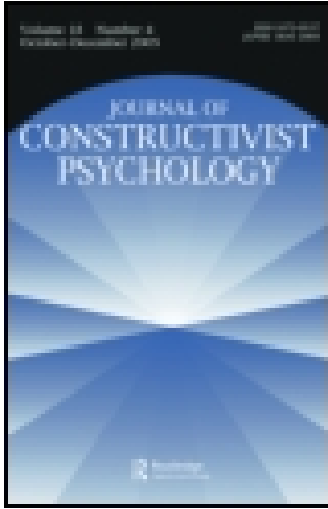


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# FROM EPISTEMOLOGICAL TRUTH TO EXISTENTIAL MEANING IN COGNITIVE NARRATIVE PSYCHOTHERAPY

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*The notion of truth is discussed from the standpoint of narrative cognitive psychotherapy. The dominant clinical epistemological framework, based on the search for truth, needs to be replaced by an existential framework emphasizing the construction of alternative meanings. This article begins with a discussion of the paradigmatic shift from epistemological truth to existential meaning. The narrative is then presented as an ideal root metaphor for existence. Finally, the work of cognitive narrative psychotherapy is used to illustrate the construction and deconstruction of meaning in the clinical situation.*

There is no better way to introduce my discussion of the role of truth in psychotherapy than to present two personal narrative reports of an ultramarathon in the Sahara Desert I recently experienced.

## Narrative 1

It's 9:00 P.M.; I am alone in the Sahara Desert, barely illuminated by the moonlight. I don't know exactly where and in what kind of terrain I am running. Far away I see some lights, and I wonder if they are the control stations or more stars in this threateningly vast sky. Huge and aggressive dark mountains grow on the horizon. There is a heavy silence all over. I smell my own sweat and taste it on my lips, reminding me constantly of my exertion. All my muscles are tensed and tired as I think, "I am not going to make it . . . I'm going to get lost . . . Nobody will be able to find me in the middle of nowhere." The image of the two runners who died previously in similar runs is always present. I think of my family and friends for consolation. I wonder if it is worth all the suffering I am going through . . . I feel lonely . . . tired . . . and scared.

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## Narrative 2

It's 9:00 P.M.; I am alone in the Sahara Desert, and the moonlight is splendid. My legs seem to find their own way across the terrain without any participation of my mind. The lights of the control stations far off are reassuring, and I feel that I have all the time in the world to arrive there. The sky is a crowd of stars. Magnificent dark mountains occupy the horizon. There is a peaceful silence all over. I breathe in the pure and dry smell of the earth. All my body's movements seem effortless while I am thinking, "It's great to be all alone in the middle of the Sahara desert . . . I am going to make it . . . It is worth it just for the experience of being grounded and peaceful." I feel my passion for the desert growing as I run through it . . . I love it . . . I feel delighted . . . relaxed . . . and peaceful.

"Which one of these narratives is a true rendition of the experience in the Sahara desert?" asks the epistemologist.

"Both!" answers the existentialist.

Of course both are true. Both sets of sensorial experiences, behaviors, emotions, and cognitions were present in my adventure. I could easily provide a reliable press release using either of these narratives. Likewise, any client in a clinical or sport psychology session could provide either of these competing accounts of the experience and claim to be speaking the truth.

Truth, therefore, does not seem to be a good criterion for the hermeneutic analysis of the reports clients provide about their experiences. In fact, I believe that the epistemological criterion of truth is a senseless criterion when applied to the realm of human existence. Human experience is not a search for truth but, instead, a never ending construction of meaning. Meaning is, I believe, the core criterion for all the narratives that we understand backward and that we live and project forward.

In this article, I elaborate on the assumption that the epistemological framework, which is still dominant in the majority of our clinical practices and is based on the search for truth, needs to be replaced by an existential framework based on the construction of alternative meanings. I begin with a discussion of the movement, in the constructivist era, from epistemological truth to existential meaning. Narrative is then presented as an ideal root metaphor for existence. Finally, the work of cognitive narrative psychotherapy is used to illustrate the construction and deconstruction of meaning in the clinical situation.

## FROM EPISTEMOLOGICAL TRUTH TO EXISTENTIAL MEANING

The foundation of most psychotherapies (i.e., psychoanalysis, experiential therapies, and cognitive therapies) is clients' verbal report of past and current experiences. Clients are asked to provide narrative accounts of some of their most significant life events. These narratives are supposed to be true recollections, and if they are not, the therapist helps the client in progressively uncovering the truth. Yet, as was well remarked by Wyatt (1986), the past is always a borderline concept. That is, past experience is always a process of projective reconstruction. Clients' narratives are constrained and empowered by the sociodevelopmental context of current meaning making.

Traditionally, constructivism as inspired by Piaget (1930/1960) was strictly epistemological. The most basic concern of Piaget's genetic epistemology was to understand how knowledge about the physical world develops across the life span. Individuals were seen as personal scientists who grew in stages, developing increasingly comprehensive logical-prepositional operations and systems of operations. However, as noted by Vandenberg (1991), "Theories grounded in epistemology fail to consider fundamental existential concerns and therefore constrain our understanding of ourselves" (p. 1278). These existential concerns are concerns about meaning: the meaning of being alive and dying, the meaning of culture and beliefs, and the meaning of relationships and family. These issues can hardly be perceived as well-defined puzzles. They are instead ill-structured problems, questions that do not have a *true* or *false* answer. In other words, for psychologists who wish to analyze the existential questions their clients bring to therapy, an epistemological approach has limited usefulness.

Proponents of recent versions of constructivism, namely, hermeneutic and narrative approaches (Gonçalves, in press-a, in press-b; Mahoney, 1991; Sarbin, 1986a), claim that the cognitive revolution was betrayed by the information-processing approach. This approach moved the field away from the core concept of meaning construction. The epistemological nature of the information-processing approach assumes the existence of a reality independent of an observer, a reality that can be accessed by appropriate cognitive and metacognitive operations. In other words, it assumes that there is a well-established truth that the client can identify with the appropriate therapeutic or educational help. Therapy is thus pedagogical and corrective (Guidano, 1987).

Of course, this approach might very well be appropriate to some puzzling epistemological problems that we face in our daily lives,

such as, Do I have enough computer memory for what I am writing? Did I attend the Board of Directors meeting today? Am I married? However, these questions seldom represent the existential problems that bring our clients into therapy. In therapy, the questions are more likely to be, Am I going to make any difference with what I am writing? What did I experience in the Board of Directors meeting? Why did I marry? Such questions are demands for meaning in our existential space and require more than digital true/false statements. They require the construction of meanings.

Raising his voice against the limitation of an epistemological and information-processing model, Bruner (1990) claimed that such an approach "cannot cope with vagueness, with polysemy, with metaphoric or connative connections" (p. 5). In other words, such an approach cannot cope with *narrative*, which is precisely the foundation of the clinical practice of psychology.

In sum, narrative is an onomatopoeic representation of our existence. Like existence itself, narratives cannot be placed in a true/false framework. An existential approach is therefore required. A shift from the search for epistemological truth to the search for existential meaning is, I believe, a central task for the development of clinical practice.

Traditional cognitive therapies are based on the epistemological/truth paradigm. Therapists use rational arguments to correct and convince clients of the truth. In contrast, in the existential/meaning paradigm, both the client and the therapist provide narratives and draw conclusions about their likeness. The first approach "verifies by eventual appeal to procedures for establishing formal and empirical proof. The other establishes not truth but verisimilitude" (Bruner, 1986, p. 11). In the next section, I explain why the narrative is an ideal path for the construction of existential meaning.

## **NARRATIVE AND THE CONSTRUCTION OF EXISTENTIAL MEANING**

In an interesting exploration of the function and meaning of literature, Milan Kundera (1987/1988) contended that the objective of the novel is not to discover a "true reality" but instead to experiment with the possibilities and meanings of existence. Experimental selves are projected into the world of narrative to explore some of the core themes of existence.

Narratives are therefore intentional pursuits whose goal is the construction of meaning. Our personal identity, the coherent narra-

tive of our life, has meaning as the central organizing principle, as recently described by Guidano:

Bringing forth a coherent world is the first and last condition for having a consistent self-identity, with personal meaning as the proactive understanding that reveals a specific mode of being becoming the key notion in the elaboration of an ontological theory of personality. (1991, p. 15)

I have been defending the idea that human existence is characterized by a continuous process of meaning construction. In this context, the Cartesian idealist position "I think, therefore I am" is replaced by the Ortega y Gasset alternative, "I am, therefore I think" (Miró, 1992). This hermeneutic attitude of meaning construction implies the conception of humans as *narrators*.

Whereas the epistemological framework is sustained by the root metaphor of humans as personal scientists whose objective is to uncover truth, the existential approach subscribes to the notion of humans as narrators, whose task is to construct meanings. The replacement of a *Homo scientus* metaphor with that of a *Homo fabulus* is indeed the proposal of a narrative and hermeneutic psychology (Howard, 1991; Polkinghorne, 1988; Sarbin, 1986a).

We think, fantasize, understand, and make choices according to a narrative structure (Sarbin, 1986b). Our experiences in the past and their projection into the future are structured in a narrative way. Like the six characters in Pirandello's play, we search for a sense of identity and authorship through the experimental narratives of our possible selves.

Some authors refer to this alternative conception of human cognition as *experientialist cognition* (Johnson, 1987; Lakoff, 1987) in order to emphasize "the human imaginative capacity for creating meaningful concepts and modes of rationality that go well beyond any mind-free, external reality" (Lakoff, 1988, p. 119). Subscribers to a narrative and experiential approach tend to agree that

1. Humans are storytellers.
2. Thoughts are essentially metaphorical and imaginative.
3. The manipulations of thoughts are intentional quests for meaning.
4. Reality is a set of ill-structured problems that can be accessed through hermeneutic and narrative operations (Lakoff, 1987).

Substantial support has been found for the idea that very early in our development, we use narratives to describe life events, under-

stand the present, and predict the future (Mancuso, 1986; Mandler, 1984; Van Den Broek & Thurlow, 1991). For example, Sutton-Smith (1986) has shown that as early as age 2 children are able to share narrative accounts of their lived or fantasized experiences. Interestingly, Sutton-Smith proposed that their stories can be seen as a kind of music, with a structure of "theme and variation." Aesthetic, poetic, and rhythmic aspects predominate in early narratives. Although development leads to the acquisition of a progressive narrative grammar structure (Mandler, 1984), some of the early aspects remain in our narrative accounts throughout our lives.

According to Gergen and Gergen (1986), if a narrative is to bring meaning and coherence to experience, it must meet two basic requirements. It must (a) establish a goal or valued end point and (b) include events that are relevant to the goal. Similarly, Mandler (1984) has identified seven categories in a complete narrative: setting, initiating event, internal responses, goal, actions, outcome, and ending. It is through the process of structuring life experiences within this narrative structure that human beings find coherence and connectedness and come to the construction and deconstruction of meaning.

In sum, meaning is central to personal understanding and development. The hermeneutic activity of meaning construction presupposes the existence of narrative. To construct meaning out of our life experiences, we must be able to conceptualize our past, current, and forthcoming life experiences with narratives. Meaning and narrative are therefore twin concepts requiring the close inspection of psychotherapist.

Narrative is a scheme by means of which human beings give meaning to their experience of temporality and personal actions. Narrative meaning functions to give form to the understanding of a purpose of life and to join everyday actions and events into episodic units. It provides a framework for understanding the past events of one's life and for planning future actions. It is the primary scheme by means of which human existence is rendered meaningful. Thus, the study of human beings by the human sciences needs to focus on the realm of meaning in general, and on narrative meaning in particular. (Polkinghorne, 1988, p. 11)

## **THE THERAPEUTIC CONSTRUCTION AND DECONSTRUCTION OF NARRATIVE**

I have been suggesting that human beings are embodied metaphors whose eminent task is to exist through understanding and under-



stand through existence (Gonçalves, in press-a). That is, life is a narrative and human beings are themselves narrators, exploring the versatility of different meaning constructions. Thus psychotherapy can be seen as the experiential atelier for the construction and deconstruction of clients' narratives.

Authors from different therapeutic orientations have shown that conceptualizing the psychotherapeutic process within the narrative framework introduces new possibilities for the clinical practice (Angus & Hardtke, 1992; Gonçalves, in press-b; Gonçalves & Craine, 1990; Russell, 1991; Spence, 1986; White & Epston, 1990). In fact, a narrative approach to clinical practice brings existence into the focus of therapy, and discussion of existence means discussion of meaning. For example, Russell (1991) stressed that in the narrative framework,

patients come to be seen less as inductive discoverers and testers of theories of their and others' conduct and more as scientists interested in what we are always interested anyway—constructing stories to live by. (p. 251)

Cognitive narrative psychotherapy, the therapeutic approach that my colleagues and I have been developing in our clinic (for a description, see Gonçalves, in press-b), allows clients to participate in the construction of alternative meanings through the narratives experienced in the past and projected into the future.

Like any kind of text, clients' narratives are to be taken not as paradigmatic and unbiased facts, but instead as illustrations of the authorship of meaning-making activity—"We go back to Tolstoy to recover the confusion of battle, but not to learn where specific regiments were deployed or exactly why one side lost and the other side won" (Spence, 1986, p. 22). This is exactly the attitude of the narrative therapist regarding clients' reports.

On the basis of clients' prototype illustrations, the therapist helps clients (a) develop their narrative skills and attitudes, (b) construct meaning out of their narratives, (c) deconstruct meaning and develop alternative meanings, and (d) test the viability of these meanings by projecting alternative narratives.

These objectives may be accomplished by using a therapeutic process that includes the following phases: recalling narratives, objectifying narratives, subjectifying narratives, metaphorizing narratives, and projecting narratives.

*Recalling Narratives.* First, the client develops a recalling attitude, learning how to use past and daily experiences as important tools for meaning making. Through several therapeutic exercises, the client

recollects significant narratives across the life span and selects one for analysis. The selected narrative is expected to be a prototype or best example of the theme under discussion.

*Objectifying Narratives.* In the second phase, the therapist helps the client develop an objectifying attitude, which enables the client to identify the sensorial and behavioral dimensions (e.g., visual, auditory, olfactory, gustatory, kinesthetic, and behavioral) of his or her narrative. The aim is not to develop an objectivist, photographic, "true" representation of existence. Instead, clients are encouraged to empower the complexity of their ontology by discriminating the network of experiences in which they exist. The maze of reality can be approached linearly and factually, such as in the statement "Today I woke up at 6:00 A.M.," it can be transformed into a narrative process by objectifying the sensorial and behavioral dimensions of the experience, in the following example:

At 6:00 A.M., the old round alarm clock went off with a strident and aggressive noise. There was some light coming through the window. In the air there was a paradoxical mixture of French perfume and sweat. I felt a dry taste on my mouth. My lazy body was revolting against the idea of moving. Slowly I began to stand up in tentative stretches of different parts of my body, realizing that I was finally waking up.

The clients is instructed to apply this objectifying attitude to the analysis of the prototype narrative.

*Subjectifying Narratives.* The third stage consists of subjectifying narratives. The idiosyncratic nature of every narrative is characterized by the inner experiences, both cognitive and emotional, of the characters. The internal side of experience is often referred to as one of the essential dramatic tools for the construction of meaning out of every narrative. The client learns how to construct his or her narrative emotional experiences using the experiential strategies of activation, focusing, and symbolizing (Greenberg & Safran, 1987). In addition, the client gets acquainted with instructions for constructing the cognitive dimension of his or her narratives, such as thought listing and downward arrowing (Beck & Freeman, 1990). Both of these processes are applied to the analysis of the prototype narrative.

*Metaphorizing Narratives.* As therapy progresses, the client gets closer to meaning construction. Meaning making is indeed the central objective of the fourth phase of the therapeutic process, the metaphorization of the narrative. Metaphors are ideal meaning-making sym-

bols that are isomorphic with the content of the narrative (Haskell, 1987). The objective of the fourth phase of therapy is therefore to help the client develop structural, orientational, and physical metaphors that ideally symbolize the meaning of any narrative. After learning how to create meaning-making metaphors of experiences, the client turns to the prototype narrative and is instructed to construct his or her central root metaphor. Further narrative illustrations of this root metaphor are provided through an excursion into the client's life span.

*Projecting Narratives.* At this point, the client has constructed a prototype narrative with the objectivity of sensorial and behavioral details, the complexity of emotional and cognitive subjectivity, and the underlying meaning of a root metaphor. In addition, the client has developed the capacity to empower his or her narrative schemes through the construction of meaning from past, present, and forthcoming experiences. The final stage—projecting narratives—aims to help the client develop alternative meaningful metaphors and test them through the projection of new narratives. The process parallels what Markus has referred to as the construction and validation of possible selves (Markus & Nurius, 1986; Wurf & Markus, 1991). The objective is to orient the client to forthcoming life narratives, bringing a sense of acting and authorship. That is, the client is invited through the projecting attitude to develop new alternative characters (i.e., alternative metaphors) and then to develop and experiment with new narrative scripts out of these new metaphors. That is, after identifying alternative meanings through new metaphors, clients are invited to objectify and subjectify these metaphors. Once this is accomplished, a fixed role trial of these projective narratives takes place and the experiences are evaluated (Neimeyer, 1993).

As I have discussed elsewhere (Gonçalves, in press-b), the process has no definitive ending. Instead, the objective is to introduce an ontological openness to past, present, and forthcoming experience. This goal is best served by assuming a narrative attitude that allows the versatility and complexification of experience necessary for the construction and deconstruction of ever-changing and progressively more encompassing meanings.

## CONCLUSION

The focus of this article being narrative, let me conclude with the presentation of two enlightening narratives. The central characters of these narratives exemplify the contrasting views of epistemological truth and existential meaning.

The first one is a puzzling story about Epictetus, the stoic philosopher inspiring some of the current models of therapeutic rationalism. Epictetus was well known for the strategies he used in some tragic episodes of his life narrative. In one of these episodes, Epictetus was being tortured with a diabolic apparatus applied to one of his legs. During the torture, he kept repeating to his master, "I am telling you that you are going to hurt me deeply, impair me, and I'll be limping for the rest of my life." The stubborn master continued the torture, testing the limits of the philosopher, while the stubborn Epictetus kept repeating, "I am telling you that you are going to hurt me deeply, impair me, and I'll be limping for the rest of my life." In the end, Epictetus was indeed severely injured and limping for the rest of his life, but nevertheless proud of his accurate predictions. Epistemologically speaking, Epictetus was indeed true in his prediction, but it is doubtful that this truth made any difference in the meaning of the experience.

The second story is a well-known episode in the history of painting brought to us by Bruner (1990). After completing the portrait of Gertrude Stein, Picasso was told by friends of both of them that she was quite dissatisfied because she didn't see any resemblance between the portrait and herself. In other words, according to Gertrude Stein, Picasso was not painting the truth. Responding to these complaints, Picasso told the messengers, "Tell her to wait . . . eventually she will resemble it." In contrast to Epictetus, Picasso was more likely to project meanings than to find the truth. It is indeed ironic that Gertrude Stein would become one of the most important figures of the surrealist movement.

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