Topic: narrative therapy



In this article, Jensen, a practicing psychiatrist, promotes the use of narrative therapy (NT) to help stabilize patients as they begin their treatment. He raises awareness of this technique to other psychiatrists in belief that it creates a comfortable, respectful atmosphere for both the patient and doctor.

Context

In analysis of Jensen's sources that he cites it is evident that there is an overlapping theme between papers. From this the context can be deducted to narrative therapy and treatment of patients. This issue belongs to a broader disciple of psychiatry and further more psychology and mental health. Jensen describes how language in a fundamental part of therapy which can be deduced that communication studies is also a part of the wider discipline.

Structure

Jensen's secondary research paper exploits a formal report, with a topic sentence; which introduces narrative therapy as a proposed solution, demonstrating its usefulness with his 'road-works metaphor,' that conceptualizes and communicates complex ideas. Jensen begins by introducing the reader to the dangers of acute mental illness, highlighting "a patient's sense of competence and identity [as being] particularly fragile..." Jensen (2011, pp. 709) Jensen continues by using one of his own personal experience to illustrate examples of what could happen if only workers follow their own intuition instead of following the conventional style.

Jensen presents the idea that standard psychiatric diagnostic interviews compromise a patient's integrity, almost as if they are being blamed for their mental illness, enforcing awareness. He uses the word "conceptualizing" preaching out to the readers that narrative therapy has potential, without enough evidence to support his case he can only show glimpses of what narrative therapy can do. Jensen continues to by expressing his concern that patients are treated as inanimate objects, raising more awareness Jensen (2011, pp. 710) the last paragraphs express that with change a difference can be made. Jensen (2011, pp. 711

Style

Jensen's article was written using his own observations and experiences, speaking directly to psychiatrists and patients, in first person; enabling them to understand his main argument. Jensen uses acronyms (NT- narrative therapy) continuously through his article, Jensen unintentionally left a bracket open on page 710; which questions how accurate his writing is; also mentions his own experiences to broaden the viewers mind about the topic. This is not a reliable source of data as it has minimal evidence to support his theories. The article was written as a conversation, broadening the minds of its readers involving the therapy techniques in psychiatry. Jensen's writing is general, with metaphors mentioned

Argument

This article is less of an argument and more of a moral question, asking psychiatrists " to reconnect with some of [their] reasons for becoming a doctor...then have a closer look at NT." (Jensen, p. 711) The idea is that NT uses language and affiliated analogies to fill the gaps that standard https://assignbuster.com/topic-narrative-therapy/

diagnostic interviews fail to cover such as: cultural based issues and the value of the patient. This "may ease some of the associated distress and potentially disqualifying impact on patients" by veering away from the "dehumanizing onslaught of tick-boxes and risk-management practices." Jensen (2011, pp. 711) this in turn would allow psychiatrists to rationalize with patients with the ability to "put something back in... and stabilize things a bit". Jensen (2011, pp. 710)

Evidence

As Jensen states early within the article, he does not expect psychiatrists to fully comply with the benefits of NT as " there is no scientific evidence base to back such claims." Jensen (2011, pp. 709) With this, Jensen had to utilize articles; which promoted the concept of NT and paraphrase ideas within the text to further his point. An instance of this is used when he analyses Simon Hatcher's work, 'Risk Management in Mental Health: Applying Lessons From Commercial Aviation.' Jensen paraphrases Hatcher's work by implying that psychiatrists need more adversity in the documentation of their work, fully excavating all aspects needed to formulate an adequate treatment. He also uses the article to support his idea that a common method (NT) needs to be enforced in order for effective treatment, of the patient as commercial aviation use the same successful method.

However, Jensen fails to specifically reference intertextuality between the articles and thus gives the impression that NT is a personal opinion of treatment rather than a psychiatric technique. 'What is narrative therapy?' written by Alice Morgan is another reference by Jensen, which ignites the two articles mentioned by contributing ideas that support the unconventional

way of facing the main issue; which gives an indication to therapists on how to approach the patient and receive an excellent result. "Narrative therapy seeks to have a respectful, non blaming approach to counselling and community work..." Morgan (2000, pp. 1-9) this relieves the patient so they aren't victimized once again and creates a safe environment to begin treatment. These results indicate White's intentions to further use narrative therapy within psychiatry.

Evaluation

Jensen wrote a very interesting article that positioned his target audience, psychiatrists, to re-evaluate their technique for excavating information in diagnostic interviews of patients. He was able to strongly convey this point by magnifying the astonishing consequences of standard psychiatric diagnostic interviews, and how they dehumanize and destabilize patients who already undermine their competence. Jensen (2011, pp. 710) The author was able to portray his opinion succinctly, and used examples of NT to help further his point. However, in saying this, the article was flawed with Jensen's lack on utilizing all available resources. Articles such as the ones written by White and Morgan are well written as they incorporate evidence from the wider community and relate it to NT. Jensen does not specifically reference key ideas or points in these articles and thus appears to be stating an opinion rather than documented evidence.

Even though there is a lack of scientific studies for NT, Jensen could have specified ideas; which directly correlate with NT, such as the risk management method that White describes is used in Commercial Aviation. To engage the reader, Jensen could have used the intertextual links between

White and Morgan's work, where White spoke of the concept of NT and Morgan specifically referenced incidents where NT was effective in patients. This would demonstrate to the reader that Jensen had a greater understanding of NT besides from his personal experience. "I am concerned that the ways we presently practise for instance diagnostic interview and risk management may act to further destabilise rather than support the patient." Jensen (2011, pp. 709)

This not only expresses the culture perspective of narrative therapy; it also shows a few fields that can use narrative therapy as an approach to support the patient while adjusting to the new environment. When analysing the text from "Risk management in mental health: applying lessons from commercial aviation" The risk factors more so relate to the narrative therapy aspects with the culture, adversity in results and the common language used.

Conclusion

While other articles tip -toe around the concept of narrative therapy Jensen is straight to the point, advocating what a success he has encountered with the technique. A methodical treatment that psychiatrists have been sheltered by their traditional techniques, which are appearing to be outdated. Narrative therapy is the future of psychiatry and although under studied, with more research, this new approach could change the lives of patients with a few simple words.