

Narrative therapy and the affective turn: Theoretical Concepts /Part One

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Abstract

This article is the first of two articles which explores the impact of the affective turn on the development of narrative therapy. This Part One article will explore the theoretical influences and the epistemological and ontological value of integrating the ‘affective turn’ with narrative therapy. Part Two, which will follow in a later publication of JST, will explore the practice implications of the affective turn in shaping counseling interactions with clients. This article explores research and scholarship on the mind, brain, and body, and its connection to the language of feelings, intentions, and choices. The primary focus is on examining both existing and potential contributions of the affective turn to the evolution of narrative therapy. The article makes a case for moving beyond the discursive turn that originally shaped narrative therapy toward a more complex affective-discursive practice in counseling and psychotherapy.

Key words: affect, affective turn, affective practice, narrative therapy, embodiment, discourse, discursive turn, affective-discursive practice.

There is a growing body of research and scholarship in the humanities and the social sciences directed towards studying bodily responses, feeling practices, neuro-biological stress responses, and other experiences that reside beyond linguistic domains. This interest is now being referred to as the “affective turn” (Ahmed, 2014; Brennan, 2004; Cromby, 2015; Damasio, 2000; Gregg & Seigworth, 2010; Massumi, 2002; Sedgwick, 2003; Stewart, 2007; Wetherell, 2012). The term “affect” is understood and used very differently across domains of academic study. We hope to situate our definitions within a constructionist, poststructuralist framework. This context supports a definition of affect as “affective practice,” where it is “constantly flowing, merging, developing, changing” as part of a social practice (Wetherell, 2013). Here, affect is best understood as an embodied interpretation of human beings’ lived experiences (Beaudoin, 2017; Cromby, 2015; Wetherell, 2012).

We propose it is time to enlarge the epistemological tent and invite discursive narrative therapy (NT) scholars and practitioners to consider the value and therapeutic advantages of moving toward what Wetherell (2012) terms the “affective-discursive turn.” We make this case for two reasons: 1] The paper draws attention to White and Epston’s original intentions of viewing narrative practice as an activity that focuses on human experience and the performance of meaning, in contrast to the dividing practices of the cartesian traditions that separate mind, body, and affect. 2] Embracing the affective-turn draws more attention to a domain of human experience that more contemporary iterations of NT appear to have ignored. This inclusion into the ongoing evolution of NT not only keeps alive the important attention to the politics of therapy, but also calls attention to how the “affective turn” keeps NT connected to newer, complementary discoveries in assisting people through the applications of resiliency-based, non-pathologizing practices (Zimmerman, 2018).

This interest in bringing attention to the affective-discursive turn is not an effort to create or add momentum to a “dividing practice” which breaks up human experience into cartesian categories. Neither is this article oblivious to the origins of NT that emphasize an

integrative interaction where everything in a human experience is connected including emotion and affect. In fact, this article seeks to emphasize and underscore the value of integrated interaction so prominently modeled by the founders of NT.

Origins of Narrative Therapy and Their Connection to Affect and the Body

Prior to 1989 when White and Epston published their first text, *Literate Means to Therapeutic Ends*, the founders of NT were not tied solely to intellectual arguments and textual descriptions. They documented the importance of addressing expressions of experience, and the performance of meaning in their client's "lived experience" which integrated affect, text, and bodily experience. Their work at the time was heavily influenced by Geertz (1973), Turner (1969) and Myerhoff (1982) who reiterated the centrality of the expression of experience and the way meaning is performed. For example, Geertz stated that "the drive to make sense out of experience, to give form and order, is evidently as real and pressing as the more familiar biological needs" (1973, p. 140).

Later in the 1980s, White embraced much of Michel Foucault's writings (1973,1975, 1976,1984a, 1984b) and Foucault's work became infused with a discursive approach to therapy. This post-structural influence paid close attention to the effects of modernity discourses on the shaping of peoples' desires, and bodily experience. Building on Foucault's work, Michael White became interested in the work of the philosopher Gilles Deleuze's scholarship, one of the one of the main philosophers of influence in the study of affect (Cole, 2009). In his final teaching workshop in March, 2008, White spoke of his recent reading of Deleuze and the Deleuzian concepts of deterritorialization and reterritorialization (Winslade & Hedtke, 2008). Deterritorialization and reterritorialization are the study of forces that presuppose and reinforce the notion of a shared essence of desire. Topics that are keenly associated with affect. Winslade (2009) documented Gilles Deleuze's work and their connection to many of the principles of NT in his article *Tracing Lines of Flight: Implications of the Work of Gilles Deleuze for Narrative Practice*.

Deleuze consistently explored the relationship between affect, language and power (Cole, 2009). With his close friend and colleague, Guattari a psychoanalyst and political activist (Deleuze & Guattari, 1988), Deleuze explored how the use of language in human engagement can feature an influential and intense affective resonance. Deleuze and Guattari noticed how desire is routed through power and language.

Zimmerman (2018) described how narrative therapists who had the good fortune to observe Michael White's narrative work observed his ability to stay close to affect as his clients shared their stories even though he never theoretically discussed the role of emotion in narrative therapy. The first author of this article can testify to the talents of Michael White in his ability to track and respond to affect, particularly through having observed his clinical work in New Zealand in 1984 and subsequently over a 24 year period until his passing in 2008.

Zimmerman writes, Michael White's work

was far from emotionless, despite removing the language of emotions from his inquiries into client's lives. Historically, the point of not addressing the concept of emotions was to do away with privileging the supposed therapist's expert knowledge about the client's unconscious (nonconscious) drives and emotions. ... this was a political act in its time (p.22).

Narrative therapy's interest in the non-discursive experiences of human behavior is not new. Griffith and Griffith (1994), in their influential text *The Body Speaks: Therapeutic Dialogues for Mind-body Problems*, broke important ground in introducing poststructural therapists to the value of paying attention to mind-body connections. Much of their writing bridged what is occurring in language and within stories and how this critically influences bodily states. They wrote, "a narrative or story is a linguistic unit of coordinated bodily states as they extend from start to end of a human experience" (p.37). They note the importance of understanding emotion as a dynamic character of the body to influence linguistic and bodily action. The publication of Griffith and Griffith's text was met with great interest by the social constructionist Ken Gergen (1994), who wrote that these authors "...solve the Cartesian riddle of mind and body." The co-founder of NT, David Epston (1994), claimed Griffith and

Griffith's (1994) text was more than a summary of mind-body problems and essential for family therapy reading. The psychiatrist Tom Anderson, whose work was so impactful in the Collaborative Language Systems, was also consistently attentive to these mind and body connections (Anderson, 1991).

The integration of affect, emotion, and the body as experience, and as providing all critical elements enabling human beings to perform a lived experience of meaning, adheres to well established traditions of mainstream narrative practice.

The inadvertent swing to dividing practices and “thingification” in NT

Zimmerman (2018) observes that NT, despite its strong thrust on emphasizing the integration of human experience, or what some narrative scholars and practitioners refer to as the importance of “holism, and flow” in conducting NT, the evolution of narrative practice has lacked “the affective flavor that it needs” (p. 36). While White modeled affective involvement, Zimmermann (2018) cites Madigan (personal communication 2014), who reflected that a whole generation of narrative therapists have ended up with a very “cognitive” picture of NT and they have missed “the spirit of the work” (p. 37). Zimmerman reflected that Michael White's (2007) publication of *Maps of Narrative Practice* may have inadvertently reinforced a more textual, more cognitive thrust in NT.

Karl Tomm (2018) addresses this concern too by stating that narrative therapists must be rescued from:

becoming increasingly ‘disembodied’ as they seek more and more rigor in articulating a preferred ‘text’ of a persons’ life stories. For some time now, I have been concerned about how privileging the ‘story’ of people’s lives too strongly in narrative work can have an inadvertent negative effect by separating persons from the bodies in which they live - and depend on - to generate those very stories” p. xii.

While contemporary writings on NT do demonstrate an interest in the exploring of the effects of mind and body and, of course, paying attention to emotion and feelings (Paré, 2013). the theoretical language in many narrative training contexts treats affect as peripheral in comparison to spoken words and written text. For example, the use of transcripts is a central

and fundamental element of training in NT. These practices are of course critically important to train effective narrative therapists. However, we argue that prioritizing tracking spoken language and text using transcripts in NT training over other elements occurring between therapist and client (e.g. considering the non-verbal behavior of client and therapist in video sessions), inherently limits access to information that could be very important to assisting clients. Furthermore, NT are often positioned with values and perspectives that support a compassionate, caring and attentive posture towards their clients, but with limited theoretical language to describe the nuances in this process.

Narrative therapist, Johnella Bird (2004) supports the concerns about dividing practices emerging in NT when there is a strong emphasis on text rather than embodied experience. She writes:

The privileging of text, ... is of particular concern in enterprises where dialogue is the principal medium... The process of relational meaning-making through dialogue requires attention to embodiment through speech, the emotional quality of speech, together with the struggle for articulation (p. 36).

Because of the dominance of liberalism and individualism in contemporary psychotherapy, many narrative therapists are hesitant to focus on examining affective practices. Affect can be viewed as occurring inside the person, and therefore disconnected from what is occurring in the social and cultural landscape. There is a legitimate concern that the turn to affect may dilute the centrality of the discursive turn, and that this will be a slippery slide back towards bolstering the harmful formulations of services that pathologize and inadvertently amplify human deficit and human failure. After all, the origins of psychotherapy are largely captured by, and continue to be dominated by, the traditions of modernism and liberal-humanism and non-discursive approaches that lie at the heart of the psychologizing of human failure (White, 2002). The application of the discursive turn has been a bulwark for narrative therapists against the psychological side effects of power, which can be mined within dominant institutions, forces of neocolonialism, and the discursive fabric that supports their existence.

The fear is that embracing the affective turn could invite therapists to draw their attention away from addressing the impact of the sociopolitical.

There is no human experience that exists outside the relationship we have with each other and the broader systems in which they occur, and any affective practice is inherently informed and shaped by the discursive considerations of its context (Gergen, 2009). The critical point here is that the attention to affective practices can support NT from falling into a post-structuralist trap, where stories are disembodied from experience and discourses are understood and learned as a phenomenon located outside of the body. Zimmerman (2018) writes that the preoccupation with the discursive framework alone has taken us “away from bodily based experiences” (p. 9). Part of this dividing practice between text, affect and the body has occurred primarily because of narrative practitioners overemphasizing client spoken language as the exclusive focus in the therapeutic process. Zimmerman surmises that it was an unintended consequence of primarily centering upon client spoken language inadvertently led to emotion and affect being sidelined. Speaking about NT he stated, “the idea was never to get rid of emotion altogether” (p. 23).

Today, Zimmerman (2018) argues that the direct attention to emotion is critical for the evolution of narrative therapy. We agree with this observation. Like Zimmerman we have noticed how many narrative therapists do not purposefully attend to affect. “We don’t talk emotions, affect or feelings. We don’t write about them either. And much of the time we don’t take care to make sure they are present in the room with us” (p.1).

An introduction to Narrative therapy and the Affective-Discursive Turn

In this article we take a fresh look at affect and the body, but without an interest in the liberal humanist or apolitical modernist contexts in which these topics have traditionally been viewed. Instead, we argue that postmodern therapies such as NT can be enhanced by inviting scholars and practitioners alike to more deliberately attend to more channels of human communication within the therapeutic context that do not require the abandonment of the

fundamental ethical agenda that NT offers, while also acknowledging that this development has already emerged within the community (Guilfoyle, 2012; Haugaard, 2016). In this exploration, we take a critical view of both the contributions and challenges of neurobiology and its integration to NT. More centrally, we explore the strengths of affective –discursive work in the therapeutic endeavor.

We approach this interest in the affective turn with a careful curiosity, fueled by the intention of recognizing and honoring the epistemological origins of Narrative Therapy (NT) that emerged within the discursive turn (Besley, 2002). We are guided by the music metaphor of consonance versus dissonance, where dissonance is defined by anything that is *not* consonant. Consonance is anything that is “pleasing” and “accepted”. Similarly, NT became the dissonance to the liberal humanist preoccupation with emotions and catharsis as the vehicles for change and began to consider client’s lives through a discursive epistemological and ontological lens (White, 1990; Dickerson, 2014).

The interest in the study of affect now features within disciplines of anthropology (White, 2017); geography (Thien, 2005); sociology (Clough, 2008); political science (Hoggett & Thompson, 2012); education (Zembylas, 2014); philosophy (La Caze & Lloyd, 2011); feminist studies (Pedwell & Whitehead, 2012); and psychology (Cromby, 2015). Over the last two decades this affective turn has been gaining traction and becoming more influential in shaping theory and practice in the social sciences and humanities. This epistemological and ontological shift follows the poststructural discursive turn that was so influential in the major social sciences in the last half of the twentieth century. We anticipate that these theoretical developments will very likely continue to shape the practice of therapy throughout the 2020s.

The emergence of the discursive turn was situated as the dissonance to the liberal humanist consonance of therapeutic practices at the time. Now, approximately forty years since the emergence of the discursive turn within a therapeutic context, many authors (Ahmed, 2014; Brennan, 2004; Massumi, 2002; Sedgwick, 2003; Stewart, 2007; White, 1993) argue this has

become the consonance of the field, and that a comprehensive study of human action has been neglected because of a fixation on language, discourse and meaning (Wetherell, 2012).

Massumi (2002) has argued that social constructionist and poststructuralist theory have ignored the importance of studying the biological aspects of humans and their anatomical or behavioral features from their earliest stages of development. Sedgwick and Frank (2003) identified the preponderance of an anti-biological and anti-essentialist sentiment which has shut off discursive researchers from exploring the value of embodied states. Some narrative therapists are concerned that the threat of obscuring the defining, now-consonant features of the discursive turn by turning “back” to liberal humanist considerations of the body could pose too great of a risk to the progression of NT (Dickerson, 2014).

Pedagogy has profoundly influenced the evolution of NT. We acknowledge that the current practices and conceptualizations in NT may not precisely reflect the original intentions of Epston and White, which is a predictable effect when ideas and movements expand and the primary authors become de-centralized (Bouteldja & Valinsky, 2016). Epston and White acknowledged the risks of NT being co-opted by mainstream counseling approaches and thus globally exported as a Western trademark of therapy. polanco (2016) describes how, despite Epston and White’s “subtle and overt efforts”, NT can be transmitted and received as a “global trademark”, absent of the “cultural sensitivity and humility” that is ingrained in the ethics of the practice. bell hooks (1994) describes this transformation of knowledge, describing the ways that knowledges generated through resistance can be used to support the status quo. Given the generations of therapists who have contributed to NT over the past thirty years, this evolution is noticeable and reflective of the Western, neoliberal mental health and academic contexts that can be smuggled into NT.

We argue that it is impossible to “turn back” our considerations given the depth and breadth of literature on post-structuralism in the past forty years, and that we can now remember and reconsider the importance of the body and affect with more developed and

nuanced understandings. We acknowledge that many poststructuralist counselors have been engaging with affective practices, but these practices are taken-for-granted as “basic counseling practices” that are not central to the theoretical work that takes place. We intentionally draw upon the literature of authors who have robustly engaged with the discursive turn who are now exploring the interface between discourse and affect (Wetherell, 2014).

Narrative Therapy and the Linguistic or Discursive turn

The centrality and metaphorical influences of what has been defined as the “discursive turn” (Harre, 1992; 2001), or the “textual” or “linguistic turn” (Rorty, 1967), on the development of NT is well documented and easily noticed (Freedman & Combs, 1996; Dickerson, 2014). Since NT is grounded within a poststructural framework, the turn to language is central to how notions of the self, identity, and meaning-making are developed (Besley, 2002).

The primacy of NT has operated within the field of discourse, culture, and the Foucauldian analyses of power (White & Epston, 1990). Michel Foucault’s (1980) analysis of power and knowledge and his discussion of the influences of dominant discursive systems in shaping the human landscape have been central in narrative therapy’s grounding in poststructuralism (White & Epston, 1989). From its inception, the integration of the discursive considerations into the practice of NT has been an essential conceptual resource in revealing how the creation of human problems can be understood beyond conversations about internal states and individualistic, psychological constructs (Monk & Gehart, 2003; Sinclair, 2007). The “dissonant” turn to language and discourse has provided a powerful set of practices to expose the taken-for-granted psychological assumptions and normalizing judgments that can dictate how people should live and behave. The discursive turn has been critical in supporting narrative therapists in developing practices that allow clients to traverse the complex and socio-political landscape that shapes their experiences. For example, the NT literature has documented efforts by therapists to support women confronting patriarchy or aligning with

indigenous communities against structural and systemic economic inequalities (Denborough, 2004; Monk & Gehart, 2003; Sinclair & Taylor, 2004; Tamasese & Waldegrave, 1993; Waldegrave, 2003; White, 1990).

As mentioned, we are interested in honoring and maintaining the critical contributions of NT through the discursive turn, and integrating key tenets, honoring the importance of noticing exceptions in problem-saturated stories, positioning as de-centered but influential, and co-constructing preferred performances of identity and considering the effects of cultural discourse (Madigan, 2010; V. Dickerson, personal communication, March 13, 2018).

Explorations of the Affective Turn Within a Narrative Therapy Practice

Due to NT's acute attention to language within a therapeutic practice, NT scholars and practitioners working within a poststructural lens have, up until recently, largely ignored the research and scholarship on the body, brain, emotion, and affect in the therapeutic process. Zimmerman (2018) points to the disinterest of narrative therapists to explicitly speak to the issue of emotions and affect, and how they are conceptualized in regards to therapeutic change in people's lives. However, in the last ten years there is evidence of narrative scholars and practitioners now paying attention to new ontological and epistemological forces arising in the sciences and social sciences located outside of a linguistic or discursive frame (Beaudoin & Zimmerman, 2011; Bird, 2004; Hamkins, 2014; Weingarten, 2010, 2016; Zimmerman, 2018). More NT scholars and practitioners are writing about the inclusion of the fields of neurobiology and neurophysiology within the practice of NT (Beaudoin & Zimmerman, 2011; Beaudoin, 2015; Zimmerman & Beaudoin, 2015; Beaudoin & Duvall, 2017; Carey, 2017; Ewing, Estes & Like, 2017). Some of these practitioners and scholars are increasingly paying attention to human functioning that occurs within our bodies and in affective practices that are located outside of the linguistic and discursive domain. Zimmerman (2018) writes, "Since 2005, bringing affect more consciously and directly into Narrative work has been the focus of my teaching (p.36).

In a more contemporary rendering of the relationship between body and mind, the narrative psychiatrist SuEllen Hamkins (2014) writes, “we are embodied creatures fortified by and beholden to our biology” (P. xiv). Hamkins argues that NT can be extended by including the role of human biology in therapeutic practice. These understandings are commonly considered as beyond a “nurture vs nature” debate, which is housed within Cartesian ideas of the mind and body. Rather, affective practice should be considered as a relational practice that can be useful when storied and not taken-for-granted and is neither purely biological nor cognitive.

Kenneth and Mary Gergen, writing on the development of social constructionism within the discipline of psychology, concluded in the book titled “The Discursive Turn in Social Psychology” (2014):

Although pivotal in the construction of meaning, a focus on spoken and written language is quite limited ... As any seasoned actor will attest, the implications of any spoken phrase (i.e. its potential meaning or illocutionary force) are seldom given in the phrase itself. It is the tone of voice, the facial expressions, and the bodily movements of the actor that will send them in one direction or another. It is not that something is said, but how it is said that matters. Nor should the focus on bodily movements be limited to these “non-verbal expressions.” One must consider the full array of actions associated with the linguistic exchange. College cheers at a football game may often urge their team to “vanquish,” “bury” or “destroy” their opponents; yet, do such cheers have the same implications (meaning) as of an Islamist crowd shouting “death to the Western dogs” (p. 211).

Gergen and Gergen (2014) have invited postmodern scholars and practitioners to go beyond text and talk in human relating and to pay attention to the non-verbal expressions of bodies and their potential impact on human action. Margaret Wetherell (2012) argues that it is time to extend more traditional social constructionist analyses by incorporating the body/brain in social science research and move towards asking new questions and exploring new territory.

Key Elements of the Affective Turn

Wetherell (2012) argues that the study of affective practices is inseparably connected to meaning-making and that attention to the affective turn enables researchers and scholars to

study human interaction beyond what is linguistically knowable. Attention is drawn to noticing not only how affect impacts a person but how affective practices shape interactional dynamics of many individuals at the same time.

Wetherell describes the value of practices that invite analyzing feeling states to better understand the cultural and socio-political histories people display when they are meaning making to build richer understandings of psychological actions. She suggests that an examination of affect expands the understanding of bodily possibilities. Attention is paid to examining senses of touch, body position, muscle action, and the unconscious awareness of movement and spatial orientation of the body itself. Irvine (2016) suggests that unspoken social norms include how humans use space with their own bodies which influence the transmission of feeling and body expressions. Irvine states “The affective turn has alerted us to the importance of examining the social operations of emotions, including their potential role in reinforcing restrictive social norms” (p. 213, 2016). In her “walk of shame” research, she noted there was value in conducting affective mapping to track the dimensions of how emotional culture functions. She argues in her research that the affective turn provides researchers with alternative resources in researching the social contexts we inhabit (Irvine, 2016). Brown (2007) describes the centrality and importance of inviting the narrative of the body in sharing the effects and influence of eating disorders on women’s bodies, and the practices that support conceptualizing a tangled relationship between cultural discourse and the body.

Pedwell and Whitehead (2012) emphasize the critical importance of conducting research on affect because of “the critical links between affect and gendered, sexualised, racialised and classed relations of power” (p.116). Ahmed (2014) in her study of affect in the political landscape comments on how affect is socialized within the intersections of gender, ethnicity, and sexuality, constructing an active cultural politics of emotion. From this perspective, emotions get enrolled into dominant social practices and circumstances. Cromby (2015) discusses how cultural norms can structure bodily reactions and produce “regimes of

emotion” (p. 74). Brown and Augusta-Scott (2007) note how cultural discourse can be inscribed in the body, and the values of exploring with clients the “cultural grip” of gender performance in our bodily experiences. These explorations can expand conversations beyond linguistic binaries that can be constrictive of identities, and bolster existing narrative practices in acknowledging obscured and marginalized experiences (Augusta-Scott, & Maerz, 2017).

Hochschild’s (1983) research on emotional labor resonates well with the study of the cultural politics of emotion. In a neoliberal capitalist context, our Western societies have come to rely on the purchase of emotional labor. Due to the demands of service industries employees must placate, restrain, suppress, produce and project emotions for the benefit of those they serve. Consider the feeling management required to create a corrective facial and bodily display. Sex workers, fast food employees, and customer service hotel workers must feign pleasantness and even happiness in the service of their customers even in the face of violating interactions.

The specific attention to affective practices only increases and enhances the therapeutic responses made possible by practitioners in tracking how the body and emotion can simultaneously embody the oppressive discourses of exclusion and personal failure. Wetherell (2012) argues that the study of power is crucial to affect studies as the display of emotion is unevenly expressed in relationships of consequence. Attention to affect invites us to consider who is emotionally privileged, and ask what emotional privilege and emotional disadvantage looks like? For instance, demeaning remarks towards a minority ethnic group might be easily disregarded and not activate the body of a member of the dominant ethnic group and could be considered as emotional privilege. Additionally, we can analyze how particularly affective practices enact, reinforce or disrupt human interaction.

Affect theorists like Massumi (2010), argue that the study of the intensity of emotion and how the body responds to stimuli is a potential illustration of the operations of power. This is most prominently illustrated in the political domain in the example above. Therapists are

often addressing emotional intensities when classic patriarchal entitlements are demonstrated in couple relationships where intimate partner violence occurs. In the therapeutic context Cromby (2015) proposes the study of affect generates wider possibilities for understanding human interaction and opportunities for change that are not exclusively contained by discursive regimes. Wetherell (2012) comments how the neuroscience studies emerging on mirror neurons advance our understanding of how affect is transmitted in groups and crowds, creating a contagious set of interactions.

Shotter's (1993) psychological research on human interactions, which he termed "knowing of the third kind," in some ways aligns with the research on mirror neurons which is a biological description of human connectedness. This is the knowing where we can spontaneously respond to social interactions in a mutually engaging manner. Shotter (2016) described how human beings can have the ability to engage in interactional flows where we are moved by particular actions of the other. He describes having an encounter within a particular flowing circumstance in which "another's expressions carries a bodily sense of the possibilities for responsive action in relation to one's momentary placement, position, or orientation in the present interaction" (Shotter, 2006, p. 600).

According to Wetherell (2012), affective practice studies how people are recruited into synchronous assembling with other emoting bodies. Within the political landscape, particular partisan messages evoke particular feeling states. Cromby (2015) describes how particular ideologies chain and finesse affect by practices of association and repetition. Certain feelings get associated with the social statuses of specific groups of people. For example, anger will be directed at people on welfare rather than bankers, and admiration is linked to venture capitalists rather than crusaders for equality. Resentment is directed at immigrants for stealing low paying jobs rather than resentment evoked against employers for offering low wages.

Glassner (1999) and Baumann (2006) comment that affect analysts draw attention to how political power and influence is increasingly mobilized with an affective contagion based

on fears, threats and anxieties. Infusing the present circumstances with “affective tones of dread” about harmful future possibilities actualizes feelings in the process of present-day decision making (Cromby, 2015, p. 168). As Massumi (2010) states, anxiety and tension are instilled within political ontology and threat occurring in a virtual future shapes the actual present. By employing an affective lens, it becomes easier to spot how felt sensibilities are instilled in political rhetoric inviting acquiescence or compliance, especially when threats of terror, violence and subversion are amplified. Loud volume, high frequency harmonics used by “angry” partisan television and public talk back radio commentators evoke an arousal of the brain/body state provoking fear, anxiety or excitement that helps secure assent and compliance to the message.

Wetherell (2012) comments that Western communities assume that emotions are distinct and internal subjective experiences for which the individual is both accountable and responsible. Traditionally, in the West, emotions are located within meta-narratives that promote reason and self-control. Shweder (1994) reports that, within non-Western communities, the understanding of somatic and affective events are interpreted within entirely different ethnopsychological frameworks. What is evident is that different ethnic communities have different lexicons for making meaning of somatic and affective experiences and it is impossible to match these across different geographical and cultural communities. In this way, emotions can also be considered as functions of social and power relations, in much the same way as discourses or narratives can (D. Pare, personal communication, June 4, 2018).

Wetherell (2012) writes that affect theorists find it difficult to agree on the fundamental list of emotions. Certainly, the study of affective - discursive practice does not revert to simplistic liberal-humanist views of emotion and human behavior.

Understanding the Mechanics of Neuroscience and Their Contributions to Narrative Therapy

Because of the prolific research now conducted in neuroscience and its contributions to psychotherapy within Western contexts, we are in a much stronger position to identify some current knowledges about the body/brain relationships and psychological well-being. For example, emerging knowledge on traumatic stress on neurological functioning especially when human beings are under threat or are in danger (LeDoux, 1996).

Beaudoin (2015) defines affect in neuroscientific terms. She describes affect as the “experience of feeling” and has three neurological markers: arousal (impulsion to act), intensity (activation of the nervous system) and valence (positive or negative) (p. 28). We are not particularly physically robust mammals in comparison to other larger mammals. In the face of these bodily disadvantages, our brains have developed sophisticated functions to protect us from danger.

American physiologist Walter Canon (1932) created the theory of the flight or fight response triggered by the ANS in the face of threat. Subsequently, more recent research has shown that human reaction to threat is made up of other primary responses - fight, flee, freeze and appease responses (Carey, 2017). Andersen (1991) stated “the body gives its signs that there is something in the situation the person should be protected from at this point in time. The body has grasped the idea about this, which the mind has not yet” (Andersen 1991, p. 26). Beaudoin (2016), points out that it is important for poststructuralist therapists to be aware that “logical arguments alone are unlikely to neutralize intense emotional states... unless we are able to combine the logical arguments with viscerally felt and embodied experiences of self, congruent with the desired preferred state” (p. 2).

Many NT scholars and practitioners, such as Beaudoin and Duvall (2017), Duvall and MacLennan, (2017) and Zimmerman (2018), draw heavily on the work of the neurobiologist Daniel Siegel (2007) in their applications of neuroscience and the postmodern theories. They reinforce the point that our environment, relationships and lived experience are being shaped by the brain and shape the biological structure of the brain. Beaudoin and Duvall (2017),

describing themselves as collaborative therapists (which include solution-focused therapies, brief therapies, narrative therapy and collaborative dialogical therapy), remark on the importance of including the differential and linking functions of the brain (Siegel, 2007) in their understandings of therapy. Siegel's (2009, 2010) work is being integrated by a number of constructionist therapists into their practice; practitioners and scholars originally inspired by the "discursive turn" (Dunne, 2017). Beaudoin & Duvall (2017) make a compelling argument about the importance of paying attention to the pre-cortical elements of the brain and body functions. Many NT authors now view the importance of working with the autonomic nervous system when clients are affected by strong negative stimuli evoking a fight/flight/freeze reaction.

Furthering the work of affective-discursive practice in narrative therapy

While there is a growing number of scholarly articles emphasizing the value of neuroscience and its contributions to NT, much of the work draws upon therapeutic interactions that take place at the micro-level between therapist and client. Our intention in this article is to acknowledge the value of considering the client's neurological functioning and the brain's response to the shaping of human interactions in NT, as well as argue for a broader, more macro-level analysis of interactions in therapy that occur within an affective-discursive practice field. The biological body is bound to, and in many ways inseparable from, socio-political and socio-cultural influences, making it a social body. Wetherell (2013a) discussing the turn to affect and discourse and the importance of these elements stated, "bodies and sense making are like two sides of the same sheet of paper" (p.). Affective – discursive practices are intimately interwoven into the daily elements of our lives.

We acknowledge that these understandings are situated within and influenced by Western contexts of mental health, neuroscience, and healing. We argue that expanding discursive considerations beyond language can support cross-cultural counseling contexts, and open possibilities of addressing the "unintention[al] suffocate[ion]" that can occur in engaging

with Western theories (polanco, 2016). The effects of affective-discursive considerations in my (NZ) own work with refugee immigrants experiencing domestic violence has invited a therapeutic space that explores the habits, physiologies, and affective experiences of immigration, war, American imperialism, neoliberalism and their relationship to gendered violence.

This article, because of limitations on length, is a theoretical review of affective-discursive practice in NT rather than an examination of the practical applications of affective-discursive work. In our next article, “Narrative Therapy and the Affective turn: Practice Implications /Part Two”, we examine a variety of clinical applications of the affective turn that can be employed in NT and nested within an affective - discursive framework.

Summary and Conclusion

The major thrust of this theoretical paper is to explore the emerging focus on affect across the NT field, and to argue that client’s lives and experiences can be considered through an affective –discursive practice that does not dissolve the central tenets of the discursive practices in NT. We have argued that it is preferable to combine the affective and discursive turns rather than rest upon exclusively post-structural discourse theories. The discursive and affective turn can contribute to the evolution of NT at a time when social science and neuroscience are becoming more aligned with the value of understanding the body and affect. Furthermore, this range of inquiry opens many areas of investigation that would benefit from the engagement of NT practitioners from diverse life experiences. To integrate an affective-discursive practice with NT is to broaden the foundation of narrative work and open new areas for therapeutic action.

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