

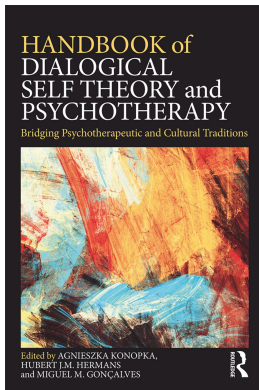
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## **Handbook of Dialogical Self Theory and Psychotherapy Bridging Psychotherapeutic and Cultural Traditions**

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### **Assimilation of problematic voices and the historicity of signs**

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## 5 Assimilation of problematic voices and the historicity of signs

### How culture enters psychotherapy

*William B. Stiles*

This chapter considers how words and other signs absorb their meaning from the experience and cultural context of people who have used them, a property called *historicity*. Through the historicity of the signs they use, therapists' and clients' cultural backgrounds shape clients' understanding of and solutions to their problems. The account is framed in terms of the assimilation model (Stiles, 2011; Stiles et al., 1990).

#### The assimilation model

According to the assimilation model (Stiles, 2011; Stiles et al., 1990), people's experiences leave traces that can be reactivated by new experiences that are similar in some way. Experiences involve actions and intentions as well as perceptions, thoughts, and feelings. So when the traces are reactivated, they too encompass actions and intentions. That is, they can act and speak. To emphasize the active, agentic nature of experiential traces, assimilation theorists and researchers often refer to them as *voices* (Honos-Webb & Stiles, 1998; Stiles, 1997). The reference can be understood as metaphorical, but it has observable manifestations: Different internal voices often speak with distinguishable voice qualities (Osatuke, Gray, et al., 2004; Osatuke, Humphreys et al., 2005; Stiles, 1999).

With time and experience, traces of people's experience tend to become linked with traces of other experiences by a process we call assimilation. This linking can occur through physical similarity or contiguity of the experiences; however, much of the assimilation is mediated by semiotic *meaning bridges* – words, stories, and other constructions that link the experiences – as described later in this chapter. In this way, the voices of experience become resources that can be addressed by events. Because they are addressed by events that are related, they are reactivated and tend to emerge at times when they may be useful. For most people, most experiences are unproblematic and can be assimilated smoothly. Mutually accessible experiences are thereby aggregated by a *community of voices* in which each member is a resource that can be called upon when it is needed. For example, voices of cooking experiences emerge in the kitchen; voices of teaching experiences emerge in the classroom.

Some experiences are problematic, however, because they are traumatic, incompatible with the person's usual self, or otherwise distressing or unacceptable.

Problematic experiences leave traces too, and the voices of the problematic experiences also try to respond when they are addressed. However, they cannot be smoothly assimilated because they evoke powerful negative affect when they begin to emerge. As a consequence they tend to be excluded from the community of voices to varying degrees, remaining suppressed, avoided, or distorted (Stiles, Osatuke, Glick, & Mackay, 2004). In therapy, meaning bridges are often built first between the therapist and the client's problematic voices. These interpersonal semiotic links can then be used as intrapersonal bridges among the client's own internal voices.

The assimilation model also describes how a client's problematic voices can be integrated (assimilated) during successful psychotherapy, turning them into resources. Assimilation tends to follow a systematic developmental progression summarized in the eight-stage *assimilation of problematic experiences sequence* as the meaning bridges evolve (Stiles, 2002, 2011; Stiles et al., 1991): (0) warded-off/dissociated, (1) unwanted thoughts/active avoidance, (2) vague awareness/emergence, (3) problem statement/clarification, (4) understanding/insight, (5) application/working through, (6) resourcefulness/problem solution, and (7) integration/mastery.

This semiotic and developmental account has been supported and elaborated in intensive case studies involving a variety of types of psychotherapy (e.g. Basto, Pinheiro, Stiles, Rijo, & Salgado, 2017; Brinegar, Salvi, Stiles, & Greenberg, 2006; Caro Gabalda, Pérez Ruiz, & Llorens Aguilar, 2014; Caro Gabalda & Stiles, 2013, in press; Caro Gabalda, Stiles, & Pérez Ruiz, 2016; Honos-Webb, Stiles, & Greenberg, 2003; Leiman & Stiles, 2001; Mendes et al., 2016; Osatuke, Glick et al., 2005; Ribeiro et al., 2016; Stiles et al., 2006; see also a summary of earlier work in Stiles, 2002). Studies have also shown that good therapeutic outcomes are statistically associated with assimilation progress, whereas poor outcomes are associated with little or no progress (Basto, Stiles, Rijo, & Salgado, 2018; Detert, Llewelyn, Hardy, Barkham, & Stiles, 2006).

### **Bridges to Dialogical Self Theory**

As pointed out by Konopka (2017, personal communication), there are many possible theoretical links between the assimilation model and Dialogical Self Theory (DST). Voices could be, in DST language, additionally called *I*-positions (Hermans, 2002). Building meaning bridges between voices to enlarge a community of voices could be described in DST terms as changing relations between *I*-positions or within the society of mind (Hermans, 2002). Developing close relations between *I*-positions is, in a DST perspective, stimulating centering or centripetal movements in the self (Hermans & Hermans-Konopka, 2010), whereas disconnected or avoided experiences may be related to the decentering or centrifugal voices in the self. Building meaning bridges has some similarity to the concept of developing meta-positions.

Centering movements like assimilation have been described from the DST perspective as movements towards a greater integration and order, working in the direction of coherence and unity. They restore the organization of the self when an existing order has been challenged. Decentering movements are those

movements in the self that create disintegration, disrupt or undermine an existing order and integration, although these movements also have the potential to innovate the organization of the self (Hermans & Hermans-Konopka, 2010).

Presumably assimilation theory and DST overlap because both seek to describe and explain the same underlying reality. Attempts to conceptualize should tend to converge as new observations suggest adjustments in the tenets and concepts (Stiles, 2009). However, caution is warranted, as terms are not precisely translatable across theories (Leiman & Stiles, 2002). For example, the concept of *I*-position carries meanings that are not included in the assimilation model concept of voice.

The theoretical advantage of the notion of *I*-position is that it brings unity and continuity in the self, while preserving its multiplicity. The *I* is continuous over time: in the process of appropriation and rejection, it is one and the same *I* who is doing this.

(Hermans & Hermans-Konopka, 2010, p. 139)

In the assimilation model, people's (variable) sense of unity and continuity of the self is not built into a concept but requires explanation. It is posited to reflect the degree of smooth mutual access between voices, mediated by meaning bridges (Stiles, 2011).

Within scientific theories like the assimilation model and DST, terms and expressions should mean the same thing to everybody, and the meanings should remain stable across time, except for explicit modifications in light of new observations (Stiles, 2006, 2017). Psychological theories don't fully achieve such consistency and stability, of course, but they are important goals, and deviations risk problems in logic and understanding. This is why theorists must be careful and explicit about defining their terms and why numbers are so appealing to scientists. More than most other words, numbers tend to mean the same thing across people and time (Stiles, 2006, 2009).

### **Signs and meanings**

The concept of meaning bridge in the assimilation model rests on a concept of *sign* that draws on the work of Bakhtin (1984, 1986), Voloshinov (1929/1986), and Leiman (1992, 2011): A sign, such as a word or an image, or a system of signs, such as a sentence, a narrative, a theory, or a picture, has two aspects, a physical, observable aspect and an experiential, epistemologically private aspect. First, it has a concrete presence in the world, such as marks on a page or a screen or vibrations in the air. Second, it refers to people's experience of events in the world or in their minds (Stiles, 1997, 2011).

The second, experiential aspect of a sign is the sign's meaning. The meaning includes the experience of the author who produces the sign and the experience of the addressee or others who perceive the sign. That is, in this theory, meanings are experiential and epistemologically private.

In contrast to scientific theories, social conversations and psychotherapy do not require that meanings remain consistent and stable. This is fortunate, as word meanings normally vary across people, and they change and grow constantly. Psychotherapy makes use of these changes, as addressed in the rest of this chapter.

A sign's meanings to an author and an addressee are never exactly the same; we never understand each other perfectly. Further, signs have a different meaning each time they are used. People's experience changes from moment to moment, so any word that refers to it changes meaning at the same time. The word *sign*, for example, means something at least slightly different to you and to me now than it did at the beginning of this chapter.

Even the shared meanings of simple common words can change substantially across time. For example, since I began school in the 1950s, English gender pronouns have shifted meaning. A sentence like, "A therapist should pay attention to everything his client says" could refer to either a male or a female therapist. Now it is understood by most Western professionals as either referring to only male therapists or insensitive to issues of sexist language. In either case, the meaning – the experience of the addressees – is different. Technology has shifted many meanings. For example, people still dial phone numbers even though more than a generation has passed since telephones had the round, rotary dials from which the verb was derived, and that in turn had been derived from the round clock dials that measured the day (*dies* in Latin).

In this fluid view of meaning, dictionaries can be considered as historical summaries of meanings that words have had. They can be useful guides to understanding the experiences that people who use them are trying share. But they should not be considered as an authoritative source of stable or immutable properties of words.

### Meaning bridges

Signs mediate communication; they offer a way for people to share their experiences with each other and across space and time. As you read this chapter, you are sharing experiences that I had when I wrote this at my home in North Carolina, probably years ago. To the degree that my words' meanings are similar to you as they were to me, you understand me, and the text of this chapter is a meaning bridge.

People generally, and therapists and clients particularly, work hard to ensure that the words they say convey the meanings they intend, and they work hard to understand the meanings that others intend. To the degree they succeed, the sign or system of signs is a meaning bridge between them. Meaning bridges are thus a semiotic glue that binds people's experiences together.

According to assimilation theory, meaning bridges serve the same function intrapersonally as interpersonally. That is, the same semiotic glue can bind experiences together whether author and addressee are different people or different voices within the same person.

Meaning bridges make experiences smoothly accessible within and between people. People can move from one experience to the other using shared signs or systems of signs. Meaning bridges take a variety of forms: Names can make things similar. The term *tree* links diverse experiences of tall, woody plants, both within and between people. Terms like *car parts* or *deterministic theories* can make even more disparate objects or experiences similar. Narratives can link characters and scenes to each other by plot and chronology. Scientific theories link disparate observations; for example, the theory that the earth is round pulls together observations that ships disappear over the horizon, that the sun and moon rise and set each day, and that you can go either east or west to get from New York to Beijing.

Semiotic meaning bridges also underlie the process of aggregating experiences, and in this capacity, they are the mechanism of assimilation. By bringing two experiences together in awareness – reactivating their traces at the same time – a meaning bridge produces a new, aggregate experience, involving elements of both (see Stiles, 2011). Any experience that involves recognition, familiarity, or perceived similarity illustrates this process. Traces of aggregate experiences yield aggregate voices. For example, smoother access can be facilitated by giving experiences a common label (“I can see that this was another self-defeating moment”) or making them part of a story (“my father hit me when he was drunk because of his own demons, not because I was despicable”), bringing even unpleasant experiences into the community of voices.

### Historicity

Although signs continually change meaning, the old meanings are not lost. On the contrary, signs accumulate these meanings; each use adds another layer. This property of accumulating meanings is called the *historicity* of signs.

To understand how signs accumulate meanings, consider: To the extent you understand what I mean in this chapter, you are sharing some of my experience. If and when you use some of these words or expressions later, their meaning (your experience of these words as author) will incorporate a little of the experience I shared with you. Then, to the extent that your addressees understand your meaning, they will therefore share a bit of my experience along with yours through your words or expressions.

Further, I was not the first person to use these words and expressions. My understanding of signs owes a great deal to discussions with Mikael Leiman (1992, 2011), whose understanding drew on reading work on semiotics by Bakhtin (1984, 1986), Voloshinov (1929/1986), and Vygotsky (1978). Thus, as you read, you are sharing Leiman’s, Bakhtin’s, Voloshinov’s, and Vygotsky’s experience as well as mine. When you mention it later, your addressees will also share a bit of their experience. And of course the history does not end there. Every lecture and discussion and conversation draws on and shares the experience of the generations who have previously used the expressions; their experience is embedded in the signs. As Bakhtin (1986) put it, “the word . . . is

bottomless” (p. 127). DST was also inspired by the work of Bakhtin, among others (Hermans & Hermans-Konopka, 2010).

Theoretically, historicity underlies how words come to have the meanings they have for us. We learned the meanings from others when they shared their experience with us. Subsequently we use those words to share similar experiences with others. In this way, historicity accounts for the stability of language. Most words have so much experience already invested in them that speakers of the language use them similarly. This is why dictionaries work.

Nevertheless, new terms and expressions and new uses for old ones enter the language continually. As people use words to share new experiences, old words are used in new ways and contexts, as illustrated in the earlier examples of gender pronouns and the verb *dial*. Mass media – books, newspapers, radio, television, and the Internet – speed up and broaden the sharing. Words and phrases from pundits, politicians, and popular songs make their way into everyday conversations and psychotherapeutic dialogue, as people find uses for them in sharing their own experience.

Although the meanings of words, expressions, and stories are constructed from others’ experience, the voice of any one of the previous users is likely to be extremely faint, diluted to homeopathic levels by the many other voices whose experience is also shared by the word. Even expressions attributed to well-known figures share not only the experience of the attributed source but also the experience of those who have repeated, commented, interpreted, or recommended the expression. Likewise scientific concepts and theories, which should be experienced similarly by everybody, share the (hopefully similar) experiences of researchers, textbook writers, the teachers, students, and others who have studied or used them, as well as that of the originators.

The concept of historicity describes what is available to authors and addressees. However, nothing in the concept of historicity requires that what the signs mean is accurate, honest, or complete. Authors make their own choices about what experiences they share, and addressees can determine what they accept.

### **Penumbras of meaning**

The theory suggests that sign meanings can be retained and shared even though they are not fully conscious. People’s experience of signs seems to extend beyond what they are fully aware of in the moment. Sometimes the layers of meaning can be unpacked. For example, etymologies can make implicit historical meanings explicit (see e.g. Elliott’s (2006) analysis of the term *insight*), yielding a sense of recognition. Attending to an expression, as when a therapist repeats a client phrase, can lead more layers to emerge.

When people listen to their own words, they may hear the voices of people who have used those words previously along with their own voices. In a sense, writing or speaking, even to oneself, can be a dialogue with forebears. Likewise, an addressee may become aware of meanings that were subliminal to the author.

The possibility of understanding more than the speaker is obvious in the case of words and stories that are recited (e.g. dramatic productions), but theoretically it is characteristic of all sign-mediated communication. Conversely, some communications are intentionally off-record; hints, for example, or manipulations, intended to be recognized by their addressees but not as having been intended, apprehended as if the ideas were the addressee's own (Stiles, 1986).

Therapists are familiar with subliminal meanings, and indeed, it is appreciating these that allow the therapist to reflect and interpret the client's experience deeply enough to be helpful, to re-state or reframe their clients' expressions so that they realize more fully what they were saying, making explicit what was implicit. In general, people say more than they know. As Hattersley (1976/1991) said about a conversation with author John Braine: "I remember him explaining to me the true message and real moral of *Room at the Top* and discovering how much better was the novel I had read than the one he had written" (p. 120).

Meaning seems to survive translation. Much of the original depth of meaning is lost when an utterance is recast in a different language, of course, but something is preserved. Much depends on the intermediation of the translator or of those who develop mechanical translation systems. The historicity of the terms in the translation may mislead. But in principle, this is much like translations across media: writing represents a translation from spoken language; electronic reproduction is a translation from the original sound. In some cases translations may even improve communication, making some subliminal meanings more explicit in the translation than in the original.

### **Words as tools**

Language and other signs are tools for sharing experience. In using semiotic tools, authors are not restricted to dictionary meanings or standard grammar but can use any available semiotic resources. There is plenty of scope in the means of delivery to convey even very subtle aspects of an author's experience. Paralinguistic features, for example, include intonation, tonal contours, emphasis, pauses or the absence of pauses, loudness variations, length of syllables, laughter and other vocal noises, and nonverbal accompaniments to speech can convey meaning (Edwards & Lampert, 1993). Authors can use neologisms, slang, metaphors, gestures, facial expressions, pictures, drawing material, or sand trays. All of these are semiotic, and all can accumulate meanings.

Success in the task depends partly on the authors' and the addressees' cleverness, resourcefulness, creativity, and persistence, but also on what is in the toolbox. Through the process of historicity, semiotic tools have been shaped by generations of previous users to deal with their needs. We can imagine that interpersonal and psychological problems were salient among those needs. In consequence, words, expressions, theories, and stories are well adapted for addressing such problems.

The semiotic tools available to therapists and clients include theories and lore – the formal professional work of theorists and researchers and well as other



therapists and former clients whose experience went into building theories of therapy. Their thoughtful experience is embedded in the terms, formulations, and interpretations that therapists use as they practice. These tools include formal treatment protocols, which share the experience of successful therapists and theorists. Scientific writing about individual psychology and psychopathology share the experience of scientists. Perhaps less authoritatively, aphorisms, folk wisdom, and common knowledge about human relations and human feelings share the voices of forebears, having been passed through many people, accumulating their experience as they pass. Comments by supervisors and colleagues and tones of voice and postures learned from watching successful therapists are available, bringing those voices into the consulting room.

Sharing experience is a two-sided exercise. In building meaning bridges, authors on both sides of the dialogue must contend with uptake by their addressees. Authors select and modify their semiotic tools to fit their addressees. Professionals use different terms with other professionals than with lay people. Words have different meanings in conversations with intimates than with strangers. Talking with children requires different semiotic tools than talking with adults. And idiosyncratic meanings develop within relationships, particularly psychotherapy, as people find ways to refer to complex or subtle personal experiences. Thus, signs are shaped by the addressee as well as by the author. As Voloshinov (1929/1986) put it,

A word is a two-sided act. It is determined equally by whose word it is and for whom it is meant . . . A word is a bridge thrown between myself and another. If one end of the bridge depends on me, then the other depends on my addressee. (p. 86)

Finding an internal meaning bridge between a problematic experience and the self is also a two-sided act. That is, to be a meaning bridge, the signs must be acceptable from the perspective of the problematic voice as well as from the perspective of the self (Stiles et al., 2004).

### **Culture enters psychotherapy through signs**

Culture is ubiquitous. It is there in every word. Words and other signs bring representatives of the culture into the room. The words, expressions, stories, and theories that are available to clients and therapists were also the tools that forebears – professional and nonprofessional – have used to build internal meaning bridges, to name, confront, and overcome their personal and interpersonal problems. To put this another way, voices of the culture speak to and through clients and therapists as they speak to each other, bringing cultural experience concerning interpersonal and intrapersonal relationships to bear on the client's current problems.

Historicity theory helps explain why intercultural therapeutic dyads may have problems. Clients and therapists with different traditions and perhaps different native languages are relatively likely to miss or misconstrue some of the meaning

of what is said and what is done. It will be harder to bring as much of the meaning into awareness. Both author and addressee have to work harder to be understood and to understand. Accurate communication and building meaning bridges may take more time.

On the other hand, modern communication, travel, and immigration have expanded opportunities for acquiring meaning. Increasingly, therapists and clients are exposed to other cultures in mass media, restaurants, and on urban streets. Popular representations of anthropology and history expose people to semiotic representations of experience in diverse cultures, even if the representations are not completely accurate. Targeted cultural education affects not only those exposed directly, but all those with whom those who are exposed interact. In this way people can absorb the experience not only of people living now but of their forebears as well. Not perfectly, of course, but in part and in flavor.

### **Examples of historicity in psychotherapy**

I offer two commented case examples to illustrate how historicity works, drawn from assimilation case studies. Both were studied following the four-step assimilation analysis procedure used in most assimilation case study research (Stiles & Angus, 2001): (a) familiarization and indexing, (b) identifying and choosing themes, (c) extracting passages representing a chosen theme, and (d) describing the process of assimilation. The fourth step may include coding according to the assimilation of problematic experiences sequence and/or qualitative analysis of the issues selected for scrutiny, such as the nature of the signs used in meaning bridges between therapist and client and among the client's internal voices.

#### ***Debbie's rejecting voice***

Debbie was a 29-year-old mother of two who sought treatment for depression at Guys Hospital in London, England, where she was considered to have borderline characteristics. She was seen for 16 sessions of cognitive analytic therapy (CAT) as part of the Guys Borderline Project (Ryle, 1997; Ryle & Kerr, 2002). She was considered a successful case.

In Debbie's opening statement, she described an encounter with her estranged husband, which had occurred three months previously and that, she felt, had greatly intensified her depression.

He sort of, he came over the last occasion  
and basically said that  
he'd never wanted to know me the whole time he'd been with me.  
Which –  
That was the last.  
You know, after I'd,  
I'd had ten years of torture anyway,

living with someone in that condition.  
 And then –  
 And that was like the final.  
 There was nothing else to say, and  
 I sort of went down from there.  
 I'd been depressed leading up to that,  
 but not that bad.  
 And then, once that had been said,  
 I just, I just stopped, basically.  
 The next day I couldn't,  
 I couldn't take the kid to school.  
 I just, I couldn't get out of bed.  
 And my mum came down and stayed for a week,  
 and I basically didn't do a thing.  
 I sat on the couch for a week.

Following this episode, Debbie said, she could not stand to see her husband because it reminded her of this rejection. She said she had lost control and physically attacked him the last time he had shown up unannounced.

It emerged that Debbie had a long-standing pattern of occasional angry outbursts, apparently triggered by signs of rejection. In therapy, there were some brief intrusions of defiant, angry content, spoken in a distinctive voice, louder, more rapidly, in a lower register, likewise triggered by discussions of times she had been rejected (Stiles, 1999). Debbie's outbursts were mainly verbal; the physical attack on her husband was unusual and extreme. After the outbursts, which she described as uncontrolled, she said she would feel horrible about herself. Most of the time Debbie was docile and unassertive.

A distinctive part of the CAT approach is a written formulation of the client's relevant strengths and problems, usually given in session 4. Among other things, the therapist suggested that Debbie's outbursts seemed to involve flipping from a meek *rejected* role into the complementary *rejecting* role. Such reciprocal role procedures involving alternation between positions and counter-positions are discussed in the CAT literature (Leiman, 1997; Ryle, 1997; Ryle & Kerr, 2002), and incorporated in DST (Hermans & Hermans-Konopka, 2010).

Debbie took this formulation on board and worked with it. The following passage, from the middle of session 8, illustrates her progress in building a meaning bridge between the rejected and rejecting voices. The passage was part of a discussion of a telephone call in which Debbie had told her husband how irresponsible she thought he had been for failing to show up to take their children on a promised outing. From her description, the conversation seemed to have been a forceful expression by her rejecting voice. However, she was less impulsive than in previous episodes, and she did not feel so horrible and rejected afterwards. As she explained,

Even with that, sort of that rejecting now,  
 when I said yesterday on the phone –

I knew that I would feel rejected after I'd said it.  
 Because . . .  
 he'll . . .  
 He'll reject me  
 because I'm not going along with what he says.  
     And I'm not being nice.  
     And I'm not being, you know . . .  
 So I did feel like that a little bit  
 But then I thought,  
 No.  
 I did the right thing.  
 I can't start feeling bad  
 because I'm saying what I think's right.

The term “rejecting” in the first line of this excerpt was a reference to the therapist’s formulation. Debbie’s explanation can be understood as an account of her progress in assimilating – gaining smoother access to – her rejecting voice. That is, the rejecting voice was becoming a resource for assertion rather than a disruptive and unwelcome intrusion. The smoother access was manifested as somewhat greater moderation and control in employing it and in less anguish and remorse afterwards, though it was still not fully under control. By the end of the 16-session therapy, she was still more comfortable and facile with her new assertiveness (Stiles, 1999).

The formulation of reciprocal rejected and rejecting voices was thus part of a meaning bridge Debbie built to her disconnected rejecting voice. The therapist brought this formulation into the treatment, having drawn directly on CAT theory. We could say the voice of Ryle (1997) and other CAT authors spoke to Debbie through the therapist. Beyond that, the formulation built on the experience of the many previous users of the term *reject*, which entered the English from Old French and Latin, carrying the experience of those cultures. It also drew on the contrast of English -ed and -ing verb forms and hence on the centuries of experience that have honed that linguistic device.

### ***Richard’s use of avatar software***

Culture enters therapy through nonverbal signs as well as verbal ones. Richard (pseudonym) was a 14-year-old boy with (high-functioning) autistic spectrum disorder (ASD), who was seen for anxiety and disruptive behavior in a clinical trial of what we called avatar software in school counseling (van Rijn, Chryssafidou, Falconer, & Stiles, submitted). The therapeutic focus in Richard’s counseling was on his distressing experience of being different, “mocked” and excluded by his peers, which he attributed to his ASD.

Using the avatar software, clients can digitally create visual representations of their inner worlds and life situations on a computer monitor. The action is set in a rural, somewhat medieval landscape containing hills, fields, a forest, a river, and

a castle. Androgynous avatars can be created to represent self or others and assigned names, emotions, and expressions. A variety of props, such as bridges, walls, roadblocks, and treasure chests can be added and given labels.

In his first encounter with the software, Richard created a scene within the walls of the castle, which he described as a “secure base,” and populated it with avatars representing himself and his peers and milestone props labeled with recent accomplishments. A campfire prop labeled “happiness,” confirmed this as a reference to an inner refuge where he felt safe. Later Richard chose a sunlit forest glade in the digital landscape and added a section of wall prop, which he labeled “cannot get past it” with a treasure chest on one side labeled “normal” (later expanded to four treasure chests) and an avatar named “fitting in” on the other side with a “crying and stressed” emoticon, a posture of “stressing/regretting/OMG [oh, my God!],” and an inner voice saying, “I can see it but I cannot achieve it” (see Figure 5.1). This representation of his core problematic experience of being different seemed more poignant and powerful than his verbal characterizations at the time.

Theoretically, the images were powerful tools for Richard because they carried cultural voices that trace at least to medieval forebears. These images have been used continuously over the intervening thousand or so years, not least in modern video games. As Richard used the images to share his experience with the



*Figure 5.1* Treasure chests labeled “normal”; wall labeled “cannot get past it”; avatar named “fitting in” on the other side of the wall with a “crying and stressed” emoticon, a posture of “stressing/regretting/OMG,” and an inner voice saying, “I can see it but I cannot achieve it.”

counselor, he could see them too. Theoretically the metaphorical visual representations, like an apt choice of words, made his experience more salient or clear to his own other inner voices, suggesting deeper meanings, drawing on the images' cultural history.

### **Discussion: therapist as representative of the culture**

Through the historicity of the words and other signs they use, therapists' and clients' cultural backgrounds shape the meaning bridges and hence clients' understanding of and solutions to their problems. Just using words or other signs puts people in contact with the forebears and can be therapeutic, as illustrated in the expressive writing paradigm (Pennebaker & Beall, 1986; Sloan & Marx, 2004). But having a therapist in the room helps too, as a cultural representative who can help bring appropriate forebears' experience to bear on the psychological problem at hand. The job is easier if the therapist is conversant with the client's culture.

Therapists try to find the right words for interventions (Stiles, 2017), framing the client's problems in ways that fit for the client while bringing to bear professional and other cultural resources, pointing toward solutions that worked for others who have expressed their problems in similar terms.

Professional psychological knowledge is central, of course, but broad understanding of the human condition is also useful. Authors reaching back to Freud and Jung have emphasized the value of knowledge of art and literature for understanding otherwise mysterious intrusions into client's experience. Jungian archetypes (Jung, 1981) are more understandable if we understand "racial memory" as "cultural memory" and suppose that the encoding is not in the DNA but in the historicity of language and imagery.

Theoretically, cultural voices enter all human interaction, not just psychotherapy, though the historicity of signs. But perhaps an understanding of the mechanism can suggest ways to use signs more effectively in therapy.

### **Historicity from a DST perspective**

The account of historicity in this chapter was offered from the perspective of the assimilation model, but the assimilation model is arguably a member of the dialogical self family of theories. The account is, I think, largely compatible with DST and perhaps offers some tentative elaborations with respect to the role of signs, sign meanings, and meaning bridges in dialogue and psychological change. For example, the meaning bridge that Debbie built to her disconnected rejecting voice could be seen in DST as her developing a connection between two opposite *I*-positions. The assimilation account elaborates this by describing a semiotic mechanism for how this connection was built, involving deep meanings of the verb *reject*.

One of this chapter's important conclusions was that the meaning of words and stories is composed, in part, of the experience of the forebears who used them

previously. As a result, any speaking or writing brings the experience of those forebears into the room, drawing on it to address present concerns. From a DST perspective (Hermans, 2002) this could be described as an intermingling of internal *I*-positions with external ones. DST suggests such voices express the mental presence of the significant others in the self, and internal dialogue can often be understood as a dialogue with a significant other in the extended domain of the self. The concept of historicity extends this, suggesting that even distant, unknown forebears may contribute a bit to the dialogue. There may be a large society of mind involved in some interactions, as when therapists bring to bear an accumulation of skills and theories passed to them by teachers, supervisors, colleagues, authors, and others, all in making a particular intervention.

DST might say that bringing cultural experience to bear though language and imagery is a manifestation of cultural *I*-positions. For example, Richard's use of a castle to represent a secure base and a treasure chest to represent a valued personal goal might be considered as expressions by cultural *I*-positions (Hermans & Hermans-Konopka, 2010). In such interactions, the therapist or counselor, as a cultural representative, can initiate a dialogue with a variety of external, cultural *I*-positions, which are an accessible part of the extended domain of the self.

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