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if DSM5 doesn't speak to you, consider an open story strategy. In your relationship with the persons who come to you for help, they usually begin with all the things they want you to fix. They take for granted the psychiatric model with its accent on pathology. I've trained therapists in the traditional approach for over forty years, and have been impressed with the zeal and compassion they brought into our field, only to see our professional wisdom offering straight jacket self-fulfilling labels constricting their work rather than evoking a free spirit to liberate theory and practice.

For nine years with eight groups each and every week at a private psychiatric hospital in the East I let the teens and adults there teach me. I dispensed with our customary jargon, and wrote into the clinical record progress notes in plain English. I found a way to let others who worked with the same persons know what they needed to know, while respectfully describing persons in the difficult situations they found themselves. Often the therapist would read my report to their patient. No great surprise, for I was willing to show the patient ahead of time what was going into the record if they asked for it. Others supplied diagnoses which have little predictive power, not out of incompetence, but because the prevailing system utterly fails to connect specific diagnoses with specific treatments. Here is my alternative.

Though my enduring focus has been psychodrama, you should find the following applicable to family, group, couples, and even individuals. Beyond residential treatment I've found the open story system valuable for the general public, spiritual growth, drama, comedy, creative writing, addiction and correctional populations. Are you culturally aware, having taken in your fill of film, TV, plays, fiction...etc. Turn your pleasure, escape (or whatever) to everyone's advantage. You have more relevant resources at hand than you ever imagined.

Ever since you were an infant you've tuned into the emotional expressiveness (-affect) your care givers showed in your presence. In high school outside class you assessed the emotional climate around you in order to survive among your peers. Here we begin. Lists of emotions may stretch out, but the working labels may be grouped as 1. anxious-fearful, 2. negative-depressed, 3. angry, 4. mobilized and 5, positive-happy.

The only new category is MOBILIZED. This covers plots, stories, and themes we call PURSUE, EXPLORE, SURPASS, SAVE, NURTURE and HEALED. This entire cluster stands midway between "anger" and the "positives." 24 transitive verbs name the story models we employ, a relatively short list. A facilitator's impression of the individual's affect turns his attention to one or two of the four or five under each category. We'd expect the leader to have had abundant examples from his own personal experience of every possibility.

The minimum components for a story consist in answers to orientation questions such as WHO? WHAT? WHEN? WHERE? and HOW? These are CONTEXT questions. Social and cultural convention sees the answers as background.

A conspicuous omission is WHY? This is the PLOT QUESTION, the key to our interest in a particular story, which may very well point to what has gone amiss. Daily usage glosses over the distinction. Normally we don't analyze, but experience plot and context as one. Habitually we use story and plot interchangeably. In working closely I avoid the 'why question, and emphasize the setting. This allows a person to catch her breath, for context questions allow one to lower one's guard. Often significant perceptions emerge that previously escaped notice. An unchallenged answer to the WHY yields a closed story, whereas a loosely held answer yields an open story. When leaders accept the closed story, the individual no longer needs to defend his WHY and he moves to an open story.

Simply telling, or better, enacting the full story using persons and things as props gives everyone an adequate picture of the situation. One wants to go beyond what hasn't worked to something else. About half way through the session we provoke imagination for our protagonist to explore likely outcomes of scenarios. In the process a possible future may serve as more adaptive for the individual's reality (=surplus reality). He intends a course of action to try out a better life-story, done in session—or as 'homework.'

Each of the 24 story models offers roles, which facilitate translation into action, pressing us upward in constructing an identity, soul, or self. We move from 'who I am not' to 'who I want to be,' and from there through anticipating the future declaring for myself and others who I am.(already).

I expect to present this system to the American Society for Group Psycho-therapy and Psychodrama at Oakland this upcoming April entitled LET GO OLD PLOTS FOR NEW WITH AN OPEN STORY STRATEGY. Let's dispense with the mystique and complexity and opt for a procedure everyone can understand.

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