PRIVATE STORIES AT THE MEETING POINT

This chapter provides story maps of the journals of two learners and one facilitator. Narrative themes and patterns emerging from the stories are summarised in a narrative core.

In the previous chapter, you were introduced to the meeting point between three public actors, namely Orthotics/Prosthetics, Psychology and Higher Education, during the course of a psychology module for B.Tech Medical Orthotics and Prosthetics. In this chapter, you are introduced to Peter, James and the facilitator (actors) who share private stories of their experiences of teaching and learning in the form of reflective journals (acts), in the course of the Applied Psychology II module (scene). Central to my agent-centred understanding of teaching and learning as performance, I am interested in exploring the collaborative process through which the construction and meaning making of knowledge took place.

This section intends to provide you, the reader, with the antecedent unfolding stories of the learners’ and facilitator’s experiences of teaching and learning; their current experiences of knowledge co-construction in the course of the Applied Psychology II module; and their future intentions as a case story or map (Richmond, 2002). After presenting the story maps, I introduce the narrative themes and patterns that emerged from the analysis of the reflective journals. The analyses of the story maps of participants who share a common life event (i.e., the learning experience in a psychology module for orthotic/prosthetic practitioners) can collectively offer multiple perspectives in understanding the frame, affect, conflict and enduring role strains that emerge from the
research text (Riessman, 1993). The narrative framework, furthermore, focuses on the categories of abstract, orientation, complicating action, resolution, evaluation and coda (Labov, 1972).

My interpretation of the story maps is informed by my own life story and the methodology map that I have chosen to follow in understanding and analysing the text. My interpretations are therefore not truth statements. As a reader, you may find yourself constructing different meanings. Your understanding, as well as the meaning that Peter and James ascribe to the story maps, contribute to a co-construction of multiple meanings.

My adoption of multiple roles in this text presents me with multiple challenges in this chapter. As a researcher, I must interpret data written by me about myself, in my role as facilitator. In an attempt to see, confront and discover myself in my practice, I have chosen to refer to myself in the third person, i.e. as ‘the facilitator’. This dissociation in using the third person may open up new possibilities in challenging assumptions about myself and encourage alternative interpretations and learning about my professional practice.

The Setting

To accommodate orthotic and prosthetic practitioners in full-time practices, the B.Tech Medical Orthotics and Prosthetics learning programme is facilitated by means of monthly two-day lectures. During these regular meetings between facilitators and learners, the following study modules are covered: Orthotics and Prosthetics Theory IV, Business Practice I, Research Methods and Techniques, Applied Psychology and Pharmacology II. It was in this setting that I, as facilitator, met with Peter and James (the learners) in the course of the Applied Psychology II module. The psychology course map included the following learning outcomes:
At the end of the course, students should be able to:

- demonstrate understanding of a helping relationship
- apply basic communication skills of attending, listening and understanding in a helping relationship
- display an understanding of human development throughout the life cycle
- apply basic principles of social constructionism and externalising conversations to a helping relationship
- display an understanding of the effect of primary and secondary trauma
- demonstrate an understanding of the effect of loss on an intra- and interpersonal level
- display an understanding of personal relationships with substances
- display a personal understanding of HIV/AIDS

During the three-hour contact sessions, Peter and James were invited to collaborate in the discussion teaching. They both received a study guide in the form of a workbook in which they could make notes and reflect on case studies discussed during class. Continuous assessment was done in the form of various assignments, which carried a weight of 60 per cent of the final mark. The examination (an integrated oral assessment) constituted the remaining weight of 40 per cent. Examples of assignments include a helping skills project in which learners had to give evidence of situations where they applied helping skills such as listening, empathy or externalising conversations, with reference to a specific case study. A life analysis project in which learners had to analyse their own life by means of a developmental theorist of personal choice was used to assess their knowledge of life-span developmental psychology. After viewing the film, *The life of David Gale*, learners were invited to choose a character from the film to discuss the effect of loss and trauma, and to reflect on how the film and the assignment
impacted on their own personal views and relationships with death and secondary trauma.

Reflective journal writing was introduced as an integral part of the learning and teaching process, and also used as a means of data collection. The learners and the facilitator were required to make a journal entry on each learning outcome covered. Some open-ended questions served as a guideline to facilitate reflection-on-practice in the journals (see chapter 3, *Picking up Leaves*). Journal entries were not assessed, but complete journals, which covered all learning outcomes, contributed 10% of the total predicate mark. It is on the basis of these reflective journals that the private narratives of the learners and facilitator were explored.

This chapter follows Richmond’s (2002) structure where the journal entries of Peter, James and the facilitator are presented in a story map of past experiences, present experiences and future intentions. Thereafter narrative themes emanating from the narrative analysis are identified. Each participant’s narrative framework concludes with a core narrative utilising Labov’s (1972) categories of abstract, orientation, complicating action, resolution, evaluation and coda. In concluding the chapter, a synthesis is provided of the narrative themes and patterns that emerged from the data analysis.

**Peter: Story Map**

**Past experiences**

Peter had known his fellow classmate for a number of years, but only met the facilitator at the commencement of the Applied Psychology II class. Since the B.Tech Medical Orthotics and Prosthetics course had not previously existed, it created the context for a new story to unfold. He wrote:

*We have agreed that we all will give input into this new development since this subject does not exist until now.*
Peter’s involvement in the psychology module reminded him of the enthusiasm with which he had previously studied psychology.

When at home much later I reflected on a very special first lecture. I was filled with enthusiasm like in the days when I studied psychology at UP… Most of the literature was very familiar to me. I found myself recapping on some lost info I studied years ago. The reading up on the topic got some of the cobwebs cleaned out.

His previous training under a surgeon and his studies at university informed his understanding of psychology.

My training under a surgeon gave me clinically a different outlook on trauma. The studies in psychology at UP gave me a little more insight on the topic. I think that I cope better with the subject currently because of my previous studies.

As the Applied Psychology II module unfolded, Peter recalled a number of past experiences of which some were very painful. He realised that he was not the only person in the group with painful memories of past experiences. He wrote:

I told the group that I would not like to be anywhere but here right now. My past was too painful to be in again… While listening to the group as they responded on where they would like to be it caught me off guard on how stable their lives seem to have been. I found myself a little envious of them. I could also pick up that I was not the only one with some hurt in the past. From what James was saying I could easily pick up that he had some bad memories as well. The facilitator disguised her pain quite well. Although quite professional I could see her also showing body language of honesty on telling her story. I could pick up that she also had some pain in her past but seemed quite at ease with it.
Discussions about trauma invited Peter to share some of his own traumatic past experiences in the National Service with the group. As he recalled these experiences, he was reminded of his traumatic past.

*I think with this session I had the drive to elaborate a little on my time in the National Service and things I did and saw. I observed from James that I might have struck a nerve with his feeling as well towards the army... I felt some hidden aggression towards the system about certain things that has happened in the past. Maybe we lost a bit of track during this session but it opened the floor to conversation between us.*

Peter realised that his past experiences have had a significant impact on his life.

One other observation was a repeated one of realising again what traumatic history I had with how my life has evolved to today... I see that our childhood years still have very deep impact into all our lives. We all refer to some stage of childhood that have deeper meaning or some significance in our lives today.

Peter’s experiences of loss and death in the past made him appreciate life so much more. He wrote:

*I count myself lucky to have lost something special... The fact that I have faced death in the army made me appreciate life just so much better.*

The class discussions about relationships with substances brought forth an account of past adolescent experiences and school reunions. He recalled:

*I find it quite funny how we are manipulated as teens into joining cliques, gangs or groups and after leaving school totally redirect our lives to become successful. What throws me is what we do when we have reunions and old school mate gatherings. We immediately fall back into the same old cliques, gangs and groups we belonged to when last in school. Although we all have professional qualifications and so on we demonstrate exactly the same actions when we were*
adolescents. It somehow demonstrates the effects that peer pressure and all those topics in discussion have had on us. We present adulthood physically but act like children mentally. Those who smoked or abused alcohol at school suddenly do it again without provocation.

He realised that he has already been practising some narrative therapy principles in his own practice.

It was clear to me that in my own practice and surroundings I am already practicing at large the narrative therapy model. Maybe not in such detail but still.

Present experiences

Peter began his present experience with great anticipation and explored his fellow group members from a distance and with scepticism.

It was with great anticipation that I met up with the small group that was to form the pilot study in Applied Psychology for the B.Tech Medical Orthotics & Prosthetics. On meeting with our facilitator and lecturer we explored one another at a distance… The first thought that crossed my mind on meeting with both of them was one of a little bit of scepticism regarding the enormous task that was in front of us.

The first session assisted him in establishing a better understanding of his group members and of the psychology course.

We established some understanding of interactive input during the first session of who we are and what we want to be and that it would be the model for the rest of the lectures ahead.

He compared the facilitator’s qualifications and capabilities with his first impressions of her.

On reply from the facilitator many thoughts crossed my mind. I was thinking about her qualifications as I could see them across the room. I
was also thinking of her capability to handle this subject since our course is such a complicated one. Her response was very enthusiastic and she crossed me as being in the right profession. My first personal impression of her was one of a good listener.

During the first session Peter came to realise his own need to talk to someone about his profession, but also about personal issues.

_During the lecture it became apparent to me that it seemed that James and I have found someone to talk to about issues related to our profession and personal issues... I had so much to give for this subject to be used for examples in developing this subject into something special that I did not become aware at first what need there existed for me to talk to someone as well._

Self-disclosure, performing life stories and witnessing the stories of others held significant meaning to Peter, and he wrote about this experience continuously.

_During the session I felt that we as a group were forming something more than just merely a study group. It felt that we could share something with one another a little bit more on personal issues of a general nature without feeling uneasy. Somehow it was a good feeling._

He was aware of the honest way in which the facilitator disclosed her life story. This in turn, allowed him to share stories of his own experiences, resulting in a release of stress.

_I have had a tough week and some work issues crept up that we discussed. During our release of stress I also came to realise the need to talk with others on work-related stress and issues._

He became aware of “our inability as professionals to deal effectively with stress”. The discussions about Peter’s past experiences in the National Service created a common interest and encouraged the sharing of stories: “I observed from James that I might have struck a nerve with his feelings as well towards the army”. Performing
his own life stories and witnessing the stories of others left Peter feeling content and recharged for the next session. He wrote:

\[ I \text{ was feeling very positive during and after the session was over. On the way back to my office I could not help to feel charged for the next session.} \]

Being a participant in the facilitator’s PhD study left Peter with a sense of value in contributing to another person’s personal development.

\[ \text{My mind was going back several times on the facilitator’s comment on completing her PhD and using us as basis of her study. For me this is a huge compliment. If we can stimulate just one professional working with us it will equal tens of students qualifying. I was glad that although we were a study group there still was room to influence one another to higher level of performance and thinking.} \]

Peter enjoys his present life experiences and would not like to exchange them for his past experiences.

\[ \text{I told the group that I would not like to be anywhere but here right now... I enjoy my life right now. I like to be around my children and wife.} \]

Peter found the co-constructed meaning relating to helping skills and externalising conversation principles useful to apply in his future intentions in his practice and teaching to students: “the lecture today gave me some helpful hints to use narrative therapy in my practice and teaching to students”. Reflecting on the construct of co-constructing knowledge challenged Peter to position himself differently as a lecturer in future:

\[ \text{The idea of co-construction of knowledge is starting to sink in with me. I find myself thinking aloud throughout the day on the way I lecture to students. I think this new method will allow my students to participate at a different level in lectures with me and I am quite challenged at the thought of it. I like challenges.} \]
He was hesitant to share his life story with the facilitator in a life analysis assignment: “On receiving the assignment I thought it would be a huge task. I have an idea what school of psychology to use but seem a little hesitant to put my life on paper before strangers”. However, during session four he reflected on the meaningfulness that the assignment had for him.

The long assignment of the holidays was still fresh in my mind and the effect thereof on me I think was quite easy to see. I felt quite relieved after doing the assignment, not for the work that went into it but for the therapy value it had for me. It felt good afterwards to have completed the assignment.

Peter realised that every individual constructs his or her own meaning of knowledge and that everyone is entitled to their own opinion.

Today’s lecture made me aware again of all the different viewpoints of loss and bereavement. My point of opinion is only my own. The viewpoints of my wife, children, patient, and others are their own and they are entitled to it… My own outlook on life and the viewpoint on death have a different meaning for different people.

He also realised that what people believe are only contextual truths. He wrote:

I learned today how irrational we all are. Our perception of substance abuse is based on what we believe. What we believe is not always true… I could see that all of us although understanding trauma interprets it differently.

He thinks that others have much to learn about the orthotist/prosthetist profession, including the facilitator.

It struck me how little other professions know about our scope of practice… Very few people know what we practice and it is evident to me that she [the facilitator] still need to be enlightened on the whole scope of our profession.
Societies’ construction of substance use scares Peter.

What amazes me however is how we as fellow colleagues, friends, family etc., sweet-talk these issues. No more judging of character, dislike in attitude and so on. Only a “see-past-it” attitude. It is scary. People are not scared anymore to show what they are doing. They do it openly and un-ashamedly with disrespect towards the law, friends and their own integrity.

Peter’s attention was drawn towards the risk he has in his profession of contracting HIV/AIDS.

The one thing that did grab my attention is the risk I have in contracting this disease. As a practitioner I am at risk of being infected by means of carelessness. We as practitioners know the dangers but are careless towards safety precautions and protocol.

The discussion on loss and bereavement left Peter with questions regarding religion.

My observation was one of how do we know that the religion we are following is the right one. What are we to do when we come to understand too late that we have been on the wrong track ever since?

Peter believes that the meaning constructed from acquired knowledge is dependant on the responsibility that individuals take in creating meaning for themselves. He believes that in the process of helping a client, he is also changed as a person. He compared this with the metaphor of a gait analysis:

Psychology is like gait analysis. There are different moments in the gait cycle that have an impact on the overall walking pattern. If you make a small adjustment on toe off, you create a new problem with heel strike. The skilled practitioner will know what to adjust and what to leave alone. Life is very similar. One gets born with all the potential to have a good gait cycle in life. Through your lifespan it is necessary to adjust something here and there all with an end result affecting the final walking cycle.
How you will adjust your own moments of impact depends very much on acquired knowledge and what you do with it. Some people become mere strollers, walkers, and joggers while others become Olympic athletes running like the wind.

Some of our patients are unable to walk initially. With help from us they can progress to a shuffle. They go from no gait cycle to a completely new cycle. And it touches everyone who is in contact with them - most of all you.

Future intentions

Peter described his future by means of an analogy of a tree with big branches shadowing his family. He positioned himself as a protector:

On answering the group for my response on where and what I would like to be I reflected on being a tree with big branches shadowing my family. For me the example simplifies my outlook on life and what I stand for. A big tree withstands the elements of time, is a landmark for the area, a playing area for children, gives shelter against sun, wind and rain. I somehow didn’t think that the group saw it in that light. It had more symbolic meaning to me than they understood.

This analogy reminded him of the orthotist/prosthetist’s responsibility as practitioner in future: “I think that by the end of the lecture it became quite evident that we as practitioners have an enormous responsibility towards patients and community”.

He realised what impact and role psychology has to play in his profession in future. Peter hopes that future B.Tech students will grasp the concept of social constructionism and gain a meaningful perception of rehabilitation from this point of view.

The co-construction of knowledge in narrative therapy I think will be a good reference for our profession that I hope the new students will
grasp. I constantly am thinking that the leap from previous training in psychology as a subject in the N Dip those practitioners will gain new insight into the world of rehab with this school of thought as viewpoint.

He would like to use the co-construction of knowledge as an invitation to new learners to collaborate with him: “I think this new method will allow my students to participate at a different level in lectures with me and I am quite challenged at the thought of it”.

He suggested that the life analysis project should be incorporated into future psychology lectures, due to the value it has had for him. He wrote:

I am looking at the value of doing such an assignment to be highly underrated. I will suggest that this assignment be incorporated into all psychology studies for students and practitioners alike.

Peter suggested a number of issues that could be followed up in future. These include ‘the lost generation’: “I think my comments on the lost generation caught them a little off guard. Maybe this point needs to be explored further in future”; issues relating to faith and death: “I also get the feeling that both my two colleagues have issues with faith and themselves that need to be explored or confronted”; the impact of HIV/AIDS on our future: “I am also convinced that we do not realise yet the impact this disease will have on society… When the end result finally hit this country we will be ill prepared to deal with all its facets of manifestation”; and dealing with trauma/disaster: “we will have to be equipped enough to direct our patients through some difficult times in order to cope with demands regarding personal disaster”.

He believes that he will be shaken if someone very close to him dies in the future. Although I have an open mind about the issue of death I still think I will be shaken if that special person comes any closer to what I have experienced before.

The thought that his children might be exposed to substances in the near future scares him.
I am scared at all the new methods of criminals in finding ways to introduce substances to children. Even at my son’s school is it present. I am scared of the consequences it may have on my family in future. I also am scared that those in our family currently on substance abuse will introduce it to my children because of the joke of it. How often have I seen at parties where adults give toddlers alcohol to drink to see how they will react to it. Big joke!

He is not sure what his future position and feelings will be on the topic of HIV/AIDS. The lecture on HIV/AIDS has made me think. My answer is not defined to what I should be feeling. Time will only tell.

Peter believes that as an orthotist/prosthetist he can make a contribution in a helping field in future: “in future we all will be therapists of some sort”.

Narrative Themes

Peter’s meta-narrative of the teaching and learning process can further be clustered into narrative themes. Stories of teaching and learning, co-constructing knowledge, community of concern, reflection-on-practice, life-analysis project, and agency emerged from the narrative analysis. Elucidation of the narrative themes includes visual representations of the grouping of codes into family trees (see chapter 3, A story map to guide the way, step 3: Analysing, for a full description of the analysis process).

- Teaching and learning

In Peter’s story of teaching and learning he writes about a different approach towards teaching and learning (strengths model) in contrast to the traditional model (deficit model) that he has been accustomed to: “I think that the level of student in this group is quite different to that from a normal classroom”. Although he is initially sceptical of the teaching and learning challenge, his first impression of the facilitator encourages
him to be open and to participate as an active learner. Peter collaborates in the
discussion teaching and the co-construction of knowledge. He also describes a new
sense of responsibility as a learner and as a practitioner. The responsibility that Peter
refers to is congruent with McNamee and Gergen’s (1999) notion of relational
responsibility. The teaching-learning transaction acts as a spur for life-long learning
and Peter realises that the facilitator can even learn more from him about the
profession of orthotics and prosthetics.

Figure 9 Network view of teaching and learning (Peter)

- **Co-constructing knowledge**
The story of collaborating in the co-construction of knowledge is introduced with the
social construction of the first B.Tech Medical Orthotics and Prosthetics programme in
southern Africa. Peter writes about the invitation to learners to participate in the
discussion teaching and to give interactive inputs. During the process of
collaboration, Peter continuously evaluates and reconstructs his existing knowledge
regarding psychology and creates his own meaning of the co-constructed knowledge.
He realises that contextual truths exist and that people construct different meanings of
knowledge. Peter’s personal narrative of specific knowledge systems and beliefs
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(propositional, procedural and dispositional knowledge) concerning topics such as substance use, are challenged during the teaching and learning process. The process of co-constructing knowledge created an awareness of the purpose of knowledge, the skills it develops and how Peter can use it in practice.

**Figure 10** Network view of co-constructing knowledge (Peter)

- **Community of concern**
  Peter writes about the inviting and supportive learning environment, which brings him to the realisation that he has a need to talk and to perform his life stories before a supportive audience. Sharing his life stories offers him an opportunity to release stress. Entering into dynamic dialogue allows Peter the opportunity to exchange ideas, thoughts, opinions and feelings in a learning environment that makes room for all voices (facilitator and learners). From the dynamic conversations, Peter is able to co-construct meanings and ways of understanding himself, his patients and the co-
constructed knowledge. For example, he realises that he and James share similar experiences of their previous engagement with the army. Peter’s sense of belonging, contributes towards the establishment of a community of concern.

**Figure 11** Network view of community of concern (Peter)

- **Reflection-on-practice**

Reflecting with oneself and others, and putting silent thoughts into spoken or written words, form an important part of learning in the Applied Psychology II module. Throughout the psychology course, Peter finds himself thinking aloud and reflecting on the class process and the value of the co-constructed knowledge. His story of reflection includes an awareness of the effectiveness of his current skills, the value of newly acquired skills and knowledge that he can apply in practice. He also expresses an awareness of where his dominant narratives come from and the impact that they
have on his relationship with others (application of content, process and premise reflection).

![Network View of Reflection-on-Practice (Peter)](image)

**Figure 12** Network view of reflection-on-practice (Peter)

Peter ascribes value to the contribution of his own life experiences, such as death, bereavement and trauma, in terms of better understanding his patients. Reflecting on meta-narratives surrounding substance use (one of the learning outcomes of the Applied Psychology II module) encourages Peter to relate his new understanding not only to his practice, but also to his personal relationships. His reflection on his own teaching practice emerges spontaneously from the experience of participating in a collaborative learning process. The reflection process furthers an awareness of professional responsibility and encourages reflection as part of everyday practice in Peter’s life.
• Life-analysis project

Peter refers to the completion of a life-analysis project (a life-story narrative project introduced in teaching life-span developmental psychology) as a unique outcome in his life. Completing the project created an awareness of the impact of his past experiences on his current experiences, as well as an opportunity to re-author his life. Peter expresses a favourable attitude towards the assignment as an effective learning tool by which he was able to undertake an introspective analysis of his own development. Through the life-story narration, Peter could connect and construct his life experiences into a personally meaningful artefact.

• Agency

Agency in Peter’s narrative refers to his perception of competency, or his ability to perform or take action.
Participating in the facilitator's PhD study contributes towards Peter's sense of accomplishment and agency. He writes about his agentive negotiation in positioning himself as a collaborative learner, facilitator and research partner. Peter realises that he has the potential to collaborate in knowledge construction and meaning making. Through his engagement in conversational becoming, Peter constructs and reconstructs representations of self as helper, professional orthotist/prosthetist practitioner and protagonist.

**Narrative Core**

**Abstract**

Peter’s narrative on teaching and learning is guided by his early life events and previous learning experiences. The enthusiasm with which he previously studied psychology, has been rekindled by his participation in the psychology module for the B.Tech Medical Orthotics and Prosthetics programme.
Orientation

The setting of Peter's narrative takes place during the course of an applied psychology module for B.Tech Medical Orthotics and Prosthetics. He writes about his experiences of teaching and learning in the process of co-constructing knowledge. James, his fellow classmate, and the facilitator are the other actors involved in the collaborative learning community.

Complicating actions

Peter’s previous training informs his current understanding of psychology. The authority of public narratives regarding the power hierarchy of facilitators and institutions of knowledge production informs the positioning that he ascribes to the facilitator. Her qualifications and listening skills bestow a higher level on authority to her in comparison to him as a learner.

However, through the process of utilising the assumptions of social constructionism as part of the philosophy that underlies the learning experience, Peter is challenged to reconstruct how he thinks about teaching and learning. Collaborating in the co-construction of knowledge helps him take responsibility as a learner and practitioner, and reflection-on-practice encourages Peter to be active and purposeful in his learning and in determining his direction. Through engaging in dynamic dialogue with his classmate and facilitator in a community of concern, Peter is able to co-construct meanings and understandings of himself, his patients and the co-constructed knowledge. The life-analysis project creates a unique outcome in allowing Peter to connect and construct his life experiences into a personally meaningful artefact. The academic knowledge that Peter constructs pertaining to theories of human development is transferred and applied to his personal life story. In the process, these become meaningful knowledge constructions that he can refer back to in his interpersonal encounters with patients in practice. He realises that people construct their own meaning of knowledge and learns to respect differing opinions. He also comes to realise that beliefs are contextual truths and rejects the authority of public narratives.
embedded in a deficit model of teaching and learning that argues for knowledge as a single scientific truth.

Resolution

Peter writes about his agentive negotiation in positioning himself as a collaborative learner and embraces the potential to invite prospective learners to collaborate with him, as a facilitator, in the knowledge construction process. He also positions himself as a protagonist in being one of the first learners in South Africa to successfully complete the B.Tech learning programme and to lead the future training of orthotist/prosthetists in developing countries.

Evaluation

The public narratives of teaching and learning embedded in a deficit model informed the way that Peter’s narrative initially unfolded. His narrative started off with an authoritative positioning of the facilitator as someone with more knowledge and power and of himself, as a learner, as someone with lesser responsibility in the teaching-learning transaction. However, in the process of inviting learners to collaborate in knowledge construction, we witness a shift in Peter’s story towards a position as an equal partner in a collaborative learning context, who shares responsibility with the facilitator. His narrative concludes with a balance between individual meaning making versus collaborative meaning construction with his acknowledgement of the existence of contextual truths.

Coda

Peter values the important part that psychology has to play in his future and believes that he can make a contribution to the helping field as an orthotist/prosthetist.
Past experiences

James described the narrative beginnings by writing that “my journey begins as a small boy with lots of trauma in my life!” He blamed trauma for missing out on childhood experiences: “the trauma is to blame for the man I am today. Due to trauma I could not enjoy life as a youngster and do all the boy things”.

In his attempt to catch up on lost time and change the past, he feels as though he has missed out on the present and on quality time with his family. He writes:

My wife and I have had a lot of quarrels, since in my thirties with the financial means to support my activities, I started to do all the boy things, like model cars, airplanes, fishing etc. This had a negative impact on our family time since I am using this time for playing and not to grow closer as a family… I always tried to change the past and in the process, missed out on the present.

James used aggression as a coping mechanism to deal with the pain and loss. He recollected traumatic and painful past experiences of which his wife and parents know little.

My parents and I had so many issues that were never discussed. My wife is not aware of all my skeletons.

Through his involvement in the orthotics/prosthetics profession since its early beginnings and his leadership in developing the B.Tech learning programme, James feels that he has been recognised as a protagonist in his profession. He wrote:

I am surely one of the few orthotist/prosthetists in the country who can speak from experience about the old and the new! I studied through the original internship training, did a bridging course with technikon students and then qualified as practitioner. I was a study leader for the

Note: direct quotes from James’ journal is the researchers’ translation and transcription of Afrikaans to English text
construction of the B.Tech programme and presented papers on this topic in Germany and San Salvador. I find it very meaningful and rewarding to know that I have done so much for the profession and to be recognised as a protagonist.

James’ inability to open up and talk about his emotions and feelings created the context for the rest of his story as it unfolded during the course: “I never knew how to open up …”

Present experiences

James started out with openness to new experiences and an eagerness to develop and grow as a person. He wrote:

The fact that I am 35 years old does not imply that I have developed optimally! I believe that one should be open to new experiences that life offers. Open in order to grow and develop! Experience everything and hold on to what is good! Without experience I (and others) cannot grow!

Although he has had many positive experiences in his life, he often feels incapable of helping himself. He would like to manage experiences with passion, just like the facilitator.

I wish I knew what helping means! There are so many positive aspects of my life, but I often feel depressed because I don’t know how to help myself. I have certain principles by which I live and also expect from others to act with a positive attitude, respect and honesty. The facilitator manages situations with passion – I would like to follow her example in managing situations in my own life with such experience!

As his experiences of teaching and learning unfolded during the course of the year, James discovered unique outcomes that created doorways to alternative stories in
his life. The life-analysis project was a sparkling event or unique outcome that enabled James to re-author his life. His courage in inviting his parents and wife to witness his life story resulted in open communication, better understanding and a feeling of being “on top of the world”. James’ ability to express his emotions and feelings in writing allowed him to deconstruct a personal narrative of the inability to communicate or open up, and assisted him in performing new meaning. He wrote about this unique outcome:

The feeling of ‘on-top-of-the-world’ after completing the assignment was indescribable … I feel much better after my wife and parents read my assignment, because I can’t express myself verbally that good, but writing about my experiences allows them to rethink things at their own time. My frankness in sharing my experiences opened the door for effective communication. I always wanted to build my life on a solid foundation of life experiences, without all these negative issues and the life analysis project gave me the key. Caption: As a result of this, my relationship with my parents has improved, especially from my side.

The class discussions gave James an opportunity to share stories of his experiences with the group and to witness the stories of others: “the contact sessions with the facilitator invite open and dynamic dialogue!”

The learning environment created the context for repressed memories of trauma to surface and allowed James to deal with trauma in a supportive and safe environment. He felt that his classmate and facilitator played an important role in helping him to deal with trauma in his life.

I think that I have repressed trauma so deep, that it only surfaces during class discussions. It is during these discussions when the pain and sadness surface and it leaves me burned-out and with fear that the house-of-cards will collapse. Peter and the facilitator play an important part in supporting me to deal with the trauma during class.

Sharing his stories about trauma led to another unique outcome in that James was able to eat watermelon for the first time in 18 years without being overwhelmed by
traumatic memories of the past: “For the first time in 18 years I had watermelon this summer! Thanks!” He was left with a feeling of wholeness regardless of his traumatic past experiences.

James learned that sharing painful or difficult experiences in his life with others helps to reduce overwhelming emotions and release stress. He wrote:

The helping skills gave me a foundation of developing my self-image and how to handle communication and stress! In the past pain and sadness of loss created aggression, but now, a year later, I am able to acknowledge that the sharing allowed the loss to subside and disappear!

Reflecting on the unique outcomes that unfolded through the “landscapes of action” (White, 1991, p.31), James gave meaning to these events and constructed representations of selfhood that could take ownership of the present, invite free expression of emotions and encourage self-acceptance.

I believe that I am busy to beat this monster through learning to share more of myself with my spouse. I never knew how to open up, but through the B.Tech course and self-development I have learned to come closer to the comfortable me by expressing my feelings! Thank you!

His wife became a witness to his life-changing knowledge and acted as an audience to performances of the new story. He wrote:

At the end of a year’s hard work, I can relax and my wife, in particular, says that I am a much more pleasant person to be with!

James also created a professional identity that allows him to understand, help and support others with confidence. His working relationship with Peter improved as a result of this.

I can work with a patient, understand, help and support with confidence and I am glad to be a part of the rehabilitation system. My relationship with Peter has improved as a result of open communication and for the
first time in our careers Peter and I complement each other by working towards a collaborative goal. In combining Peter’s academic approach and my practical approach, we can facilitate a class from different perspectives and still reach the same end result – great!

Through his experiences in the course, James realised that everyone has a relationship with substances. He learned to take ownership of his relationship with smoking and not to blame peer pressure. Through this process James is reclaiming power from smoking. He wrote:

All of us have some knowledge about substance abuse either through personal experience or through contact with a patient… I can make a choice to overcome my problems. To hide behind peer pressure is no excuse for my smoking. I am the only person who can sort it out through the choices that I make.

He recognises the importance and value of helping skills, empathy and listening in the rehabilitation process.

Communication plays a vital role – sometimes you have to listen first before you do a fitting. The best prosthesis will not necessarily rehabilitate a person, unless the patient’s emotional needs are addressed. As practitioner, I have to learn to be patient, to give the necessary guidance, to be empathic and even sympathetic at times and to place the patient’s well-being always first.

James’ attention was drawn towards the risk of contracting HIV/AIDS he takes in his profession. He feels that he should act in a responsible manner that is not detrimental to the patient’s treatment.

I often treat a patient without considering his/her HIV status and in the process I can place myself at risk in contracting the disease. I have to remind myself to be more cautious, but not to the detriment of the patient’s treatment.
The class discussion on loss and bereavement assisted him in becoming aware that he deals with loss through repression and denial: “when I lose a friend, not necessarily through death, I often put off the friendship and avoid thinking about it again”.

In the process of articulating the unique outcomes, James brought the stories of his experiences into the foreground of an emerging alternative story. He named this alternative story a “success story”.

> It is so meaningful to me to be a part of such a success story...

In the success story, James privileged the facilitator’s significant membership in assisting him to reconnect with his alternative story.

> Without your (the facilitator) contribution I could never have been part of such a success story. Your constructive contribution towards my self-actualisation and self-acceptance is fantastic! Once again thank you for being such a wonderful person and excellent lecturer!

The meaning that James ascribes to his “success story” cements the unique outcomes into a foundation for his future intentions. He now lives life to the full:

> I now live life to the full and ensure that I make the best of every day before I lay my head down to rest at night.

**Future intentions**

James is now able to place the dominant problematic stories of his past in the background and access his alternative story as a resource in his future. He feels that his experiences in the psychology course have provided him with a sound foundation and a key for his future. He wrote:

> I always wanted to build my life on a solid foundation of life experiences, without all these negative issues and the life analysis project gave me the key. It takes time, but I believe that the class contact gave me the key to deal with the trauma.
He believes that these resources will affect his future actions and shape his personal and professional identity. He also believes that he has personal agency in shaping his own future.

*The class of psychology gave me the strength to stand up, make choices and to develop me into the person I want to be for myself and for my family. I can work with a patient, understand, help and support with confidence and I am glad to be a part of the rehabilitation system.*

James fears the day that suppressed emotions of pain and loss might surface to a conscious level and he thinks that he may be overwhelmed with grief if that happens.

*I think perhaps one day all the pain and sadness might surface and then I fear that I will be overwhelmed with sadness and grief!*

He believes that the B.Tech has created an equal playing field for the future of orthotic/prosthetic practitioners in South Africa.

*I believe that the academic field has now been elevated to an equal playing field through the status of the B.Tech degree and better qualified professionals who set an example for higher professional standards.*

Reflecting on his experiences in the B.Tech year, James used the analogy of puzzle pieces fitting together into a clear and positive picture of his future. He saw this puzzle as a thickening of his success story.

*I wonder sometimes whether my future will yield light at the end of the tunnel. If I have to answer myself … Yes! Why do I answer yes? Life is not always fair – you and the environment in which you function are often challenged! However, as time pass by I see, for the first time, how all the pieces fit together. The B.Tech, the lecturers, and in particular the conversations during the psychology classes have made a constructive contribution to build a successful puzzle in my life, as well as an important corner-stone for a wonderful career in Medical Orthotics and Prosthetics!*
James concluded his notes with excitement about his future: “... I am looking forward to tomorrow!”

**Narrative Themes**

James’ meta-narrative can further be clustered into narrative themes. Stories of teaching and learning, co-constructing knowledge, community of concern, reflection-on-practice, life-analysis project and agency emerged from the narrative analysis. Elucidation of the narrative themes includes visual representations of the grouping of codes into family trees.

- **Teaching and learning**

  ![Diagram of Teaching and Learning](image)

  **Figure 15** Network view of teaching and learning (James)
James’ story of teaching and learning starts with his openness to new experiences and an eagerness to develop himself. His experience might be indicative of his view of progress as a life-long process, and not as linear and infinite as suggested in the modernistic public educational literature (Edwards & Usher, 2001). He believes that progress is a basic human condition for self-actualisation. The facilitator’s passion for psychology inspires him to approach his own learning with passion.

In a collaborative learning community, James is invited to engage in dynamic dialogue. Although he finds it difficult to express himself, he collaborates in the teaching and learning challenge, which results in the creation of life-changing knowledge.

- **Co-constructing knowledge**

In James’ story of co-constructing knowledge, it becomes evident that both his knowledge of psychology and self-knowledge are products of communal construction. It is through social dialogue, interchange and interaction that James’ dominant

**Figure 16 Network view of co-constructing knowledge (James)**
narratives surrounding topics such as substance use, trauma, death and bereavement, developmental psychology, helping skills and HIV are challenged. Of particular interest in James’ story is the personal meaning that he attributes to the co-constructed knowledge. Through his continuing self-dialogue, as well as the discussion teaching during class, James is able to apply the co-constructed meanings of knowledge not only to his practice as orthotist/prosthetist, but also to his personal life. This results in a liberated understanding of his relationship with trauma, substance and ability to communicate.

Furthermore, James relates ownership and responsibility as a learner and as a person to the personal meaning that he attributes to the co-constructed knowledge. In the process of co-constructing knowledge, James is able to resurrect his subjugated knowledge, which enables him to come to new realisations about himself and his relationships. White and Epston (1990) define subjugated knowledge as the process in which certain knowledges of persons are subjugated to the dominant discourse that denies them validity. In James' narrative his special skills in helping others have been subjugated to the meta-narrative of an inability to communicate effectively or open up. However, the life-changing knowledge that was co-constructed in a collaborative and supportive learning experience allowed him to discover his special helping skills and to bring them forth.

- **Community of concern**

James writes about the inviting and supportive learning environment in which he could connect with his classmate and the facilitator. In this community of concern, James has room to find a way to voice his emotions and thoughts, which results in a deconstruction of the meta-narrative of ‘an inability to communicate or open up’. From the dynamic conversations, James is able to co-construct meanings and understandings of himself, his patients and of the co-constructed knowledge. James
ascribes special membership to Peter and the facilitator, who act as an audience to the performance of a new story of teaching and learning in his life.

Figure 17 Network view of community of concern (James)

- Reflection-on-practice

Figure 18 Network view of reflection-on-practice (James)
Reflection forms an important part of James’ learning process. Putting his silent thoughts into written words in the reflective journal spontaneously results in James’ desire to go further and write reflections-on-his-reflections. James reflects on his responsibility as a practitioner to be patient and responsible when he interacts with his patients. Furthermore, his story of reflection includes an awareness of the importance and value of knowledge and skills that he can apply in both his professional and personal life. In his reflections-on-practice, James acknowledges the contribution that the B.Tech learning programme has made in the creation of an equal playing field for orthotists and prosthetists, both nationally and internationally. The reflection process furthers an awareness of professional responsibility and encourages reflection as part of everyday practice in James’ life.

**Life-analysis project**

![Life analysis project diagram](image)

*Figure 19* Network view of the life-analysis project (James)

The life-analysis project in James’ story (a life-story narrative project introduced in teaching life-span developmental psychology) acts as an unique outcome (an
exceptional event that is inconsistent with a problem-saturated story), which creates a doorway to the creation of a new preferred story. Through the life-story narration as a learning tool, James is able to access his capability to express his emotions and feelings through writing, which cultivates a seed of newness in his personal and professional life.

In the process of re-authoring his life, James reclaims his life from trauma and finds his voice as a writer. He invites his wife and parents to witness the performance of this alternative story, resulting in the creation of new meanings, understandings and knowledge of his own life-span development. Through the life-story narration James connects and reconstructs his life experiences into meaningful, life-changing knowledge.

- **Agency**

![Agency Diagram](image-url)

*Figure 20 Network view of agency (James)*
James’ narrative of agency becomes a way in which he creates multiple possibilities and varied ways of being and acting in the world. He transforms his professional identity through acting as protagonist in presenting papers at international conferences relating to the co-construction of a B.Tech learning programme in South Africa. The recognition that he receives from the orthotics/prosthetics professional board contributes towards his agentive potential.

James writes about his agentive negotiation in positioning himself as a collaborative learner and as a confident practitioner. Reflecting on the unique outcomes that unfold from the collaborative knowledge construction process, James is able to take ownership of the present and to construct positive representations of self. James acknowledges the facilitator’s contribution as an agent of change in his life. He is able to place the dominant problematic stories of his past in the background and access his alternative story as a resource in shaping his future.

Narrative Core

Abstract
The story of James’ past experiences describes his attempts to catch up on lost time. He felt that his past trauma resulted in his missing out on the present. His inability to open up and talk about his emotions and feelings creates the context for the rest of his story as it unfolds in his experience during the course.

Orientation
The setting of James’ narrative takes place during the course of an applied psychology module for B.Tech Medical Orthotics and Prosthetics. He writes about his experiences of teaching and learning in the process of co-constructing knowledge. Peter, his fellow classmate, and the facilitator are the other actors involved in the collaborative learning community.
Complicating actions

In James’ narrative the personal meta-narrative of an inability to communicate effectively or to open up, together with his previous experience of trauma, subjugates his knowledge of helping skills and psychology. James’ disabling narrative is embedded in a deficit and medical model in which his deficits and passivity are emphasised. It is with the authority of these public narratives of disability and deficits that James’ voice is silenced. James thus enters into the learning context of the applied psychology module with the experience of being locked into a system of lesser rights and obligations in comparison to the facilitator.

However, his openness towards new learning experiences creates doorways to unique outcomes that shape his current and future actions. The collaborative and supportive learning context challenges the authority of deficits and disability, thus moving the narrative of his learning experience from deficit to strength. Facilitation practices informed by the public literature on collaborative learning communities (Anderson, 2000) and the honouring and privileging of personal experience and knowledge (Carlson & Erickson, 2001), invite James to engage in dynamic dialogue and discussion teaching. The academic knowledge that is co-constructed in the learning process, in particular knowledge relating to trauma, enables James to utilise the life-changing knowledge in reclaiming his life from trauma. Furthermore, the life-analysis project as a learning tool instigates the construction of meaningful knowledge about human development that James can apply to the re-authoring of his own life story. It also allows him access to repertoires of knowledge and skills that he can refer back to in his encounters with patients and interpersonal relationships.

James’ wife, Peter and the facilitator act as an audience to performances of an alternative story that he names “the success story”. In the process of becoming a life-long learner, James embraces professional responsibility and reflection as part of everyday practice. The personal meaning that James ascribes to the co-constructed knowledge in the psychology module is a product of communal construction.
PRIVATE STORIES AT THE MEETING POINT

Resolution
The meaning that James ascribes to his success story cements the unique outcomes into a foundation that provides him with a key to his future.

Evaluation
The authority of public narratives of disability, as well as James’ previous traumatic life experiences, informed the way that James’ narrative initially unfolded. His narrative started off with themes of a life robbed by trauma and an inability to communicate effectively, thus silencing his voice in expressing his emotions, thoughts and ideas, and positioning him as a passive learner in the learning context. However, genuine concern and interest in one another’s well being was expressed in the learning community. Through this as well as facilitation practices that value and privilege personal experience and knowledge, James is encouraged to rediscover his subjugated knowledge. The life-analysis project helped James to find his voice and to re-author his personal narrative, moving from deficit to strength. The collaborative learning community invited and encouraged James to take responsibility for and to be the architect of his own learning and development as a practitioner and person.

Coda
James is able to live life to the full and is excited about his future.

The Facilitator: Story Map

Past experiences
The facilitator wrote about the narrative beginnings of constructing a psychology course for B.Tech Orthotics and Prosthetics in her field notes (field notes, November 5, 2002; October 21, 2004).

She described the meta-narratives and assumptions about psychology that operate in the learners’ lives before participating in the Applied Psychology II module. Despite
these meta-narratives, the learners still believe that there is a need for psychological skills in their profession.

Students in the Diploma course have Psychology I in the 2nd year of the 3-year diploma. Peter and James’ recollection of their own experience of Psychology during their studies is not very positive. They felt that the subject was not presented in an applied way and was therefore not very meaningful. However, they are of the opinion that there is a need for psychological skills in the profession of Orthotics and Prosthetics.

Her conversations with the course coordinators for B.Tech Medical Orthotics and Prosthetics, as well as a colleague at the Psychology Department at another university, guided the unfolding story of constructing and designing a curriculum for Applied Psychology II. She wrote:

They [course coordinators] issue me with an outline of a proposed curriculum for Applied Psychology II for the B.Tech course… The curriculum is more of an outline, than a detailed curriculum, and not written in an outcomes-based format.

I am very excited to be a part of this process and immediately give Peter and James my commitment to the course.

(Field note, 15 November, 2002)

I consult with a colleague in psychology at UP to assist me in guidelines of how to compile a suitable curriculum for Applied Psychology II, as nothing currently exists. He suggests that I should decide on a specific philosophy in psychology, either from a modernistic or postmodern paradigm that I would like to use as a platform to base the curriculum on.

In the process of designing a module in which the assumptions of social constructionism are utilised as part of the philosophy that underlies the learning experience, the facilitator recalled her experiences of designing a life skills curriculum for Tshwane University of Technology.

(Field notes, 2 – 31 December, 2002)
I design a curriculum for Applied Psychology II, from an outcomes-based perspective. I choose outcomes that relate to helping skills and refer back to my experience of designing a life skills curriculum for TUT. I decided to base the curriculum on a social constructionist philosophy, due to the fact that I find this field very interesting and would like to share the new knowledge that I have gained on this new era in psychology with others (transferring of skills and knowledge).

She came to realise that she knew very little about the profession of orthotics and prosthetics, and that she might learn much from collaborating in structuring a new curriculum for the course.

My first impression of the curriculum is that it looks like a list of amputations and medical terminology that I understand very little of!

As the facilitation process of the Applied Psychology II module unfolded, the facilitator recalled memories of past experiences that relate to the topics under discussion.

Discussing development was like a walk down memory lane... The discussion reminded me of how I allow the child in me to be more free and vivid when I am on holiday and when the adult in me takes more control in other situations.

The facilitator reflected on the process in which her past experiences shaped her dominant narratives about substance users, as she remembered a family member who had a relationship with alcohol. She became aware of the impact that these dominant narratives about substance use had on her current relationship with her clients in therapy.

This reminded me of an uncle in my family who had a relationship with alcohol. I was always afraid of him when we went to visit and I always assumed that he was under the influence... Even in conversations with my clients in therapy, I am often critical of their true intentions.
She shared her experiences of her final oral examination for MA Counselling Psychology with the learners while discussing an integrated assessment approach for the B.Tech Medical Orthotics and Prosthetics final examination.

*Peter and James had concerns regarding their final examination for the B.Tech Medical Orthotics and Prosthetics course… I shared my experience of the MA Counselling Psychology final oral examination with Peter and James and proposed a similar approach in which they should present a case study. The panel of examiners should be representatives of the different modules in the course. Their oral presentation should focus on the application of the different modules on the particular case study.*

**Present experiences**

The facilitator starts her journey with an exploration of boundaries and establishing rapport with the learners. In this process she attempts to negotiate a non-expert position for herself and privilege the learner’s lived experiences and skills.

*My first meeting with Peter and James was a meeting that symbolised the beginning of an exciting journey of discovery and knowledge creation. The journey started off with an exploration of boundaries… trying to establish who is really the “expert” or is all of us experts on the topic or neither of us? We got to know each other a little bit better. We all shared a common love for the outdoors and nature – James loves fishing, Peter loves camping, I love gardening and camping.*

She comes to the realisation that helping is part of her own life story, as well as those of the learners. She is struck by the learner’s positive outlook on life.

*Peter and James had all the textbook answers on helping, but we came to the realisation that helping others is part of their life stories (and maybe a part of my own life story too). They both reflected on how the time and dedication that they put into their occupations also “infiltrate” in their personal lives and relationships. I was struck by their...*
positive outlook on life – being able to see potential even in a patient dying from cancer (a case study which was discussed).

The facilitator becomes aware of “my own stressful experiences of standing in a helping profession” and of the impact of secondary trauma:

With the discussion of secondary trauma, we all were faced with the unavoidable truth and reality that we as health professional workers cannot escape the impact of secondary trauma when dealing with clients who are exposed to trauma!

The facilitator writes continuously about the learning environment that invites the sharing and witnessing of stories to take place.

At a point during the discussion I felt as though I (the facilitator), or the topic of ‘helping’, or maybe both, opened the door for Peter and James to blow steam off about stressful aspects of their occupation and job environment...

This opened the door for a whole conversation about the selection criteria for the course and the role of politics and equity in selecting candidates for admission to the N.Dip and B.Tech Orthotics and Prosthetics. Although this conversation is not directly related to the ‘curriculum’ that had to be discussed, I sensed a need from their side to voice their concerns and thoughts...

She reflects on the therapeutic value of this process.

While I am busy writing this journal, I am becoming aware of the fact that the process of knowledge creation is not only a cognitive experience, but also a therapeutic process. Maybe it has to do with my own language, where I refer to “sessions” and not classes. The subject of psychology allows us to open the doors of our souls. We witness vulnerable, special and very personal parts of others, and through the process we also learn from each other!
The facilitation process makes her aware of her own positioning as a facilitator who can learn from the learners, and of her responsibility as a psychologist.

*I also realised that orthotists and prosthetists have much more personal contact with patients, than I was aware of… Peter and James shared their knowledge about HIV/AIDS with me from the pharmacology class that was presented to them. I learned a lot from their stories… It also made me aware of a responsibility that goes beyond teaching or facilitating – the responsibility as psychologist to follow-up on an individual level on their traumatic experiences and of my ethical responsibility to do individual debriefing, if necessary.*

She comes to the realisation that she is part of the process and group:

*I am becoming more and more aware of my very personal involvement in the facilitation of this course. I am not only the facilitator any more. I am part of the process and group. I witness and experience the sharing of personal stories. I am very aware of my role as therapist and psychologist. This process involves much more than the mere mark for an assignment or the memorising of facts…* and acknowledges the commonalities she shares with the group.

*We all share a common love for the outdoors and nature… We shared one common experience: how our children challenge our meaning of death.*

The process of performing and witnessing life stories encourages the remembering and re-telling of experiences.

*This is where everything begins – with our life histories and us. With the introduction of every new outcome, we revisit our own lives and recall memories, some happy, others painful…*  

In the unfolding process of co-construing knowledge, reflection leads to deep learning and new meaning is performed.

*The reaction within me was a feeling of “aha” and joy! I realised that something is really happening in this process of knowledge creation.*
The level of reflection that took place within them astonished me. How they both applied “knowledge” on such a personal level in their lives, and their spontaneous reaction to share these experiences with their spouses. They gave a new meaning, a very personal meaning to lifespan development. This is what you call application of knowledge!!

The theory and knowledge was not mere facts any more, but got faces and identities.

The facilitator finds it difficult to facilitate from a social constructionist perspective.

Facilitating from a Social Constructionist perspective is not an easy task. I am constantly faced with my own dominant discourses. It feels as though I have to adopt a new ‘religion’ and I am not sure if I am ready to do this!

However, in the process of challenging dominant narratives, alternative stories emerge.

The ‘medical discourse’ was challenged:

James gave a very good example of the “first generation” of orthotists and prosthetists – the discourse that only professionals wear white jackets, and how they tried to change that discourse.

Alternative story:

We identified ourselves as the “first generation” of creating a social reality of Applied Psychology II for B.Tech Orthotics/Prosthetics – this was a very exciting realisation! But we were also aware of the fact that realities and knowledge can change over time…

The ‘bereavement discourse’ was challenged:

Elizabeth Kubler-Ross’ stages of bereavement were also discussed… The discourse of what society expects a grieving person to go through became evident, which is so different from our own experiences.

Alternative story:

We concluded that every person experiences this cycle in a unique way and that no specific time limit can be attributed to a ‘normal grieving’
period. James mentioned from personal experience with death, how he only experienced stage 1, 2 and 5 of the loss cycle, not 3 and 4.

The ‘substance use discourse’ was challenged:

What caught my attention were the labels that we attach to people and how easily we categorise them… Another dominant story in my life regarding substance use relates to my belief that some people have an ‘addictive personality’ and just can't say no to peer pressure. I also thought that people use drugs due to a traumatic history, they need drugs to make them feel better or cope better with life- even to avoid facing some kind of hurt or pain.

Alternative story:

I realised (even in preparation of today’s class) during our conversation that some people who use substances are very informed, much better than I will ever be! … I now know that taking drugs can be an experience that people have chosen to take to have fun, enjoyment and a sense of adventure… The political games of power in the legitimisation of drugs never became so evident before today’s discussion. I wonder how different the world would have been if more drugs were legalised…

The ‘HIV/AIDS discourse’ was challenged:

Peter and James’ stories highlighted some dominant discourses, myths and even prejudices surrounding HIV/AIDS. They mentioned how a priest in Morocco condemned the use of condoms, but indirectly promoted premarital sex. James shared his experience of working at a clinic where a lot of patients are HIV positive. He almost always wears surgical gloves when working with black patients, but not necessarily when working with white patients… Dr. Shaw told them that the highest reporting numbers of HIV/AIDS are under white teenage girls and black men ranging from 17 – 23. They told me about their army days (during
the apartheid era) when they saw black men and white girls / ladies together in nightclubs in Soweto.

Alternative story:

The sharing of the story of his experience made him aware of his stereotypical behaviour… This experience challenged their discourse that white people think that they are a superior race… I never envisaged that the three of us (all white) would have such interesting discussions relating to racial issues and HIV/AIDS!

The discourse of ‘traditional examination practices’ was challenged:

Peter and James had concerns regarding their final examination for the B.Tech Medical Orthotics and Prosthetics course. Apparently, their departmental head believes that an examination on postgraduate level is not ‘proper’ if it is not at least 2-3 hours long.

Alternative story:

I shared my experience of the MA Counselling Psychology final oral examination with Peter and James and proposed a similar approach in which they should present a case study. The panel of examiners should be representatives of the different modules in the course. Their oral presentation should focus on the application of the different modules on the particular case study. If applied in this way, time is not that important! Peter and James liked my proposal and decided to negotiate this with their departmental head.

The facilitator concludes: “Knowing that a multitude of ‘truths’ exists leaves me at ease with standing by some of my values and beliefs whilst negotiating new alternative stories regarding substance use”.

During the process of inviting collaboration into the learning experience and valuing specific skills and knowledge, the facilitator utilises her own knowledge and skills regarding psychometrics and selection practices to assist the course coordinators in designing a selection model for orthotics and prosthetics.
(Field notes, 8 October, 2003):
Peter asks for my advice on selection criteria and strategies for the B.Tech O&P intake for 2004. I suggest targeted selection interviewing and propose a tailor made customisation of the targeted selection model. I explain that interviewing can be very effective and credible if the same criteria are applicable to all interviewees / applicants. We discuss appropriate competencies for the profession and I draw up a draft document for Peter’s inputs.

(Field notes, 23 October, 2003):
Peter asks me to explain the targeted selection model to the interview panel. I give a presentation and they seem to be very satisfied with the proposed model and identified competencies.

A consultant from the HIV/AIDS consultancy centre is also invited to collaborate in the co-constructing and presenting of the HIV/AIDS module.

We decided that Applied Psychology II module’s approach to HIV/AIDS should be from a psychosocial perspective, and not only from a medical perspective. I proposed that they should contract a consultant from the HIV/AIDS Consultancy Centre on campus to present this outcome to the next B.Tech group. She is a social worker and deals with patients who have a relationship with HIV/AIDS on a daily basis.

In conclusion of the academic year, members of the community (other counsellors and an orthopaedic surgeon) are invited as outsider-witnesses to act as an audience of the performance of a new story.

(Field notes, 11 July, 2003)
I have asked Peter and James to do a presentation to the counsellors involved in career counselling at TUT about Orthotics and Prosthetics. Their presentation is very informative and their approach is refreshing – they focussed on the profession as seen from the patient’s eyes (psychological approach). One of my colleagues made a comment
after the presentation that she can see that I am involved in their training…

(Field notes, 1 November, 2003)

The final oral examination takes place. Peter and James are well prepared and give outstanding case study presentations. Comments from an orthopaedic surgeon on the panel: “they are doing groundbreaking work in the O&P profession and should present their innovations and findings at an international conference!”

During the last contact session the facilitator and learners reflect on their experiences of the psychology module. The impact and value of the facilitation process becomes evident.

Today was our last session. We reflected on the whole Applied Psychology II course. James felt that he has grown on a personal level in this subject. He is able to apply helping skills effectively and he is of the opinion that his patient’s are benefiting from this. On a personal level, Psychology gave him a lot more confidence in himself and contributed to a new understanding in his relationship with his wife and parents. Peter declares that Psychology is not just another subject to him – it has become a way of life! In particular, Peter and James enjoyed the postmodern approach in psychology, the ‘applied’ value of the course and the helping skills.

Reflecting on her own experiences, the facilitator is reminded of her passion for facilitation and psychology.

I am sad to say goodbye to Peter and James, but I know that this is not the end of my journey with them. This year has made such an impact on my life and just reminded me again of how much I love facilitation and psychology!
Future intentions

The facilitator is inspired to continue on her journey of knowledge construction and development in the meeting point between psychology and orthotics/prosthetics by completing her PhD.

*This first session inspired me to such an extent that I decided to continue my own personal journey of knowledge creation and discovery, by enrolling for a PhD in Psychology... I am looking forward to my personal journey ahead in analysing our journals and writing the story of our experiences in my thesis.*

Her journey with Peter and James continues as they ask her to facilitate Psychology on graduate level for the N.Dip Orthotics and Prosthetics in future.

*They (course coordinators) would also like for me to present Psychology I to the N.Dip students, in order to align their curriculum to the B.Tech Psychology curriculum.*

The process of co-constructing knowledge in the Applied Psychology II module also continues as the course coordinators propose that the reflective journal entries be included in the future facilitation of the module.

*Although the reflective journal was only for research purposes and data collection, they propose that the Applied Psychology II curriculum (2004) should include the reflective journal entries.*

**Narrative Themes**

The facilitator’s meta-narrative can further be clustered into narrative themes. Stories, similar to those of Peter and James, of teaching and learning, co-constructing knowledge, community of concern, reflection-on-practice, life-analysis project and agency emerged from the narrative analysis. An elucidation follows of the narrative themes, by means of visual representations of the grouping of codes into family trees.
Teaching and learning

In the facilitator’s story of teaching and learning she writes about the tensions between a deficit and strengths model that play an important part in her underlying philosophy, from which she constructed the Applied Psychology II curriculum. The authority of her previous learning experience of psychology facilitated from a modernistic and deficit approach, and the movement of her personal narrative after being introduced to ideas from outcomes-based education, social constructionism and critical psychology, informs her current experiences and construction of the psychology curriculum. The public literature on a strengths model of teaching and learning (Carlson & Erickson, 2001) and ideas of integrating social constructionism and critical psychology into mainstream training practices (Harper, 2004; Anderson, 2000) are positioned as authoritative in informing the underlying philosophy of her teaching and learning approach. The facilitator's intention is to create a collaborative learning community that invites the learners to experience a different relationship with her from the familiar hierarchical and dualistic teacher-student relationship and learning processes that they have been accustomed to in their past experiences of teaching and learning.

During the process of teaching and learning the facilitator invites learners to engage in discussion teaching, to collaborate in the knowledge construction process and to re-member and rekindle their special skills and knowledge that have invited them into the helping field of orthotics/prosthetics. Through this process she succeeds in facilitating relationships and processes where the learners can identify, access and develop their own unique competencies and strengths. Collaborating in the co-constructing of knowledge invites the facilitator to become a part of the learning community and to position herself not only as a facilitator, but also as a learner.

Facilitating from a social constructionist philosophy challenges the facilitator to face her own dominant narratives relating to teaching and learning practices, as well as her previous knowledge constructions with regard to the specified learning outcomes. She writes about her awareness of a new sense of responsibility towards the learners, congruent with the notion of relational responsibility (McNamee & Gergen, 1999).
Through the process of teaching and learning, the facilitator discovers new teaching practices of appreciation, collaboration and knowledge construction that she takes with her on her own journey as life-long learner.

**Figure 21 Network view of teaching and learning (Facilitator)**

- **Co-constructing knowledge**

The facilitator’s story of co-constructing knowledge begins with the first conversation she has with the learners, in which both learners and the facilitator are forthright about their need to collaborate in the knowledge construction of the psychology module for B.Tech Medical Orthotics and Prosthetics. Without denying or ignoring her wealth of ideas and previous knowledge constructions, the facilitator allows knowledge to be generated and co-constructed in dialogue. From this perspective, knowledge is put forth in dialogue, interacted with, interpreted by and co-constructed between learners
and facilitator in a collaborative learning community. The private narrative of social and collaborative construction of knowledge thus has authority over the public narrative of a hierarchical power relationship in knowledge production. The facilitator writes about the process in which her previous knowledge constructions are challenged as she continuously reconstructs her experiences. She is astounded by the learners’ ability to integrate formal knowledge (also referred to as declarative knowledge) with practical (procedural) knowledge and to reflect on and evaluate their own actions.

**Figure 22** Network view of co-constructing knowledge (Facilitator)

The facilitator writes about collaborative learning experiences in the B.Tech learning programme that reciprocally inform the unfolding of alternative practices outside the organised learning context, such as transferring procedures from one discipline
(psychology’s mechanisms for selection) to another (selecting candidates for orthotic/prosthetic training). From her involvement in facilitating the applied psychology module for the B.Tech-learning programme, the facilitator was invited to also get involved in the construction and facilitation of the graduate psychology module. It is through this process that the private narratives of an alternative learning experience in the Applied Psychology II module open doorways to inform public opinions. In turn, these have authority over future possibilities of knowledge constructions, not only in the postgraduate learning programme, but also in the graduate learning programme.

- **Community of concern**

![Network view of community of concern](image)

**Figure 23** Network view of community of concern (Facilitator)

In the process of facilitating learning relationships, the facilitator writes about her approach in inviting, valuing and respecting each voice. She becomes aware of the trust that spontaneously emerges in a community in which learners and facilitator
have genuine concern and interest in one another’s well being. The learners ascribe special membership to the facilitator in becoming a witness to the performance of their life stories.

The community of concern is celebrated in a special way at the conclusion of the academic year, when the facilitator and learners celebrate and honour the collaborative actions and revered knowledge constructions in a definitional ceremony. At this ceremony Peter and James receive certificates of special knowledge that serve as collective self-definitions intended to proclaim an interpretation to an audience that is not otherwise available, such as their spouses, family, friends and patients (see appendix C). White and Epston (1990) argue that “such awards often signal the person’s arrival at a new status in the community, one that brings with it new responsibilities and privileges” (p.191).

- **Reflection-on-practice**

In an attempt to keep track of the teaching and learning process, the facilitator initially introduced reflective journal writing as field text of accounts of experiences. However, as the collaborative process unfolded, reflection became an integrated part of teaching and learning. Reflective journal writing created an opportunity for learners to reflect on their learning experiences, as well as on their practice. It also served as a basis for contributions to group discussions and as a way to share new ideas or issues. The facilitator also participated in the practice of reflective journal writing, which created an opportunity for her to reflect on her own teaching practice and experiences. In her own story of reflection, the facilitator writes about the dynamic conversations during class that brings her to the realisation that helping is a central theme in the life stories of both the learners and herself. It reminds her of her own risk of secondary trauma and of her responsibility as a psychologist and facilitator.
Figure 24 Network view of reflection-on-practice (Facilitator)

The facilitator’s reflections are a product of what is put forth in dialogue, the interactions with the collaborative learning community, and the interpretations that arise here. They also include the facilitator’s internal dialogue with herself. Her reflection focuses partly on content, such as meta-narratives of substance use and bereavement, specific case studies that are introduced by the learners, and the value of personal experiences in understanding others. In addition, the facilitator reflects on her own teaching practice and the process that unfolds during teaching and learning (Mezirow, 1991). She writes about the value of reflection in stimulating the creation of meanings and understandings of knowledge. Requesting learners to reflect on the value and impact of the Applied Psychology II module provides the facilitator with an opportunity to improve her facilitation style and to adjust the module content to best serve the needs of her learners. The reflections of both Peter and James confirm the practical value of the Applied Psychology II module: “Peter declares that psychology is not just another subject to him – it is a way of life!” The reflection process
encourages the facilitator and the participants in the learning context to apply reflection as part of their everyday practice.

- **Life-analysis project**

In the facilitator’s story of the life-analysis project she describes her experience as “extraordinary”. The life-story narrative project introduced in facilitating life-span developmental psychology acts as an unique outcome, not only in the personal meaning that the learners ascribe to it, but also as an effective tool that stimulates deep learning, spontaneous reflection and knowledge construction. The facilitator writes about an “aha” feeling when she realises that “something is really happening in this process of knowledge creation”.

![Network view of the life-analysis project (Facilitator)](chart)

**Figure 25** Network view of the life-analysis project (Facilitator)

The benefits of learning through life-story narration relate to each learner's capacity to connect and construct ideas, concepts, and experiences into personally meaningful relationships. The facilitator is surprised when both learners spontaneously ascribed
special membership to their spouses to act as audience and witness the performance of their life-stories. The collaborative learning community is thus expanded to also include the special members of the learners’ lives, namely, their spouses. The recruitment of a wider audience contributes to the consolidation of new meanings, but also invites a revision of the pre-existing meanings that James and Peter ascribed to their lives. Furthermore, participating in the life-analysis project creates a conscious awareness of Peter’s and James’ participation in the constitution of their lives. In addition, it leads to a profound sense of personal responsibility, as well as a sense of possessing the capacity to intervene in the shaping of their lives and relationships.

**Agency**

![Network view of agency (Facilitator)](image)

**Figure 26** Network view of agency (Facilitator)
In the facilitator’s story of agency her battle to find a balance between her position as facilitator and as a therapist/psychologist becomes evident. She writes about her experience of the organised learning context moving towards a therapeutic context in which learners share very personal life experiences. Her battle to make sense of this process is informed by the authority of traditional, modernistic public narratives in psychology that expect people to have unified and fixed selves and to behave in a certain way according to the roles that are ascribed to them. In the referred to here, the role of facilitator and the role of therapist are relevant. Furthermore, the authority of these public narratives leaves her with an ethical dilemma of whether a facilitator is permitted to become a therapist to the same group of learners.

However, as the narrative of her learning experience unfolds, the facilitator writes about her agentive power in negotiating a multiplicity of selves as a product of her social encounters and relationships in the learning context. This is informed by the authority of postmodernist public narratives (Burr, 1998). It is this agentive power that creates the opportunity for the facilitator to position herself as facilitator, learner, therapist and researcher within the learning context. This process creates an opportunity for the facilitator to invent herself and yet maintain her sense of authenticity and integrity. However, agency itself lies not only in the degree of agentive ascribed to the facilitator, but also in the reception and perception process, in other words, in the generativity of the learning conversations.

Narrative Core

Abstract
The facilitator’s past experiences of teaching and learning, informed by traditional, modernistic public narratives, and the process of discovering alternative practices embedded in a postmodernist public counter narrative, inform the narrative beginnings of constructing an applied psychology module. The facilitator writes about her experiences in a collaborative learning community as the facilitation process unfolds.
Orientation

The setting of the facilitator’s narrative takes place in the course of an applied psychology module for B.Tech Medical Orthotics and Prosthetics. In this story, she writes about her experiences of teaching and learning. Peter and James (the learners) are the other actors involved in this narrative.

Complicating actions

The facilitator is confronted with the learners’ past experiences of teaching and learning in her initial encounters with constructing the psychology module for B.Tech Medical Orthotics and Prosthetics. In these experiences, public narratives embedded in a deficit model and the transference of disinterested scientific knowledge had authority over the learning experience. The learners’ experiences remind her of the authority of modernist public narratives in her own training in psychology. She then engages in conversations with colleagues who represent a counter voice (the postmodern public voice), readings of the public literature embedded in a strengths model of teaching and learning (Carlson & Erickson, 2001) and ideas of integrating social constructionism and critical psychology into mainstream training practices (Harper, 2004; Anderson, 2000). These voices inform her construction of an applied psychology module with an underlying philosophy of social constructionism and ideas from critical psychology.

As the facilitation process unfolds, the facilitator creates and facilitates collaborative learning relationships and processes. Through these, learners can experience a different relationship with her from the familiar hierarchical and dualistic teacher-student relationship and learning processes to which they were accustomed in their previous experiences of teaching and learning. Facilitating from a social constructionist philosophy challenges the facilitator to face the authority of public modernist facilitation practices and knowledge constructions and to negotiate a position not only as a facilitator, but also as a learner who is part of the process and group. The process of positioning moves from a dichotomy of facilitator/therapist to a negotiation of multiplicity of selves as facilitator, learner, therapist and researcher. The latter becomes authoritative in taking agentive power. Without denying or
ignoring her wealth of ideas and previous knowledge constructions, the facilitator allows knowledge to be generated and co-constructed in dialogue. She is reminded of her relational responsibility towards the learners in a community of concern. The reflection process encourages the facilitator to reflect on her own teaching practice, but also allows her to improve her facilitation of the psychology module through the feedback she receives from the learners. For example, she acknowledges the important part that the life-analysis project plays as an effective learning tool in facilitating life-span developmental psychology.

Resolution

In her conversational becoming, the facilitator shifts between identities of self as facilitator, learner, psychologist and agent of change. Whilst maintaining her sense of authenticity and integrity, the facilitator performs and invents different representations of selfhood. The authority of public narratives from a postmodern and strengths perspective informs her private narrative of collaborative teaching and learning practices.

Evaluation

The authority of traditional, modernist facilitation practices in psychology, and the embeddedness of the learners’ past experiences in a scientist-practitioner model, informed the way that the facilitator’s private narrative initially unfolded. As facilitator, she battled to find a balance between authoritative modernist public narratives that argue for unified fixed selves and postmodern counter- narratives that advocate the construction of a multiplicity of selves within the teaching and learning context. We witness a movement in her private narrative towards privileging learners’ strengths and social constructions of knowledge in a collaborative learning community. Reflection practices in the learning context encouraged the facilitator to reflect on her own teaching and learning process. This was informed by the authority public narratives from both modernist and postmodern perspectives, her previous knowledge constructions and her current reconstructions. The social construction of knowledge in a collaborative learning community reflects the authority of a reflective-practitioner training model. This model promotes the application of knowledge
PRIVATE STORIES AT THE MEETING POINT

through praxis. Private teaching and learning experiences supported the authority to co-construct a newfound knowledge on collaborative training practices in the health professions.

Coda

The facilitator writes about the impact that the teaching and learning experience has made on her life. It is reminiscent of her love for facilitation, learning and psychology. She feels honoured to have special membership in the learner's lives and to collaborate in the construction of meaningful learning experiences.

Synthesis

The stories of Peter, James and the facilitator provide patterns of teaching and learning experiences that unfold in the process of co-construction knowledge in the course of the Applied Psychology II module. According to Marshall and Rossman (1995), no single story provides a full understanding of the journey and experiences at the meeting point, but each provides “pieces for a ‘mosaic’ or total picture of a concept” (p.88). Repeated patterns and storylines collaborate in exploring the shared experiences of learners and facilitator. The story map, in turn, can present a meaningful cross-case comparison (Richmond, 2002).

The reciprocal authority of public narratives influences the narrative themes and patterns that crystallised from the analysis of participant’s private narratives. In the initial unfolding of the participants’ narratives of teaching and learning, the narration of participants was dominated by public narratives embedded in a deficit model. The hierarchical power inherent in the deficit perspective is evident in Peter’s positioning of the facilitator as someone with more power and knowledge, and of himself as a learner with lesser responsibility in the teaching-learning transaction. James’ disabling narrative, which is embedded in the deficit and medical models, locks him into a system of lesser rights and obligations and positions him as someone who
needs healing and as a passive learner. In the face of these dominant deficit narratives, the facilitator is faced with the challenge of constructing a psychology module that has applied value in the orthotic/prosthetic profession. She manages to balance the authority of public modernist versus postmodern approaches in psychology through constructing a psychology module that respects and values previous knowledge constructions, but challenges the authoritative position from which they speak. The psychology module and facilitation practice is based on the underlying philosophy of social constructionism and ideas from critical psychology.

Peter acknowledges this different approach towards teaching and learning (strengths model) in contrast to the traditional approach (a deficit model) to which he was accustomed. James’ openness towards new learning experiences creates doorways and opportunities to engage in discussion teaching and to become part of a collaborative learning community in which learners can identify, access and develop their own unique competencies and strengths. Engaging in dynamic dialogue allows both learners and facilitator to crisscross ideas, thoughts, opinions and feelings in a learning environment that allows room for all voices (facilitator and learners). In this collaborative process, knowledge is put forth in dialogue, interacted with, interpreted and co-constructed.

The authority of a public counter-narrative of strength and collaboration thickens the unfolding of participants’ private narratives about an alternative learning experience. We witness a shift in both the learners’ and the facilitator’s stories towards relational responsibility (McNamee & Gergen, 1999) in which the responsibility for learning and knowledge construction is shared. Facilitating from a social constructionist perspective challenges the facilitator to face the authority of previous knowledge constructions and to reconstruct her teaching and learning experiences. Peter and James reflect on and discover an awareness of the impact of public meta-narratives on the construction of their private life narratives.

Peter becomes aware of the interrelationship between collective and individual meaning that is derived from the co-constructed knowledge. James utilises the life-changing knowledge that is co-constructed in dynamic dialogue to reclaim his life.
from trauma, and discovers his subjugated knowledge pertaining to helping skills. The authority of private narratives of learning experiences contributes towards the facilitator’s construction of a newfound knowledge on collaborative training practices in the health professions.

The life-story narrative project, introduced as a means to facilitate life-span developmental psychology, becomes an effective learning tool that stimulates deep learning, spontaneous reflection and knowledge construction. Furthermore, it creates doorways to unique outcomes and alternative stories in Peter’s and James’ lives. Through the life-story narration as a learning tool, James is able to access his capability to express his emotions and feelings through writing, which cultivates a seed of newness in his personal and professional life. In the process of re-authoring his life, James reclaims his life from trauma and finds his voice as a writer. Peter expresses a favourable attitude towards the assignment as an effective learning tool by which he was able to undertake an introspective analysis of his own development. A new understanding of developmental psychology is socially constructed through this process of collaborative and internal dialogue.

Within the authority of public narratives, the learners and facilitator agentively negotiate different positions within the learning context. Peter negotiates a position as a collaborative learner and would like to invite prospective learners to collaborate with him, as facilitator, in the knowledge construction process. James takes agency in moving from a deficit position to negotiating an alternative position in which he becomes an architect of his own learning and development as a practitioner and person. The facilitator negotiates multiple positions as facilitator, learner, therapist and researcher as opposed to the authority of a modernist public view that advocates a unified fixed self. Both Peter and James indirectly negotiate positions as protagonists in becoming the first learners in South Africa to complete the B.Tech learning programme and to lead the future training of orthotic/prosthetic practitioners.

The teaching and learning process creates a conscious awareness in Peter, James and the facilitator that they possess the capacity to intervene in the shaping of their lives and relationships. This leads to a profound sense of personal responsibility. It
is evident from the analyses of the reflective journals that Peter, James and the facilitator are changed and transformed during the process of teaching and learning, but not necessarily in ways that can be attributed to “the illusion of causality” (Clandinin & Connelly, 1990, p.6) or ways that are readily apparent to the observer. Belenky, Clinchy, Goldberg and Tarule (1986) state that there appears to be a link between the development of an individual’s voice as an essential component in the development of their sense of self. The narratives of the learners and facilitator reflect their process of self-discovery.

Both Peter and James ascribe special membership to their spouses and the facilitator to act as audience for the performance of their special knowledge claims. Bruner (1986) emphasises the transformative power of performances and enactments of life stories: “it is in this sense that texts must be performed to be experienced, and what is constitutive is in the production” (p.7). The certificates of special knowledge that Peter and James receive in a definitional ceremony at the conclusion of the academic year serve as collective self-definitions intended to proclaim an interpretation to an audience that is not otherwise available. The definitional ceremony, furthermore, celebrates and honours the collaborative actions and revered knowledge constructions of learners. White (1997) argues that definitional ceremonies are contexts that potentially contribute to the generation of thick descriptions of persons’ lives. The awards that Peter and James receive signal their arrival at a new status in the orthotic/prosthetic community; one that brings with it new responsibilities and privileges (White & Epston, 1990).

Reflection

Analysing the private narratives of Peter, James and my own journal was an enriching experience. The process allowed the practice of outsider witnessing to continue and invited you, as reader, to act as an audience to the performance of a new story. However, as researcher and audience, you and I need to be mindful of the difference between the events as lived and the events as told. As a researcher, I need to acknowledge that the stories of Peter, James and the facilitator were judged
by my own interpretations, which in turn are framed by the lens of social constructionism. I came to realise that my personal involvement in the facilitation of the psychology module and process both helped and occasionally hindered me in re-telling the story of experiences at the meeting point between psychology and orthotics/prosthetics. I was in the opportune position to give an insider perspective on the stories of experiences of teaching and learning. However, my personal involvement in the teaching and learning process hindered me at times by making it difficult to step back and give an impartial account of the learners’ and my own stories of experiences. I constantly had to be reminiscent and responsible for giving voice to the participant’s account of their experiences according to my own interpretations. My identity as a storyteller remains the same although the story may change.

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**To Follow**

In the final chapter, the connection between private and public narratives is explored in the process of puzzling the pieces together. Before saying goodbye, I reflect on the meta-narratives that inform the evaluation of qualitative research.