Prepublication Draft

In this draft the figures are placed **at the end of the paper** following the reference section.

Running Head: Internalised other interviewing: attending to voices of the ‘other’.

Internalised-Other interviewing: attending to voices of the ‘other’.

M. Haydon-Laurelut

University of Portsmouth & Sussex Partnership NHS Trust

J. C. Wilson

University of Portsmouth

Correspondence:

Mark Haydon-Laurelut

Department of Psychology

University of Portsmouth

PO1 2DY

UK

Email: Mark.Haydon-Laurelut@port.ac.uk

Abstract

This paper investigates a new application of the Internalised-Other Interview (Tomm, 1993). Internalised-Other Interviews have been used for increasing empathy (Burnham, 2000), for creating dialogue (Lysack, 2002), as a way of entering the culture of a person (Pare, 2001) and from within an object relations framework (Hurley, 2006). This paper explores the use of the Internalised-Other Interview for conversations where the referred person is not present. Such people may be at risk of being understood by family members, staff, and others in the community in narrow, monological and problem-saturated ways. Such people may include those with severe intellectual disabilities (ID); those with challenging behaviours; and those with high communicative support needs. The paper discusses an illustrative vignette based on using the Internalised-Other Interview with residential staff supporting people with ID. We have found that Internalised-Other Interview can be powerful in supporting people, family members, support staff, professionals and others in a person's network to help them into the experience of a person who they might otherwise be struggling to understand. Internalised-other interviews invite attention to the voices of, and positions occupied by, people at risk of being either unheard or understood only in superficial, clinical, problem-saturated and 'othered' ways. The Internalised-Other Interview is particularly useful when working with referrals for individuals where proxies may be required to provide communication support.

Saturated with Problems

This paper addresses the response of a therapist when a person is referred whom -perhaps due to communicative abilities and/or challenging behaviours – she struggles to include in the therapy room. The focus is on conversations where the referred person is not present. There may be many reasons for this, for example, the referred person may not be aware that there is a problem. Further, the description of the problem of the referred person may be denigrating and the referred person may not have the skills to respond. Often when a person is referred to an agency, it is to seek help for a problem another person perceives they have. At times, the referred person may be seen as problem-saturated (White & Epston, 1990). A problem-saturated view is one in which the person and the problem are merged into one entity, such that, all behaviours of the person are seen as relating in some way to the problem. Indeed, as White, (2007) explained “people come to believe that their problems are internal to their self or the selves of others – that they or others are in fact the problem. And this belief only sinks them further into the problems they are attempting to resolve.”(p. 9). This is as true for the referrer as it is for the person referred. The problem-saturated view of the person can obscure a more useful understanding of the person and their relationship with the problem. The problem-saturated story organises interpretation of the person’s actions. For example, a person’s displays of emotion are described only in terms of jealousy; high; or selfish. A person with severe intellectual disabilities who insists on a particular fixed daily routine when adjusting to new accommodation may be viewed as being obsessive; or a person with an Autistic spectrum disorder who repeatedly asks the same question is at risk of being understood as “trying to wind me up” or “push my buttons”. Such descriptions inevitably limit possibilities and beg the question, who needs to talk?

Interviewing the Internalised-Other

Internalised-Other Interviews have been conceptualised as a practice for increasing empathy (Burnham, 2000), for creating dialogue (Lysack, 2002), as a way of entering the culture of a person (Pare, 2001) as well as from within an object relations framework (Hurley, 2006). Internalised-Other Interviews have been used across a variety of clinical contexts including with men who are violent (Nylund & Corsiglia, 1993), with children who have been exposed to violence (Hurley, 2006) and more broadly in systemic therapy and consultation (Burnham, 2000; 2006). The Internalised-Other Interview asks the person to speak of their experience of another's experience or of a part of them self or an emotion. The person being interviewed is interviewed as if they were this 'other'. For example, a person may be interviewed as someone in their network of significant relationships and are called by, and answer to, this others name in the interview. This process is then reflected upon and meaning made. Thus, in the interview a person moves to taking a first person position *as* the 'other' speaking from an 'I' position and back to a third person position once more, speaking about the person. Pare (2001) suggested that "we speak with others, invariably across a cultural divide" (p. 1) and that the Internalised-Other Interview may be a way to cross this divide.

We all inhabit multiple cultures and the Internalised-Other Interview is an opportunity for changing places, that is, experiencing the world through the eyes of another (Bakhtin, 1981). Switching between first and third person perspectives has the potential to create a better understanding via a broadening of our perspectives, a taking of different positions on self and other. In Paul Auster's novel *Invisible*, a character writing an autobiographically based piece finds he has writer's block:

I continued writing in the first person, grew more and more dissatisfied with the results, and eventually stopped. The pause lasted several months (difficult months anguished months), and then one night the solution came to me. My approach had been wrong, I realized. By writing about myself in the first person, I had smothered myself and made myself invisible, had made it impossible for me to find the thing I was looking for. I needed to separate myself from myself, to step back and carve out some space between myself and my subject (which was myself), and therefore I returned to the beginning of Part Two and began writing it in the third person. I became He, and the distance created by that small shift allowed me to finish the book.

(Auster, 2009, p. 89)

Being invisible to oneself, as well as to others, can be highlighted and addressed by a change of perspective. For the writer of an autobiography this involves moving from the first to third person, for the person speaking of an absent other a move from the third to the first may be indicated.

Burnham (2000) proposed a series of steps for carrying out an Internalized Other Interview (see Table 1 below).

INSERT TABLE 1 HERE

These steps are intended as a useful guide to the process rather than binding rules. This process is fleshed out in the vignette below.

Contested Disabilities

This section of the paper will make some introductory remarks concerning the contested nature of intellectual disabilities, in particular, and disability more generally and subsequently introduce the context of the first authors (M.H-L) work in intellectual disabilities services in the UK. This will set the scene for an illustration of internalized other interviewing in this context¹.

Problem-saturated descriptions of people with intellectual disabilities may be understood as reflecting or drawing upon dominant understandings of disability circulating in the wider culture. These dominant understandings are predominantly the ‘medical’ and ‘individual’ models of disability (Goodley, 2011). These cultural representations of disability in general and intellectual disabilities in particular operate as a lens through which the actions of disabled people and their supporters are understood. Challenging behaviour, for example, may be understood as emerging from impairment itself rather than as something created in social interaction (Goodley, 2001). The individual and medical models tell of the tragedy of intellectual disabilities and as such position people as in need of rehabilitation (fixing) or sympathy. These deficit saturated models construct disability as inside the person who is consequently understood as needing to adjust to the disability she possesses. Disability has often been viewed in this way in the psychotherapeutic literature. It has been pathologised and seen as leading to a maladaptive personality and poor social functioning (Roosen, 2009). The discipline of Disability Studies and the disabled peoples movement more generally have developed alternative narratives of disability as found in the social world and not in the bodies (or minds) of disabled individuals (see, for example, Goodley, 2011; Rapley, 2004).

¹ Due to confidentiality and considerations of space this vignette is a composite reflecting work undertaken across a number of agencies over a period of more than ten years.

The focus of disability studies is of 'Ableist' culture that denies full inclusion to those with impairments and is hence productive of disability (Campbell, 2009). As well as exploring physical and legal rights based barriers to the spaces of community, a number of critical disability studies scholars have become interested in discourses as carriers and creators of disability (Goodley & Lawthom, 2006). Support staff, for example, may draw on cultural discourses of disability as individual deficit and pathology as they make sense of their working experiences. As staff make sense of their experiences drawing upon the discourses of a disabling culture, disablement is reproduced in the everyday interactions with people with intellectual disabilities (Rapley, 2004). These discourses limit how disabled people and their supporters understand themselves and how they are thought of and talked about by others.

Many people with ID in the UK often live in staffed accommodation, either operated by private companies, charities, the voluntary sector or, now less frequently, by the local social services department. The issue of working with the support staff of people with ID has been addressed by a number of authors (Haydon-Laurelut, Bissmire & Hall, 2009; Haydon-Laurelut & Nunkoosing, 2010; Rikberg Smiley, 2006). Staff are a major source of referrals of people with ID to community learning disability (intellectual disabilities) teams. Mark works and receives referrals in several of these teams and employs internalized other interviews with individuals in the person's network.

The Internalised-Other Interview below follows a referral of a man with intellectual disabilities to a community team and concerns residential support staff struggling to

comprehend a person with severe ID and significant communicative support needs. The person is not physically present and it is the staff who have requested help.

Interviewing Rob as Andrew: A Vignette

A man with a label of severe ID, let's call him Andrew, is referred for anger problems, damaging property and shouting at staff at the residential service where he lives with 24 hour support. The referrer is the manager of the service, Rob. Andrew has lived in the service for about 18 months and his behavior is described as deteriorating. Following a phone call to the service regarding who was concerned about the issue, Rob, the manager and three staff arrived at a meeting with the therapist. Rob and the three staff struggled to respond to questions asking about their experience of Andrews experience and responded to questions with statements about his apparent characteristics ("aggressive" & "Jealous") and behaviours ("hits out" & "destroys property"). After detailing the problem saturated description, the staff were asked if they would consider undertaking an Internalised-Other Interview.

Warming the context and providing information about an Internalised-Other

Interview

What appears 'usual' to systemic therapists may be experienced as rather unusual to everyone else. To be interviewed as if you were another person is perhaps one of the more unusual practices. In most work contexts, it is likely that the Internalised-Other Interview will depart somewhat from the expectations and experiences of attendees. Traditional clinical interviews involve information given by those attending and professionals offering advice on how to

adjust care practices. The context then needs a little warming for the Internalised-Other Interview idea to survive (Burnham, 2005). For example one might say:

Sometimes it can be tricky to understand a situation you have been involved with for some time – you know to step back and try and think about it in another way. I find sometimes that by changing the way we talk when we meet something new and useful can emerge. I know this way of interviewing that can sometimes help with this. I interview you or another person here as if they were Andrew (person with ID). So I call you Andrew, you answer as you think Andrew would. You answer as you imagine Andrew might if he shared your verbal abilities. It's as if you are responding as you think he might wish to.

Once staff felt ready to do something a little out of the ordinary, there followed a discussion regarding who would be interviewed. Guiding questions include who may be best placed to keep new meanings alive in the person's life as well as who knows the person a little bit. One might also have ideas about who might be most ready to take on such an imaginative task. Rob (manager of the residential service) was interviewed as if he were Andrew. When undertaking these interviews, it can be very helpful to have a reflecting team. The remaining three staff made up the team on this occasion. Staff may not have engaged in practices like these before and require some explanation before doing so.

Orienting Questions

The conversation opens with questions to Rob (in the Internalised-Other Interview as

Andrew) designed to orient Rob to Andrews's experience. Questions such as:

“What's your name?”

“Ok Andrew, where do you live”,

“Who lives with you?”

“Andrew, how are you able to find out what your day will hold?

‘Talk me through a typical day

‘When a member of staff leaves you Andrew, how do you know when or if they are coming back?’”

During the interview it can be useful to use the person's name often to ground the person in their experience (Burnham, 2000).

Relational Questions

Subsequently the interview moves on to questions that focused on experiences, of inclusion, of life events and significant relationships. This is in the context of the lives of many people with ID experiencing little meaningful choice in such matters. Here in this illustrative text Rob, interviewed as Andrew, begins to answer on Andrews experiences of contact with his family. As he is asked to respond in the first person the former talk of character traits and problem behaviours is joined by talk of feeling powerless and missing his family.

Therapist: Andrew, who are the most important people in your life?

Rob: Erm... my mum is the most important person; she comes to see me at Christmas time and sometimes, sometimes if a special event is happening.

Therapist: How do you choose when to spend time with her Andrew?

Rob: Uh... I don't choose. The staff tell me when mum is coming to pick me up.

Therapist: So how do you know when you are going to see her next? How do you know when there will be a special event?

Rob: I don't know. I don't know when she, when they, will visit. They visited last June when my uncle was over from France but I haven't seen them for a few months now.

Therapist: Do you miss them? Why do you live here in the service and not with your family?

Rob: I don't know... Maybe I did something wrong. Maybe they sent me away? I do miss them – I wish I could see them more than I do.

These kinds of questions have moved the discussion away from descriptions' of behaviour problems and character (perhaps linked to disability/impairment) to the broader context of the person's life and the complexities of the person's experience.

Episodic Questions

These questions focus on specific episodes of interaction, including those associated with the referral issue. These questions aide in a retelling of the story of the 'challenging behaviour' from another characters perspective: Andrews. Rob is asked to speak as Andrew might of the kicking at the office door – something mentioned in the referral and of which staff were unsure about.

Rob: I damaged property – kicked the door in and shouted at staff.

Therapist: Really? Tell me where you were. What had happened?

Rob: I came back from the day centre, I was upset...

Therapist: What about?

Rob: I don't know. I was upset though...

Therapist: What happened when you got in? Who did you talk to?

Rob: Erm.. I wanted to talk to someone... but after Jess (staff member) opened the door she went into the office. They were all busy doing things in the office, paperwork in the office, with the door closed. I was in the corridor outside. I was trying to listen but I couldn't hear. I opened the door and they all said 'Andrew, we are having a meeting, we will see you in a bit' and I had to close the door and stay outside while they had their meeting.

Therapist: How did you feel?

Rob: Hmm I felt hurt, upset, excluded, let down, erm... like they didn't want me..

Therapist: Like they had rejected you?

Rob: Yes, I was upset and they didn't say hello to me – just said go away. I was angry.

Therapist: What happened next?

Rob: I waited and then I shouted and nothing happened so I kicked the door.

An episode of interaction has a richer palette now of contexts, motivations, emotions. In a conversation such as this disabling meanings find it harder to survive as the Andrew's humanity is acknowledged.

Interviewee/Internalised-Other appreciative questions

Questions about the interactions of the person interviewed with the Internalised-Other can be particularly valuable (Burnham , 2000). In this context those supporting a person whether staff, family members or others may at times feel as if they have few abilities and skills and that their support is ineffective. For example, in the UK context many support staff receive low salaries, little supervision and undertake work viewed as being of low status. Thus, these adding an appreciative element to these questions create an opportunity to explore what it is the Internalised-Other (Andrew) might appreciate about the interviewee (staff) as well as difficulties. This highlights what Andrew might want more of and what Rob is doing well.

Therapist: 'So Andrew what do you most appreciate about the support Rob gives you?'

Rob: When he makes some time to listen to me.

Therapist: When does he do that? When does Rob find time to do that?

Rob: If he's on a late shift we will sometimes listen to music together. We both like music. We don't talk much but we look through my CDs and pick tracks to listen to...

Therapist: Andrew, before we end, if Rob was here right now what would it be most important for you to say to him?

Rob: Don't forget that I can have bad days and I won't always be able to tell you about it in words like some other people might be able to.

Rob is asked to evaluate his own practice through Andrew's eyes. Even if it was a possibility to ask Andrew himself Rob is encouraged to engage deeply as he attempts to understand himself.

The Reflecting team

After the interview the staff reflected on what they had heard. They make connections with what was said and the conversation has a different tone than the beginning of the meeting. Staff were clearly annoyed and blaming of Andrew at the beginning of the meeting and now it's calmer. A story begins to develop about rejection - rejection when moving out of the family home and into the residential service - rejection echoing in everyday interactions such

as before the kicking of the office door. It was only 18 months ago that Andrew moved out of his parents home and there is talk of how this might be negotiated by someone who may have some difficulty in comprehending the move and little apparent choice in it happening. There are some voices of blame for the family of Andrew and some of guilt at not having thought about this very much before now.

Rob is briefly re-interviewed as Andrew. What were his thoughts about the reflections of the staff? Does Andrew think they might change some of what they will do now he has heard this conversation? What advice would he give them? He doesn't think that his parents should be blamed. They are the most important people in his life.

Stepping back into ones' 'own' voice

After the interview it is important for Rob to have a chance to step away from the Internalised-Other and back into the shoes of Rob. To do this, Rob's name is used again at this point and he is asked a couple of biographical questions about who he is and where he works. He is then invited to reflect on the experience of being interviewed in this way. He was surprised at how easy he found it to access his 'internalised Andrew' and of feeling moved when he was asked about Andrew's family. He felt some concern that he'd not thought about Andrew's emotional life more. He liked the question about what Andrew appreciated about him as it helped him feel more hopeful that he did provide something of value to Andrew.

So what are going to do now? Possibilities and actions

Rejection was a theme in the interview. This is, of course, an idea, a hypothesis, not a fact. It provides the team seeking help for a place to look. When working with staff actions arising from exploration are particularly important. There may be many entries and exits in an organisational system and teams may be large with part time and non permanent staff; creating actions that will keep learning alive in a changing system is an important component of the work. It was discussed how the service would put this information into action, as well as develop and maintain this learning. This involved care planning systems and induction processes for new staff. New understandings need to be carefully embedded to stand a chance of surviving human services.

Internalised-Other Interviewing: A new relationship to knowledge of the person?

Over the years of use of this interview technique with the support networks of people with severe ID reflections from interviewees have included: Being moved by the powerlessness of the person over their environment; the noticing of the limited opportunities for communication that the person has; talk of how in their busyness the person had become lost to them; talk of the impact of life events on the person with ID; talk of how they hadn't realised how much they knew of the person; and a detailed, unsolicited list of many actions that should be implemented to improve the life of the person. It has appeared to be a particularly effective technique with staff. When an episode *has* been co-constructed where the team feel ready to elaborate on their understandings of the person, the conversations have stepped away from the language of blame ("It's attention seeking") to the language of experience ("I think he's lonely"); from accounts of behaviours ("throwing things") to accounts of thoughts ("maybe he doesn't understand when I ask him to do this?") and emotions ("He must have been devastated when his mother died"); from the language of

certainty (“Bills Bill”) to the language of uncertainty (“I wonder what would bring out the best in Bill?”); and from the language of hopelessness to new ideas and their potential for change. This is also a move from answers to questions; a different kind of understanding, more provisional, dialogical. In the context in which this technique has been used it is concerned not only with gaining knowledge of a person but also with creating a new relationship to knowledge about a person. One characterised as open ended, uncertain and curious. It is taken-for-granted-knowledge in ID services that ‘knowing the individual’ is what one should strive for. However systemic practice and Internalised-Other interviewing in particular ask us in ID services to consider *how* we know the person; of maintaining a curious position regarding our knowledge. Figure 1, below, attempts to capture this process.

INSERT FIGURE 1 HERE

Taking care of carers

“It can be very dangerous to see something from somebody else’s point of view without the proper training.” (Adams, 1992 p. 142)

Being interviewed in this way can be demanding. Pare (2001), in the context of men who have abused others, suggests that asking the person who has been abused about how the abuse was experienced (and having the abuser hear this) may be a way of getting that person to do the work the abuser needs to do. Questions may be sustaining of oppressive relations. With the Internalised-Other Interview we are asking people to engage in a struggle to imagine for themselves the lives of those they support. However in the vignette the staff are not in therapy and they have not come to us as abusers. They have come to us for help. This raises

questions. What do we have a contract to do together? What has been consented to? What episodes might we co-construct with staff? The Internalised-Other Interview may be a moving, significant experience for the interviewee and potentially for those listening. We ask the person to step into the world of another, an experience that may be unsettling, if not painful. This is a particular concern with regard to people such as people with ID, disabled people, mental health system survivors and others who are at risk of rejection and exclusion in our communities. As shown in the vignette this may be a step into a place where there are feelings of powerlessness, of not having a voice and of discrimination more generally. This technique requires particular care and attention. Careful judgement is required regarding the interview, for example, the rationale for undertaking it. Clear explanations of what will happen in the interview are crucial. We can consider including a 'Pass' rule – a person is informed that they do not have to answer any question. A 'Stop' rule invites the person to bring the interview to a close at any time and without reasons for doing so being sought. Respect is shown of course for those who do not wish to participate. The interviewer notes feedback moment to moment with those who agree to be interviewed. We may ask: "How will you help me to ensure that you have what you need to feel comfortable enough in the interview?"

Aftercare is also a consideration in busy community services. Will you have the ability to meet with the person if any follow up conversations regarding the experience are requested? It would be best not to undertake an Internalised-Other Interview if one cannot be reasonably confident that these factors, concerning, safety, purpose and efficacy will be adequately addressed.

Person positions: A further conceptualisation

This paper has explored the Internalised-Other Interview as a way of accessing the voices of those who may not be with us in the therapy room. This has been through an illustrative vignette of an application in a service for adults with intellectual disabilities. What is going on in these conversations that can create space for movements away from narrow disabling or ‘othering’ discourse? Person positions may be of use here (Pearce & Walters, 1996). As we engage in talk with one another in any conversation we assume certain person positions and associated moral orders; the rights, duties and obligations that person positions bring. If we consider the Internalised-Other Interview process we can see that at the beginning of the meeting those present are taking the third person position – they are saying, “Andrew is just so angry”. When interviewing the Internalised-Other they now take the first person position of “I am angry”.

This interview format has – temporarily – provided a new moral order in the conversation. This is made manifest in the altered speaking rights accorded the interviewer as well as the interviewee. When in the third person an interviewer may ask “Really? What makes you think that he is angry?” It is less legitimate, though not impossible, to ask the interviewee in the Internalised-Other interview, “What makes you think you are angry?” First persons are usually accorded the right to remain unchallenged when making such statements. So the interviewee no longer needs to appeal, to justify, or defend his feelings in quite the same way and is freed up to explore this world of experience. As an interviewer one can explore curiously a first person account. In addition, there is an implicit invitation to position the person interviewed not as a complainant about another not present but rather as an advocate of the person – they are positioned to speak as them rather than for oneself, ones organisation or profession. The movement through person positions primarily manifests as changes from interviewees talking *about* others in episodes in which they may be a participant to talking or

listening *as if* they *were* those others (see figure 2). They become other to themselves and in the space created find room to incorporate the other as part of themselves.

INSERT FIGURE 2 HERE

Conclusion

Internalised-Other Interviews (Tomm, 1993) can be a powerful method of attending to the voices of those whom we may struggle to include in the therapy room. Some of these persons may risk being understood in narrow, problem saturated ways. For example, people with ID historically have been labelled in such a way that their problems have been stripped of context and interpreted within the biomedical model (Haydon – Laurelut & Nunkoosing, 2010). The vignette of residential staff supporting a person with ID demonstrated the transformational power of Internalised-Other interviewing. Internalised-Other interviewing creates an opportunity to loosen the grip of such reductionist disabling understandings of a person's life – bringing persons back into relationship. One theoretical lens for making sense of this is person positions (Pearce & Walters, 1996). Internalised-Other interviewing can be conceptualised as changing the positions in the interview in a way that invites new conversations via a novel moral order. However, careful preparation may be required when inviting interviewees to speak with the voice of the 'other'.

References

- Adams, D. (1992). *Mostly Harmless*. London: Pan Books.
- Auster, P. (2009). *Invisible*. London: Faber & Faber.
- Bakhtin, M. (1981). *The Dialogic Imagination: Four essays by M.M. Bakhtin, ed. M. Holquist*. Austin: University of Texas Press.
- Burnham, J. (2000). Internalized other interviewing: evaluating and enhancing Empathy, *Clinical Psychology Forum*, 140, 16-20.
- Burnham, J. (2005). Relational Reflexivity: a tool for socially constructing therapeutic relationships. In C. Flaskas, B. Mason and A. Perlesz (eds.) *The Space Between: Experience, Context And Process In The Therapeutic Relationship*. London: Karnac.
- Burnham, J. (2006). Internalized other interviewing of emotions: from blame to strength. *Context: The magazine for family therapy and systemic practice*. June.
- Burr, V. (1995). *An introduction to Social Construction*. London: Routledge
- Campbell, F. K. (2008) Exploring internalized Ableism using critical race theory. *Disability & Society*, 23 (2), 151 - 162
- Goodley D. (2001) 'Learning Difficulties', the Social Model of Disability and Impairment:

Challenging Epistemologies" *Disability and Society*, vol.16 no.2, 207-231

Goodley D. (2011) *Disability Studies: An Interdisciplinary Introduction*. London: Sage

Goodley D. & Lawthom R. (2006). *Disability and Psychology: Critical Introductions and reflections*. London: Palgrave Macmillan

Haydon-Laurelut, M., Bissmire, D., & Hall, H. (2009). Systemic Staff Consultation in Staffed Accommodation. What do we mean by Systemic? What do we mean by Working Systemically? *Human Systems: the Journal of therapy, consultation and training*, 20, 1, 35-50

Haydon-Laurelut, M. & Nunkoosing, K. (2010). 'I want to be listened to'. Systemic Psychotherapy with a man with intellectual disability and his paid supporters. *Journal of Family Therapy*, 32, 73 – 86

Hurley, D (2006). Internalized other interviewing of children exposed to violence. *Journal of Systemic Therapies*; 25, 50 - 63

Lysack, M. (2002). **From Monologue to Dialogue in Families: Internalized Other Interviewing and Mikhail Bakhtin**. *Sciences Pastorales/Pastoral Sciences*, 21, 219-244.

Nunkoosing, K. & Haydon-Laurelut, M. (2011). Intellectual disabilities, challenging behaviour and referral texts: a critical discourse analysis. *Disability and Society*. 26,

4.

Nylund, D. & Corsiglia, V. (1993). Internalised-Other questioning with men who are violent. *Dulwich Centre Newsletter*. 2, 29 - 36

Paré, D.A. (2001). Crossing the Divide: The Therapeutic use of internalized other interviewing. *Journal of Activities in Psychotherapy Practice* 1, 21-28.

Pearce, W. B. & Walters, K. A. (1996). *Research methods: A systemic Communication Approach*. PearceWalters, Inc: California.

Rapley, M (2004) *The Social Construction of Intellectual Disability*. Cambridge: Cambridge University Press

Rikberg Smyly, S. (2006). Who Needs to Change: Using Systemic Ideas when working in a group home. In Baum, S. & Lynggaard, H. (eds) (2006) *Intellectual Disabilities: A Systemic Approach*: Karnac.

Roosen, K. (2009) From tragedy to 'crip' to human: The need for multiple understandings of disability in psychotherapy. *Critical Disability Discourse*, 1: 1-25

Tomm, K. (1999). Chapter 12. Co - Constructing Responsibility. In S. McNamee, & K.J. Gergen, & Associates (1999) *Relational Responsibility: Resources for Sustainable Dialogue*. Thousand Oaks CA: Sage

White, M. & Epston, D. (1990) *Narrative means to therapeutic ends*. New York: Norton

White, M. (2007) *Maps of narrative practice*. New York: Norton

Wilcox, E., Finlay, W. M., & Edmonds, J. (2006). 'His brain is totally different': An analysis of care-staff explanations of aggressive challenging behaviour and the impact of gendered discourses. *British Journal of Social Psychology*, 45, 197-216.

Table 1: Proposed steps for an internalized other interview (Burnham, 2000, p. 16)

Steps for the Internalized Other Interview

1. Choose the person, idea, ability, problem or emotion
2. Propose the way of working as a way of fulfilling a goal of the interview
3. Explain the process as much as necessary to begin or politely accept if the person declines the offer
4. Begin by 'grounding' the person being interviewed in the identity of 'the other'.
5. Continue by exploring more deeply the experience of the other in relation to the goals of the interview
6. Explore the relationship between 'the other' and the person being interviewed, including possible reflexive effects
7. Prompt the person that this aspect of the interview is ending by saying 'goodbye' to 'the other' and 'hello' to the person sitting in front of you. (this is optional depending on what kind of future relationship the person being interviewed wants with the ioi).
8. Reflect upon the process and its effects on the purpose of doing the interview.

Social World - Stories & Patterns

Episode: Co-construction of an episode of elaboration of our discourses of the person

Figure 1: An Internalised-Other Interview discursive process

Figure 2: Illustrating movements between person positions regarding conversations concerning the person referred