

Money Talks: Personal reflections from a systemic therapist on inequality, speaking out, and leaving the NHS

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Abstract

Recognising the historical development of systemic theory and practice from its radical roots, I reflect on my positioning as a systemic therapist within the National Health Service (NHS) in the UK in 2020, and describe my journey from family therapist into community based systemic activism which seeks to directly address structural inequality. The concept and practice of Poverty Truth Commissions are examined through a systemic lens, and I outline the design influences in its set up locally, mapping those against historic and current systemic thinking. In the process, I examine my own relationship to money, status, voicing and work.

If you are a therapist, how often have you found that conversations about money, and the power it gives to its owner, with the consequent and relative powerlessness of those who own considerably less of it, take place in the therapy space, or in gatherings of colleagues? Poverty is linked with poorer physical and mental health and reduced life expectancy (Marmot et al., 2010), and many UK based systemic therapists are employed in the National Health Service (NHS), so we might think the topic would come up more often than it does.

I have long been drawn to liberation practices, including the applications of non violent resistance in families (Omer, 2004). Afuape and Hughes (2016) provide a helpful history of the development of liberation practices, naming the influence of liberation theology from South America, African-American social movements, and South Africa, upon the development of liberation psychology. Martin Baro built upon the work of Paulo Freire, amongst others, and “called for psychology to critically examine itself so that it could be a force for transformation rather than conformity” (cited by Afuape and Hughes, 2016, p.31). Afuape argues for a fifth wave to move “the [systemic] field from a focus on families as the target of intervention, to a focus on systems” (2016, p.45). Family therapy has “radical roots” but “family based interventions do not necessarily challenge the oppressive social structures of society”, Afuape suggests (p.46). This paper tracks a section of my journey of examination, and outlines where it has brought me thus far.

I am a white, middle class, middle aged, heterosexual and cisgender woman, who has had the further privileges of an education and employment in the NHS for most of my life, as well as a long term relationship with my partner. Having graduated with a Masters in systemic psychotherapy when I was 50, I must admit I was feeling quite pleased with myself, thinking that I had finally found a profession I felt at home in, and therefore would happily be able to work in the NHS in that role until I was pensionable age.

Barely 5 years later, in the middle of the coronavirus pandemic lockdown, my perspective radically changed. I was reading Hilary Cottam's book "Radical Help – how we can remake the relationships between us, and revolutionise the welfare state" (2018). Cottam reminds us that the NHS was created after the Second World War and the publication of the Beveridge report (1942), with the intention of providing a basic level of healthcare to the population and enhance a national recovery from the ravages of war. The new learning for me was that Beveridge realised that there was a fatal flaw in the plan – he published a follow up report in 1948 in which he voiced his concern that the plan failed to take into consideration, and furthermore, limited the power of, citizens and communities. In other words, he had designed people and relationships out of the welfare state (Cottam, 2018, p.45). This concern was largely ignored, as by now the public were enjoying the first fruits of the initiative and had lost interest in social policy. As a systemic therapist, my attention had been piqued. I had first come into the NHS as a childrens' nurse in 1983, following in the footsteps of my aunt, who herself had decided upon childrens' nursing as a career after her 9 year old sister died of a brain tumour in 1957. I felt deeply connected to the NHS, emotionally and intergenerationally. My employment journey followed my interests through child development into parenting, attachment and eventually systemic practice. By 2020, I was a systemic therapist working in a system that discounted the value of human relationships, and I had begun to feel the pain of that. The inexorable rises in referrals to Child and Adolescent Mental Health Services (CAMHS) resulted in interminable waiting lists, while families who felt they should wait for professional intervention were losing any sense of agency and motivation. One of my roles in the team was to help with the "screening" of referrals, and so I was in prime position to see how many of these families were struggling with contextual pressures linked to inequality – poor housing, reliance upon benefits despite also being in work for long hours, social exclusion, and so on.

When I started work in CAMHS in 2008, there was a systemic acknowledgement that a child was a part of a family, and care was organised within that understanding. By 2020 children had been individualised and required a diagnosis in order to receive a service, with adult oriented service models being imposed. Not only was the context of inequality being disregarded, but the context of family relationships. In the spirit of non violent resistance, I sought out others who were concerned so that we could take a position of resistance against this culture together. I wanted to speak out collectively, but a number of respected colleagues were leaving the service, and on the occasions I spoke up in team meetings I felt alone and silenced by men in more powerful positions. I began to spread the net wider, and look for folks who were speaking out about this on social media – Mad in America and Sami Timimi (2010), amongst others. I overcame my aversion to Twitter in order to follow what they were saying, and feel less isolated. I became increasingly uncomfortable that I was financially dependent upon employment within a system which trapped the very folks it sought to help into a situation of dependence, eroding resilience and resourcefulness, and ignoring the contextual resources, as well as the contextual inequality. The reflective work I had done on my own voice entitlement (Boyd, 2010) enabled me to notice what was happening, but I felt powerless to change anything. I felt I was taking

part in a collusion which guaranteed me financial security with a condition – I must not talk about what I was seeing.

Vikki Reynolds' (2011a) language of “spiritual pain” connected with me. I knew I was not “burnt out” (the only description used contextually to describe people who no longer felt inclined to carry on in a situation) but that I was being harmed by “the injustices and indignities suffered by clients and my frustrating inability to personally change the unjust structures of society they struggle with and live in” (p. 28). In a Murmurations interview with Leah Salter (Reynolds and Salter, 2018) – Vikki named the dilemma of folks who raise questions about privilege being a threat to the dominant culture. In the same interview, Vikki said that when we witness peoples’ suffering, if we don’t act against injustice in the systemic structures, we become complicit in the dominance of privilege. In this way she describes very well the double bind that I found myself in as a systemic therapist within the NHS, and perhaps goes some way to explain why I heard so little being said, and felt silenced myself.

At the same time, I was learning about the concept of Poverty Truth Commissions (PTC), a growing movement in the UK, which builds on ideas from the Truth and Reconciliation Commissions in South Africa, the Disability Movement, and Latin American Truth Commissions. PTCs share and extend the mantra “Nothing about us without us is for us” from the Disability Movement and seek to disrupt the power balance of the status quo by creating the conditions such that those with lived experience of poverty can take centre stage in decision making processes. I was starting to feel very excited about the potential in this idea, and how I could be involved, whilst aware of my privileges, wanting to bring my resources, my systemic training and experience, and my desire for justice and for the world to be a fairer place. I felt I had to break free, and “put my money where my mouth was” – could I take a financial risk, let go of my NHS pension forecast, and rely solely on my variable and much less reliable income from independent practice? [My experience of independent practice has, contrary to common public opinion, not been lucrative and characterised by wealthy clients – I work largely with families funded by the Adoption Support Fund (ASF – government funding for those who have adopted children)]. Could I carve out an integrated, ethical, congruent way of living my life and working as a systemic therapist in service to my community outside of the NHS?

After a period of checking out my thinking with others whom I respected, I resigned, and left the NHS in September 2020, with both a heavy heart (I never thought I would leave the NHS because it no longer felt compatible with my ethics) and a spring in my step (Freedom! What will it enable?).

I joined a group of local folks to form a Start Up team to look at whether there was an appetite for a Poverty Truth Commission where we live. We drew from the resources and learning of Poverty Truth Commissions around the country, and organised information meetings for anyone and everyone we could think of, from grassroots groups, community activists, councillors, and chief executives of NHS trusts, as well as significant local businesses and employers. We asked everyone the question “What has motivated you to come to this meeting, out of all the possible other things you could have done with your time today?” Many cited their own experiences of childhood poverty, a recognition that current systems are not working, and a desire for the system to work better for those most disadvantaged.

PTCs are a facilitated process – funding is required so that facilitators can be recruited and paid a decent wage, and all who take part in the process are not left out of pocket. Up to 15 people with lived experience of the struggle against poverty become the “community commissioners” (CCs). The

facilitation team work with the community commissioners, listening to the stories of experience, for several months, until the point that the commissioners feel ready to host a public launch and invite civic and business leaders to join them to form the Commission. An equal number of Civic and Business Commissioners (CBCs) are invited, dependent upon their influence on the particular issues identified by the Community Commissioners, for example, housing, mental health, the benefit system. So already the power balance is shifting – the CCs are issuing the invitations and defining the areas for discussion. The process is relational – the different commissioners pair up and start getting to know each other as fellow humans over food and drink. The CBCs are encouraged to remove their lanyards, both literally and metaphorically, and bring their whole selves to the process. No one knows where the conversations and relationships will lead them – outcomes cannot be predicted.

Afuape and Hughes (2016) cite Paulo Freire in their exploration of the historical development of liberation practices, and I was struck by his understanding of dialogue, which occurs “when people critically reflect on their experience, and through a newly acquired critical consciousness, the mechanisms of oppression become visible and new possibilities for action emerge that are liberating for all participants” (p. 30-31). I sensed a real resonance between this idea and what was happening in the PTC movement.

The Poverty Truth Commission Start Up group raised the funding, largely provided by Public Health, a local grant making body, and the National Lottery, in order to be able to employ the facilitation team, and I became the director of a small “not for profit” organisation which acted as the host organisation, and hence employer. A PTC needs a host because it is a time limited project – it does not become a permanent structure. The process has a beginning, middle and end, which usually lasts no longer than 2 years. We did not want the host to become a mini replica of the systems which do not work for people and relationships, and so we took inspiration from the work of Laloux on Teal organisations (2014). Laloux describes the evolution of the way humans organise themselves, and suggests a colour for each different form he describes. He suggests that the next major breakthrough in organisational structure involves much more emphasis on teams managing themselves. He offers the colour teal to describe organisations that do not have top down management structures, and recognise the value of trust and shared responsibility. We took this on board in the designing of the interview process for the facilitators, and I was able to utilise my systemic experience here. Four candidates were invited for individual conversations, and a shared lunch, over which they would meet each other and have a conversation between themselves, with specific questions, and the “interview panel” acting as a reflecting team. This gave the candidates the opportunity to see if they might enhance each others’ skills, and the interviewers the opportunity to observe that. It made the process more transparent, and became a shared responsibility to decide how the facilitation team would be made up. Following their appointments, we hosted another gathering, where all the tasks were written out on separate pieces of paper around the room, and each candidate wrote a number on a sliding scale on each piece of paper according to how closely they felt their skill set aligned with that task. This was how we created the job descriptions for each person’s role, which remain fluid, with ongoing trust and responsibility for sharing out tasks as they arise. Everyone is paid the same, so that roles and tasks are experienced as being of equal value.

At the Association for Family Therapy and Systemic Practice (AFT) conference in September 2021, I was stirred to hear Gail Simon talking about “the end of the clinic” (Simon, 2021), and knew I had found another member of my Solidarity Team (Reynolds, 2011b). Gail spoke of the clinic as a “colonial

relic”, and the waiting list as an “unethical promise” – here was someone who could put into words the discomfort I had been feeling, and didn’t know how to describe. Gail has become a consultant for my work with the Poverty Truth Commission, and invited me to the launch of Lenticular Futures in May 2022, the title of which is inspired by the work of Wanda Pillow (2019).

There have been many challenges for me in leaving the NHS. One is about identity. Who will I become without the lanyard (ironically, I can no longer find my NHS ID card on its lanyard!) Without the given role, what do I look like? How will my systemic training equip me to work in a position that has no title, no job description, no pay? What will my colleagues in the PTC work see me do that is any different from what others might do as a result of their experience and learning? Does it matter if there is no difference, and our conversations develop a richness of understanding grown from all of our learning combined? In the early days of meetings after I left the NHS, I noticed a desire to introduce myself as a “systemic psychotherapist”, holding on to my professional identity. After a while, I realised that if we are asking folks to “remove their lanyards and bring their whole selves to the process” then I also needed to do the same. I found it freeing to introduce myself simply as Julie – I could be myself, and not feel I have to live up to the expectations that such a title might set up in the hearer.

It was a process of letting go. Rohr (2013) writes about “falling upward” – the idea that if the first half of one’s life is about ascendancy, gain, building up, proving, getting paid more, obtaining qualifications and recognition, then the second half of life is about learning to let go of all of that with grace. Where might that letting go journey take me? I hoped that it would result in greater wisdom, integrity, detachment to ego, generosity, and compassion, which would need to be accompanied by a willingness to make mistakes and make myself vulnerable.

I also needed to challenge my own idea of what work is – is it only what you get paid for? The traditional concept of voluntary work as the alternative did not seem to fit – does that imply that paid work is involuntary? I decided I liked Handy’s term “gift work” (2015), and set about creating a rhythm to my week which included work for which I was paid, and work which was gifted. I like the idea that the work with PTC could be described as “relational activism”. I am grateful to Shila Rashid, who attended a presentation I gave at Lenticular Futures, for introducing me to this term via LinkedIn. Mike Love, from the Leeds Poverty Truth Commissions, talks of the “politics of friendship” (Love, 2022) and cites Lederach (2010) when he describes political friendships as those that span the greatest difference and are therefore often anarchic. I have really enjoyed extending the network of influences on my practice by making these connections.

I found Pillow’s ideas around epistemic witnessing (2019) really useful as I reflected on what happened in the public launch of the Bournemouth, Christchurch and Poole Poverty Truth Commission which took place in July 2022. Pillow describes epistemic witnessing as “a methodology of decolonial love, rage and responsibility” (p. 130). The launch event provided the opportunity for those with lived experience of the struggle against poverty to share their testimony of the injustices, both past and present, and enter into a triangular relationship with both the Civic and Business Commissioners who witness the tellings, and their narratives (Pillow, 2019). The relationship that is entered into is developed and deepened through the ongoing conversations and connections made – the stories heard at the launch are just the beginning. Testimony from other Commissions describes the process as transformative for all involved. Lugones’ (cited by Figueroa, 2015) idea of “faithful witnessing” is both “a stance and a way of seeing”, and “challenges singular narratives” while aiming to be

“noncomplicit with the powers that dehumanise others” (p. 641). The witnessing needs to be “thickly detailed” – not perpetuating “constructs which suit existing social knowledge or policy needs” (Pillow, 2019, p. 128). Those present at the launch witnessed resistance to oppression, to “survivance” (p. 129) and those who spoke were received with love – as one of the witnesses, I experienced the atmosphere as alive with warmth and appreciation for the courage shown by those who told their story through poetry and prose. For example, Paula read her poem in her first language of Portuguese, with the words in English projected on a screen behind her. With her permission, I provide an extract here, so that you the reader might also have the opportunity to witness Paula’s story of survivance, and to hear her voice –

I am a woman, a suffering woman, a humiliated woman, a mistreated woman, an abandoned woman, an abused woman. I am a STRONG WOMAN!

You are a woman with a sparkle in your eyes, with a unique look, with a smile on your lips. You are a STRONG WOMAN!

Brave you managed to fight a war, with claws and prayer. You are WOMAN!

Warrior by nature, with hardness and beauty. You are WOMAN!

You have a natural gift of inspiration and transformation. You are WOMAN!

Threatened, slandered, pressured, isolated, persecuted and beaten, even tired, she doesn’t get tired of going on and on. You are WOMAN!

Success through the process. You are WOMAN!

With a heart full of gratitude and passion. You are a STRONG WOMAN!

Paula, Community Commissioner,

Bournemouth, Christchurch and Poole Poverty Truth Commission, July 2022

I witnessed Paula standing tall and strong, her beautiful language ringing out across the space full of people held in rapt attention. Afterwards, she expressed her joy at having “found her voice again”.

I have needed to consider my own relative lack of experience of poverty, and how that positions me in this work. Pillow enabled me to see the value of folks like me nevertheless “doing the homework” (Pillow, 2022), engaging with the issues and not shying away, doing the work of decolonisation by “learning to remember the things we have been taught to forget” (Dillard, cited by Pillow, 2019). The aspects of life we have been taught to forget are linked to oppression and economics, and sitting with that is uncomfortable work. Part of that discomfort is the not knowing, and unlearning of mastery as a desirable position (Pillow, 2019). The work of decolonisation requires me to let go of those structures, perceived entitlements, and remunerations that make me feel safe, and behind which I can hide. I am learning how to take action against injustice whilst not dominating the space with my own agenda, and creating room for those who are experiencing the injustice most acutely to have their voices heard. This will require me to continue to be aware of the structures that I can take refuge in, structures that support me whilst excluding others. Freire would describe this as conscientizacao (conscientisation) (2004), a process which is enabled by “true dialogue”.

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