CONFERENCING WHEN THERAPY IS STUCK

FINN TSCHUDI
SISSEL REICHELT
Institute of Psychology, University of Oslo

Retributive approaches to confronting harmful acts like suspected sexual abuse (SSA) have often been the norm in contemporary Western cultures. Alternative restorative approaches partly inspired by indigenous traditions are growing. Conferencing, one of these restorative approaches, is the focus of our conceptual exploration in this paper. We concentrate on cases of how conferencing may be useful when traditional therapeutic approaches fail. In conferencing, it is typically the case that the person responsible for harmful acts acknowledges this. For SSA, however, we argue that the focus should rather be on the victim's suffering and alleviation of her/his harm, especially for the children. Martin Buber's I-It vs. I-Thou conceptual ideas serve as useful constructs for describing how conferencing invites a holistic approach in difficult and highly conflictual situations where conventional retributive and therapeutic approaches may fail.

We live in an age increasingly committed to cookbook approaches, whether in the field of therapy, in handling conflicts, or in regulating institutions (Braithwaite, 2002). There is an underlying belief—characteristic of modernity—that scientific or expert guidance is a boon in all areas of life and that experts must construct and apply the governing rules. Contrary to this, we value the postmodern emphasis that human problems are messy and defy standard recipes. Within this framework, we want to emphasize the danger of experts disempowering the ones they set out to help. Conflicts—especially when negative emotions prevail—can of course lead to harm, but they can also spur growth. Increasing reliance on experts to deal with conflicts can thus be seen as “conflict theft,” to use Christie’s (1977) felicitous phrase. The ones primarily involved are deprived of the possibilities of handling the conflicts themselves. Since there are no standard solutions to be found, empathic understanding can help construct ways of going forward. We draw here on Buber’s (1958) celebrated account of I-Thou.

Dialogue is, however, next to impossible when strong negative emotions reign and it is thus important to help set the stage for a transformation of the emotional climate to foster cooperation and construction of benign narratives. We concentrate here on a conferencing approach that epitomizes the postmodern values of empowerment and dialogue within a self-guided (not scientifically guided) society (Moore & McDonald, 2002). Conferencing is prominent within the restorative tradition. In this article, we take a closer look at how conferencing can be relevant to working with families where there is suspicion of sexual abuse. In the restorative tradition, the adversarial procedure of prosecutor and counsel for the defense is replaced by a meeting (conference) where the aim is not to fix guilt and mete out “just deserts” but—as far as possible—repair harm that has occurred and prevent further harm.

Why should restorative dialogue be therapeutic? While therapy is not part of the restorative agenda, its aim is to construct new narratives that point to collaborative endeavors instead of staying trapped in strong negative emotions. Perhaps this holds for many forms of therapy. Consider Elster’s (1983) analysis of “states that are essential by-products” (good sleep is not a consequence of deliberate activity but a by-product of a healthy way of living).

The first author, Finn Tschudi, has recently developed a preference for a restorative tradition in contrast to the traditional retributive legal tradition, (cf., Neimeyer & Tschudi, 2003). The second author, Sissel Reichelt, has a longstanding commitment to family therapy and emphasizes the primacy of ongoing conversations with others—to experience themselves and each other as human—focusing on relations, and on opening closed conversations to help families to find their own solutions (Reichelt & Christensen, 1990; Reichelt & Sveaass, 2001). The authors have, through several decades as dialogue partners, experienced the pleasure and challenges of exchanging ideas from different fields and feel that our respective work points to a convergence.

FOCAL TOPIC: SUSPICION OF SEXUAL ABUSE

In recent years, Sissel has worked in a project particularly focusing on mothers suspecting incest in their family (Reichelt, Tjersland, & Gulbrandsen, 2002; Reichelt, Gulbrandsen, Jensen, Mossige, & Tjersland, 2003). The person suspecting incest (usually the mother) approached us directly, mostly on the advice of

---

1 The FOBIC-project: Sexua1 abuse in families: Exploration of ways to react and trying out suitable interventions. Treatment an I research team: Wenke Gulbrandsen, Tine K. Jensen, Svein Mossige, Sissel Reichelt, Odd Arne Tjersland (project leader).
other helping professionals at Child Guidance Clinics and Child Protection Services. Previous research and clinical work had heightened our sensitivity to the dilemmas and plight of mothers in this situation. We saw how they were trapped in inconsistent and conflicting demands, and how relations within families, and between families and helping systems, were deteriorating. We attributed some of the intensity of this turmoil to a quest for definite answers and deficiencies of legal systems, in a situation where definite answers (as demanded by legal systems) rarely were achieved.

Although we worked within a restorative paradigm, and tried to avoid public and legal procedures, a high percentage of the families we worked with (altogether 31) notified, or were reported to, the Child Protective Services. In eight of these families their cases were closed. Ten cases were investigated in the judicial system, and eight of these were closed. In two of these cases a lawsuit was carried against the father. The one father who admitted to abuse was convicted, and the other is still in the judicial process. Four families were in civil procedures about custody. In all of these families the fathers were suspected of abuse. In two of them, the father received the custody of the child, and in two he was permitted visiting privileges without restrictions. These findings are in line with public statistics, and clearly demonstrate the impotence of the protective services and legal systems in constructing adequate solutions for these families (Reichelt et al., 2003). One conclusion from such findings is that something beyond collaborative therapy may be called for to avoid legal procedures. The prospect of conferencing in such cases poses challenging questions both for family therapy and for conferencing. On the one hand: How can conferencing be a fruitful alternative approach to family therapy, particularly in families that move towards legal procedures? On the other hand, are there special problems in SSA that call for a more flexible approach than what is usual in scripts for conferencing? Hopefully we provide challenges for each of the traditions we represent. Our guiding perspective is, as far as possible, to provide an opening for a process-oriented, collaborative approach, and to avoid the pitfalls of adversarial approaches. This article suggests therapists consider conferencing as a resource when in stuck situations, something we are only beginning to research in circumstances of SSA.

RETRIBUTIVE AND RESTORATIVE PARADIGMS

The retributive paradigm is epitomized by procedures in criminal law. A crime has taken place. The state is seen as the basic target of the crime, and is vested with the responsibility of punishing (or in special cases, mainly when youngsters are involved, reforming the offender. When there is a clear victim—as in assaults, theft or destruction of personal property—the task of the victim is to provide evidence about the crime, but not to suggest what should happen to the offender. One reason for depriving the victim of an active role here is that the victims are thought to be highly vindictive and thus might interfere with “objective justice.” As further discussed in Neimeyer & Tschudi (2003), one perspective on cases where victims express a wish for strict punishment is that this fits a logical position within the dominant legal narrative of society. This type of narrative furnishes a discourse that all too readily leads to a need for some form of outside adjudication—and so the parties involved don’t see the issue as one that can be resolved within their dialogue.

Alternative positions can be brought forth through considering alternative possibilities in a context different from the typical legal setting. Christie (1977) argued that the state—represented by lawyers—“steals” conflicts between offenders-victims, and people close to these parties. The implication is that conflicts may hold intrinsic value for the participants, but professionals appropriate this value, especially where lawyers become “conflict thieves.” In a related fashion, professionals in the health sector may also contribute by labelling some participants in the conflicts as having illnesses, thus placing them under their jurisdiction. While lawyers and other professionals get more power, those falling within their jurisdiction risk being disempowered. Such negative spirals disempower people as they increasingly rely on more experts, prompting further atrophy of their capacities for self-healing, and healing within local communities. Christie can be seen to generalize Illich’s (1975) scathing indictment of modern medicine to the area of conflicts. Where Illich’s concern is the “expropriation of health,” Christie’s concern is with the “expropriation of conflicts,” thus recommending large public meetings where those primarily involved took responsibility for settling their disputes.

The term restorative justice is now used as an umbrella term for a large variety of such approaches. Restorative justice is a process whereby all the parties with a stake in a particular offense come together to resolve collectively how to deal with the aftermath of the offense and its implications for the future (McCold, 1999, p. 1). Inspiration from indigenous Maori traditions in New Zealand has been particularly influential. Current law states that the extended family should be allowed to have their own procedures as an alternative to legal proceedings or child welfare recommendations (Government of New Zealand, 1989). This inspired McDonald, Moore and O’Connell to start the first Australian conferencing program in Wagga Wagga in 1991. McCold (1999) has reviewed restorative programs, including Zehr’s (1990) influential Mennonite-inspired “victim offender reconciliation program,” and circle models based on First Nation approaches in the U.S. and Canada. Braithwaite (2002), in a review of the restorative tradition, suggests the restorative tradition as a context for broader reforms of all types of regulative activities. Koss & Bachar (2003) have found the restorative, communitarian approach to justice superior to the retributive, adversarial approach for domestic violence. After critically reviewing the retributive approach, Koss (2000) concluded that “as practitioners of psychological science and practice we can no longer support justice responses that the tools of our profession have revealed to be damaging and ineffective” (p. 1339).
TYPICAL CONFERENCING PROCEDURE

In a typical conference, a facilitator is responsible for preparing the participants for the conference by explaining what will happen: exploring what everyone thinks and feels about the concern and how this has affected them, and talking about what can be done to make things better. Transparency is a key consideration; there is no hidden agenda. During the conference the participants are seated in a circle with no intervening tables. If it is recognized that a specific person is responsible for harm, that person will usually be asked to start by describing the acts and what s/he believes are the thoughts and feelings of those harmed, thus acknowledging having caused them harm. Each person experiencing harm describes her/his experience. The persons close to the harmed person(s) express their thoughts and feelings in the wake of the harm. Finally, persons close to the one instigating harm will describe their reactions to the situation. In an ideal conference, they will denounce the acts causing harm, but state positive aspects of the person doing the act (condemning the sin but not the sinner). The facilitator will then ask if the instigator wants to say something to the one(s) being harmed, thus setting the stage for a possible apology and forgiveness—reconciliation.

Regardless of whether such reconciliation takes place, the conference will turn to what can be done to repair harm and prevent future harm. At the end of the conference, the facilitator drafts an agreement outlining further steps and key participants sign it. The conference ends with light refreshments, and spontaneous social mingling—which occasionally includes hugs and tears.

The primary task of the facilitator is to make sure that everyone gets a chance to say what s/he thinks and feels about the situation and to get suggestions deliberated. Furthermore, no one gets to dominate the conference—this is the principle of non-tyranny. The facilitator is careful not to make ameliorative suggestions, to avoid becoming another “conflict thief,” but to leave the construction and evaluation of solutions to the participants. They own the conflict and it is their privilege and responsibility to find solutions (see Neimeyer & Tschudi, 2003, and Moore & McDonald, 2000, for further details).

CONFERRING, COLLECTIVE VULNERABILITY, AND BUBER’S I-THOU

Roughly speaking there are three main phases (which we will label I-It relations, collective vulnerability, and I-Thou relations) in a conference. In the first part, everyone gets to tell their story about the situation and strong negative emotions, such as anger, hate and fear are expressed. When everyone has had their say and these feelings have been vented, there is usually a change to milder negative emotions such as sadness and shame.

Conferencing When Stuck

Regardless of whether reconciliation between contesting partners occurs, there may be a turning point referred to as “collective vulnerability.” While we have been unable to research this hypothesis in circumstances of SSA, we have observed this development in other emotionally charged circumstances where conferencing was used, such as a conference in the aftermath of a road fatality (cf. Neimeyer & Tschudi, 2003). In that case, Jack’s daughter was fatally struck by a car that veered off the road with a drunken driver at the wheel. He was consumed by anger and an intense wish that the driver, Jill, a 20-year-old woman, should experience pain similar to his daughter’s. After everyone present described her or his reaction to the fatal incident, a pivotal incident occurred when Jack passed around a picture of the accident scene. There were tears as the picture made its silent way around the circle. This had the effect of uniting the circle into one community of people. The moment reminded everyone of how fragile and short our time on the planet is, a moment we refer to as collective vulnerability. We see this feature as critical to conferencing when there is suspected sexual abuse. The next phase was marked by collaboration and a preliminary agreement that Jack and Jill should work together on a project to prevent drunk driving.

Drawing on Martin Buber’s (1958) celebrated “I and Thou,” these three phases can be alternately said to correspond to:

<table>
<thead>
<tr>
<th>negative emotions (e.g., Jack’s feelings toward Jill)</th>
<th>I-It</th>
</tr>
</thead>
<tbody>
<tr>
<td>collective vulnerability (after the picture was shown)</td>
<td>turning point to I-Thou</td>
</tr>
<tr>
<td>positive emotions, collaboration (Jill preventing drunk driving)</td>
<td>I-Thou</td>
</tr>
</tbody>
</table>

According to Buber, the basic distinction is that I-Thou signifies “solidarity of connection,” (p. 85). “I-Thou can only be spoken with the whole being.” (p. 15), and “establishes the world of relation” (p. 18). This can be contrasted with, “I-It [is] the word of separation” (p. 39), a “world of objects” (p. 26). In an I-Thou relationship, persons are sensitive to the other’s whole being, whereas at I-It relation is characterized by relating to a segment or perceived aspect of the other.

Scheff (1975) has forcibly pointed out that a diagnostic culture easily leads to I-It relations, where an other is seen as an object, in a means-end frame, where thereby their full humanity is lost from view. He further pointed out that even more pernicious consequences could be found by classifying other persons as “enemies, strangers and deviants. Such individuals may be used, segregated, or slaughtered without compunction, for the members of the collective often do not personify them as human beings like themselves” (p. 78).

From this perspective we see a similar idea when Christie (1977) described not only “professional conflict thieves” but also “structural thieves” for whom “segmentation” according to personal aspects like age, character traits, sex, etc. leads into a depersonalization of social life. Individuals are to a smaller extent linked to
each other in close social networks. ... If a conflict is created we are less able to cope with this situation. Not only are professionals there, willing and able to take the conflict away, but we are also more willing to give it away (pp. 5–6).

Segmentation is further exacerbated by adversarial legal procedures where a focus on such personal aspects narrowly and negatively specifies what is relevant to resolving conflict. In contrast, Braithwaite (2002, p. 241) emphasizes that conferencing can broaden the issues, thus (partly) setting the stage for I-Thou. The case of Jack and Jill exemplified this: a collectively shared moment of vulnerability was facilitated where there had been an emotionally charged relational impasse, such as those common in relationships where there is SSA.

Some persons’ behaviors may serve to epitomize an I-Thou attitude, others an I-It attitude. Buber uses Goethe and Socrates to illustrate the former, and Napoleon the latter (pp. 89–91). It is important to underline that “There are not two kinds of man, but two poles of humanity” (p. 88). People’s positions with respect to these poles may shift from I-Thou to I-It, moment by moment. Or, more often, they may take up positions between the extreme I-It dehumanization Scheff notes above, to a never fully realized I-Thou relationship (see also Tschudi & Rommetveit, 1982). The implication we draw from this for conferencing is that gains made after a collective vulnerability turning point (CVTP) must be carefully nurtured.

In a recent conference we witnessed an elderly couple who had been subjected to prolonged harassment by several youngsters. They clearly expressed anguish at not having been able to see the offenders as more than frightening shapes, beings without faces. We considered it a great step forward that the agreement stated that the couple and the offenders should acknowledge each other’s presence by a mutual greeting, although the couple was quite clear that they did not want the offenders to undo harm by repairing some of the inflicted physical damage. This was a small, yet significant step in a humanizing, I-Thou direction we continued to play a role in facilitating, much like how Jack started from an extremely one-sided view of Jill, “a no good individual,” but came to see her as a person worthy of concern.

A RELATED MODEL: SEIKKULA AND NETWORK MEETINGS

Seikkula and his co-workers in Northern Finland pioneered a unique approach in responding to psychotic people, labelled “open dialogue,” that builds on (Seikkula et al., 2001a; 2001b; Seikkula, 1996) the earlier network approach of Speck & Attnave (1973). The common ground between the restorative tradition and Seikkula’s project is in trusting that the power to construct viable alternatives resides in local communities, especially given that the problems faced are complex with no ready-made solutions. Thus, creativity is called for, and fostering dialogue and I-Thou relations can be seen as a “midwife” service. Within a modern, scientifically guided society, however, experts do not need dialogue but strive for obedience in following their prescriptions.

As in conferencing, everyone concerned has a chance to participate in deciding what should be done. The client participates, together with family and friends, and professionals from relevant agencies. Furthermore, the team responsible for convening the meeting is responsible for the process, but not for the content of the process. After opening ceremonies and various attempts to find solutions there is usually what Seikkula calls a “phase of depression” marked by a common feeling of hopelessness—probably a numbing combination of distress and shame. This phase is usually especially difficult for the professionals who have been taught that for every seemingly helpless situation there must be a specific solution. However, this hopelessness usually gives rise to feelings of connection, and a realization that everyone is important for a solution to emerge. This highlights the difference between the modern credo that there exists a rational and technical solution to everything, and the postmodern theme that human experience is not some knowable machine we can manipulate like technicians or engineers.

The “phase of depression” seems remarkably similar to collective vulnerability. The description of the development of professionals brings to mind that I-It is characterized by means-end thinking, which may be stock in trade for professionals, and contrary to Seikkula’s key concept, “open dialogue.” Hopelessness may signal (re)emergence of I-Thou relations.

THERAPEUTIC FAILURES: CONFERENCING AS A POSSIBLE WAY OUT

In much of the treatment literature (e.g., Steinberg & Fraenkel, 2001), it seems to be taken for granted that it is possible to arrive at a clarification as to whether sexual abuse in families really has happened or not. In our experience, however, definite conclusions are rarely arrived at. The typical case—which we will concentrate on—occurs where the mother suspects that the father has abused one or more children. During the therapeutic work with the 31 families where sexual abuse was suspected, two-thirds of the families developed a narrative that at least the mothers could live with, whether this narrative implied that the suspect was innocent or guilty. In these families most of the men, still considered guilty by the mother, stuck to their narratives of innocence. In the rest of the families, the uncertainty was just as strong when therapy was terminated as when we met them. The majority of the families managed to find more or less satisfying ways to go on with life, but several families remained stuck in different descriptions of reality that impaired their quality of life and particularly affected the children.

We worked within a restorative paradigm, and shared much of the philosophy of conferencing. Our approach was particularly inspired by ideas from social
constructionism (Anderson & Goolishian, 1988; Anderson, 1997; Andersen, 1987, 1992). Within a collaborative frame we aimed at establishing dialogues with the person who suspected (usually mother), expanding the dialogues by including the children, the suspect, other family members and other helping instances. The therapists worked from a not-knowing position, facilitating an open expression of thoughts and feelings rather than focusing on a conclusive answer. Two therapists always worked together, one of them from a reflecting position behind the mirror. The two therapists exchanged their thoughts in the therapy room while the family members listened, focusing on expanding perspectives and keeping the conversation going, rather than closing it off through voicing strong opinions. In this process the question of “has it happened or not” was of course unavoidable, but often the persons involved began to listen to each other and a main theme — assuring that the child was protected — became a concern for everybody involved, including the suspect.

In working with these families, we met an initial strong urge to find the right answer. The mothers were saddled by suspicions and doubts, and thought that only a clear answer relating to the question of whether abuse had occurred or not could help them to go on with life. We tried to address their concerns, and sometimes spent several sessions with the mothers and children around the quest for truth, but we rarely arrived at clear answers. Most suspects denied our interpretation of the children’s utterances and behavior, leading to mostly inconclusive answers; in a high percentage of the families, some degree of uncertainty remained. As therapy went on, much effort was spent on protecting the children and on finding how to go on living with uncertainty. We aimed at creating an acceptance of living with different narratives of these events, as a starting point for future communication and cooperation about the children. In several instances Child Protection authorities and legal services were also involved with the families, carrying through the mandatory investigations. We cooperated with them as far as our relation to the families permitted, but as previously mentioned, their involvement did not add to constructive solutions.

In some of the families considerable conflicts remained. The suspected person might have been estranged and angry, possibly supported by his family, and wanted to bring in a lawyer, while the mother’s family and friends stood up for her, suggesting that she needed her own lawyer. Protective services might be involved with their own stands on the issue, perhaps by urging legal actions. Positions often became strongly adversary. We believe this process is unavoidable, and that it often creates a deadlock. In deadlocked or stuck situations (usual procedures don’t work), or “when the solution gets to be the problem” (continuous search for truth by means of juridical procedures), something quite different should be tried. As Kelly (1955) put it, “fresh input may be necessary for change.”

Our intention was to strengthen the families through involving members of the extended problem system (Anderson & Goolishian, 1988; Anderson, 1997), but this part of our work was not fully accomplished. It may be that a collaborative approach is not always sufficient in families struggling with themes of taboo. The mothers were often reluctant to bring in other family members (apart from the children), and some came to distrust other helping professionals. Shame and embarrassment were strongly present, often resulting in a wish for secrecy. Frequently our attempts at collaborative dialogues were insufficient in dealing with these impediments to change. In hindsight, we lacked an overarching idea for organizing such meetings. Conferencing represents one such idea, and we outline how it, in a modified form, may importantly contribute to work with SSA in families, to get beyond deadlocks.

Conferencing is in line with one of our basic ideas—that the SSA should remain within the family and not be fodder for legal procedures. The adults must take responsibility for ensuring that poisonous effects on the children become minimized. In this process we need the help of family, friends and maybe child welfare agencies.

One important argument for introducing a conference, rather than more therapy, is that at such points therapy’s experts have failed. No clear answer has been determined, and no new experts are considered able to provide one. The problem thus moves from expert-solution to an issue of the human condition: “Here we stand without solutions.” We ask a facilitator to help us to initiate a process that may bring forth unknown resources, not to be a new expert.

We expect strong emotional reactions as the participants vent their bitterness, aggression and their very different and adversarial constructions of what has happened, but also that they will be able to see and hear each other in new ways. We hope for a turning point—a moment of collective vulnerability, or Seikku’s (1996) phase of depression—where a breakdown in hopes for solutions may open possibilities for renewed creativity. What may be created is a deep, common understanding that living in uncertainty and ambiguity is an unavoidable condition, and that the only option in human vulnerability is in turning forwards, facing the prime task of protecting the children.

In our judgment, acknowledging that the alleged offender has instigated harmful act(s) is a prerequisite for a conference. However, we also suggest that this will not be necessary if conference members are able to renounce their quest for finding the truth, and instead focus on the plight of the children and on the importance of giving them possibilities for growth. Otherwise, it is quite likely that the suspected offender will refuse to attend a conference. This does not reduce the need for the mother and children to get whatever protection, support and structure is necessary for going on with their lives. It is particularly important to maintain the cooperation of the suspect. His claims of innocence must be accepted and respected by the facilitator, and he must be assured that the conference does not aim to put him in a position of blame. The main issue for the conference is to plan the next steps related to the welfare of his children: Who should communicate what to the children in which setting? What plans for protections are viable and how should they be carried out? How can the alleged offender ensure that nobody
will accuse him of abuse in the future? We do not advise bringing the children into the conference. Their loyalties make it impossible for them to give their concerns a voice, and they also may feel guilty, possibly having "the clue" that could clear up this mess. Elder children, who have discussed these issues extensively, might profit from listening in, provided they are assured of no pressure to talk.

POSSIBLE PROBLEMS

Coordinating Agencies and the Role of Facilitator

With many families who seek our help, a large variety of agencies may already be involved in their lives. Each agency will usually have its own agenda, and these will quite often diverge. Agencies tend to specialize and thus be prone to "Fordism" (people seen as cars with independent parts, thus to be treated as objects in an assembly plant [Seikkula, 1996]). In the present terminology, agencies may be steeped in I-It relations, which—especially for difficult problems—will be counterproductive. The conference progression from I-It through CVTP to I-Thou may be helpful. However, there often is a strong tendency to believe difficult problems require yet another level of experts for their resolution. A hierarchy of agencies, and perhaps also especially well-equipped therapists, may exacerbate the problems. (Reichelt and Christensen (1990) point out the dangers of being an expert and assuming responsibility when you have no control.

Conferencing offers a break from such spirals. We again emphasize that the facilitator does not provide any solutions; s/he is not an expert, or another conflict thief. Her or his only concern is with the process. One might argue that in a collaborative approach, the therapist is a facilitator rather than an expert change agent (Anderson, 1997). Problems are dis-solved and alternatives developed through dialogues, and the therapist—or facilitator—is defined as an expert on process, not on content or solutions. This warrants some further comments on the role of the facilitator, and we find the discussion between Carl Rogers and Martin Buber (reprinted in Buber, 1965) illuminating. Rogers claimed that his therapeutic experience had given him unique insights into "I-Thou" and expressed puzzlement that Buber could have arrived at his views without the benefit of prolonged therapeutic experience. Buber, however, insisted that therapy was different from what he had in mind with I-Thou. For Buber, I-Thou would imply symmetric experience, whereas therapy—by definition—was asymmetric and could not be otherwise. It seemed impossible for Rogers to grasp this idea. He appeared stuck in his phenomenological experience of "sharing," and blind to Buber's insistence that he might well embrace the world of the client, but the reverse would not hold true. Almost in a Goffman-type mood, Buber pointed out that the therapeutic situation would bar the client from saying, "Oh, Doctor, where were you yesterday? Oh you were in the movies? How were you impressed?" (p. 173).

Conferencing When Stuck

One clear difference between collaborative therapy and conferencing is that the facilitator will not try to engage in I-Thou relationships with the participants (as Rogers obviously would). Her or his task is to provide opportunities for others to develop their interactions with each other towards such a relationship. We thus see deep significance in how McDonald, the facilitator in the Jack and Jill conference, chose not to look at the picture—"to help people keep me at least symbolically separate"—as he wrote in his notes. In a well-conducted conference, the facilitator will recede into the background during the heat of the conference. The well-known Australian playwright, David Williamson (2001), has used the Jack and Jill story as part of his inspiration for a moving drama where the death penalty, or a plea for clemency for a heinous crime, is at stake. After having reached reconciliation, one of the participants exclaims to the facilitator, "What the hell's goin' on. We got through all this shit and you didn't do nothing", to which the facilitator responds, "They're your problems so you do the work. I'll have this [agreement] ready in a few minutes."

In collaborative therapy (Anderson, 1977), as well as in conferencing, an important idea is to invite everyone concerned, when the situation is stuck, in order to hear all relevant voices. The therapists are, however, active dialogue partners, strongly involved in the process. Therapists interview each person separately to ensure that all the voices are heard and expanded, and argue for the importance of bringing forth different and controversial voices. Listening to different voices changes one's own and moves the conversation towards new descriptions of realities. In contrast to conferencing, however, increase of tension in the room and building towards an emotional crisis is not the issue. We are intrigued by the crisis element in conferencing, where the responsibility for coming up with new options is completely left to those who own the conflict, and by the possibilities in the collective experience of vulnerability. We thus believe that what may be needed in our stuck families may be this kind of emotional experience, brought forth by a facilitator who does not act as a therapist.

Acknowledgement and Reconciliation

Zehr (1990) has pointed to some possible goals of a restorative program: reform offenders (mitigate punishment), help victims, involve community, and reconcile. Zehr points out that "some of these goals may be mutually contradictory" (p. 170) though he chose reconciliation as the primary goal. Braithwaite (2003) pointed out that our position may be subjected to a feminist critique in that "domestication of violence" may lead to sweeping wrongdoings under the carpet (cf., Braithwaite, 2002, pp. 251-254). We do, however, think that trying to force acknowledgement of specific acts may lead to a further deadlock, and increase present and future suffering. On the other hand, in a more general sense it is necessary that all participants acknowledge that others suffer, and that there is a collective responsibility for alleviating distress. In
SUMMARIZING: BEYOND CONFERENCING?

Our hypothesis is: Movement from I-It to I-Thou may be crucial for change in strongly adversarial relationships. Turning points in such movements correspond to collective vulnerability in conferencing when a common fragility in the conference community is experienced. When professionals engage as change agents, no matter how collaborative their stance may be, progress may come to an end. A collective experience of "hopelessness" or phase of depression seems to call for a deeper view of the other, and a necessity for cooperating in a different vein. If we accept Buber's point that therapeutic experiences cannot epitomize I-Thou, this points to a possible limitation of the therapeutic situation as far as relationships go. Conversely, this is exactly where conferencing has a great potential. The story about Cathy in Neimeyer and Tschudi (2003) is illustrative. For Cathy, the confrontation with her abuser in a conference was a decisive turning point. While the abuser did not acknowledge any transgression, his family as well as members of Cathy's own family supported her and thus validated her emerging agency—freedom from the abuser's spell—in a way that would be difficult in conventional therapy.

It is important not to overstate the general importance of collective vulnerability turning points. There may well be (since) significant therapeutic movements without such turning points. We are thus not claiming that CVTP is necessary for therapeutic change nor that it is sufficient for such change. This is clearly brought forth by seeing what has happened in the U.S. after 9/11. Right after the bombing millions experienced CVTP, and there are countless witnesses to helping—I-Thou relationships in the aftermath. But, sadly, deeper relating does not thrive in current U.S. policy that speaks much more strongly of separation than connection. The experiences that occur at the turning point need to be sustained in the spirit lest one completely fall back to I-It attitudes. Thus, agreements and follow up are necessary in conferencing!

We significantly depart from the standard conferencing script when we suggest bypassing acknowledgement. Our suggestion is that using conferencing in a broader sense widens the scope of application of philosophical stances and collaborative options carrying us beyond therapy when this is called for. This may also bring us beyond conferencing. The most important for us, however, is to open up further dialogue!

REFERENCES


Moore, D. B., & McDonald, J. (2002). Community conferencing as a special case of con-
Tschudi and Reichelt


---

READING THE COLLABORATIVE LANGUAGE SYSTEMS APPROACH PHENOMENOLOGICALLY

FRANK MACKE, Ph.D.
Mercer University

This essay seeks to consider the theoretical work of Harlene Anderson and Harold Goolishian from the standpoint of existential and semiotic phenomenology—what Richard Lanigan (1992) has come to call, in his most recent work, "communicology." The essay then suggests another set of possibilities for the Collaborative Language System concept of therapeutic dialogue, one which might have additional productive implications for the future of this approach and which might help therapists better understand the semiotic conditions that accompany a client into the context of a professional therapeutic situation.

THE ANDERSON AND GOOLISHIAN APPROACH TO THE LANGUAGE OF THERAPY

A cursory glance at the bibliography of Harlene Anderson's text, Conversation, Language, and Possibilities (1997) reveals the extent to which her work is grounded in theories of language that endeavor to see beyond mere empiricism, objectivism, and functionalism. The approach that Anderson and her colleague Harry Goolishian began developing close to two decades ago emerged from their considerable background in family systems theory as a decidedly post-positivist and antifoundationalist perspective on the delicate relationship that takes shape between a trained clinician and a nervous client. As with virtually all of the current postmodern approaches to psychotherapeutic interaction, the approach developed by Goolishian and Anderson is concerned with the dynamics of power, the contingency of identity, and the invisible and insidious workings of discourse. Unlike other postmodern approaches to therapeutic interaction, the Collaborative Language Systems Approach

Address correspondence to Frank Macke, Ph.D., Associate Professor, Department of Communication & Theatre Arts, Center for Journalism & Media Studies, Mercer University, Macon, GA 31207; E-mail: Macke_FJ@Mercer.edu.