marion how he was feeling: he had wanted to make her proud of his abilities (as he had wanted to please his father) but feeling frustrated and inept with his lack of manual dexterity had reminded him of earlier lacks. Alistair's display of anger could be seen as a plea for sympathy from Marion (or maybe he was communicating something similar to his father, although he is not present?).

The meaning and expression of the emotion of 'anger' has altered over the past three centuries say Stearns and Stearns (1988 in Harré and Parrott 1996). In seventeenth-century England and Massachusetts bodily sensations and private feelings were considered irrelevant in the conception of anger. The *display* of anger was purely an expression of judgement of what someone else had done: expressing outrage and engaging in reprimand.

From another direction altogether, and counterintuitively, Laird and Apostoleris (1996 in Harré and Parrott 1996) describe some of the 'literally hundreds' of studies that show that when people are induced to act as if they felt something, they do, indeed, feel it (pp. 285–301). In a fascinating study Strack et al. (1988 in Harré and Parrott 1996) induced people to adopt facial expressions by asking them to hold a pen in their mouth, either in a way that produced something like a smile or an expression more like disgust. Participants reported feelings that corresponded to the induced emotion. Zajonc et al. (1989) 'asked participants to produce vowel sounds (including the 'ee' of cheese) and observed matching changes in their feelings. Feelings of confidence and pride are affected by posture say Flack et al. (1996 in Harré and Parrott 1996). If people act in a particular way, they will feel the corresponding emotion (pp. 288–9).

The social constructed self

'Beliefs in the individual mind . . . form the cornerstone of . . . the Western tradition' Gergen (1999) says, and 'To raise serious questions about the self is to send shock waves into every corner of cultural life' (p. 13). Social constructionism challenges the Western idea of an individual self that resides inside us. Instead, our selves, our identities, are created within specific historical and cultural discourse-communities.

Kate, a 23-year-old white British woman, went to see a therapist saying that she was 'not herself'. She used to be sociable, energetic and hard-working. Now she wanted to be alone, did not feel like going out, felt fired and sometimes felt tearful. 'I'm not me' she said.

The way we describe the self is a 'modern conception . . . "invented" in the 18th century' writes Pearce (1994: p. 256). 'Our "Selves" are "given" to us by our society . . . we are expected to act within a cluster of rights and responsibilities deriving from our parents' position within the economic structure, the community in which we live' (p. 250). Our gender, colour, place of birth, ethnicity, physical abilities and so on, are all created within patterns of conversations, which confer identity on us. These social processes are so powerful that they are usually invisible.

Kate said that she had had a car accident a few months ago but this did not explain her personality changes: 'I should be over it by now.'

Pearce (1994) says that this is 'a far more complicated and fateful process than it seems . . . Patterns of conversations with one's parents, brothers, sisters, teachers and classmates and government officials produce the "self" that we know ourselves to be' (pp. 250–1).

Kate's family and social group stories involved everybody working very hard; until the accident Kate had had two jobs including helping in the family business. A 'normal' fully functioning person was busy, active and gregarious, which also fitted their middle-class values. A 'self-indulgent' (lazy) person was 'not normal'.

Unlike the Western concept of the self as distinct from others in the community, in 'traditional non-Western cultures . . . the self is not differentiated from the nexus of social relationships in which the individual participates' (Gudykunst and Ting-Toomey 1988: p. 82). Even within Europe the term 'self' is used in many different ways: in Spanish it is difficult to express the English idea of self, whilst in French 'moi-même' does not exactly mean 'self' with the Cartesian implication of an inner entity (Mühlhauser and Harré 1991).

Kate was relieved to be allowed 'permission' and time to heal from the accident. She developed a different story: she could still be 'herself' even when she was not relentlessly productive. And it enabled her to be more empathetic with less energetic friends.

Gergen (1991) describes three different discourses or languages of the self in our culture:

- romantic;
- modernist;
- post-modern.

The romantic vocabulary talks of 'depth', 'mystery' and 'passion', originating in the 18th and 19th centuries as a protest against the reduction of human experience to rationality. 'For many, the loss of such a vocabulary would essentially be the collapse of anything meaningful in life. If love . . . intrinsic worth, creative inspiration . . . and passionate expression were all scratched from our vocabularies, life for many would be a pallid affair indeed' (Gergen 1991: p. 27).

Modernist languages view the self as a fixed and knowable entity: finding one's 'true self', valuing autonomy, rationality, and reliability. A healthy person aims to be 'self-directing', 'trustworthy', 'consistent', 'genuine' . . . 'principled' not craven, stable not wavering (Gergen 1991: p. 44).

However, in post-modern languages huge social and intellectual changes have questioned any ability to discover a single vocabulary of the self: we 'exist in a state of continuous construction and reconstruction' (Gergen 1991: pp. 5–6). Constructionism creates a new language, says Pearce (1994), a 'bricolage', 'picking up bits and pieces of leftover language and integrating them into a new language' (p. 264) which Stout (1988: p. 75) says all creativity involves.

A sense of one's personal individuality, Harré and Gillett (1994) write, involves having 'a sense of a location in space, literally a point of view'.

Studying the use of first and second-person pronouns, they say, can help us understand how the self is produced discursively, in conversation. But we must be wary of seeing English as the standard from which other languages deviate, particularly since English has a paucity of pronouns compared, for example, to Japanese. In Japan two people in a conversation can refer to 'something like 260 different social relations using pronouns and verb inflections' (pp. 105–6). This leads to a much richer idea of the 'self' from the one 'I' in our culture that stands for one's body, physical location, moral obligations, autobiography and so on.

The self, in cultures like ours, 'influenced by the Judeo-Christian moral system . . . means having a sense of myself as a moral agent, located in a network of mutual obligations and commitments' (Harré and Gillett 1994: pp. 103–4). The 'sense that one is agent of one's actions and responsible to others for them, is something that we acquire through learning the language with less energetic friends.

guage and cultural conventions' (p. 111). When we act, we often refer to some moral reason, which includes an explanation based on our identity (Cronen et al. 1979).

If I were in the pub with a group of friends I might think 'I must buy a round of drinks when it is my turn' (because 'a person like me' could not act otherwise).

Vygotsky (1986 in Shottter 1995) says that learning manual skills is just as necessary for acquiring a sense of self as the learning of verbal skills.

If, after taking people's orders, I go to the bar, order the drinks, pay for them and bring them back, I am developing my 'self' through a combination of 'moral' reason', language skills and manual skills.

'Position' and one's right to speak

There are important differences between the rights (and duties) that different people have in the world, particularly their ability to enter a conversation.

Jenny, a young black social worker, may have fewer rights to give her opinion at a child protection case conference than the white male psychiatrist or white female paediatrician.

The 'position' we occupy in the world creates our sense of self and creates certain emotions.

After this had happened several times Jenny came to describe herself as a 'hard-working but unimportant' professional; she may feel undervalued and experience all the emotions attached to that.

A 'position' is a set of rights, duties, and obligations particularly with respect to what one may say in a certain context. The concept of 'positioning' was first devised by Holloway (1984) say Harré and Gillett (1994: pp. 34–5). The different positions that we occupy in society offer certain rights and duties, and can describe what is happening in certain contexts without having to refer to an individual's intrapsychic personality traits.

In mixed groups Holloway found that women say less than men: women in mixed groups are 'positioned' as having fewer rights than men to offer

their views or criticise a male speaker. However, in same-sex groups women talk more than men in all-male groups do. An adult is usually positioned as having more rights to speak than a child does. In a work setting a professional is positioned as having more rights than a student. People from non-dominant racial and ethnic groups are generally permitted fewer rights than those who are from the dominant culture.

Social and economic factors

Social factors, such as our accents, access to specialist knowledge (such as medical languages) and so on can affect how others describe us and what discourses and communities we can join. Also, since problem-saturated stories are nested in social, cultural, economic and gender assumptions, systemic therapists must be thoroughly conversant with the social and historical biases inherent in certain theories. In child development certain ideas that led to social engineering practices, such as separating Maori children from their parents in order to give them a 'better future', were once seen as 'common sense' but have since been reversed and reviled.

Socio-economic imbalances and the 'crushing effects of poverty and stress' affect the ways in which people live and what opportunities they have write Dallos and Draper (2000: 94). Sapolsky (1998) says that poorer people have the most stressors and a disproportionate share of disease regardless of gender or race (p. 308). And, as we have seen, these affect a person's sense of self and their emotions. An excellent edition of the systematic journal *Human Systems* (1994) devoted entirely to poverty, shows ways in which we can confront these issues. Imelda McCarthy urges us to question the 'normative practice base' which used the male experience of the nuclear family as a principal referent (1994: 23). Reflecting on their own practice Waldegrave and Tamasese (1994: 194), from the 'Just Therapy' group in New Zealand, critique the way they had been treating 'events like unemployment, bad housing or homelessness, racist or sexist experiences . . . as though they were symptoms of family dysfunction'. They then recognised that these were 'symptoms of poverty, of unjust economic planning' and so on.

It is possible to work both with the social effects of economic and other inequalities and a client's relationship says Jones (1994: 169–83). This is not a case of either working with personal and interactional issues or doing something at a broader cultural and political level, but more a truly social constructionist stance of both/and: our therapeutic conversations are political ones.

Feelings and emotions

- are culturally and historically specific;
- relate to specific gender, class, family, religious and personal identity stories;
- are co-constructed through communication processes and language (verbal and non-verbal);
- are social 'roles' that we enact in brief 'episodes' within specific contexts;
- are statements: communications to specific people (whether present or absent);
- usually involve a bodily feeling, a moral 'judgement', a description and a communication;
- are connected to our position in the world;
- can be induced by a particular facial expression or body posture.

The self is

- a social, cultural and historical construction;
- co-constructed within ongoing conversations;
- not necessarily a separate individual (this is a Western construction);
- co-constructed within cultural, economic (and other) contexts;
- developed through both manual and verbal skills;
- co-constructed through particular pronoun use.

Social and economic factors and our position in society

- grant certain people rights (to speak, act and so on);
- allow, or deny, access to discourses and communities;
- affect the way others 'hear', 'see' and describe us;
- powerfully affect a person's physiological health and well being.