

Reference. Krause, I.B (2012) (eds) *Mutual Perspectives: Culture + Reflexivity in Systemic Psychotherapy*
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CHAPTER SEVEN

Developments in Social GRRRAAACCEEESSS: visible–invisible and voiced–unvoiced¹

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The importance of being aware of, sensitive to, and competent in working with issues of social difference has a rich history in the systemic and narrative approaches to therapy and training and is specified in the AFT learning outcomes in the training for therapists and supervisors. (AFT website). The “Social GRRRAAACCEEESSS” is a mnemonic developed jointly with Alison Roper-Hall (Burnham, 1992, 1993; Roper-Hall, 1998) and has, in its various forms, been making a practical contribution to this movement, in the systemic field, since 1990. This chapter describes its history, presentations, applications, and exercises. It introduces the distinction between Personal and Social GRRRAAACCEEESSS, and explores the differences within SG, along the dimensions of visible–invisible and voiced–unvoiced.

History

From DISGRRACCE to SOCIAL GRRAAACCEESS and/or Social Graces

In 1990, I was, as a therapist, supervisor/trainer, and director of systemic training programmes, struggling along with many others to

manage the complexity that was involved in engaging and working with those aspects of experience and practice that were, at that time, referred to as the "isms" (e.g., racism, sexism, ageism). As a personal prompt, I created a mnemonic called DISGRRACCE to remind me of these important aspects of difference. It stood for Disability, I, Sexuality, Gender, Race, Religion, Age, Class, Culture, and Ethnicity. I used it as a personal reminder, a teaching tool, and I included it in student handbooks as a guideline for writing case summaries. In a teaching session, I might put the mnemonic across the top of the board as a visual context/guideword for myself and the participants. I used to say, "It's a DISGRRACCE if we do not include these issues in our therapy/training, etc." The "I" was inserted to make up the mnemonic, but when I asked audiences to guess what the I stood for, many people said "identity", and proposed that identity was created from and within these different aspects of lived experience. This idea of identity was "lost" when the mnemonic was later altered. It might be said that these aspects of difference are constitutive of a person's identities and, recursively, the communities in which they live and where and with whom they story their experiences.

This idea/practice was useful to an extent, but the negative implications of the word "DISGRRACCE" sometimes led to misunderstandings of my positive intentions in using the mnemonic. One black female student said, "Are you saying these issues are disgraceful?" This response triggered a change in my practice, and, in Burnham (1992), I proposed "An extension of this ('DISGRRACCE') may be to think about becoming GRACEFUL through the evolution of therapies and trainings which actively develop approaches, methods and techniques that enhance abilities in these areas" (p. 27). Around 1993, Alison Roper-Hall suggested amending the mnemonic by putting "social" in front of GRRACCES, to emphasize the social construction of these aspects of experience. In the view of both Alison and myself, it is important to retain the prefix of "social" as a context for these issues of difference. However, in writing this chapter, I have wondered whether it might be useful to also use the distinction of *Personal* GRRAAACCEESS (PG), as well as *Social* GRRAAACCEESS (SG). This might draw our attention both to the social contexts in which differences are constructed (SG), and the shaping of individual experience within those contexts. Our curiosity might include both SG and PG and the recursive relationships between

them. Social GRRRAAACCEEESSS was introduced as a practical tool, not a theoretical position. Although it is grounded in social constructionism, it can be used by any practitioner.

Spelling and presentation

Over time, the mnemonic has been presented and used in a variety of ways. In Alison Roper-Hall's teaching and writing (Roper-Hall, 1998), she prefers the grammatical spelling of "Social Graces" and uses it in a "mind map" format for audiences to generate suggestions about different aspects of experience. This enables new GRACES to be added according to the experience and imagination of the reader/audience. I prefer to use the eccentric spelling, which has now extended to Social GRRRAAACCEEESSS, as it draws attention to it as a word made for a particular purpose, and avoids the connotation of "correctness" associated with the dictionary definition of social graces. The mnemonic can be presented in different ways, including a linear list, and what I call a "collide-scope". These two ways of presenting might be seen as grounded in Bateson's dictum that "we shall know a little more by dint of rigour and imagination, the two great contraries of mental process, either of which by itself is lethal. Rigour alone is paralytic death, but imagination alone is insanity" (1980, p. 233).

As such the relationship between them should be seen as reflexively complementary. Each contributing to our work in a different way. Moving between the two can enable practitioners to gain the advantages emergent from "double description" (Bateson, 1980, p. 21). A list can promise or offer rigour, clarity, and order, to the point of tempting us with certainty. Alternatively, the collide-scope suggests difference, variety, movement, complexity, fluidity, and can excite our imagination. It can also prompt doubt, danger, uncertainty, confusion, and frustration, which are not unfamiliar feelings in our practice.

A linear list of Social GRRRAAACCEEESSS: what does it currently "stand for"?

Gender
Geography
Race
Religion
Age
Ability

Appearance
Class
Culture
Ethnicity
Education
Employment
Sexuality
Sexual orientation
Spirituality

Each named difference can be regarded as being part of, and making a contribution to, the construction of social realities, as well as being a significant punctuation within a person's experience, shaping of their identity, and reflexively influencing their positioning within family, and other social relationships, and society and broader cultural contexts. This clear, equal, yet artificial separation of the constitutive aspects of a person's experience can facilitate a rigorous exploration of each aspect. It can afford each aspect a consideration that they might not otherwise receive, if a practitioner, team, or organization goes forward on the basis of what is usual, preferred, or "common-sense" practice. When the term common-sense is used, I am likely to ask: "In what framework does this make *sense* and who is that framework *common* to?" Systemic practitioners often have an allergic reaction to linearity, but this separation might allow for a skills analysis that can show which areas need particular development in the endeavours of therapy, training, supervision, and organizational practice.

Making the phrase "Personal/Social GRRAACCEEES", a rigorous part of planning for conversations with clients, between colleagues, and in training programmes increases the chances that each aspect will "have its turn", and be featured as a context to systematically describe and evaluate practice/agency development. Formal examples of systematically using SG include Birmingham MSc Course Handbooks, and Northumbria University personal and professional development (PPD) sessions undertaken in the context of their MA in Family Therapy and Systemic Supervision courses. Elsewhere, University of Newcastle uses SG as a four-bar "Diversity Grid" applied across the clinical psychology training programme. The Relate Institute includes it as a writing guideline and in the marking criteria on MA and MSc Relationship Therapy courses. Jersey's Early Years & Childcare working group on Social Inclusion have utilized the Social

Grrraaccees acronym to provide a focus on social difference in their self-assessment tool on inclusion to be used by anyone working with children and families to help them consider their attitudes and working practice within the social inclusion and equity agendas. Referring to the mnemonic regularly, on your desk, across the top of a one-way screen, on a notice board, might prompt practitioners to give an account of how they are attending to each of these aspects in their work, and can promote inclusion when otherwise differences may disappear, be ignored, and excluded. However, people do not live in a simple clear list, and a more imaginative, diagrammatic kind of presentation can hint at the complexity involved in the relational aspects of the Personal or Social GRRRAACCEESS.

Collide-scope

In an attempt to demonstrate the rich, complex, sometimes random, unpredictable relationship between the different aspects of a person's experience within the complexity of social relations, I devised this diagram in Powerpoint (Figure 1).



Figure 7.1. Collide-scope.

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What should I call this? Tapestry was tempting, but lacked movement. Kaleidoscope (different visions created through multiple reflections) was more attractive, but too symmetrical. How about a collide-scope? In this non-symmetrical, sometimes colliding vision of relations between socially produced differences, there is a greater sense of what Pearce (1989) defines as mystery.

Mystery is the recognition that the human condition is more than any of the particular stories that make it coherent, or any of the particular patterns of coordination that construct the events and objects of the social order. [Pearce, 1989, p. 23]

Compared to the visual clarity of the list, viewing the collide-scope is not easy, nor is it intended to be. It might also be interesting, confusing, exciting, and frustrating. The collide-scope is intended to generate curiosity and an awareness of your relative positioning in relation to the aspects of difference for yourself, and to the positioning of your colleagues/clients. You might immediately see some aspects which go unseen by a colleague. In workshops, using this image with PowerPoint leads to participants often having to *physically change their own position* in relation to the diagram, before some aspects become visible to them. Some people leave their chairs, move closer, bend themselves, develop conversations with other participants in which they learn something about what they are observing and themselves as observers, and, thus, visualize and experience what might happen in any episode of social interaction or conversation. In PowerPoint, these aspects are then moved around in the "collide-scope". Relations between these differences change. They expand and contract, collide, become foregrounded for a while, and then temporarily move into the background, faded, yet always remaining present. What is obscure might become clearer, what is clear becomes uncertain. This can sound as if each aspect takes an equal and fair turn in the limelight, with the same degree of opportunity to be the highest context marker. Life, left to its own devices, seems not to be like that. At different times and in different contexts, some aspects will, unjustly, remain in the background and be almost invisible and perhaps never spoken about. It may be foregrounded in a negative and unfair light. This is perhaps when the rigour of lists in the forms of specific training policies, procedures, practices, and exercises can remind us to examine each one specifically and develop the specific skills that are necessary to

bring each one for and (c) to evaluate particular context.

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bring each one forth, (b) show that it can be discussed in this context, and (c) to evaluate its contribution to the issues being discussed in any particular context.

Applications and exercises

Many imaginative exercises have been created to explore the more complex relationships between practitioners and the Social GRRRAACCEESS, and to enable them to be more practically competent in using them. These include: Burnham (1993); Roper-Hall (1998, 2008) working clinically with older adults; Heaphy (2000) in training exercises; Burnham and Harris (2002) to address culture in supervision; Divac and Heaphy (2005) giving "Space for GRRRAACCEESS" within training for supervisors; Karamat Ali (2007) hypothesizing in a context where the participants are mostly white middle class; Mills-Powell and Worthington (2007) inviting students to choose one letter from SG and to say something about themselves and how the identity it represents informed their life and influences the hypotheses they make and questions they ask; Burnham, Alvis Palma, and Whitehouse (2008) deconstructing the differences within a training group to facilitate reflexive discussion, and focussing on the gendered significance of who holds the remote control during video supervision; Partridge and Lang (personal communication) using structured exercises to help doctoral students connect "their personal graces" to different stages in the research process. Partridge found it was necessary to "warm the context" (Burnham, 2005) by making connections between research and the graces. In an unpublished dissertation, Totsuka (2010) describes an exercise that she calls "Which aspects of Social GRRRAACCEESS grab you most?" Supervisees found it useful to explore what *does not* grab them, "because then we have to ask why, don't we?" Some feedback from participants was: "personal stories contextualized people's preferences"; "thought provoking and made me think outside the box"; "some people talk about things that I kind of take for granted"; "you can't challenge everything, so you challenge what's organizing you".

Each of these exercises invite, facilitate, require, and nudge practitioners to extend their practice outside their current preferences. Another way of developing and extending abilities is to explore the differences between the social differences, in particular where they

appear on a continuum between visible and invisible, and where they are heard on a continuum between voiced and unvoiced. How might this influence the ability of practitioners and families to raise these differences for discussion?

*Differences among the differences
(not all differences are the same!)*

During the applications and exercises referred to, practitioners often reflect on personal and professional experiences and generate stories from these experiences. They often tell of their dilemmas and uncertainties about how including aspects of the SG in the conversations are personally affecting them. These dilemmas can often be situated along the dimensions of visible–invisible, and voiced–unvoiced. Juxtaposing these two continua creates a set of four quadrants, shown in the heuristic graphic below (Figure 2).

Initially, I thought that, as in other graphics, such as Barry Mason’s “towards safe uncertainty” (1993) and Karl Tomm’s “empowerment” (workshop, 2008), there was a ranking of the quadrants in terms of being more/less preferred as a context for therapeutic or supervisory practice. I imagined that “invisible and unvoiced” was the least preferred and that practitioners would want to work towards “visible

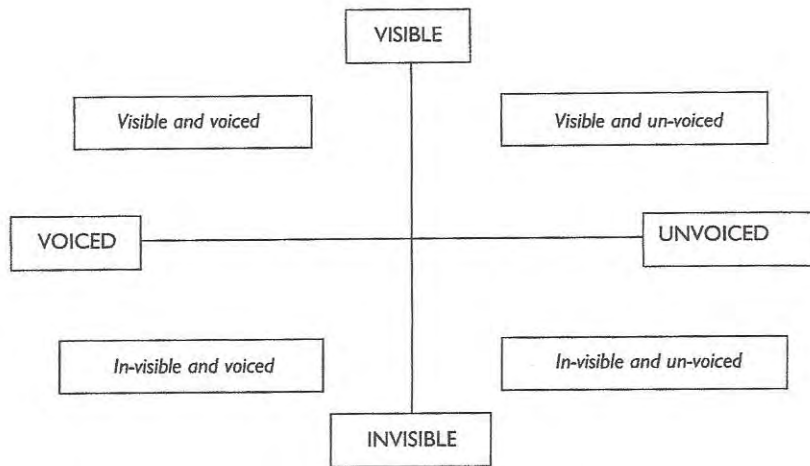


Figure 7.2. The four quadrants of visible–invisible, voice–unvoiced.

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and voiced". This still has some attraction, but I think that it is important to adopt a reflexive approach to the potential value of each quadrant as a context for working in any particular milieu. Voicing the unvoiced, or bringing the invisible into the conversation might contribute to transparency that is therapeutic, or exposure that becomes unhelpful. Roberts (2005) addresses these issues relating to transparency in some detail.

I realise that these terms do not fit for all practitioners, including those with impairments of sight, hearing, or speech. Neither do they fully or adequately describe all the ways there are to experience aspects of social difference and construct social realities. These issues might well be developed in further publications, in collaboration with practitioners with expertise in those areas (Petters, 2011). For the moment, however, I want to observe that it is an ongoing aspect of practice in which relational reflexivity (Burnham, 1993, 2005) is required in order to make decisions with each client/family/supervisee/colleague about what is relevant in their/our particular circumstances, and what metaphors and language helps to describe the story lived. Porter (personal communication) described her experience: "I think the quadrants works in the written form as it invites your own imagination to consider ways you would incorporate into practice. Immediately I think about supervision groups, individual pieces of work, so as a reader the tone and voice is included." The quadrants are arranged in a particular order, but they could be read or used in a different order that makes more practical sense for you.

Visible and unvoiced

Visible aspects of SG might be about self/other, anything in the room, or visual "clues" about such aspects as race, gender, age, ability, culture, and other aspects of appearance. This might be about a particular person: clothes, body shape, colour, height, hairstyle, hair length, glasses, body markings, jewellery, badges, and so on. These might go unvoiced (by comment, reflection, or question) by anyone in the session. This might happen for a range of reasons. For example, being outside awareness; seeing but not noticing; perception of relevance; not realizing the significance; taken for granted; cultural rules of politeness; not having words to name/describe, or not having a culturally appropriate question/grammar; waiting for someone else

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to say something; or if the practitioner does not mention it then it cannot be important. For example, Totsuka (2010), uses the schema within her SG exercise, and the feedback illustrates this section very well. For example: Ruth (supervisee) described how she wondered if her client did not return because she saw a Jewish symbol in her house. Due to her appearance (she is blonde and has blue eyes), Ruth thinks her clients assume that she belongs to the majority white group in the UK context. This poses a dilemma for her when she works with clients of ethnic minority background. She wonders if her clients assume that she belongs to the dominant group and, therefore, cannot relate to their experience. When she works with the clients of white UK background, the dilemma is that they might assume that she is the "same", but she is "feeling different inside".

There is so much that can be commented on in any session/course of work that, perhaps inevitably, there is more that is unvoiced than voiced. It is often difficult to know what is relevant, necessary, appropriate, or has therapeutic potential. If the differences are not particularly relevant to the work, then it might not matter that they go unvoiced. However, practitioners might be anxious that they are missing something important. They might not be content merely to hope that they have done what they can to create a context where the clients feel that differences of significance can be discussed. They might also feel they need to develop the ability to notice their noticing and take the initiative in giving voice to that noticing. If the therapist experiences themselves as regularly noticing but not voicing particular SG that the client has not raised, then it may indicate a possibility to develop what I will call their *vis-abilities*. A practitioners "*vis-abilities*" are those abilities to notice what is visible, and step outside their preference/prejudice and generate curiosity. They might graciously invite them into a spoken domain to indicate that this is a place where these issues can be discussed if and when appropriate. While it is significant when a client raises these aspects, in this chapter I will focus on the practitioner's abilities to take the initiative in bringing forth these issues.

Visible and voiced

Developing *vis-abilities* might involve different levels of relational risk taking (Mason, 2005) and relationally reflexive conversations

(Burnham, 1993, 2005) between practitioner and client/supervisee. Depending on the content, any conversation could be brief or prolonged, easy or difficult. Vis-ability might be restricted by assuming meaning, as in "it's obvious", and it can be enhanced by the "discipline of curiosity", asking questions, even when you are sure you know the answer (Burnham, 2005). Vis-ability might be decreased when working with people who are similar to you in some ways (appearance, class, culture, age), and increased when you are working with someone who shows a visible difference of which you become aware. Vis-ability may vary with clients over time and with different people in the same room. How one voices what is visible can have significant effects. For example, to say about a person that you notice that they are *in* a wheelchair, is quite different to saying that you notice they are *using* a wheelchair. Practitioners might value rehearsing the words they might use so that they do not sound too inexperienced or embarrassed. For example,

Therapist: "I notice you are wearing a cross. Is that symbolic of something religious, or something you like to wear, or both?"

Therapist: "It looks as if we are of different ages, genders, and racial origins. Shall we talk about that as a way to start, or talk about it when it seems relevant?"

In supervision, Porter described a difficult piece of work with an unaccompanied minor who was seeking asylum and who had experienced multiple carers and social workers. I proposed that she ask the question, "When you look at me, who do you see?" After a period of silence, the girl replied, "I see all of the social workers and professionals who promised to stand by me and support me, but eventually let me down." This seemed to open space for a relationally reflexive (Burnham, 2005) conversation which explored the young woman's hopes and expectations and the abilities, or otherwise, of their relationship to realistically achieve these.

The voicing of the visible SG might open up stories that can be deconstructed and with different possibilities. It might also lead "nowhere in particular", be seen as irrelevant, or be disruptive to a therapeutic process. For example, a young woman seemed to use her hair as "curtains" in sessions one and two and then "opened the curtains" in session three. My usual comment would often voice this

visible difference with a variation on "I was wondering when you would come out to play?", often leading to a humorous response and emergent possibilities. On this occasion, she promptly "closed the curtain" and did not reappear until session five, by which time I had learnt a lesson about not always voicing what is visible (readers can insert their own version of what they think I should have learnt from that episode!). The British Association for Sexual and Relational Therapy intentionally include the reference "sexual" in their visible and voiced title, so that clients do not have to risk embarrassment by asking, "Do you do sex therapy?"

Invisible and voiced

Many cultures will have interpretations of phrases such as: "There is more to this than meets the eye", or "Don't judge a book by its cover" (Islamic Words of Wisdom, 2010), indicating "that you shouldn't prejudge the worth or value of something, by its appearance alone" (Hirsch, 2002). Aspects of SG/PG that are not, or not necessarily, obvious to the eye include: geography, religion, ability, class, culture, ethnicity, employment, education, sexuality, sexual orientation, and spirituality. Clients might speak of invisible aspects of SG/PG in a variety of ways, including request for therapy: "Differences in our class backgrounds is causing trouble in our marriage"; informing a practitioner, "I need you to know that . . ."; prompting of one family member by another, "Go on, tell them about . . ."; questioning a practitioner, "Do you have children of your own?" An example from Totsuka (2010): Patrick (supervisee) talked about hidden aspects of self, and contexts in which he might or might not choose to make his invisible aspects voiced. He always tells people he is gay when he attends job interviews because he does not want to work in a homophobic environment. This led to reflection from the observers as to how he might manage invisible aspects of his personal self in his working context and acknowledgement that some aspects of personal selves are harder to disclose in some contexts.³ Practitioners and agencies can contribute to creating contexts in which clients feel this is a place where these aspects of their experience can be discussed, both by how they respond to initiatives taken by clients and by the initiatives they take to bring forth these issues. My colleague, Dr Queenie Harris, received a telephone request: "I am looking for a family therapist who is a Christian

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and I was given your name. Are you a Christian?" Queenie replied, "Yes, I am Christian, but I might not be the kind of Christian that you are looking for. Shall we talk about it first?"

Taking the initiative could include:

- routine questionnaires inviting/requiring clients to give us information about themselves;
- routine questions that might help to bring forth the invisible:
 - "Are there any things that are not immediately obvious about you, that you think it is important for me to know?"
 - "In my work with people and families I am interested in how different aspects of their life influence their well-being and help them to overcome the problems they are facing, for example, their cultural belongings, their religious or spiritual beliefs, the job they do, the class they come from and belong to . . . how about you?"
 - "Is there anyone special in your life at the moment?" (As an alternative to "Do you have a girlfriend/boyfriend?", given their visible gender.)
 - "What idea has to die, so that you can live?"
 - "I am interested to know if there are any spiritual or religious values that might be a resource to you in facing this problem?"

See also Griffith and Griffith (2002) and O'Hanlon (2006).

Impressions drawn from what is visible and voiced might trigger a prejudice or create an assumption that stifles the discipline of curiosity and the ability to hypothesize about what is invisible. The term "invis-ability" does not work in the same way as "vis-ability". So, what kind of ability is required? One ability might be learning not to be "put off" or mesmerized by what is visible, not to fall under the spell of immediate visceral feelings or immediate thoughts "that x (something visible) says it all". If you think someone looks "unapproachable", ask them anyway, and use this information about this prejudice to trigger a self-reflexive conversation with colleagues or in supervision. Keep the SG in mind somehow: because you cannot see some SG, it does not mean to say that they are not important. I have, myself, made many mistakes in this area, and hope that I have learnt to be braver and more skilful from those episodes that have come to light. For example, six siblings (8–15 years old) were separated and

living in a variety of placements, with no intention/hope of being physically reunited with one another or with their parents before they were legally able to make that decision for themselves. As part of rehabilitating their emotional relationships with one another, they wanted something practical that they all could do, no matter what their age was. I asked each person to make something which could be shared among them, so that when they each looked at that object, it might remind them of their love and affection for each other and their family identity, even when they are physically separate (making their love for one another visible). In the next session, the children looked excited about showing and sharing the things they had brought to share . . . all except one boy, who was said to have reduced abilities to learn and communicate and was often on the periphery of sessions. I could not see that he had brought anything, and I (and his siblings, perhaps) was concerned not to embarrass him, or his social worker, by asking him. I assumed that he perhaps lacked the abilities to complete the task. As the session was drawing to a close, he said, "What about mine?" It turned out that he had bought eight white plates from the market, and written the name of each family member around the edge, and the name of their family in the middle. The plates had a device that meant they could be hung on a wall and displayed. After a significant silence, everyone gave him a round of applause and agreed that his was the "best of all". My fear/sensitivity to his assumed lack of ability almost led to his invisible ability not being brought forth. Thank goodness that he felt able to remind us!

These are not hard and fast distinctions. For example, there are times when a person's gender might be uncertain (Iantaffi, 2010), or there might be a visible clue about a person's religion in their dress/symbols.

Sometimes, the voicing of an aspect of experience makes it difficult to discuss and sometimes not. For example, a father who said in a family session, "I am a racist, I suppose" (voiced). From the response of the other family members, I was unable to tell what their position was in relation to his statement (invisible). I was somewhat taken aback by this, but proceeded by asking, "Do you think other people in the family share your views?" As he imagined what their positions might be, and then each person responded, the invisible became voiced. Each person had a different position: some felt they used to

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share his views, but not now, others felt they were more strongly influenced by racist values than their father. They felt that the influence of these strong prejudices were related to the reasons they were coming for therapy, and so we then considered how each person had arrived at this position, what had led people to change, and how they might change to different positions.

Invisible and unvoiced (can we resist temptations of curiosity?)

The aphorism "Out of sight, out of mind" (we might forget about things we cannot see) makes a different sense in reverse: "Out of mind, out of sight" (if we do not think about things, we tend not to see them). Aspects of difference might remain invisible and unvoiced by both the client and the practitioner for a variety of reasons, within or outside of people's awareness. In some contexts, experience might not be volunteered, asked about, explored, and can sometimes be explicitly declared "out of bounds". I thought that while this might be the least preferred and most difficult quadrant to work in, it might be the easiest and potentially the shortest section to write about. Yet, it has been the most difficult to write about, and the most reflexively demanding. The main difficulty I have experienced in considering these possible contexts in which some aspect of SG is not visible and never voiced is what I would call the temptation of curiosity. This would be the kind of *compulsive curiosity* that might lead me to drift into, or attempt to push the conversation into, the invisible and voiced quadrant as an unquestioned/taken for granted routine. Amundson, Stewart, and Valentine (1993) wrote about the dangers inherent in the "temptation of certainty", while curiosity (Cecchin, 1987) is so often posited as a desirable therapeutic asset. While I would support that position in general, and have committed myself to the posture of curiosity in practice, in writing this section I have, gradually, come to think that curiosity, or certain kinds of curiosity, might be problematic. It might be that curiosity that is used *routinely or non-reflexively* draws practitioners to continue exploring aspects of difference that clients prefer not to, are unaware of some "taken for granted" aspects of their lived experience (it is only the fish that does not know (until they are out of it) that they swim in water). For example, it might be only when a person moves to another country/culture/organization that they realize what values/practices they take for granted in their practice

routines. It might be that non-reflexive or premature curiosity, based on unquestioned professional beliefs about the goodness of, for example, openness, transparency, and honesty, could contribute towards a problematic pattern. For example, the more a client/supervisee declines to discuss an issue, the more the practitioner hypothesizes/believes that declining to discuss is evidence of its immediate relevance, and generates curiosity and further, sometimes unwelcome, premature exploration.

Two adult sisters (aged thirty and twenty-seven) came to therapy to work on their relationship following a reconciliation after being estranged for five years due, as they described it, to the drug-saturated lifestyle of the younger sister. According to them, the work was going well, and then the younger sister said she felt spiritually ready to confess to her sister everything, and get it "off her chest" about what she had had to do to maintain her drug habit. The older sister said she did not want/need to know, and was happy to "draw a line" under that period of their relationship, and get on with being grateful for how things were now. The therapist had what might be called a bias towards healing through forgiveness, and, on reflection, considered that he/she influenced the conversation towards enabling the younger sister to make her confessions. The confessions included content that the elder sister found she could not tolerate/forgive, and this response had a deleterious effect on their relationship with each other and with the therapist. The therapy was resumed sometime later, but only following a session in which the therapist proposed to co-create new ground rules for the conversations. A relationally reflexive approach to openness was held, which looked at questions to be considered by all members of the therapeutic system, including both the sisters and the therapist. The questions included: "When I want to introduce something into the session, have I thought about the effects that it might have on me, on others, and on what we are trying to achieve in our work together?" "How might 'speaking out' about things that I am finding it hard to bear alone be a resource to our work together, and how might it be a restraint?" "How might I know when 'getting things off one's chest' could best be considered in an individual session, before deciding how, or whether, to confess it to others, who might find hearing it too difficult?" In this way, each person, including the therapist, was prompted to think relationally about something that seemed like a personal decision. This relational

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consideration seemed to have reflexive effects on how each person then conducted themselves personally.

This example is not intended necessarily to show that it is always a mistake to persist in helping people to give voice to painful issues, or aspects of difference whose significance they are not yet aware of. It could indicate that a therapist's prejudice/passion about openness, or the influence of a non-reflexive belief in curiosity, or any other therapeutic concept, as an unquestioned virtue, can lead to an anti-therapeutic effect, even with therapeutic intentions. Warming the context (Burnham, 2005) is a practice that is intended to be used at different turning points or junctions in the work with any client, not only at the beginning. The more I write about what is invisible and unvoiced, the more I feel tempted to give in to the influence of compulsive (non-reflexive) curiosity, which, alongside overwhelming optimism, continues to be the most troublesome aspect of my approach to therapy. Fellow sufferers from this kind of condition might seek a suitable antidote by growing reflexive curiosity into a second-order skill. This growth can be helped through practices such as: exploring your own relationship with an aspect of SG by asking yourself (whichever self you choose) the questions that you are proposing to ask your clients, becoming curious about your areas and patterns of curiosity and hypothesizing about your hypothesizing in the context of Social GRRRAAACCEEESSS. If someone seems unaware of the significance of an aspect of SG and the influence it is having in their lives, then a practitioner might initiate this in the conversation. Once the client is aware of the potential influence, then a process of relational reflexivity with the client might enable the client to make a choice as to whether or not to discuss that influence.

Summary, reflections, and exercises

In this chapter, I have situated the Social GRRRAAACCEEESSS within the broad field of social constructionism and outlined its origins and development as a tool to influence practice at the levels of approach, method, and technique (Burnham, 1992, 1993; Roper-Hall, 1998). Different methods of presentation have been used to facilitate both rigour and imagination (Bateson, 1980). A rigorous

exploration of each aspect, listed as if separate, can help to promote inclusion and avoid practitioners staying within their "comfort zone" (Wilson, 2007), or experiencing "social vertigo" (Pearce, 1989) when trying to consider too much difference simultaneously. Imaginative play in the form of a "collide-scope" invites us to explore the relational, multiple reflection aspects of SG, which hints at the depth of experience and the systemic notion that "the whole is always greater than the sum of the parts". Examples of how practitioners have used SG have been referred to. A schema for exploring differences between the SG is introduced along the dimensions of visible-invisible and voiced-unvoiced. The aesthetic abilities required to practise in each quadrant and to move between is tentatively explored.

An exciting/frustrating feature of SG as a mnemonic is the wish to add another letter, so as not to exclude any aspect of socially produced difference. While writing this, I have, prompted by workshop participants, added another G for geography, and another S for sexual orientation. Where will it end? I do not have an answer for that, except to say that no framework is ever complete, and is always emerging and developing. It is intended to be practically helpful, not theoretically definitive. Creating something like *Social GgRRaAcCCeEeSsS* can often have a refreshing or innovative effect and lead to enthusiasm and generative practices. Eventually, what was novel might slip into orthodoxy and lose the spirit in which it was conceived. It is a pity that this happens, but is indicated when we ask people why they perform a certain practice and they answer "because that's the way we do it". Perhaps this will also happen to SG, and it will be referred to, as I sometimes have here, as "SG" for brevity, convenience, or because it is not always easy to remember. I hope not, well, at least, not all of the time, anyway. But if it does, I am sure that the spirit that promoted this invention and its extensions will emerge in other ways. When SG is practised at all levels of approach, method, and technique, it can create changes *both* within a broad philosophy *and* within the small and ordinary practices of therapy, consultation, training, and supervision. I will end with two exercises ("Paper GRRRAACCEEESSS", and "Place a Grace") that might be useful in using the schema and maintaining a flexible approach to the ideas in this chapter.

Fig

1.

EXERCISE 1: Paper GRRRAACCEESSS Show and Tell?

Enabling visible and voiced (show and tell):

- Step 1 Write the name of each S G on an individual piece of paper
- Step 2 Arrange them on a table.
- Step 3 Tell the family/client/trainees about each one
- Step 4 Invite them to organize them in ways which show the significance of each one in general/in particular to the situation they are in, the problems they are facing etc.
- Step 5 Discuss the arrangement(s) in relation to the work that might be done together. Including any questions the family/client/trainees/supervisees have in relation to your arrangement

EXERCISE 2: PLACE A GRACE⁴

Place a Grace in the centre of the diagram and explore the 'Grace' in relation to each of 4 distinctions (where might you usually put it) in the context of each quadrant (experiment with how you think/feel/do it)

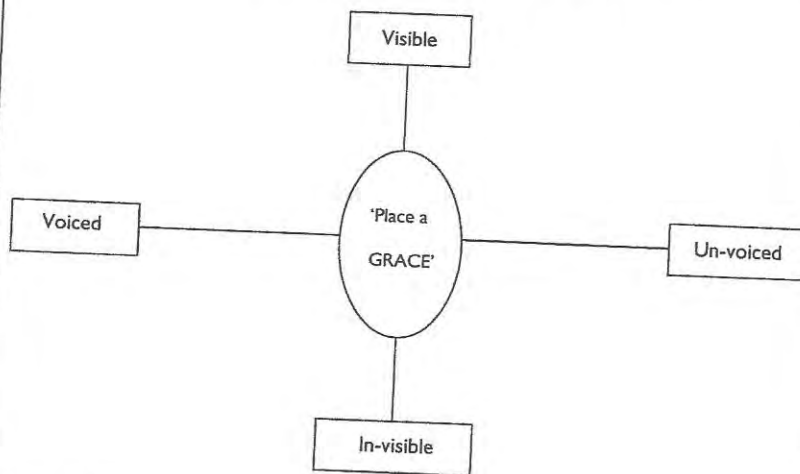


Figure 7.3.

Notes

1. I am grateful to Gail Simon, Barry Mason, Dorothy Porter, Louise Brooks, Julie Barber, and Jeanette Neden for their helpful comments and

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encouragement during the writing of this chapter, especially to Alison Roper-Hall, with whom this has been developed over many years.

2. I would like to dedicate this chapter to my late father, John Burnham, who died while I was writing it. Although he never travelled widely himself, he had an openness to other ways of being and living that I continue to aspire to.
3. Roberts (2005) points out that opportunities for self-disclosure might be more limited for some therapists due to their background and their work contexts, for example, for gay and lesbian therapists.
4. Readers of drafts of this paper have suggested a family resemblance with the "Johari window" (Luft & Ingham, 1955), which some readers may wish to explore.

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