# Narrative Treatment Plan



## INTRODUCTION TO THE NARRATIVE TREATMENT PLAN

When individuals seek therapy, they often arrive carrying a heavy load of painful experiences, self-doubt, and limiting beliefs. They describe their lives through stories of failure, loss, or struggle. These stories, while deeply felt, are not the whole truth. A **narrative treatment plan** offers a way to gently separate the person from the problem, allowing them to see their life from a new perspective. This approach, rooted in narrative therapy, focuses on helping people rewrite the stories that define them, moving from a place of victimhood to one of agency and strength.

The process of creating a narrative treatment plan is collaborative and respectful. Unlike traditional models where the therapist diagnoses and prescribes, narrative therapy positions the client as the expert on their own life. The therapist acts as a curious and supportive guide, helping the client identify and deconstruct problem-saturated stories. The goal is not to erase difficulties but to uncover hidden strengths, values, and moments of resilience that have been overlooked. This article explores the core components, practical steps, and profound benefits of using a narrative treatment plan in therapeutic settings.

### WHAT IS A NARRATIVE TREATMENT PLAN?

At its heart, a **narrative treatment plan** is a structured yet flexible roadmap for therapy. It is built on the foundational belief that our identities are shaped by the stories we tell about ourselves and the stories others tell about us. These stories are not objective facts; they are interpretations influenced by culture, relationships, and personal experiences. When a story becomes too narrow or problem-focused, it can trap a person in a cycle of shame, hopelessness, or helplessness.

A narrative treatment plan works by externalizing the problem. Instead of saying "I am depressed," the client learns to say "depression has been visiting me." This small shift creates space between the person and the issue. It allows the client to examine how the problem has affected their life without feeling defined by it. The plan then guides the process of identifying unique outcomes—moments when the problem did not have control—and weaving those into a new, preferred story.

## Key Principles of Narrative Therapy

To understand the narrative treatment plan, it is helpful to know the principles that guide it. These principles ensure the plan remains client-centered and empowering.

- **Externalization:** The problem is seen as separate from the person. This reduces blame and opens up possibilities for change.
- **Deconstruction:** Problem stories are examined to reveal hidden assumptions, cultural influences, and power dynamics.
- **Re-authoring:** Clients are supported in creating new stories that reflect their values, strengths, and hopes.
- **Thickening the story:** The new narrative is enriched with details, memories, and evidence from the client's life.
- **Witnessing:** The therapist and sometimes a wider audience acknowledge and celebrate the new story.

## WHY CHOOSE A NARRATIVE TREATMENT PLAN?

Many therapeutic approaches focus on reducing symptoms or changing behaviors. While these are valuable, a **narrative treatment plan** goes deeper. It addresses the meaning a person gives to their experiences. This is particularly effective for individuals who feel stuck in negative self-concepts, who have experienced trauma, or who are navigating major life transitions.

The narrative approach is also highly respectful of diversity. Because it recognizes that stories are shaped by cultural and social contexts, it allows for a therapy that is sensitive to issues of race, gender, sexuality, and class. Clients are not pathologized for their reactions to systemic oppression. Instead, the therapy validates their experiences and helps them reclaim their voice.

## Who Can Benefit from a Narrative Treatment Plan?

This approach is versatile and can be adapted for children, adolescents, adults, couples, and families. It has been used effectively for:

- Depression and anxiety
- Trauma and post-traumatic stress
- Grief and loss
- Relationship difficulties
- Identity exploration
- Eating disorders
- Addiction recovery

- Navigating chronic illness

## CORE COMPONENTS OF A NARRATIVE TREATMENT PLAN

Developing a comprehensive **narrative treatment plan** involves several key steps. Each step is designed to honor the client's experience while gently guiding them toward new possibilities. The plan is not a rigid checklist but a living document that evolves with the therapy.

# 1. Collaborative Problem Identification

The first step is to understand the story the client is bringing into the room. This is done through careful listening and open-ended questioning. The therapist might ask, "What brings you here today?" or "Tell me about a time when this problem felt especially heavy." The goal is not to gather a list of symptoms but to hear the narrative that has been shaping the client's life.

During this phase, the therapist and client work together to name the problem. This naming is important because it gives the problem a shape, making it easier to externalize. For example, a client might refer to "the voice of worthlessness" or "the shadow of past trauma." Once the problem is named, the therapist can ask questions like, "How long has this voice been around?" and "When is it most likely to speak up?"

# 2. Externalizing the Problem

Externalization is a cornerstone of any narrative treatment plan. It involves using language that separates the person from the problem. This is done with care and sensitivity. The therapist might say, "It sounds like anxiety has been trying to keep you small. Is that right?" or "What does depression tell you about yourself that isn't true?"

This shift in language can be liberating. Clients often experience immediate relief when they realize they are not their problem. They can begin to see the problem as an external force that has been influencing them, rather than a fixed part of their identity. This opens up room for curiosity and action.

# 3. Mapping the Influence of the Problem

Once the problem is externalized, the next step is to explore its impact. This is done through detailed questioning. The therapist might ask, "How has this problem affected your relationships?" or "What strategies has the problem used to keep you feeling stuck?" This helps the client see the problem's tactics and recognize patterns.

This mapping also includes identifying the problem's motivations. Narrative therapy often uses a technique called "relative influence questioning." The therapist asks about the problem's influence on the client's life and, conversely, the client's influence on the problem. This reveals areas where the client has already resisted or pushed back against the problem, perhaps without realizing it.

# 4. Identifying Unique Outcomes

Unique outcomes are moments in the client's life when the problem could have taken control but did not. These moments are goldmines in a narrative treatment plan. They can be small or large. A unique outcome might be a time when a client with social anxiety spoke up in a meeting, or when someone struggling with depression got out of bed and took a walk.

The therapist helps the client notice these moments and explore them in depth. Questions like, "How did you do that?" and "What does that say about who you are?" help the client see their own strength and resourcefulness. These unique outcomes become the building blocks for a new, preferred story.

# 5. Re-authoring the Story

Re-authoring is the process of weaving the unique outcomes into a coherent new narrative. The therapist helps the client connect the dots between these moments of resilience, creating a storyline that emphasizes agency, courage, and hope. This new story is not a denial of pain; it is a more complete picture that includes both struggle and strength.

During re-authoring, the therapist might ask questions like, "If you were to give this new story a title, what would it be?" or "Who in your life would not be surprised to hear this story of your strength?" These questions anchor the new narrative in the client's values and relationships.

# 6. Thickening the Preferred Story

A single new insight is often not enough to sustain change. The story needs to be "thickened" with detail and evidence. This involves revisiting past experiences and reinterpreting them in light of the new narrative. It also involves looking for ongoing and future moments that support the preferred story.

The therapist might encourage the client to keep a journal of moments when the new story is alive. They might also invite the client to share their new story with trusted friends or family members. The more the story is told and witnessed, the more real and powerful it becomes.

# 7. Creating a Documentation of the New Story

In narrative therapy, written documents can be powerful tools. A **narrative treatment plan** often includes creating letters, certificates, or other tangible records of the client's progress. For example,

a therapist might write a letter to the client summarizing their journey, highlighting their strengths, and witnessing their new story. The client can keep this letter and read it during difficult times.

These documents serve as anchors. They are physical reminders that the client has a history of resilience and a future of possibility. They can be especially powerful when a client feels the old story creeping back in.

## INTEGRATING A NARRATIVE TREATMENT PLAN WITH OTHER APPROACHES

While the narrative approach is powerful on its own, it can also be integrated with other therapeutic modalities. Many therapists combine narrative techniques with cognitive-behavioral therapy, mindfulness, or solution-focused therapy. The key is to maintain the core narrative principles of collaboration and respect for the client's story.

For instance, a therapist might use externalization to help a client with anxiety, while also teaching grounding techniques from mindfulness. Or they might use re-authoring to help a client create a new story around their eating disorder, while also using behavioral strategies from CBT. The narrative treatment plan provides the overarching framework, while other techniques can be woven in as needed.

## CHALLENGES AND CONSIDERATIONS

Like any therapeutic approach, the narrative treatment plan has its challenges. Some clients may initially struggle with the concept of externalization, especially if they are deeply identified with their problem. Others may have difficulty identifying unique outcomes, particularly if they have experienced long-term trauma or oppression.

Therapists also need to be mindful of their own biases and cultural assumptions. The narrative approach requires humility and a willingness to learn from the client. The therapist must be careful not to impose a preferred story on the client, but rather to co-create it with them.

Another consideration is time. A thorough narrative treatment plan can take longer than some structured, manualized approaches. However, the depth of change it facilitates often makes the investment worthwhile.

## REAL-WORLD EXAMPLE OF A NARRATIVE TREATMENT PLAN

To illustrate how this works in practice, consider the case of a young woman named Maya. Maya came to therapy feeling overwhelmed by a story she had been telling herself for years: "I am not good enough." This story affected her work, her relationships, and her self-esteem.

In the first sessions, Maya and her therapist identified and named the problem: "the critic." They mapped how the critic showed up in her life, what it said to her, and how it made her feel small. Maya began to see the critic as a loud, persistent voice rather than the truth about who she was.

Through careful questioning, Maya identified a unique outcome. She remembered a time at work when she was praised for a presentation. Instead of dismissing it, she had allowed herself to feel proud for a few hours. The therapist explored this moment in depth. "How did you manage to let that praise in, even for a short time?" Maya realized that she had made a conscious choice to "let it in" because a colleague had been especially sincere.

This unique outcome became the seed of a new story. Maya began to see herself as someone who could recognize sincerity and who had the courage to accept positive feedback. Over time, she re-authored her story. She was no longer "not good enough." She was "someone who is learning to value her own contributions." Her narrative treatment plan included journaling about moments when she felt competent, sharing her new story with her partner, and a letter from her therapist celebrating her journey.

Maya's depression and anxiety did not vanish overnight. But she now had a new lens through which to view her life. She had a **narrative treatment plan** that she could return to again and again, a roadmap for staying connected to her preferred story.

## CONCLUSION

The **narrative treatment plan** is a profoundly human approach to