

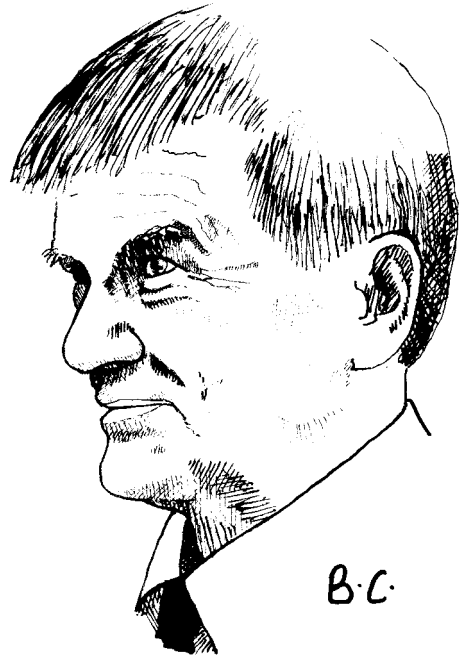
Bridges to Safe Uncertainty: An Interview with Barry Mason

Vivien Hardham

Vivien Hardham talks to Barry Mason about the development of his ideas and practice over the past twenty years, outlining the influences upon him. He speaks about the ideas that he has contributed to the field.

Vivien: I, and many others, have enjoyed your plenary presentations at Australian Family Therapy conferences in Sydney and Melbourne and your workshops in Melbourne, Sydney and Albury–Wodonga. I've enjoyed your thoughtful, self deprecating, yet engaging manner. However, I know little of how you came to a life involved in family therapy. I realise there could be many paths to this!

Barry: As far as my journey in family therapy is concerned, I first became interested in systemic ideas in 1977. I had started to specialise in working with families and was introduced to some of the family therapy literature. At that time, it was mainly structural ideas that were dominant, and later that year I went to see Minuchin present his thinking in Cardiff. He was very impressive and I came away enthusiastic about his presentation but also somewhat despondent, as I felt that I just couldn't be like him — I wasn't charismatic enough. So when, a couple of years later, Milan ideas started to emerge in the UK I found this way of working had more of a fit for me. Not just the ideas, but it seemed to me that I didn't have to be charismatic to be a family therapist. (Of course, there are quiet structuralists, but this was how I was feeling at the time.) In 1981 I started training at the Institute of Family Therapy and qualified in 1985. The introductory part of my training was with Ros Draper and the clinical part was with David Campbell, and so I became known as a Milan therapist. Towards the end of my training, Ros and David were putting together a book on applications of the Milan approach, and I and my colleagues contributed a chapter on using Milan ideas for working with disadvantaged/poor families (Christofas et al. in Campbell & Draper, 1985). That was the beginning of my writing about my work, some of which became known internationally



and resulted in invitations to such places as Australia. My involvement with IFT and later The Family Institute in Cardiff provided me with the bedrock for the development of my own ideas over the last 15 years or so.

Vivien: I would be interested to hear a little of what led you to this type of work. Could you go back a bit further?

Barry: Well, I suppose my interest also relates to my role in my own family. I, like many family therapists I have met over the years, was the peacemaker in the family. I seemed to have that role from a very early age. I can remember when I was six and my younger brother started at the same school. He cried and cried (I think screamed is probably more accurate) that first day as he was missing our mother, and none



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of the teachers could console him and so they eventually came to my class and took me out to see him, and I calmed him down. So I think I gained this reputation, some kudos, to be able to calm things down. Years later, after therapy three times a week, I ditched the role. Free at last! [laughs].

Vivien: I'm glad that the therapy worked! So, as a practised peacemaker and a developing Milan-influenced therapist and theorist, you were 'inducted' into the family therapy community?

Barry: Yes, but many people have influenced me, and I want to make sure I acknowledge them. The IFT course was chaired by Gill Gorell Barnes, one of the pioneers of family therapy in the UK, someone I remain hugely impressed with her to this day, for her intellect and skill. I went on to do the intermediate and advanced level trainings and was taught by other leading thinkers and practitioners in the field such as John Byng-Hall, Anne Elton, Arnon Bentovim, Alan Cooklin, Rosemary Whiffen — amongst many — and I felt very privileged.

One of the things that I remember most about these people was that although they were very well known and publishing important papers, they were willing to discuss their dilemmas, their uncertainties, their mistakes. And I have always remembered this, and as I became better known I tried to make sure that I always mentioned my own doubts, struggles and uncertainties when I was teaching.

I finished my training in 1985 and a couple of years later, I was asked to become a teacher and tutor, and then in 1989 to become a clinical supervisor on the Masters program. This was a two-year program and I remember being utterly scared that I would only have enough knowledge and skill for two months, never mind two years! Charlotte Burck, who is at the Tavistock, started supervising at IFT at the same time, and I always remember us having a conversation about us eventually being 'found out' — frauds!

I also chaired various programs, but from 1989 to 1996 I worked part-time at The Family Institute in Cardiff, where I was particularly influenced by the work of Jim Wilson and Elsa Jones. I left there in 1996 to become Director for Training at IFT and then in 1998 became the overall Director of the Institute. I am still very much involved in training and have responsibility for the advanced training in supervision and co-chair the doctoral program. Besides the staple systemic practice and family therapy programs we've also developed what has now become a Centre for Mediation and Conflict Resolution, (offering clinical services and training to Masters level), training in child focused practice and more recently we have received funding for training people from refugee communities to offer

family counselling skills within those communities. We have now received further funding to expand on that work. In the New Year we will be opening The Centre for Cross Cultural Studies at the Institute.

One of the things I am most proud of is the work we have done in attracting many more students from minority ethnic cultures and the work that many people at IFT — teachers and members — have done in developing crosscultural ideas and practice. For two years a group of up to 10 people from different cultures met once a month to take risks in talking about crosscultural issues. We felt that there was a danger in becoming too safe with each other, and that the field was becoming too safe in addressing crosscultural issues. This eventually led to the publication of a book in 2002 — *Exploring the Unsaid: Creativity, Risks and Dilemmas in Working Cross-Culturally* — which Alice Sawyer (a therapist at The Marlborough Family Service in London) and I co-edited. We were very influenced by people within and without the UK; not least Nancy Boyd-Franklin (who did the foreword to the book) and people from the Just Therapy group in Wellington.

I was invited to Wellington a few years ago to share a day's teaching with another British therapist, Carol Halliwell, and besides the warmth of the welcome and kindness, I always remember something Charles Waldegrave said about engaging with people in power, particularly political power. He said that it was no use thinking that just being collaborative would somehow automatically lead to them being convinced of the usefulness of your point of view. That was sort of pie in the sky. You have to engage with where they are coming from and what they need is solid evidence, not some soft-focus niceness. That's what I like about the Just Therapy group's writings and work — it really is down to earth and not in the clouds — which (my bias here) some postmodern family therapy thinking and practice can tend to be. None of my ideas, of course!

Vivien: Barry, it seems that you are always working to bridge the gap between postmodern family therapy thinking and everyday practice. Earlier, you referred to authoritative practitioners being 'willing to discuss their dilemmas, their uncertainties, their mistakes'. That sounds like the germ of one of your 'bridging' (my term) concepts. Could you expand a little on this?

Barry: I remember your making this point a few years ago and being struck by it. I suppose the first thing that comes to mind is Bateson's notion of the patterns that connect; and the longer I have been involved in the field of family therapy — which is nearly 25 years — the more I have noticed connections between different ways of seeing. For example,

the idea of ‘unique outcomes’ for me is closely associated to one of the classic early Milan questions — ‘Has there ever been a time when it was different?’ — which was an attempt to explore exceptions. Was Minuchin the first person ‘into’ reflecting processes when he asked people to turn to each other and talk about an issue while the rest of the family listened? My concept of ‘safe uncertainty’ can be connected to Bowlby’s (and John Byng-Hall’s development of) the concept of ‘a secure base’. John Byng-Hall’s ideas about family scripts comfortably fit with the essence of narrative therapy.

I am not saying the newer ideas are the same as the earlier ideas; they are clearly not, not least because they have been contextualised differently, but I do believe there are connections. It is important to acknowledge the development of client narratives through time but it is also important to acknowledge the development of family therapy narratives through time. One of the most creative people I know in our field is the British family therapist John Burnham, and he has come up with a lovely way of describing the tendency for the past in family therapy to be marginalised (and I am including narrative approaches here, which I know some people would not agree with). He encourages us to not fall into a position of ‘theoretical ageism’ and this describes what Bebe Speed has said on a number of occasions about family therapy being too enamoured with the new — that the new is afforded a disproportionately higher status than the old.

So, I see some of the ideas that I have written about and developed are part of a wish to find bridges across difference, because then I feel we may stand more chance of finding similarities and useful connections that are, ultimately, beneficial to our clients. I want to develop ideas that can be accessible to people who have different theoretical orientations than mine — both within and outside family therapy. This means trying to come at situations from different angles and that is what I like to do.

Vivien: Ideas of yours that have also struck me as important and elegant ‘bridges’ are the ideas of ‘safe/unsafe certainty/uncertainty’ and ‘authoritative doubt’. Could you expand on these a little further?

Barry: I suppose the ideas of safe uncertainty, authoritative doubt and more recently, relational risk taking (2005), are very much connected. For me, they are all about helping to develop a context where a useful therapeutic edge can emerge. I think that one of the things that really struck me in the late 1970s when I first started to become interested in family therapy was that systems theory meant taking on board that there were different perceptions of

reality. I liked the idea of coming at things from different angles.

The first time this happened, in terms of publications, was the publication of my first book. I had been the head of a centre specialising in family work for Social Services and it had a residential unit next door as part of the centre. We used to do residential staff handovers twice a day when one shift would go off and a new one would come on. All the staff were involved in this, not just the residential staff. I started to realise that the traditional handover was very content biased — full of facts, often very important ones — but there was an absence of attention to process, and the content also tended to be very problem oriented. One day I had the idea of turning it round so that the staff coming on shift interviewed the staff going off shift. They were fresher anyway and so were more curious — as opposed to the staff going off. It is much harder to get into ‘process’ when you are exhausted. What was interesting, too, was that when I was researching the literature on handovers, there wasn’t one book on the subject and here was one of the most crucial parts of the day in residential establishments (and hospitals), and yet no attention had been given to it.

So, I liked the idea of coming at things from ‘left field’ as North Americans would say. A short time later, about 1991 to 1992, in my supervision of trainees at the Institute I had another, connected idea. I started asking my trainees to interview me at the end of a clinic about my supervision of them during the afternoon. The interview was usually done by someone who hadn’t seen a family that day. It was useful both to me and the trainees in that they helped me explore the process of my thinking when supervising them and it helped them to take some risks in challenging me — they knew by that time that I wouldn’t be that pleased if they just played safe. And I had to open myself up and be more transparent.

Although at the beginning of doing this, I hadn’t conceptualised it as such, a year or so later I saw what we were doing as trying to move towards positions of safe uncertainty — never a fixed place. At about the same time, and I suppose it follows, I developed a therapeutic stance that was connected to the concept of safe uncertainty, as well as from my feeling that the notion of ‘the not knowing position’ was being interpreted in a way that I thought was disingenuous. I called this therapeutic stance ‘authoritative doubt’. I was very influenced by the ‘not knowing’ position, but I felt that many therapists were trying so hard not to marginalise the clients’ discourses that they were ending up, it seemed to me, marginalising their own expertise.

Let me give you an example from something I wrote for the book that Carmel Flaskas, Amaryll Perlesz and I recently co-edited. (2005). Not so long ago I observed a session with a male–female couple, who, it seemed to me, were struggling to obtain from the therapist what the latter was thinking about the issues they were presenting to him. The more this (‘not knowing’) therapist was curious, the more the couple asked the therapist what he thought about their situation. The couple, particularly the man, started to become frustrated and eventually this frustration was discussed. The man said that he came from a family where he had always experienced a frustration with both his parents because he felt they did not give him clear feedback about what they were thinking when he asked for their views or advice; he experienced his parents as withholding help, and he was experiencing the therapist similarly. It seemed to me that the client had invested the therapist with a constructive ownership of power, something that Jeff Young and colleagues have written about (1997). The therapist in the session, in an attempt to remove power from the therapeutic relationship had, I felt, and in the words of Guilfoyle (2003) only ‘concealed its visibility’.

I felt this wasn’t helpful to clients. I felt they were paying their taxes to receive some of our expertise via our expression to them of our knowledge, as well as through them having our expertise via our curiosity about their lives. We had got into an either/or position and we needed a both/and position. ‘Authoritative doubt’ means the therapist owning their expertise (both knowledge and curiosity) in the context of uncertainty. It also means taking a stance of genuinely being open to being influenced by ‘the other’. In that sense it is also linked to the idea of mutual influence. If there is no space for doubt there is no space for being influenced by clients and colleagues and other ideas. Taking a stance of authoritative doubt gave me the freedom to come up with ideas and put them to clients and then explore their relationship to those ideas in a collaborative way. So, authoritative doubt meant that I had to take the risk of owning my expertise in different ways. It was also about this time that I started to take more risks in terms of race and culture, which I mentioned earlier. I have some very important crosscultural relationships now, and I am really pleased I stopped playing so safe. It’s difficult at times but difficult in a good way, if you see what I mean.

Vivien: I am starting to see how safe uncertainty and authoritative doubt are precursors of, or are linked to, relational risk taking. How do you see risk taking as relational idea?

Barry: In the last few years I have felt that risk taking needs to become more a part of the curriculum in training family therapists and family therapy supervisors. With regard to the latter I have chaired the supervision training at IFT for seven years and in the last couple of cohorts I have put risk taking as a core element in the program. It relates to what I said earlier about my feeling that the field at times has played too safe. I have called this new development ‘relational risk taking’ (2005) to distinguish it from more solitary risk taking such as driving cars fast. Relational risk taking is what we have to try and find ways of doing when relationships get stuck. I am very encouraged by what has been the response in the supervision training and I am now addressing it in other trainings.

I am also exploring this much more with clients themselves. It has now become a very useful part of my clinical work. I ask couples to interview each other about the history of taking relational risks in their lives and in their relationship with each other. Family members also interview each other at times. Children who are involved in this activity are usually in their teens, not younger. Some people have recorded the interviews and transcribed them. Some of them would make good therapists!

I have also developed some questions to address relational risk taking in terms of the therapeutic relationship, for example, ‘Suppose I were to take more risks in working with you. What advice would you give me regarding talking about an issue which you think might be uncomfortable but potentially useful/helpful?’ Another question is: ‘When you are playing safe in your relationship(s) but in a way that is not satisfying, what happens? What do you do?’ I think the structure of those questions is probably typical of my style. I am interested in the tension, the potential edge that is embedded in terms and questions I have developed, ‘safe uncertainty’, and ‘authoritative doubt’, being the obvious ones. It gets back to the idea of coming at things from a different angle, switching things round.

Another example is a question that is also part of the chapter mentioned above in the new book. It’s called ‘The Not the Miracle Question’. I’ve never been that enamoured with the Miracle Question, and one evening a number of years ago I was seeing a couple who clearly did not want to be in the session. They had basically come because their GP suggested they come. They said they wouldn’t have otherwise done so. It was a quarter to eight at night, I was tired and I was struggling. In quiet, composed desperation, I think, I suddenly came out with, ‘Suppose we were to work together for a number of sessions and I was to work with you in such a way

as to be of little or no use to you, what would I have to do to get it so wrong?’ The answer they gave related to something that a previous therapist had said to them as to why they were having problems in their family relationships, and they had been very angry with what the therapist had said. I began to understand the logic of their reluctance to engage, and with further exploration they engaged. And we did some useful work together. So it was a risk out of desperation, but I suppose I had enough experience and confidence to take the risk. I saw it as authoritative doubt in action.

Later I developed a variation, which I sometimes ask when clients and I are reviewing our work together and when they are engaged in the work. I first of all remind them of the earlier question at the beginning of the work then say, ‘Suppose in the continuation of our work together you were to be of little or no use to yourself in the way you contributed to these meetings, what would you have to do to get it so wrong?’ People often smile, or chuckle but always answer. To me it is a form of respect that I ask them this question. It is respectful challenge, which is a part of our therapeutic intimacy and trust.

Vivien: So, what may seem fairly simple questions have arisen from your thoughtful response to questions asked of families you have met, of your students and of family therapy as a whole. I guess that this thoughtful responsiveness continues to lead you in developing your theory and practice even further?

Barry: Hopefully, yes. I do get a great deal of stimulus from doing clinical work as well as from discussion with colleagues in the UK and elsewhere — particularly Australia and Singapore: Australia in terms of the years, nearly 20 now, of coming here and developing important collegial and personal relationships. A few years ago The Institute of Family Therapy and The Bouverie Centre decided that if cities could twin, so could family therapy institutes. The Bouverie Centre is a very creative place and it is an honour for us to be associated with them. People from Bouverie have been over to London, Amaryll Perlesz will be over shortly, and other IFT members and I have been over here. Rosemary Whiffen, one of the founder members of IFT who I mentioned earlier, died a couple of years ago and we established the Rosemary Whiffen Supervision Scholarship as a tribute to her. The scholarship (a bi-annual award) is a study visit to The Bouverie Centre. The first visit took place last year and was a great success. I am particularly close to Colin Riess, the director of the Bouverie Centre and, of course, Amaryll, one of the co-editors on the new book. It was a real joy to work with her and

Carmel (Flaskas) — it was all very harmonious and we are really pleased with the book.

In relation to Singapore, I had a three-month sabbatical at the Counselling and Care Centre (CCC) there (July to October, 2005). The Institute has had a long-standing relationship with CCC and we collaborate on their masters program in family therapy, validated by Middlesex University in London. They have had a significant impact in working with families, couples and individuals in Singapore, and I have learnt a lot from them about working crossculturally.

In terms of further ideas I am working on, some of them relate to the relational risk-taking idea that I have already mentioned. A paper I have just started is about relational risk-taking, men and relationships and infidelity.

Another area of development has come out of my research on a relational approach to the management of chronic pain, which I hope will be out in book form by the end of 2007. One of the areas that emerged out of the research was around the issue of family of origin scripts in coping with adversity. The fit or lack of fit between family members can have an important impact on how the person in pain and the family members manage the pain. It struck me that scripts in coping with adversity may be important to address with all clients I see. After all, in the main that’s who we see — people who are coping with some form of adversity. Another idea coming out of the research, primary and secondary relationships with pain both for the person with the condition and for significant others — that is, pain being in the foreground of your life or in the background — is something I am doing further work on, particularly the clinical applications of the idea (see Mason, 2004).

Earlier on in the interview I mentioned that I was influenced over 10 years ago in a way that contributed to my taking more relational risks crossculturally. I want to remain committed to this change that happened in me, and as part of that ongoing process I am just about to embark on co-editing and contributing to a special edition of the British family therapy magazine, *Context*. I am doing it with Rabia Malik a colleague in London. She is a Muslim and I am a humanist. The edition is to be called ‘Faith, Values and Relationships’. We don’t want to play safe in what we put together. There will a range of contributors and we hope the edition will be informative, respectfully challenging and at times uncomfortable, but useful. It’s due out in February 2007.

So, they are some of the ideas I am presently working on. One of the most important things in all this is that I retain a commitment to one of the core

beliefs that got me into the field — the notion of mutual influence. It is extremely stimulating to feel sparked off by clients and colleagues. In the last week, over here, for example, I have had wonderful conversations with Colin Riess, Carmel Flaskas and Brian Stagoll. And all those conversations have got me thinking about how I can improve my work. It's a nice place to be.

Vivien: I guess that this is also a nice place for us to finish — for now. I am certain that we can anticipate many more valuable contributions from you. I am struck by the depth, breadth and richness of these contributions, and of your connections and connectedness. Thanks for taking the relational risks and working on the edge of safe uncertainty, as you are creating many sound and useful bridges for us all.

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Editors' Note. The *ANZJFT* reviews of the two books Barry co-authored are to be found as follows:

Flaskas, C, Mason, B. & Perlesz, A., 2005. The Space Between: Experience, Context, and Process in the Therapeutic Relationship, *ANZJFT*, 27, 1: 54–55.

Mason, Barry & Sawyer Alice, 2002. *Exploring the Unsaid: Creativity, Risks, and Dilemmas in Working Cross-Culturally*, *ANZJFT*, 26, 1: 59–60. 

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And it soon became apparent, even to me, that all was not well with [my parents’] marriage ... I didn’t take refuge in fantasy – even though I was beguiled by some ... Instead, I sought out books about families. I liked stories which showed parents and children living harmoniously together, stories that suggested a possibility of love and stability within the home. A different kind of fantasy, perhaps’

(Lance Salway, ‘Reading Alone’, *Signal*, 69, 1992: 157).

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