There’s a case study I often use in my pastoral care courses. Imagine that you are a pastor having a conversation with an elderly parishioner who is angry and dissatisfied with the church. He complains that the church has declined; it is but a shadow of what it used to be. “Years ago, when I was superintendent of the Sunday school, the parking lot was full, the preaching was superb, and the church was thriving. It’s not like that anymore. So much has been lost.” After patiently and non-defensively listening to the parishioner’s story, you recognize that the man has
faced many losses. He is talking not only about the decline of the congregation but also indirectly about himself and his sense of his own diminishing vigor. What should you do with this realization? Where does the conversation go next?

I use this scenario to illustrate an approach to pastoral conversation that I’ve been teaching for the last 12 years: narrative spiritual care. More and more, I am persuaded that a narrative focus offers students, chaplains, pastors, and other practitioners one of the best resources available for the meaning-making work of spiritual care. Teaching this approach is a delight. As I watch students try out various practice exercises, I always sense an increase in the energy level in the classroom. Sometimes teaching itself becomes a form of narrative practice, as new stories emerge in our shared conversations.

Barbara Wingard and Jane Lester, early contributors to the development of narrative practice, summarize it well in the title of their 2001 book *Telling Our Stories in Ways That Make Us Stronger*. As Indigenous Australian women, Wingard and Lester recognize the importance of their people’s history and the power of being able to tell their own stories, wherein they emphasize the links between grief, loss, and injustice. They also note that Aboriginal people have their own healing ways, their own spirituality, and their own wisdom that they need to recall and document for themselves and their communities. Wingard and Lester illustrate a key narrative principle: that people are the experts on their own stories.

Narrative spiritual care is built on the assumption that humans are shaped by the stories we tell about ourselves and each other. Often we hear and absorb destructive hegemonic narratives, social and cultural stories that limit and hurt us. The narrative approach to care empowers people to resist harmful discourses, to deconstruct them, and to listen instead to voices that speak wisdom and truth. Narrative spiritual conversations invite people to ask liberating questions about their own stories, questions (as Duane Bidwell puts it) through which people can set themselves free.

One narrative practice I teach is called double listening. It begins with the assumption that we always respond in some way to the ideas and events that come up in our lives. Double listening involves creating a space for a person to tell their story however they wish to tell it, which may include recounting a problem or a painful event in their life. As the person tells the difficult story, the narrative caregiver tracks not only the story of the problem or painful experience itself but
also a second story: that of the person’s response to it.

Double listening involves asking questions such as, What did you do in the situation you are describing? How did you feel about what was happening? What ideas, beliefs, or values of yours did this experience challenge? Inviting a person to say more about their response to a situation—their actions, emotions, and convictions—can help them expand their story in significant ways.

In *Maps of Narrative Practice*, Michael White—who cofounded with David Epston the field of narrative therapy and practice—suggests that a person’s response to a painful event or a problem often harbors clues about what the person values. In his therapeutic work, White used double listening as a way to rebuild or expand what he called the “territory of identity”: the sense of self held by a person or a group, which painful experiences can reduce. Double listening involves inviting people into a process of inquiry that helps them remember aspects of their stories and their identity that may have been forgotten or gone unnoticed during a time of struggle—a process that expands their territory of identity.

Double listening differs from traditional forms of pastoral and spiritual care conversations. Active listening, the usual starting point in ministries of care, involves offering a sense of presence to the person as they share their story, noticing when emotions are being expressed, and sometimes reflecting back or reiterating aspects of the story that have been described so that the care seeker knows they have been heard and understood. While active listening is an important way to begin a pastoral or spiritual conversation, double listening adds a conscious effort to hear not only the pain and struggle in a person’s story but also the unspoken dimensions that involve the person’s values and strengths. Similar to the concept Emma Justes develops in *Hearing beyond the Words*, double listening is a way of noticing what is going unsaid in a person’s story. It can assist people in gaining a fuller picture of themselves, one that is not reduced to a problem-saturated narrative.

In *Lay Pastoral Care: A Narrative Approach*, Joretta L. Marshall and Christie Cozad Neuger explain that sometimes a painful story can “take on a more negative life-defining power as it is told and retold.” They note that “we have to be careful how we invite people to tell their stories so that we don’t make their suffering more vivid or defining.” This doesn’t mean that narrative caregiving minimizes a person’s experience of pain, distracts them from it, or tries to get them to look at the bright side of a terrible experience. Rather, double listening involves keeping an ear out for
stories that “exist in the gaps.” Such stories, which may be hinted at but are not fully developed, reveal a person’s strengths, resources, hopes, and faith. Identifying and spending time with these as yet unstoried qualities can give a person a place to stand in relation to their problem—and beyond it.

In teaching double listening, I encourage students to learn the art of asking what Stephen Madigan, in his classic book *Narrative Therapy*, calls “beautiful questions.” A beautiful question invites a person to think about and experience themself and their identity in fuller ways. This is the kind of question pastoral caregivers might ask after listening to someone tell their story.

Double listening involves both hearing a story of loss and longing and wondering about what has been left unsaid. Beautiful questions help fill in the particulars that often reveal people’s abilities and special qualities. In a pastoral conversation, after doing some active listening, a spiritual caregiver might ask questions such as, How did you manage to keep going? What resources did you draw upon? How have you coped with this spiritually? Such questions invite the person to remember and tell stories of their responses, their agency, and their spiritual resources. By inviting a person to share these stories, spending time developing them, and in some way bearing witness to the strengths, values, and aspirations that these stories reveal, spiritual caregivers can help people remember their soul.

The case study I offer my students—in which a parishioner who used to run the Sunday school program is angry that the church is now declining—illustrates the power of beautiful questions. Double listening can provide a glimpse of the man’s unspoken losses, underlying values, and forgotten strengths. At this point, I advise my students, a beautiful question or two may be in order. The pastoral caregiver might try a question like this: “If we could speak with your old pastor from back in the day, when things were so great here at church, and we asked him what your leadership was like when you were the Sunday school superintendent, what do you think he would say? What was it about you and your way of doing things that the pastor or others in the church recognized and celebrated?”

Merely thinking about these questions and sharing the answers out loud with an attentive listener is likely to help the parishioner remember aspects of himself that he’d lost sight of, bringing him back in touch with a fuller sense of himself in the present. Beautiful questions can take a caring conversation about loss one step further than understanding or empathy alone. These questions help people recall
what matters to them, and as such gain access to the territory of hope.

To help my students become more comfortable asking beautiful questions, I assign a role-play exercise: a chaplain in an assisted living facility stops by to visit a resident whose spouse of 50 years died 18 months ago. The chaplain walks in and notices the spouse’s picture displayed prominently. The resident chats a little and then says, “You know, I still miss [name]. We had something special.” The chaplain says something like, “It makes sense that you would still miss [name]. You shared so many years together. Thinking back, what was it about [name] that helped make your relationship something special?” The chaplain listens carefully as the resident answers, picking up on the themes and vibrant language the resident uses to describe the deceased spouse. After this discussion goes on for a while, the chaplain asks the resident a beautiful question: “What are some qualities of yours that [name] would say are special?”

Students leave the room to practice the role-play in small groups led by local clergy and spiritual leaders. Later, the students come back to class to debrief. I ask them to describe how things went, from the perspectives of both the care seeker and the caregiver.

One day during the COVID pandemic, when we were still all wearing masks, we came back to class to debrief the role-plays. A student, Henri, reported that he had taken the role of the assisted living resident in this vignette and that the conversation had gone very well. The other students in Henri’s small group concurred. He said they had reminisced about his deceased spouse, and then the person playing the chaplain had asked the beautiful question. I asked Henri, “Did the question transport you somewhere?”

Henri’s eyes lit up. “Yes!” he said, “I could feel myself smiling under my mask.” This response left me smiling as well. The class could see what a difference the beautiful question made in the conversation. Henri, while playing the role of the resident, had remembered and reexperienced a richer and fuller sense of himself.

Narrative spiritual care is gaining currency in pastoral and practical theology because it is an empowering form of care. Narrative caregivers collaborate—from a posture of respect—with those who share their stories. In a spirit of curiosity, they offer questions to which they do not know the answers. Narrative practice works against fostering dependency on the caregiver by teaching people how to examine
their own stories and find the liberating threads in them. Pastoral theologians now recognize liberation as one of the basic functions of pastoral care, in addition to the classic list that includes healing, sustaining, guiding, and reconciling.

Whenever I teach narrative spiritual care, I am delighted to see students discover how deep and meaningful conversations about stories can be. As this collaborative practice plays out in the classroom, we get to witness liberating moments. Plots thicken as people realize their depth and strengths. Sometimes a smile breaks out, even under a mask.