

**ABSTRACT**

In pattern approach, salient life experiences of the patient that are selectively stored as narratives are examined. Such narratives may reflect a negative life pattern of thought and feeling, of maladaptive situations linked by theme(s). This becomes the problem-saturated story. Patients can be helped to change their pattern of negative thought and feeling and instead store their life experiences as preferred positive stories. The 4 Rs – Re-remembering, Re-authoring, Re-framing, and Re-telling – are the tools used to help us to construct these preferred positive stories. When we do this consistently, the pattern work approach helps us create present and future stories of hope for the sufferer.

**Keywords:** Pattern Work; Problem-saturated Stories; Preferred Positive Stories

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**INTRODUCTION**

When we use the genogram and the timeline, we might identify events in the patient’s life that are imbued with positive or negative feelings. We may notice that the patient has unconsciously or subconsciously authored problem stories by linking together significant negative events with negative themes whilst ignoring the positive events.

Such people are said to indulge in negative patterns of thinking and reacting. Their negative stories are called problem-saturated stories. In Pattern Approach, we get patients to tell their problem-saturated stories as the first step in therapy. A useful technique in pattern work is to listen with EARs to the past and EARs to the future. See Figure 1.

**EARs TO THE PAST<sup>3</sup> – EXAMINING SALIENT SITUATIONS AND STORIES**

We examine the patient’s salient situations for their meaning to him, looking especially for patterns, or themes, that the patient has used to link these situations into the negative defining stories of his life. We can help him to redefine his negative stories into positive ones by the processes of deconstruction, externalisation, alignment, and realignment. The details of these processes are described below.

**Deconstruction**

We can take apart the stories by helping him to realise that the linkages might not be valid or true by looking for exceptions. This is called deconstruction.

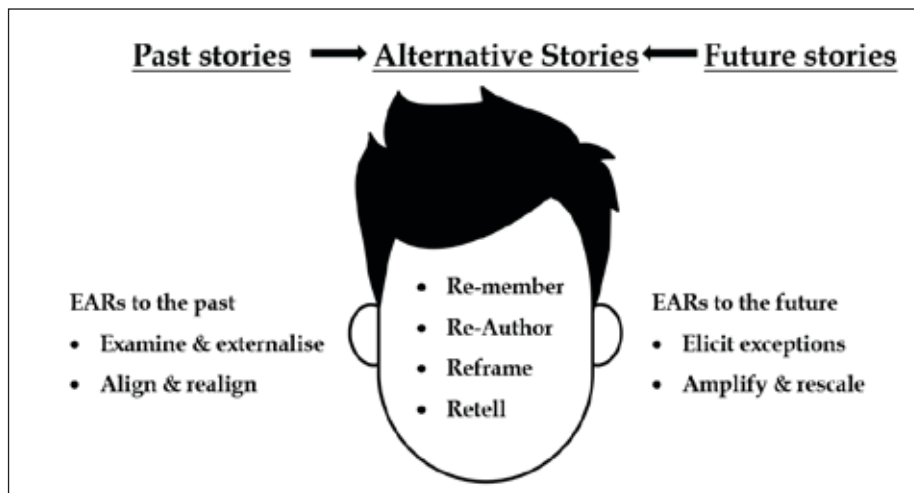
**Externalisation**

Sometimes, the problem stories are so enmeshed with self and personality that the patient might not be able to talk about them apart from himself. We may need to separate the patient from his problem using the technique of externalisation.

**Alignment & Realignment**

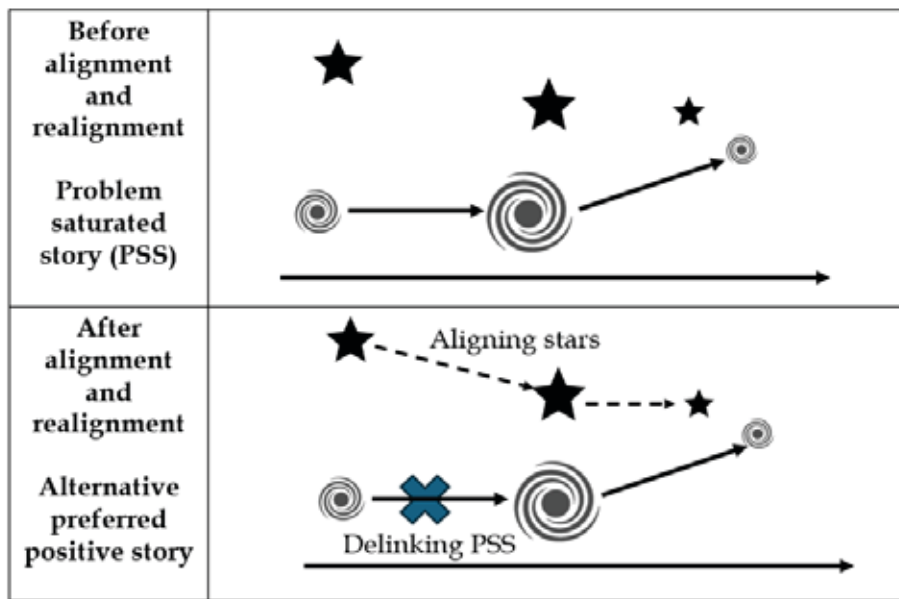
We need to actively listen to the situations and stories to understand the themes that align them. Next, we deconstruct the stories by open questioning using CAR-ACE and then realign them so that the stories lose their hold over the patient. For example, we can make the patient aware that situations might not be the same and should not be linked together. See Figure 2.

**Figure 1. Pattern Approach – EARs to the past and EARs to the future**



Source. *The Extended Consultation*, Second Edition, 2024: Page 111

**Figure 2. Aligning and Realigning Blackholes and Stars**



Source: *The Extended Consultation*, Second Edition 2024: Page 114

**RECONSTRUCTING NEGATIVE PROBLEM-SATURATED STORIES INTO PREFERRED POSITIVE STORIES**

Instead of problem-saturated stories, we can construct these into preferred positive stories. To do this, we need four reconstruction tools, namely: Re-remembering, Re-authoring, Re-framing, and Re-telling. The details of each of these reconstruction tools are described below.

**Re-remembering**

This involves reviewing the status of past and present significant persons or events, as players in the patient’s present life story. In other words, we are trying to assess what they mean now to the patient. If the present meaning is still problematic, the patient can be helped to Remember so that the past person or event, together with the accompanying pain or hurt, can be eradicated.

**Re-authoring**

This involves examining the patient’s problem-saturated story for discordance, deconstructing the story, and revisiting the events. Then we look for exceptions to the negativity, which can be framed into a preferred positive story. The new story is authored by infusing new meaning and plot into the story, which incorporates the exceptions that were previously ignored in the old story.

**Re-framing**

This involves looking at a situation with a different perspective. We try to help our patient see his glass as half-full instead of half-empty.

**Re-telling**

This involves retelling the new story over and over again. This retelling will thicken the story. The retelling can first be

rehearsed in practice situations, and then executed in social situations.

**EARS TO THE FUTURE**

We can also construct stories by finding positive moments in the present, as well as from hopes and dreams for the future. The practitioners of Solution-Focused Brief Therapy believe that a fixation on past problematic situations and repeatedly talking about them can be counterproductive. Instead, they can help patients to focus on hopes and dreams for a future where the problems do not have such a hold. How do we achieve this? We can do the following four things.

**Elicit Exceptions**

Let’s say we have a depressed man who keeps talking about how unfortunate his life has been, because of past choices. The therapist notices that the man brightens when the conversation touches on his grandchildren. Instead of letting him brood on, the therapist switches his focus to the present and starts talking to him about his family. The focus is shifted from problem talk to solution talk in the present and the future.

**Amplify Small Steps**

The **miracle question** can be suggested to elicit more exceptions. The man can be asked how he would behave if, by a miracle, all his gloom vanishes when he sleeps. When we explore the new imagined situation with him, we can generate more positive experiences. Every exception that might seem small to start with can be amplified.

**Rescale and Repeat the Steps**

After going through each small step, the patient will be asked to scale his feelings. If he improves, repeat the step. If not, elicit some other exceptions and amplify again.

### Reconstruct Preferred Positive Story

Once the gloom is dispelled, the focus shifts to reconstructing the preferred positive story.

Table 1 summarises the EARs to the past and EARs to the future in the pattern approach described in this chapter.

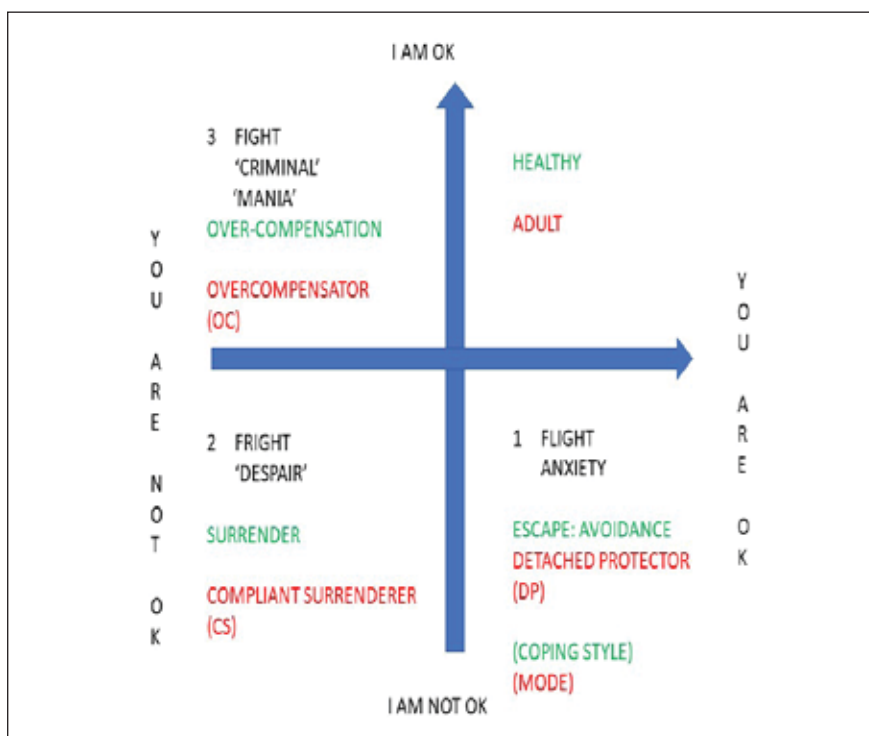
**Table 1. Summary of the EARs**

EARs to the Past	EARs to the Future
From problem-saturated to preferred positive stories	Preferred positive stories constructed from exceptions and hopes
<b>Examine</b> salient situations. When necessary, <b>externalise enmeshed embedded</b> stories	<b>Elicit</b> Exceptions to the patient’s present negativity and engender hopes for the future
<b>Align</b> and re-align salient situations that form the patient’s negative problem saturated stories (PSS), to deconstruct (take them apart) and debunk them (de-employment)	<b>Amplify</b> small steps that can be taken to construct preferred positive stories
<b>Reconstruct</b> using positive salient situations linked by theme (Preferred Positive Stories (PPS))	<b>Rescale</b> and repeat the steps
<b>Re-member, Re-author, Re-frame, Re-tell (4 Rs)</b>	
These reconstructive tools are techniques used to construct preferred positive stories – delinking externalised negative situations and using positive situations from hopes and dreams. The emphasis is not about what is true or false, but its utility in creating a preferred story to live by.	
Source. <i>The Extended Consultation</i> , Second Edition 2024: Page 123	

### PERSONALITY IN THE PATTERN APPROACH

The pattern approach can include the notion of personality, traits that developed and endured as a result of assuming the coping style in the past that helped overcome the initial challenges. These past coping styles are the three life positions of flight, fright, or fight shown in Figure 3.

**Figure 3. Life Positions**



Source: *The Extended Consultation*, Second Edition, Page 118

The person might in the present manifest the same unhealthy modes of thinking behaviour and feeling from his/her personality that were used adaptively in the past.

In transactional analyses, the model of internalised parent, adult, and child (PAC) is used to analyse the mode and the responses. Schema Therapy, another counselling school, postulates that the coping style to the early development needs form the personality traits from which the mode manifests. References for further reading are found at the end of this chapter.

The coping style may apply to the whole or parts of self (e.g., heart, mind, or body). In coping style No. 1 (see **Figure 3**), the flight may be just the heart. The body and mind of the person may remain. An example may be a doctor who while remaining present in the mind and body does not empathise.

## Case Study

**Figure 4** is a conversation between Dorothy (Client C) and her counsellor, Dr Lim (T). Dr Lim's use of the metaphor "from glue to oil" was a poignant choice in attempting to help Dorothy reframe her story. His position as Dorothy's family physician and a familiar fatherly figure was important. He was able to leverage on this and extend the old comforting role into a challenging one. The detached doctor for her medical ailments became the collaborator, engaging her in exploring her problems and patterns, and helping her to reauthor her problem-saturated story by reframing it.

**Figure 4. From Glue to Oil – A Conversation Between Client (C) and Therapist (T)**

Client (C): *I feel now that I am not really a factor [for the problems at home]. Now I see it as a war between my dad and my mum. My mum actually does it (her attention-seeking behaviour) because she wants attention from my dad. My dad finds it super irritating. He raises the volume of the TV to shut her off. Mum will then come around to watch TV with him.* **[Insight into family conflict and how it affects her]**

T: How are you Involved in the war?

C: *I feel like I am their "glue".* **[Metaphor of glue]**

T: Why do you think that you are the glue?

C: *My dad will say, "If you are not home, I would not come home."*

T: Your dad is making you [the glue]. You should tell your father, "On the other hand, she is your wife and my mother. You should reconcile with your wife and not need me around." You need to express yourself as you cannot always be the glue unless you... **[Triangulation in the family. Dad attempts to recruit her against mum]**

C: *... stay at home and be part of the war.* **[Awareness of consequence of being the glue]**

T: There are differences between them, just as there are differences between anybody. They should learn to reconcile them. You are the daughter of both mum and dad. How about your mum; did she ever tell you that?

C: *That if I am not home, she does not want to come home? No, she sort of survives on her own.*

T: So your dad tries to recruit you. What do you think about it now? **[Guided association using Socratic questioning technique]**

C: *Honestly, I do not give a damn.*

T: Going beyond this, is there something more positive?

C: (pauses) *I do not know. He wants me around; at home.*

T: Why should that be the case?

C: *So that he does not quarrel with my mum.*

T: He has to handle that himself.

C: *I don't really get you.*

T: If he thinks that, and continues to think that, whenever there is a quarrel and you are not around, then you feel responsible.

C: *Say that again?*

T: If he thinks that, and you allow him to think that you are the glue (and you believe that), if you are not around and they quarrel, you will feel responsible. In the first session, you told me that you are worried that as your sister is not around, it falls on you to keep them together.

C: *Isn't that a psychological game?*

T: I would say it's an emotional bind. Some may even say blackmail, that "You have to do this, otherwise you are responsible." The truth is that ...

C: ... because glue usually sticks.

T: That is why the word “glue” is not good for you. If you are the glue and the glue is not around and something breaks, then you will feel responsible. [Examining maladaptive consequences of the glue metaphor]

C: That is right.

T: That is why, if you keep thinking this way, you will feel bad. You can't study and when you are around, you feel you must always play an active part to keep the peace.

C: That's right, like keeping both of them involved. Even going to the supermarket, I have to run to my mum and then she will say, “Where is dad?” Then I have to run to my dad and then ... okay, okay.

[Caught in the mum-dad war and triangulated, she was in a constant state of anxiety, with occasional outbursts]

T: Are you talking about now?

C: Now, now.

T: The role you now play is worth examining. The concept of the glue is not very useful as a metaphor. Glue means that you are responsible. Think of something else if you want to use a metaphor. Think of yourself as oil, a lubricant. When you are around, things go more smoothly. Sometimes like now, things are going smoothly and don't need oiling. There is no storm. You can be positive and add oil. [Changing the metaphor (assumption) of role to a more useful one]

C: (nods in agreement) Ok.

T: For example, the next time your dad brings up this matter, you could say something like “She is your wife too; do you want me to stay a spinster all my life?” [Use of paradox and humour in disputing]

C: (laughs) Yeah.

T: If you use a paradox like this, your dad may suddenly realise that he cannot demand it of you or else “my daughter would be a spinster and stay around all her life.”

Source: *The Extended Consultation*, Second Edition 2024. Pages 124-126

## REFERENCES

1. Corey G. Theory and Practice of Counselling and Psychotherapy. 9th ed. Brooks/Cole; 2012.
2. Dulwich Centre. About Narrative Therapy. 2025. URL: <https://narrativetherapycentre.com/about/>

## LEARNING POINTS

- **In the pattern approach, we recognise that salient life experiences are selectively stored as narratives, in personalities, and in stories.**
- **Such narratives may reflect a negative life pattern of thought and feeling. This is the problem-saturated story**
- **The past stories can be examined and externalised, especially if enmeshed, aligned, and realigned to see an alternative theme. We can also explore exceptions in the future and amplify their reach.**
- **We can then focus. Patients can be helped to change their life pattern of thought and feeling and thus store their life experiences as preferred positive stories.**
- **The authoring of a preferred positive story requires the accomplishment of the 4Rs – Re-remembering, Re-authoring, Re-framing, and Re-telling the life experience.**
- **When we do this consistently, the pattern approach creates present and future stories of hope for the sufferer.**