
Reviewed by Lisa Warhuus, Ph.D. student, Institute of Psychology, Aarhus University
In collaboration with: Anna Crawford; Anne Birgitte Døssing; Winnie Flensborg; Juana Krause Hansen; Anne Jeggesen; Lene Colbert Jensen; Ulrik Mersø; Sanne Mogensen; Lisbeth Nielsen; Sarah Pedersen; Jakob Uhre Schmidt; and Tilde Hove Vestergaard. B.A. students, Institute of Psychology, Aarhus University.

*Conversation, Language and Possibilities* is one of a few non-edited books of this decade which depicts in detail the theoretical and practical implications of postmodernism for therapeutic practice. This feature alone exemplifies the importance of this book for all who have an active interest in (as well as those who fear) practical applications of postmodern assumptions.

Harlene Anderson's innovative approach to therapy is rooted predominantly in her long-time experience as member of the Houston Galveston Institute (now called simply the "Galveston Group") which has a tradition of involvement in the family therapy movement. The book was originally intended to be a collaboration between Anderson and well-known therapist-theoretician Harold Goolishian, yet due to Goolishian's unfortunate death in 1991, Anderson took the task upon herself. The result is a work from which many can benefit.

In general, Anderson's book can function both as an excellent introduction to how postmodern assumptions can be applied within practical contexts and, to more experienced readers, as an inspiring elaboration on one's prior understanding. We stress practical contexts in general, rather than limiting the discussion to therapeutic contexts, since Anderson also applies postmodern assumptions to her work as educator, organizational consultant, and to her life in general. The book offers a sensible balance between theory and practice; where Anderson exemplifies her theoretical perspective with actual case material. The chapters are well formulated and written on a personal level; inviting the reader to endeavor into a "conversational partnership" with the author.

Anderson's approach to therapy has been referred to as a "collaborative language systems approach", although in her book she refers to it simply as a "collaborative approach". This approach refers to Anderson's understanding of therapy as "a language system and a linguistic event in which people are engaged in a collaborative relationship and conversation - a mutual endeavor toward possibility" (p. 2, Anderson's italics). In the introduction to Part 1 of the book, Anderson presents the philosophical assumptions upon which her approach is based. Re-formulated for readers less familiar with the subject matter, these assumptions are that: a) our understanding of reality does not depend upon an objective understanding of the world 'as it is', or the capacities of individual mental processes, but rather is constructed through conversation and participation in social life; b) language is the vehicle through which we make sense of our lives and our world; c) our understandings of ourselves, others, our surroundings, and the occurrences of our lives are "interactional phenomena", in the sense that they are generated and experienced by individuals in conversation and action with others and themselves; d) since meaning is generated in social interaction, the individual mind is a social composition, and the self too is understood as a social, relational composition; and e) systems involving human beings are "language- and meaning-
generated systems" and are not restricted to constructed forms of social organization or structure (individuals, couple, family, social group, etc.).

Anderson goes on to portray the implications of her philosophical assumptions for therapy in contrast to modernist approaches to therapy, and postmodern approaches differing from her own, in terms of a continuum illustrating a move from one direction to Anderson's direction. For example, Anderson suggests a move from conceptualizing the therapeutic system as "a dualistic relationship between an expert and a nonexpert" to the therapeutic system as "a collaborative partnership between people with different perspectives and expertises". Additionally, Anderson suggests a move from "a therapy with people as contained, core selves", to "a therapy with people as multiple, linguistically constructed, relational selves." In its entirety, the continuum offers an effective introduction to Anderson's approach.

As in many academic works, this book is divided into distinct parts (four in total). Yet Anderson invites readers to approach the book in numerous ways. Readers can, for example, first read the book's theoretical chapters and then return to the more clinically oriented chapters. We read the book straight through, yet in doing so noticed two things. First of all, after completing the book many of us found that we would have preferred to have had read the enticing theoretical discussions in Chapters 9 and 10 before examining the clinical content presented in Chapters 5-8. The second thing we noticed was that the chapters are organized and structured so well, that information is not lost from leaping between chapters. A disadvantage of structuring the book so that it can be approached through multiple paths is that there is a substantial degree of repetition.

In order to give future readers the opportunity to consider how they will approach the book, we here provide a brief summary of each of its four parts. In Part I Anderson accounts for her clinical philosophy and practice as situated within the "paradigmatic transformations" which have characterized the field of family therapy, and presents the theoretical background to her own approach. Chapter 1 offers an excellent historical rendition of the paradigm shifts lending to the emergence and normalizing status of the field of family therapy, and the movement within that field which opened itself up to the adoption of postmodern assumptions. In Chapter 2 Anderson contrasts her interpretation of modernism and modernist approaches to therapy with postmodernism. She then describes the two elaborations of postmodernism which inform her own clinical philosophy and practice: contemporary philosophical hermeneutics and social constructionism. She concludes by accounting for some crucial differences between constructivism and social constructionism.

Part II is more clinically oriented and dedicated to characterizing Anderson's current approach to therapeutic practice. She begins in Chapter 3, by providing a description of how her own "shifts in clinical experiences" have led to her current form of practice. Of special interest, Anderson discusses: the evolvement of her understanding of the generative quality and the nuances of language; how uncertainties with the outcome and consequences of therapy led to the development of a "not-knowing" approach, where the therapist never assumes to have prior knowledge of a client's experience; and how her approach (and the Galveston Group's as a whole) became increasingly collaborative.

Chapters 4, 5 and 6 provide the characteristics of, and implications for Anderson's approach in terms of her conceptualization of therapy systems, the therapist's position and the therapeutic process. Chapter 4 provides Anderson's view of therapy systems as a "language- and meaning-
generating systems". According to Anderson, individuals seek therapy when they no longer believe that they can take effective action to deal with a problem and therefore lack a sense of "self-agency" or "self-competency". A therapy system is a system of individuals who organize in relationship to a problem and who seek to "dis-solve" the problem through the linguistic generation of meaning. The result is a renewed sense of agency for all of the participants in the therapeutic system. Chapter 5 discusses the therapist's position in terms of a "philosophical stance" which emphasizes collaboration, the creation and facilitation of a dialogical space and process, a "way of being" in relationship with the client, sharing more of oneself, and sharing responsibility and accountability. Chapter 6 expands upon the notion of therapy as a dialogical conversation and offers practical considerations for organizing therapy conversations. Each of these three chapters contain clinical examples which serve as effective illustrations of Anderson's theoretical viewpoints. Although these cases brilliantly illustrate the benefits of Anderson's approach, a case illustrating a therapy that 'went wrong' would also have enhanced the reader's understanding.

Chapters 7 and 8 elaborate on the subjects of the first part of Part II. In Chapter 7 Anderson discusses what she has learned from client reflections on therapy and their relationships with their therapists. Among other things, Anderson offers reflections on client experiences with therapists who place themselves in positions of "not-knowing", as well as the importance of asking conversational questions, listening and responding to clients, and honoring clients' stories. Chapter 8 concludes the more clinical portion of the book by offering an annotated partial transcript of a consultation interview.

In Part III Anderson returns to the theoretical realm where she takes up the subjects of knowledge, language and self from a postmodern standpoint. Chapter 9 is dedicated to the characterization of knowledge as relationally, rather than individually, determined; with language as the primary vehicle for knowledge construction. Chapter 10 takes up the subject of the self, where Anderson elaborates on the notion of the relational self, and lends this understanding to a definition of the purpose of therapy.

The final section of the book, Part IV "broadens the space" outside of the realm of therapy and into Anderson's application of her philosophical stance into her role as educator and organizational consultant. She concludes the book with personal reflections that the process of writing the book has stimulated.

*Conversation, Language and Possibilities* is oriented toward a wide range of readers, including students of psychology and other social-behavioral sciences, clinical practitioners, educators, clients, and those with clinical interests. Although the book definitely contains something for everyone, differences in interests may spark divergent areas of minor criticism. In our context, those of us who are particularly interested in theory experienced some disappointment with a lack of elaboration on a few of Anderson's theoretical and philosophical assertions. (For instance, we would have been interested in an expanded elaboration on how she incorporates both Heidegger's concept of the *hermeneutic circle*, with its internal/external implications, and Gergen's version of social constructionism, which rejects the internal.) At the same time, considering the length and quality of Anderson's bibliography, this is only a minor issue.

In summary, the book offers an excellent, personal account of how Anderson and the Houston Galveston Institute apply postmodern principles to real-life practical contexts. Anderson's rendering combines theory and practice in such a manner that the reader not only gains a
conceptual understanding, but also a sense of the artistry involved in the "doing" of therapy. We are, therefore, pleased to give *Conversation, Language and Possibilities* our most positive recommendations.