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## A Theoretical and Applied Review of Embodied Restorying for Post-Deployment Family Reintegration

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The purpose of this paper is to introduce the theory and application of Embodied Restorying Practices (ERPs), an intervention designed to promote military family reintegration. ERPs are a form of family storytelling that takes on a sociomaterial, translational approach. ERPs are geared toward individuals and families who have experienced stress, separation, or trauma. A facilitator follows the steps of ERPs to encourage people to move beyond culturally imposed narratives or separate, looped stories of trauma/difficulty. ERPs prompt families to reframe stories in cognitive and material ways to create positive, unified, living stories of the future that, when reinforced by the family system, give members increased agency and family connection. Practical roots of ERPs stem from equine-assisted interventions with veterans. Theoretical review shows how ERPs fit in the context of family storytelling research and warrant further research.

*Keywords:* military, family, stress, PTSD, deployment, family communication, storytelling, narrative, restorying, equine, sociomaterial

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### Introduction

Military service members and their families face serious physical and emotional stressors associated with deployment and family reintegration. Even though a majority of families show remarkable resiliency (e.g., Merolla, 2010; Sahlstein Parcell & Maguire, 2014), service members' exposure to stressors during active duty, as well as stressors related to separation from families and reintegration post-duty, are often implicated in higher rates of psychosocial problems experienced by veterans compared to the general population. For example, veterans experience higher rates of suicide attempts and completed suicides, unemployment, alcohol and other substance abuses, criminal violations, and prison sentences (Elbogen et al., 2012; Hawkins, Grossbard, Benbow, Nacev, & Kivlahan, 2012; Teten et al., 2010; Tsai, Maris, & Rosenheck, 2012; Veterans Intervention Project Report, 2009; White, Mulvey, Fox, & Choate, 2012). Close to a third of returning service members screen positively for serious, lingering emotional wounds in the form of posttraumatic stress disorder (PTSD), traumatic brain injury (TBI), depression, and anxiety (Knobloch & Wilson, 2015).

The symptoms and consequences of these psychosocial problems can threaten post-deployment family reintegration and prove difficult for partners and children, who face their own set of ongoing challenges related to lengthy periods of family separation and deployment transitions. For example, rates of divorce among military personnel are estimated to be slightly higher than the general population (Riviere, Merrill, Thomas, Wilk, & Bliese, 2012). Beyond spouses/partners, children with a parent who is deployed often experience more behavioral problems, increased anxiety and anger about what their parent is doing, and poorer academic performance (Wilson, Wilkum, Chernichky, Mac Dermid Wadsworth, Broniarczyk, 2011).

Family communication scholars have made important progress in helping better appreciate the stressors and transitions experienced by military families across the deployment cycle (e.g., Joseph & Afifi, 2010; Knobloch, Pusateri, Ebata, & McGlaughlin, 2014; Knobloch & Wilson, 2015; Merolla, 2010; Rossetto, 2015; Sahlstein Parcell & Maguire, 2014; Wilson et al., 2011). Yet, good treatment and support for these stressors is met with barriers and reluctance to seek therapy (Nevinski, 2013). Many returning service members delay or avoid reporting post-deployment stress or reintegration problems in fear of endangering their career or facing the stigma of having gone to therapy or been labeled with PTSD (Hoge et al., 2004). Prevailing societal and institutional narratives further discourage families from seeking help by perpetuating myths that veterans and family members should just “toughen up and get over it” or, conversely, that “the emotional wounds experienced by military families ruin all future hopes for normal functioning.” Of the family reintegration programs and interventions that exist, many have been cited for their lack of theoretical grounding and effectiveness, as well as failure to treat more than one member of the family unit (Theiss & Knobloch, 2014).

The purpose of this article is to introduce Embodied Restorying Practices (ERPs), a new family storytelling intervention that we propose may aid post-deployment military family

reintegration and veterans' wellbeing. Toward that purpose, the review of literature describes communication and perceptual challenges of reintegrating military families and examines the theoretical underpinnings of ERPs. We also detail the facilitator-led steps used in ERP sessions, based on examples from a pilot intervention with two military families. We close with recommendations for how future work can examine the efficacy of ERPs and discussion of how ERPs expand family storytelling and military family communication research avenues.

### **Communication and Perceptual Challenges in Military Families: Separate and Traumatic Stories**

Family members encounter different types of emotions, stressors, and communication challenges across the deployment cycle. Some researchers map these transitions according to deployment stages (e.g. Morse, 2006; Pincus, House, Christenson, & Adler, 2001). Presentation of Pincus et al.'s (2001) stages and associated research is useful to the extent that it provides, as Sahlstein Parcell and Maguire said, a "recognizable metanarrative" for deployment, keeping in mind that it may not capture all the "varied experiences" of military couples/families (2014, p. 132).

For the sake of discussion, Pincus et al.'s (2001) deployment stages begin with the pre-deployment stage, whereby family members find out about an impending deployment and often experience uncertainty about the future that can include anxiety, sadness, and denial. They make preparations for deployment in the form of both physical adjustments and emotional distancing between the family members (Sahlstein, Maguire, & Timmerman, 2009; Wilson et al., 2011).

Next, during the deployment stage, family members find ways to cope both emotionally and physically without a partner or parent present. Immediately after deployment, the family may be faced with a flurry of emotions related to the separation, along with adjustments related to altering roles and routines. In the sustainment stage, family members become more familiar with their new

arrangements and routines. Separated by distance and accessibility, family members grow accustomed to making decisions and carrying on activities without communicating their thoughts and actions to the each other. For some, this promotes a closed style of communication between the service member and family at home (Faber, Willerton, Clymer, MacDermid, & Weiss, 2008). It can be especially challenging to shift from a closed back to open communication style upon return. There is strong evidence that during deployment families benefit from maintaining an open style of communication, which helps sustain an emotional connection (Baptist et al., 2011). For example, Wilson, Chernichky, Wilkum, and Owlett (2014) found that deployed parents who were able to have a more open style of communication were met with fewer child behavioral problems and more positive child behaviors upon their return. To the contrary, couples report more stress when they experience a more closed style of communication during deployment, in the form of less opportunities to talk about their daily lives and more avoidance of topics when they do get to talk (Frisby, Byrnes, Mansson, Booth-Butterfield, & Birmingham, 2011).

In the redeployment stage, the month or so before the service member returns, family members may feel some apprehension about the reunion, but it is often masked by excitement and high expectations/hope for what it will be like to be together again. Finally in the post-deployment stage, initial excitement about the service member's return soon transitions to a readjustment to being together again. As they readjust to being together, some families struggle with how or whether to try to explain all the experiences they had while separated, and how to renegotiate family routines as they move from being apart to together (Faber et al., 2008; Sahlstein et al., 2009). Upon return from deployment, some veterans and families also face confusion about how to deal with the uncertain state of their family relationships when they return, making them unsure about how much they want to open up and connect to each other again (Theiss & Knobloch, 2014). The military family may have

replaced their own family as the primary line of support and, indeed, the body of the soldier has belonged to the military.

Pincus et al.'s (2001) descriptions of deployment stages make clear that deployment is as much about coping with and managing *perceptions* as it is about coping with and managing communication behaviors. When couples and families are separated by distance and experience, perceptions are especially powerful. Indeed, Gottman (1999) explains in his core triad of balance theory that when a negative threshold in any of the three domains of physiology, behavior, and perception is exceeded, relationships become unstable. For this reason, it makes sense for military family reintegration programs to work with all three domains. With regard to physiology, it is critical for reintegration programs to address the physiological stressors of veterans and family members (e.g., TBI, PTSD, physical injuries, depression, anxiety). As for behaviors, reintegration programs are keen to focus on communication skills. Our work in family storytelling is largely focused on the third domain of perception.

A great deal of relationship research reinforces the power of perception on relational wellbeing and family satisfaction. Much of this work examines the gravity of negative perceptions, such as relational disillusionment (Niehuis, Lee, Reifman, Swenson, & Hunsaker, 2011), negative sentiment override (Flora & Segrin, 2000; Hawkins, Carrerre, & Gottman, 2002), and negative attributions (Fincham & Bradbury, 1991; McNulty, O'Mara, & Karney, 2008). In addition, there is a great deal of power in positive perceptions, for example creating shared meaning (Gottman & Silver, 1999), glorifying struggles (Buehlman, Gottman, & Katz, 1992), or maintaining a healthy dose of positive illusions (Murray & Holmes, 1999).

Compounding the perceptual challenges of military families are dominant societal and institutional narratives that, in the case of military families, either silence or warp the stories of military family members. Some military families feel their family stories have been overtaken by

narratives about how they are supposed to feel upon reuniting. For example, some veterans in our equine family reintegration work described how they were instructed by their military unit leaders to think of their unit as their new family. Indeed, intense, long-term relationships with members of a military unit during deployment may come to feel like family. This can challenge definitions of who family is, making it difficult to connect again to the family back home. Society also has master narratives about PTSD that either prompt people to feel stigmatized and hesitant about admitting PTSD or doomed to experience it. Similarly, partners and children may struggle with negative master narratives about military families as being incomplete or dysfunctional.

Frisby et al. (2011) argue that when there is a lot that is uncontrollable about military life (e.g., deployment, active duty stressors, and dominant military narratives), perceptions and appraisals of those experiences may be something that is controllable. For this reason, Frisby et al. (2011) suggest that intervention programs should focus on specific skills and practices that are attainable and easily implemented. Family storytelling may be one such example. If not on their own, with the prompting of an interventionist, families can use storytelling not only to reflect back on past events, but also to cope with the present and shape a new future.

Indeed, translational storytelling is defined as “interventionist efforts to help families cope with difficulty” (Koenig Kellas & Kranstuber Horstman, 2015, p. 85). One popular example of a translational storytelling intervention is the Expressive Writing Paradigm. The Expressive Writing Paradigm typically involves writing for 15-20 minutes on four days about a particular trauma, unsettling event, or stressful episode (Pennebaker & Beall, 1986, Pennebaker & Francis, 1996; Pennebaker, Kiecolt-Glaser, & Glaser, 1988; see also meta-analysis by Frattaroli, 2006). Those forms of expressive writing that have a translational approach tend to be less retrospective and instead critically focused on “self-authoring,” in which participants look back at key moments in their past, and also identify motivations and goals for the future that help them move past obstacles (Peterson &

Mar, 2015). Self-authoring helps people write a new narrative that fits them personally, rather than following a societal or stereotypical narrative (Kamentz, 2015). However, expressive writing interventions have primarily been used at the individual level. We are particularly interested in developing ERPs as a storytelling intervention that can be applied at the *family* level. Further, we are interested in the idea that storytelling is more than just writing (text) and telling (words), but can have a sociomateriality to it.

### **What Are Embodied Restorying Practices?**

ERPs are a critical and narrative intervention based on the storytelling and restorying work of Boje and Rosile (Boje 2001, 2008, 2013, 2014; Boje & Rosile, 2015; Rosile & Boje, 2002). The intent of facilitator-led ERPs is to promote, in multiple sessions, reconfiguration of a family's story. ERPs work to dislodge dominant, linear, problem-saturated narratives of trauma that get repeated by the individual and family. Instead of replaying and reliving old stories, restorying “explores around the dominant problem-saturated narrative...to recover previously unstoryable and unnarratable events of the experience that were previously excluded from the dominant narrative” (Boje, 2014, p. 215). In that exploration, participants identify “successful moments, ‘little wow-moments’ of personal living story exceptions, when the person had some personal agency....these unique outcomes of past success and anticipated future efficacy are reformulated into a ‘new story’ to displace the habituated dominant narrative” (Boje, 2014, p. 215). In the end, family members write letters to each other in which they share and publicize the new story as a means of gaining support and accountability. Without family support the old story finds its way back and becomes dominant once again.

Boje (2001, 2014) introduced a critical concept of restorying: the antenarrative—a before narrative or pre-narrative. Antenarratives are often hidden before, or even beneath and between, the dominant narratives foisted onto veterans and families by society. Small moments of exceptional and ideal functioning can be discovered or recalled in antenarratives. Eventually storytellers begin to

place faith in, or make an ante (bet), that the moments of exceptional functioning can be realized again and connected to a new living story that is yet to be played out and has hope for being transformative. Boje (2011; see also Deleuze & Guattari, 1988) uses the analogy of a rhizome, the roots/runners of a plant that shoot out, to argue that family stories are not linear. Rather multiple antenarratives act as the runners that can connect to a new living story that has agency.

What is particularly unique about ERPs is the notion of *embodied* restorying. *Embodied* restorying is not just a process of restorying by social constructivism but also one of sociomaterialism. Storytelling is more than telling; it is showing, shaping, and experiencing. Facilitators elicit the telling and shaping of the story in an embodied way with the aid of material objects. As we explain more later, our version of ERPs uses sand tray work, where family members tell their stories by assembling a set of action figures, a landscape, home/military objects into scenes depicting deployment and reintegration (see Figure 1). Family members can leave it at that, or if they choose, tell about it. The sand tray work provides a way to spatialize the deployment experience. It is a way to decompress the compressed readiness of deployment and coming home activities, and to observe their own experience from another perspective. Family members move out of stuck ways of depicting their deployment/separation and consider ways they were successful, supported, or found solace and strength. After several sessions, family members assemble their decompressed experiences into a new story for the future and develop action steps.



*Fig. 1. Material storytelling sand tray used in ERPs*

Adults and children alike who have experienced trauma and difficulty may look to material objects to help open up, explain, and reveal stories, especially when it is difficult to find words to represent the experiences. In addition, there is something about connecting to and taking control of the material that may offer a sense of self-agency. Our theory is that by manipulating the material objects in sand tray work, there is a prereflective moment that impacts the quality of the reflective oral storytelling by veterans and their family members. As such our inquiry is into the antenarrative, pre-thematic, prereflective, and pre-oral aspects of storytelling.

### **Theoretical Underpinnings of Embodied Restorying Practices (ERPs)**

*Restorying.* The *restorying* part of ERPs (Boje, 2014; Henderson & Boje, 2015; Rosile, 2007; Rosile & Boje, 2002; Rosile, Boje, Carlon, Downs, & Saylor, 2013) is based on White and Epston's (1990) classic work on restorying. Restorying was originally a way to intervene in family systems, using a text-based approach to cognitively reframe, interpret, and attribute meaning to life events. Palgi and Ben-Ezra (2010) point out people's tendency to assimilate their own traumatic/difficult experiences into stable life narratives that predict a future consistent with those difficulties, rather than a different future. In one of the only studies to date to use restorying with combat veterans returning from deployment with the Israeli military, Palgi and Ben-Ezra (2010) show how an

intervention can help shape memories in a way to “shatter an old narrative” (p. 9). In a “back to the future” approach, Palgi and Ben-Ezra treat the present trauma by going back and asking the veteran to find what they call anchor points. These represent exceptional moments that stand in contrast to the old story and can be woven into a new coherent story.

Furthering White and Epston’s (1990) work, we understand restorying to be rooted in three modes of storytelling: (1) dominant narrative; (2) living story; and (3) antenarrative. Dominant narrative is monologic and often a problem-saturated, stereotypical narrative of what society expects of veterans and family members. For example, monologic, stereotypical master narratives may tell veterans to grin and bear it, to suck it up, to not seek care, or to assume life will be ruined by PTSD. Dominant narratives are defined as thematic, retrospective, and centered on a mono-plot with a beginning-middle-end around particular characters. They often seek to generalize or exact a universal logic (Weick, 1995). Narratology studies of dominant narrative structures explain that such stories can become petrified narratives that resist change over time (Czarniawska, 1997, 2004).

Living stories, on the other hand, are defined as grounded in everydayness or in particulars of emotive performance (Gabriel, 2000). They are still in-the-middle unfolding. In our understanding and practice of restorying, facilitators help people compare petrified stories or dominant societal narratives to lived experience. It may be revealed that dominant stereotypes do not fit living stories of veterans and family members. Living stories have a more “dialogical manner” than do monologic narratives that center on one logic or theme (Bakhtin, 1981, p. 60). What connects dominant narratives and living stories is the antenarrative process—that is, what comes before, beneath, and between the dominant narratives (Boje, 2001, 2014). Antenarratives are the shoots and runners in living stories: some are reflective of trauma and difficult experiences, while others reveal moments of ideal functioning or positive exceptions. Recognizing and realizing antenarratives of ideal functioning connects people to new, coherent, self-transformative living stories.

*Embodied*. Theoretically, the *embodied* part of ERPs is rooted in current work in sociomateriality (Barad, 2003; Kress, 2009; Leonadi & Barley, 2010; Orlikowski, 2007; 2010). Instead of separating a purely social world from a purely material/physical world, the social and material are intertwined. Material storytelling is based on work from the Material Storytelling Lab in Aalborg University, Denmark (Strand, 2012), along with storytelling scholars Boje and Rosile (Boje, 2014; Rosile & Boje, 2002; Strand, 2012; Jorgensen, Strand, & Boje, 2013). Sociomaterial storytelling theory and practice is what Barad (2003) calls ‘intra-active’ with storytelling discourse. Sociomaterial storytelling allows participants to engage with a variety of material/physical objects in the telling of their story. We argue that material storytelling helps to get to stories that are difficult to talk about. Indeed, much of our memory is tied up with material objects. We eat a food, hear a song, see a picture, and it makes us think of a direct experience or metaphoric experience. Material storytelling uses non-human objects/characters, which may help people externalize their stories to something outside themselves.

To be clear, embodied restorying is different than text-based (linguistic) restorying popular in narrative therapy since White and Epston’s (1990) seminal work. Social constructivists have critiqued the notion of embodiment by arguing “that the meaning is essentially language” and “all human systems are linguistic systems” where “there is nothing outside of language” (e.g., Polkinghorne, 2004, p. 58). On the other hand, our view is aligned with Boje’s thesis—one that “goes against the social constructivist view that everything is social language and that personal and material realms are mediated by the language of human systems thinking. Rather, in the quantum turn, there is an intra-play of storytelling with materiality” (Boje, 2014, p. 217). Embodiment theories are quite diverse ranging from cognitive sciences, neurosciences, psychology, corporeal narratology, to phenomenology and ontology.

We began to understand the power of embodied storytelling in other research our team was conducting with equine-assisted interventions for military families. Somewhat akin to the well-known Equine-Assisted Growth and Learning Association (EGALA, 2012) programs, our equine program uses a 100% on-the-ground (no riding) approach, that has the veteran and family doing simple tasks, such as leading the horse around an arena, grooming a horse in the stall, and more complex problem solving challenges such as leading the horse without a halter or lead line through an obstacle course of cones, barrels, and rails. In the process of noticing horses' reactions and being in a different material environment, our team found that families often commented on how material objects in the horse arena (e.g., the halter, the stalls) or aspects of the horses themselves related to their own individual stories and family stories. For example, after seeing a horse in a nice indoor stall, one veteran in the equine program commented, "I don't think [the horse] wants to go out because out there is where all the bad things happen." His wife and daughter laughed and said, "just like you dad," a connection that became important given the veteran's struggle to even leave the house for daily activities as he coped with flashbacks about what he referred to as "being blown up several times" during active duty.

The point here is that our team became interested in the idea that material objects and environment influence storytelling. They become pivotal elements in the restorying process, as they help put images and metaphors to stories in situations where the story may be difficult to identify and tell in traditionally verbal ways because of trauma or other barriers. This is precisely the reason why animal-assisted therapies are often used with at-risk populations. However, even though there are encouraging results associated with equine therapies for veterans (Bachi, 2012; EGALA, 2016; Martz, 2014), Nurenberg et al. (2011) point out barriers associated with establishing an equine program, namely in the form of logistic issues, safety, training, and accessibility. Simply put, horses are expensive and horse ranches are few and far between.

Our own team began to ask how/whether embodied restorying practices might be adapted beyond the horse arena to another arena that is more accessible. At this juncture, we adapted the use of ERPs for application in a more accessible setting. That setting moved indoors where a facilitator could lead a family through embodied restorying sessions in a comfortable room that included material objects in a sand tray—akin to a mini-arena. In the indoor sand tray context, participants use material objects and action figures of their choice to depict their story in both material scenes and verbal ways.

A facilitator uses reflective responding, summarizing, questioning, and focusing to help participants create their stories in the moment, tying past experiences and future hopes to symbolic objects in the sand tray. For participants, the objects represent people, places and things embedded in the stories. It is not in any way to be confused with Jungian sand play work with children where the expert interprets and psychoanalyzes the symbolism of the material objects chosen. Instead, in intraplay, participants comment on a material scene and shape a material reality to tell the story. Clearly, sand tray objects do not give the biofeedback that horses do, but these material objects still appear to be influential in eliciting the story and in externalizing the story. We believe that material storytelling is a unique way to help military families open up and move beyond some of the communication and perceptual challenges that appear to be residue of deployment stressors.

### **Practical Application of Embodied Restorying Practices**

As a means of demonstrating ERPs, we present excerpts and material descriptions from a pilot study in which we established the techniques of ERPs with two families who participated in three indoor ERP sessions as a part of a larger military family reintegration program. Our university institutional review board approved the pilot study. Research took place on the grounds of a horse ranch with both an outdoor horse arena and indoor rooms for ERP sessions. Before the first session,

veterans and family members completed a questionnaire with demographic assessments and measures of family communication, family distress, and individual and family wellbeing that were also being piloted for a larger study. The families were recruited through advertisement at the veteran student services office of a large Southwestern university in conjunction with a program on equine skill-building and storytelling with post-deployment military families. Participants were asked to attend and bring their “family,” with instructions that they could define family on their own terms, regardless of whether they were legally or biologically related. Thus, we used an open, transactional definition of family, as explained by Segrin and Flora (2011). As advertised, each family was paid a \$100 gift card upon completion of the last session. A licensed marriage and family therapist was on site and made available if desired by any participant before, during, and after each storytelling session.

Family #1 included a veteran and his wife who had one teenage child, although this child did not participate in the ERPs. The veteran had served three years in the military, including one deployment. The couple had been married three years, right before his deployment. Family #2 included a veteran, girlfriend, and the girlfriend’s 10-year old daughter, all of whom currently live together and say they consider themselves a family. All three members of this family participated in each session. The veteran had been deployed twice, therefore having approximately two years total deployment.

Prior to each family’s first session, the facilitator explained that the sessions were designed to listen to family members’ stories about the past and encourage them to shape their future story together. Adults and children completed consent forms after being reminded that their participation was voluntary, they could end at any time, and their session would be video-recorded. The families were also invited to go outside and visit the horses before and/or after their session. Families were then ushered inside for their “family storytelling sessions,” all of which took place indoors with a

facilitator and a sand tray full of a wide variety of material objects (e.g., action figures of soldiers, military vehicles, children, adults, animals, buildings, plants, etc.).

Video-recordings were transcribed verbatim and verified against the original recordings. Participants' names were replaced with pseudonyms. Using Boje's (1991) recommendations for verbatim storytelling transcriptions, transcribers also noted overlapping talk and pauses or other nonverbal emphasis by using brackets. Transcription resulted in 90 pages of double spaced text.

### Steps of Embodied Restorying Practices

Framed as a program of family storytelling, ERPs are typically conducted over the course of 3-4 sessions. In our case, we used 3 sessions that lasted 60-90 minutes each. The steps of ERPs are presented in Table 1.

**Table 1. Steps of the Embodied Restorying Process including Samples and Interpretations from ERP Sessions**

1.	<b>Characterize:</b> "Describe you at your 'best,' or your family at their best, either in words or by arranging a scene in the sand tray. What would a favorite grandparent, parent, teacher, family member, or best friend, say about you? This is you or your family on your best days, or the you that these favorite people know you have the potential to become. In contrast, there are the old 'received narratives', which have been imposed on you and your family by others. These received narratives constitute a received self-identity. For example, society, films, families, and institutions, such as the military or professional training, all tell us who we should be and how we should behave."
2.	<b>Externalize:</b> "Describe your 'old story,' your description of you/your family in the past. Feel free to make any problems or struggles into another character in your story (use an object in the sand tray to describe this character/problem)." (Note: Sometimes this step features very little talking at first, as participants choose characters, arrange scenes, and then later describe. Also, some people prefer to talk about their old story before they describe their "best" self.)
3.	<b>Sympathize:</b> "How has the problem (the old story) benefitted you or how is it understandable?"
4.	<b>Revise:</b> "Identify negative consequences of the problem." This helps reaffirm the commitment to change them.
5.	<b>Strategize:</b> "Find the 'little wow moments' of exception to the usual 'same old story.'" For example, "How did you overcome the problem this time?"
6.	<b>Restory:</b> "Re-write history and write a new future life/family story. This time, highlight all the 'little wow moments' from family members and make them the 'new normal' (instead of the exception) in the future story."

7. **Publicize:** “Identify a support network and write letters to potential supporters to request participation in the new story of the future. It does not matter if the letter recipients respond or not. Consider family and friends who can support and ‘call you on it’ if the old story creeps back in.”

Our aim in this section is to highlight, through transcripts and material descriptions, what we consider to be excerpts that epitomize that nature of storytelling in each stage of ERPs. Because this article is an introduction to the theory and steps of ERPs, the goal is not to follow the story line of one family in its entirety.

*Steps 1 (Characterize) and 2 (Externalize):* The first of the three sessions with families focused primarily on steps 1 and 2. The steps are not linear and most families progress through steps 1 and 2 intermittently. The facilitator began by giving each family member in the session his or her own sand tray and inviting them to use the objects to arrange scenes in the sand tray. The facilitator asked participants to create two scenes in the sand tray (see the prompts in step 1 of Table 1). They were told to create one scene to show themselves or their family functioning at their “best” or specific moments when they felt proud. This scene might also show how a favorite friend or family member who knows them would describe them at their best. They were also asked to create another scene that depicted difficult times individually or as a family. Also, they were invited to depict problematic ways that society or others misunderstood them. They were told that sometimes there are labels which have been imposed on us by others, for example by society, films, families, or institutions like the military, telling you who you should be and how to behave. After taking time to create the scenes, participants were asked to describe the scenes or tell the story of what was happening.

Sometimes this first session featured very little talking at first. Participants chose characters and arranged scenes. Before much talking began, participants engaged with the objects in a pre-oral, pre-reflective way that later would impact the storytelling. This pre-oral stage is critical because it is here that the antenarratives literally surface in the sand. When participants began to talk, they

described the problem and how it stood in contrast to their best moments of self and family. Most participants began by talking about the struggles and stereotypes and only later in the session did the “best” self, as described in step 1, begin to emerge. Stories about the “best” self often began to emerge after the facilitator prompted them to externalize the characters in the problem scenes (step 2). For example, the facilitator asked participants to name the figures or characters in the problem story or what the facilitator began to call the “old story.” This externalizing and naming of the characters provided a way to look at the struggles from the outside in. The objects worked in what Barad (2003) calls inter-active storytelling. Stories emerged on a moment-to-moment basis entangling objects with memories, bodies, and discourse. Thus began the reconstitution of individuals’ and family’s stories and identities, prompted by the sociomaterial approach.

The three members in family #2 worked quietly and separately, but quickly set up scenes and characters. The veteran’s partner chose a purple monster figure, which she later described as “like my past that kinda follows me around wherever I go.” This past included what she referred to as being an “angry mom,” past mistakes, and the wear and tear of serving as primary caregiver to her veteran partner who was not able to drive now and suffered from panic attacks. To depict her ideal self, she chose a wise owl figure who represented her as a person who was recognized by her professors as being smart. The wise owl or ideal self was finishing her college degree and getting a good job. She wanted to take the purple monster away from the scene, so that she could shed old labels from her own troubled past and be better at understanding and dealing with her veteran partner’s physical and emotional issues. In describing herself at her best, she took pride in the moments when she felt like a good caretaker. She suggested to her partner that she was like his “wolf pack” and tried to depict this image in the sand tray.

The veteran from family #2 externalized the character in his old problem-saturated story by choosing a monkey figure. He said the military named him as “unemployable and PTSD, then

cognitive tinnitus, it's like a really long list ... it's like a little guy in my head that like someone said freak out!" Later in the session as he characterized his ideal self and family functioning, he said, "No, no, the monkey's not dead ... but I have [Angie, his partner, and Ashley, his daughter]." Then he described his family at its ideal by choosing a figure that was an angel and noted that his partner "was an angel" because of the way she cared for him. When she cared for him, he felt at his best because he felt worth something to his wolf pack in contrast to the military labels that deemed him unworthy for military service anymore. It is notable that he plays off the reference to the wolf pack that his partner introduced earlier. This exemplifies the power of joint family storytelling and the potential for members to align stories or at least hear each other's stories rather than living in separate stories. The joint storytelling invites them to consider how they can overcome struggles together.

As for the daughter in family #2, she commented on her mother's depiction of the purple monster. One of the unique features of ERPs with the family unit is that members comment on each other's sand tray scenes. The daughter said, "My mom is over here and then my Mommy was angry." Yet in characterizing her ideal story, the daughter set up a scene in which her parents were happy watching her compete in gymnastics. She gave herself a medal in the sand tray scene. In steps 1 and 2, people seem to resonate with naming their problems and wanting to materially see that the problems can be separate from the self.

As for the veteran from family #1, the first session was dominated by him telling his old story. It really was not until the second session that the story of his best-self began to emerge. When the first session began, he spent close to 15 minutes in silence arranging a military scene, using objects and figures depicting him guarding the perimeter of their position at the base of a hill in Afghanistan. Simply arranging the material scene brought up emotions for him and his wife. His wife just watched him, even though the facilitator offered her the opportunity to create a sand tray scene if she wanted. Later, the veteran began to move the characters in the scene, still without talking. Finally, he began

to describe the scene without ever making eye-contact with the facilitator or his wife, only looking at the sand tray. He told the story of being hit with an Improvised Explosive Device (IED) that came off a hill. He also told about a small child who had been hit by an IED and died in his arms as he tried to seek help for her. His wife simply listened and watched him. It was as if the trauma he was describing and the story he was now sharing were part of her trauma story because she said she sometimes felt left out of knowing what he experienced in deployment. Following are excerpts of the story the veteran from family #1 told after he finally finished setting up his sand tray scene:

I still remember the words too, I was ... roger, you might wanna get, uh, every medic that we have on, on, on the file down to the main ... Sure enough right about that time there was about 15 or 20 uh, about 15 or 20 kids started coming in that had triggered an IED that the insurgents had set off. And uh, the, the, the little girl that was wrapped in that blanket, I had to carry her to the expected pile ... she might have gotten hit by the brunt of it, but what I saw underneath that blanket, uh, you wouldn't get that kind of detail in horror movies, let's put it that way.

The problem, as he went on to describe, was that he was haunted by this story and kept replaying it in his mind. Yet he had not talked about experiences like this with his wife, who consequently felt he was closed off to her. This was a key opening of communication and understanding for the couple.

**Steps 3 (Sympathize), 4 (Revise), and 5 (Strategize):** In the second session, a week later, we addressed steps 3, 4, and 5. These steps work to dislodge stuck narratives of trauma that get repeated by the individual and family. Problem-saturated stories and trauma stories can compromise one's capacity to be present in relationships, let alone dream about the future. The goal in this session was to discover and collect the bits of exceptional moments, "little wow moments" that often get left out of the trauma stories. Little wow-moments are spread out in pieces of conversation, nonverbal behavior,

and material representations. They can be antenarratives between the lines of narrative because they are not yet part of a new, stable narrative. The objective of the facilitator is to move from the stuck-in-the-past embodiment of trauma to a re-embodiment of a new living story of the future prompted by the antenarratives. It is important to notice glimmers of possibility and small bets on the future. Further the facilitator needs to notice more than the verbal, and look for ways that materiality calls forth different memories of events, making it possible to construct new sociomaterial alignments. It is these realignments that are telling in the nonverbal behavior, movement of material objects, and fragments of discourse that have not been shaped into a new story.

This session begins with step 3, sympathizing with the old story, but moves into deeper exploration of the negative consequences of the old story (step 4, revise), along with recognition of little moments of exception and strategizing about how to capitalize on these positive moments to move on (step 5). Again, participants do not always progress through the steps in a linear pattern.

Some participants are more open than others to step 3—a stage that is about sympathizing with struggles in the old story and considering how the struggles have benefited them. In family #2, the veteran said that “the VA put me to 100 real quick ... like when I came back, I got a speech impediment, real bad, uh, my memory was ... I was about as functioning an individual as a, like a five year old.” He went on to say that even though the military thought he was “blown up,” he was “gonna try and do whatever to break the cycle ... I finally went through and applied for it [VA benefits] and I got my payback and now I have a giant TV.” This passage depicts sympathizing. He sympathized by acknowledging that his deployment experience indeed severely impaired his functioning, something for which he was rewarded with monetary benefits. But the story did not end there. Even though everyone else seemed to think he was useless now, he was going to revise and “break the cycle.” One little-wow-moment he identified was the act of showing initiative to move on—to apply for benefits and to move on to a life outside the military. Another moment of exception he later identified was his

willingness to accept and feel deserving of the care of his “angel” partner. He came to feel that being labeled as PTSD and as “blown up” by the military did not render him unlovable or make it entirely impossible to move on, even though he needed help.

The revising step 4 is about further identifying negative consequences of the problem to help reaffirm the commitment to change them. The veteran in family #2 explored the negative consequences of being stuck in his old story saying,

After being blown up a bunch of times ... and retired altogether ... If it wasn't for [Angie] I probably would've just locked the doors to my house and stayed ... cause I talked to my dad and my grandpa about it and they're like 'nah, you just get over that stuff ... huh? No I'm gonna talk about it so it doesn't happen to me.

Next, the veteran's partner from family #2 described that the negative consequences of her old character, the purple monster who was an angry mom, were obstacles to pursuing her wise owl, her degree and a new job.

In the latter part of the second session, the family members were able to strategize (step 5)—a critical part that rests on finding the “little-wow-moments” of exception to the usual same old story. Here participants think of specific actions, thoughts, or behaviors that act as anchor points connecting them to their new story and ideal version of self and family. They again used the sand tray to depict the anchor points. For example, the veteran from family #2 described his scene in the second session: “I dropped the news, and for the most part dropped the internet too [because of how they portray veterans and fighting].” He was strategizing about how to avoid the negative perceptions and labels about veterans and see himself with the potential for healthy functioning in the future.

The veteran's wife in family #1 was able to name moments of exception when she felt like a family again. She felt like a family again when they were able to relax and open up the

communication rather than her husband shutting down and her feeling disconnected and left out. She strategized about how to promote more of this feeling:

I would just say we like to do a lot of, we do a lot of small traveling ... Like little mini vacations ... we've actually just learned that we both have to have ... we both have to have like some kind of respite and just vacation time and we've been, we-we utilize our family. Um, and unfortunately, you know, [Andrew's] not real close with his family, but uh, so it's mostly my family but ... Family's very, very supportive ... my Dad loves having a son-in-law that, you know, served, and uh, there just kind of, there is some good bonding that's going on there and uh... so we're trying to...well we're trying to eventually move to be closer to family ... Needless to say we can visit, and uh, I can, I can get some peace.

*Step 6 (Restory) and 7 (Publicize):* A week later, the final of the three sessions began with the facilitator explaining that restorying is about creating a new story of the future with an action plan to get there and commit to. After prompting from the facilitator, participants arranged a scene to depict the new story. The veteran in family #2 described his scene: "Well it's pretty simple in general ... we're happy, uhh, maybe a baby. And I want to be able to drive [as he pointed to a baby and car in the scene]." The daughter interrupted by making a bunk bed in the sand tray and saying she wanted a baby sister in the story. This is another example of the intra-active entanglement of material object and discourse, where the storytelling develops moment-to-moment. Then the veteran went on to describe objects in the scene, "... and do the, the stuff I generally enjoy doing, like uh, I have a real big gun collection that I don't shoot anymore. And I have a boat that I never take out. Be able to stay at home alone [without panic attacks], be able to drive and be able to be the rock I want to be for the two babies." The veteran's partner described herself in the new scene with a new object in the sand tray: "I'm gonna be the assertive lioness instead of the cranky mom." She said she saw herself

“learning to communicate better without, just shutting down. Just ... and walking away from an argument or when we have a discussion.” The daughter, who had been listening carefully to her mother and [Jim] create their new family goals interrupted again to point out the bunk beds. She also described that in the new scene she would work harder to improve in gymnastics.

At the end of this session, the facilitator prompted the family members to write down their new story, with the goals that they wanted to see. In Peterson’s version of expressive writing, self-authoring is grounded in goal-setting theory, which promotes what some people call a growth mindset or grit (Kamenetz, 2015). The goal setting is not to be an unrealistic dream, but a new story that puts together realistic strategies and strengths that they already possess yet have been hidden. Our participants were also told to consider who could be a support system to help them uphold this story as well as to “call them on it” (step 6, publicize). Both families named a support system that included not only their immediate family, but also extended family, friends, and military buddies.

In some ways, the letter writing in ERPs is akin to the Expressive Writing Paradigm. But ERP letter writing is focused on a future story full of goals and hope rather than an old story. Also, we feel that having the family together listening to each other over the course of the sessions is vastly different than individual talk therapies or writing treatments. Listening to other family members’ struggles and, perhaps more importantly, their dreams, creates what Gottman terms “shared meaning” (Gottman & Silver, 1999). Gottman argues that shared meaning is critical for the marital bond and in this case the family bond. For individuals who feel that meaning has been lost or warped, and for families who have felt disconnected, finding a shared dream and new story is potentially uplifting. Further, sharing that dream with a support system may help the dream turn into actual behaviors and events that could substantiate and actualize that dream.

## Conclusion

We began this article by citing the need for military family reintegration efforts that are theoretically grounded and also ones that are practical in delivery, unassuming and nonthreatening to participants, and able to penetrate beyond the superficial. This article introduces the theory and application of ERPs, a family-wide storytelling intervention grounded in a sociomaterial, translational approach. ERPs are designed to promote military family reintegration by countering dominant, problem-saturated stories of trauma, creating new joint family stories and goals, and providing a way to talk about difficult experiences so that family communication can become more open than closed.

ERPs have several unique strengths and areas of potential that warrant further testing and development. First, this is a family-wide intervention that attends to perceptions and stories in the family system, unlike other treatments geared toward the veteran alone. It is powerful for families to participate in joint storytelling and storymaking in order to move from a feeling of separate lives to a joint family identity. Second, there is a need for family-wide interventions focused on post-deployment, given there is arguably more attention on the part of the military to preparing families pre-deployment and supporting them during deployment. Homecomings are celebrated, and then there is often a misperception that the family should be alright now that they are together again. We feel that post-deployment reintegration deserves as much attention as other stages of deployment.

Third, the veterans in our pilot study indeed opened up and talked to their families about topics and feelings that they and their family members felt had been more guarded before. To this we credit the techniques of material storytelling. The veterans showed an openness to and appreciation for the material storytelling intervention. This point alone overcomes a very real skepticism on the part of some veterans regarding interventions they feel are too clinical and stigmatized. Still, we are eager to measure the degree to which family communication changes from a closed to open nature, how satisfaction and wellbeing is impacted, or how much material storytelling is impacted by

resources like a sand tray of objects versus equine-assisted interventions that we are currently employing. Our goal is that the theoretical and practical introduction of this intervention sets the stage for larger scale work, some of which is already underway.

Finally, even though ERPs may seem like a very new, different, and creative type of intervention, they are theoretically supported by literature in material storytelling, restorying, expressive writing, as well as research on family communication during deployment and family storytelling during difficult times. We developed ERPs because we feel there is a need to bridge the gap between theory and practice to make a difference in the lives of military families. However, we do not view restorying as a formal mode of therapy. One common mode of therapy aimed at veterans with PTSD is Prolonged Exposure Therapy (PET), which involves prompting a veteran to become immersed in the memory of a past traumatic event and eventually desensitized (e.g. Foa, Hembree, & Rothbaum, 2007; Rothbaum, 2009). Likewise, in narrative exposure therapy, participants relive the trauma story in successive increments (Neuner, Schauer, Klaschik, Karunakara, & Elbert, 2004). Although it is one of the few modes of therapy approved by the Veteran Administration's Office of Mental Health Services and indeed has merit, PET tends to have low participation rates, high dropout rates (ranging from 29-32%), and is directed at the individual veteran rather than the family system (Foa et al., 2005; Ironson, Freund, Strauss, & Williams, 2002). ERPs are particularly interested in the *family* story and the *future* story, rather than repeated immersion in the trauma.

Using L'Abate's (1990) description of prevention efforts (i.e., primary, secondary, and tertiary prevention, see Segrin & Flora, 2011), we categorize ERPs as secondary prevention. This is because the stressors and challenges of military family life put family members "at-risk," and ERPs may equip them with skills and interventions before more serious crises or dysfunctions develop. The families in our pilot were not seeking other more formal therapy. More formal therapy might be useful for some of the families in our current and future research, and we informed families of that

option. Yet, some of the people who may be attracted to the material storytelling of ERPs or equine-assisted programs may be adverse to or skeptical about the idea of more tertiary, formal therapy, but open to the idea of secondary prevention and skill building programs targeted specifically at their situation. In other words, families might be open to the idea of “telling and showing their story” and “considering how they want to move forward as a family in a new way,” which is essentially what embodied restorying is at its core.

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