

Uncovering Bulimia's demanding voice: Challenges from a narrative therapist's perspective

by Kassandra Pedersen

Kassandra Pedersen has a passionate interest in the practice of narrative therapy with individuals, families and groups. Alongside her private practice, she offers narrative workshops, supervision and trainings in Greece and overseas. Kassandra can be contacted by email: kassandrapedersen@gmail.com and via her website: www.kassandrapedersen.gr

Abstract

This paper presents responses to a series of challenges faced during work with a 17-year-old girl who sought to reclaim her life from bulimia's demanding voice. Kiki was at first unwilling to participate in therapeutic conversations, and initial contact occurred through her boyfriend, who became part of an anti-bulimia team. Encouraged by her boyfriend, Kiki, who was determined to 'stop throwing up at last', decided to attend sessions. Through externalising conversations, bulimia was personified as 'The Guy', who ruled her daily life with judgements. Kiki described The Guy's effect on her life and developed a stance resisting his influence. The process of working with Kiki raised a number of challenges: assisting a person who initially declined to participate, overcoming pathologising discourses, resisting the tactics of the problem and its allies, supporting a preferred identity in an unsupportive environment, and keeping Kiki's preferences and beliefs at the centre of our work. This paper explores the use of narrative practices, including externalising conversations, double listening, identifying unique outcomes, and the failure conversations map, to address these issues and support resistance to bulimia.

Key words: bulimia, eating disorders, double listening, externalisation, failure conversations, unique outcomes, narrative therapy

This paper presents an overview of challenges I faced as a therapist during my work with 17-year-old Kiki, who was on a journey to reclaim her life from Bulimia's demanding voice. In this paper I discuss some of the narrative principles and practices that contributed to our therapeutic conversations, as well as some difficulties. In order to highlight the usefulness of certain narrative ideas, I trace the history of Kiki's determination to unmask Bulimia's demands and fake promises. I describe how Kiki was able to undermine Bulimia's whispers in her life, how she positioned herself according to her preferred values and commitments and, finally, how she went on to make a contribution to other people suffering from the constructed 'Hell' Bulimia has set for them.

Notes and transcripts from each session (which were kept in collaboration with the people involved) helped me to accurately describe some of the dialogues and documents that emerged during the therapeutic process. I would like to thank Kiki, both for helping me understand some of Bulimia's tactics and also for collaborating with me in developing some counter practices for resisting Bulimia's influence. I am also grateful to Kiki for her willingness to share aspects of our work together.

My first contact with the story that Bulimia has been telling about Kiki

When I first met Kiki, she had been struggling for almost two years with what psychologists had described to her as 'bulimia'. During this time her weight often fluctuated by up to 10kg. Three or four times a week Kiki felt 'unable to resist' having 'irregular', 'large' meals, which were followed by purging. Kiki let me in on her struggle, which she described as involving a sustained feeling of 'being imprisoned' and 'not being myself'. Kiki also described her understanding of the factors and events in her own history that brought Bulimia/ purging into her life. These included: negative comments that she received at school about her body; a complicated relationship with her ex-boyfriend; strong competition she experienced with the female athletes of her school; and stomach problems that had made her lose a large amount of weight.

My first contact with Kiki's story was not direct. Instead, I had a phone conversation with her 17-year-old boyfriend, George. George called me, quite upset, to ask for advice on how he should handle the situation with his girlfriend. As he explained, he had recently noticed 'significant differences in her behaviour in relation to food' and he did not know how to help her. I asked him about the impact of these changes on his own life and thanked him for giving me a clear picture of

the situation. During our conversation I made it clear that I was not in a position to provide advice without knowing more about the help he was seeking and what kind of help Kiki herself would like. I asked if he and Kiki would like to come together to my office to continue our conversation. He said:

That's the problem, Kiki doesn't want to come. She hasn't talked to anyone about her problem, not even to her parents... I accidentally caught her throwing up. She doesn't believe that she can do anything about her problem. Neither she, nor anyone else. How can I persuade her to come?

I told George that I was impressed by his willingness to stand by Kiki and I suggested that he come to an appointment to discuss:

- 1. his concerns about Kiki
- the kind of help he would like to provide to Kiki during this difficult period of her life
- 3. suitable ways he could think of to invite Kiki to join a shared effort in resisting the problems.

There was enthusiasm in George's response: 'Yes, let's try that!'.

Therapist's challenge

How can I invite a person to take part in a therapeutic conversation when they are not willing, despite the fact that it concerns their life?

Kiki refused to come to the first appointment. As she explained to me later, Bulimia had convinced her that no one could ever understand the 'devious ways' it controlled her life. The voice of Bulimia threatened that if she revealed her experience, others would see her as having a 'disordered mind'. Bulimia tried to discredit every thought of escape from the prison it had built for Kiki, characterising every effort as 'pointless'. As a result, Kiki felt discouraged from looking for allies against the difficulties she was going through.

Since taking narrative principles into my practice, I have caught myself questioning many taken for granted ideas about therapy. For instance, I am familiar with common professional assumptions around a person's refusal to attend therapeutic sessions: he is in denial, she is not mature or strong enough, he is not ready to face his 'real self' or 'problem'. Challenging these pathologising understandings, my narrative voice asked: how can I keep Kiki's preferences and beliefs in the centre and open opportunities that are

currently being blocked by Bulimia? Double listening (White, 2004) emerged as an answer. The use of this narrative skill created an opportunity for me (and consequently for George and Kiki) to have therapeutic conversations in spite of the isolating influence of Bulimia and the pathologising discourses that are commonly associated with it.

In our first appointment George explained to me that:

Kiki has stopped eating, or every time she eats, she then disappears into the bathroom. She has become isolated and she's constantly moody. I don't see why she's so insecure and refuses any kind of help.

I could see that George was Influenced by common pathologising language, using a description that attributed Kiki's position, and her refusal to seek help, to a negative quality of hers: her 'insecurity'. It seemed that not even George remained untouched by the self-blaming influence of Bulimia. I wondered, if Bulimia was affecting both Kiki and George, could this be an opportunity for united action?

These observations led me to a new field of exploration. Following the idea of united action against Bulimia, I wondered what meanings I could locate in George's concern for Kiki. Meanings such as these often remain hidden behind a problematic story. The use of 'absent but implicit' (White, 2000) practice opened the door for the development of alternative stories about Kiki's identity, and for the potential of collaborative resistance. I wondered what George's concern might convey about the qualities he appreciated in Kiki. Was it possible these qualities were being underestimated due to the presence of Bulimia in her life?

Using double listening, I remained in contact with the principle of narrative therapy that appreciates people's lives as multi-storied. The problem-saturated stories about Kiki (as initially described by George) could not include or touch all the possibilities of her identity and life. I knew there were alternative stories about the kind of person Kiki is, stories that would give appreciation to her competencies, her intentions in life and her values. Indeed, George shared with me stories that described the 'innocence', 'joy', 'kindness' and 'spontaneity' that made Kiki stand out for him from all the other girls at school. As I watched George being deeply affected by the rich description of these stories, I felt reintroduced to Kiki. This time on different terms; liberated from Bulimia's claims on her identity.

As a second line of inquiry, I asked George about what his concerns said about his relationship with Kiki. George responded by saying that he appreciates 'the love' and 'trust' they show to each other. He claimed that these qualities

were 'very important' to him and Kiki, and he was determined not to lose them. After explaining his determination not to be deprived of 'love' and 'trust' by Bulimia, it became easier for George to proclaim what he intended to stand for in his relationship: 'I want to stand by Kiki as an ally and protect our relationship from the problems'.

George and I summed up the points he considered meaningful for both him and Kiki. George planned to address these points when inviting Kiki to become part of the therapeutic process.

George intended to talk to Kiki about:

- · the concern that accompanies me lately
- · all the things I appreciate about her
- how important it is to me to defend our relationship from the practices of any kind of problems that get in the way
- my willingness to be informed about what Kiki considers appropriate and useful so we can stand together as allies against the problem.

This approach made it possible for Kiki to speak with George in a language different from the one Bulimia was using. George adopted an anti-Bulimic language that was not threatening to Kiki as it:

- refuted the pathologisation of Kiki and the situation she was going through
- · counterbalanced the shame
- made alternative and neglected aspects of her identity visible and honoured them
- tuned into her intention to defend her relationship with George
- made space for Kiki and George to join in decisions about ways of resisting.

This approach prevented George and Kiki from reproducing dominant, problem-saturated stories and instead, provided opportunities for them to respond together as an anti-Bulimic team.

The initial request and externalising conversations

Kiki decided to come alone to the next sessions, determined 'to stop throwing up at last'. Following the practice of externalisation (White & Epston, 1990), we identified the important things in her life that the practice of vomiting had stolen from her. The 'list of stolen goods' included her

disposition, her health, the connection with her parents, the openness in her relationship with George, her concentration at school, her free time, her strengths and her hopes. Then, I asked Kiki to define what it was she was struggling with, using an experience-near name. However, her response reflected the dominant discourse of 'expertise and professional knowledge'. 'I've heard it's called bulimia' she said. I explained that this is a definition that I am familiar with because I have encountered it in psychology books, but I was not sure whether I understood what it meant to her and how this corresponded with her own experience. Therefore, I asked:

Kas: If you described to me the voice of Bulimia as a person, what kind of person would that be? A man, a woman, tall, short?

Kiki: It would be a tall, well-built and sinister 'guy' that tells me stuff...

Kas: What is the thing that this guy screams the loudest, that he thinks is most important?

Kiki: He tells me it's important to lose weight.

Kas: What name would suit the situation the 'guy' has put you into when he yells at you that it's important to lose weight?

Kiki: Hell...

Kiki said that she was tired of living in 'Hell' and that she was thinking of moving out to a different area. In her preferred country there was no space for 'The Guy'. Even if he intruded occasionally, they would only ever have a 'casual' relationship, and his words would leave her indifferent. In this preferred country, Kiki is with her friends and parents. She hangs out with the people she loves and they have ice-cream together. She has got rid of vomiting. She enjoys her love with George. She chases her dream to enter university and she is happy. The personification of Bulimia, through externalising conversations, was one of the most influential parts of our talks. In particular, Kiki's linguistic disassociation between herself and Bulimia allowed her to:

- distance herself from notions of pathology and shame
- explore the consequences of Bulimic practices responsible for the construction of 'Hell'
- · declare the extent to which this Hell assists or harms her
- evaluate the kind of relationship she would prefer to develop with The Guy.

Therapist's challenge

How can I respond as a therapist when the initial request of the person becomes restricted or hidden behind the tactics of the problem?

In the sessions that followed, Kiki pointed out small acts of resistance she engaged in on a daily basis – actions against the Bulimic practice of vomiting and the values that Bulimia represented. However, as Kiki was so strongly influenced by The Guy, it was difficult for her to acknowledge these acts as 'unique outcomes' (White & Epston, 1990). In other words, The Guy continued to rule her daily life with judgements that undermined her acts of resistance and promoted a sense of moral failure.

It was clear to me that our conversations were at risk of being sabotaged by The Guy. This idea made me wonder what could make possible the stance that Kiki was desiring for the life she wanted. Initially, Kiki's goal for our work together was limited to rescuing herself from the Bulimic habit of vomiting. I recognised this goal as a *starting point*. But how could the idea of having 'a stance' grow richer and richer, when The Guy was contributing to so much self-surveillance and guilt?

Before using maps to place emphasis on alternative meanings it seemed critical to deconstruct the tactics, methods and philosophies enacted by The Guy. Kiki agreed it was time to shed light on the kind of Hell The Guy has determined for her. It was clear to Kiki that the basic demand of The Guy had to do with weight loss. In previous meetings, Kiki had described the circumstances and events that contributed to The Guy's existence. I was curious to hear more about her understandings regarding the social and cultural foundations on which The Guy relied in order to elevate weight loss as a priority in her life. Kiki described to me the pictures of thin bodies that were constantly featured on several blogs she used to read. When speaking about the different ways the blogs urged readers to follow the example of a thin, 'successful' and 'beautiful' figure, Kiki reached the conclusion that the ideas of The Guy reflected widespread societal expectations around bodies.

By questioning Kiki about the impact of these images on her life, my intention was to contextualise The Guy, and to identify him, not just as a product of her mind, but also as a representative of social demands. My main concern was to break away from an individualising approach to Kiki's challenges. An individualising approach would have me locating responsibility for The Guy's influence on Kiki's 'weak' identity. It is likely that such an approach would continue to nourish feelings of guilt and restrict opportunities for further illumination of unique outcomes in line with Kiki's values and aspirations.

Having gained a sense of space from Bulimia, Kiki decided it was time to explore the tactics The Guy used to coerce her into trying to achieve impossible social ideals. The conversations that followed in the next sessions were inspired by the 'failure conversation map' (White, 2002). This map assisted us to put emphasis on the meanings of acts that do not fall in line with unhelpful socially constructed expectations or ideals.

To begin with, I wondered whether The Guy suggested to Kiki specific methods for losing weight. Kiki listed a series of strenuous efforts she made every day in order to keep The Guy satisfied. These efforts included: limiting the consumption of calories to 500 per day, intense exercise, avoiding 'forbidden food', frequent weighing, avoiding dinner plans with friends, isolation during meal time and obsession with the 'magic number 52' on the scales. I asked Kiki what she would call all the efforts she makes to abide by The Guy's' expectations: suggestions, rules? Kiki interrupted and responded loudly, 'you're wrong! They're neither suggestions nor rules; they're laws.'

At this stage in our conversations it was rare for Kiki to offer examples of how she had questioned or resisted The Guy's 'laws'. However, when she did give an example, I would always follow up with further questions. For instance, when Kiki said, 'I sometimes, very rarely, eat normally', I asked her how The Guy reacted to her normal eating. Kiki's description of the subsequent attack made by The Guy was particularly vivid. The dialogue that follows reveals one tactic of The Guy.

Kas: How tolerant is The Guy when you sometimes relax from all these demands?

Kiki: He's not tolerant at all. He doesn't like it at all. If I go over the calorie limit, then I feel disappointed. I say, 'now it's over'.

Kas: So, The Guy does not recognise any right for you to relax, eat something you want, or question his authority with all these 'laws'?

Kiki: He gives me no rights. He's disappointed with me.

Kas: When he does not recognise your right to have an opinion on what you eat or how you will spend your daily life, how does he express his discontent?

Kiki: He says that I am a failure and that I'm just not good enough to obey him. He says that I have let him down.

Kas: And how is this for you, to feel under the ever-watchful eye of The Guy, who is constantly sizing you up?

Kiki: That brings me feelings of guilt.

Kas: So, this is it!

Kiki: This is what?

Kas: This is how he manages to make you feel stuck in Hell.

Now I understand. I've always wondered how he does it.

Kiki: Well, yeah this is how he does it.

Kas: And what would you call this? Is it his tactic, his trick, his method? What is it?

Kiki: His tactic.

Kas: What name could we give to his tactic?

Kiki: Guilt. This is his tactic. Guilt!

This conversation sparked our interest in exploring whether there were any other sneaky tactics hidden in The Guy's ways of interacting with Kiki. We managed to uncover one more, which Kiki called 'The Dilemma': 'either you eat and then vomit or you will not eat at all'. The Guy blackmailed Kiki with The Dilemma every time she made an effort to regain his trust with 'a second chance'. He used this strategy to convince her that she needed to exercise her willpower and self-control in the service of becoming a worthier and more lovable person. Towards the end of the session, Kiki mentioned that this conversation had been one of the most illuminating experiences thus far in the journey towards regaining her life. It was the first time she recognised 'Hell' as a mechanism with a lot of cogs that work in a circle. We noted the vicious circle of Hell works in the following stages:

- 1. The Guy's' demand to lose weight
- 2. the laws
- 3. moments of giving up/resisting the laws
- 4. the tactic of guilt
- 5. the second chance and the tactic of The Dilemma.

That was the Hell. I hadn't thought of it like this. I thought vomiting was the problem. Now I see that vomiting is just part of the Hell. There are more problems before that.

I was very interested in stretching our explorations further in order to deconstruct several dominant social and cultural discourses that Kiki referred to, including notions of 'perfection', 'thin body', 'happiness' and 'success'. I was also keen to explore her understandings about the foundations of these social assumptions. I wondered if Kiki had noticed any particular social, political or economic interests that endorse

the authority of these dominant ideas. I also wondered if Kiki had ideas about how would she like to position herself in relation to these discourses.

In response, Kiki stated that she did not particularly want our conversation to take that turn. Thus, in my efforts to retain a 'de-centred' (White, 2000) stance, a stance that values a person's ability to define the problem and the focus of the conversation, I invited Kiki to collaboratively set the goals of the therapeutic process. Now the goals were not only about limiting the vomiting, but also the effort to establish a balance in her relationship with food that would prevent possible weight fluctuations from defining her mood, her relationships and her activities. In other words, we came to the conclusion that it was time to explore what Kiki wanted in life and agreed that our conversation should take a direction that supported that. This path would entail further exploration of Kiki's own strategies and allies that would help protect her from the tactics of The Guy.

Exploring alternative stories of Kiki's life

During our inquiry into The Guy's personality, Kiki described him as 'inhumane', 'unfair' and 'irrational'. Unmasking the plans he had for her made it possible for Kiki to strongly oppose the 'attitude of submission' that The Guy asked from her. As Kiki gained distance from The Guy, it became possible for her to detect sparkling moments in which she broke the routine of self-assessment. It also became possible for her to engage in some small (but significant) initiatives of rebellion:

- · I had a forbidden kind of food and I enjoyed it.
- · I didn't throw up despite feeling full.
- · I didn't feel so bad when I weighed myself.
- · I didn't mind so much having to wait to digest my food.
- · I chewed my food more.

These were all unique outcomes that Kiki characterised as actions of resistance. 'Landscape of action' (White 1995, Freedman & Combs 1996) questions contributed to thickening the details of these accounts. Further, 'landscape of identity' questions (White, 1995; Freedman & Combs, 1996) revealed the abilities and special knowledges she mobilised in order to achieve these steps. These are some of the questions that arose in our conversations:

- What did you have to invent as a way of limiting the influence of The Guy?
- Which ideas that The Guy imposed upon you did you have to disregard?
- · How did you manage to disregard these ideas?

- What knowledge relating to the way the body functions did you recall at times of emergency?
- Were there any other things that helped you? Any places, people or times of day?
- What kinds of feelings did you have when, according to the laws of The Guy, you were 'overeating'? How did you handle these feelings? Did you try to 'sit by them'? Did you try to open a discussion with them, deal with them, share them, soothe them, relieve them, or anything else?
- Did you have to recall anything else about yourself or about The Guy's intentions?
- · Which alternative desires did you honour?
- When you didn't let yourself starve (despite The Guy wishing you to starve), did you honour your desire to do something about your hunger?
- Did you use any strategies to discern whether what The Guy tells you is in your interests or whether he just wants to manipulate you?
- Is it new, this ability to sense when The Guy tries to deceive you and take your security measures?
- How did you start realising that there is an option of not obeying 100 per cent? Did anybody else help you with this?
- · How was it for you when you used all these skills?
- What might this say about you as a person things that The Guy would probably want you to forget?

Including others

The inclusion of others was an important part of our conversations. Circulating preferred stories among friends and family enabled Kiki to see herself standing in solidarity with others in this preferred territory, and these connections provided a great deal of support for the actions she was hoping to take. Below are some of the questions that contributed to thickening 'the actions of resistance' and building her support team.

- Who else was present when you thought of questioning The Guy?
- Were there any people who, in some way, limited the power of The Guy or silenced his voice when he whispered to you?
- Who consciously supported your efforts? Were there any people who helped you without knowing it? How did they do it?
- Did having all these people by your side as allies in your endeavour make a difference to you?

Gradually, by exploring these questions, Kiki was able to perceive a multi-voiced sense of her identity. She started to describe herself as a 'clever', 'competent' and 'decisive' person. Kiki recognised her own beliefs and values and saw that these differed from the value system that The Guy promoted. 'I don't agree with the stance of judgement', 'I don't believe in lies. I believe in honesty' and 'I'm not willing to give up on my freedom, carefreeness and joy'.

I was especially interested in tracing the history and meaning of the values we had discovered. I wanted to explore how Kiki had been introduced to them and how they had become so important for her. Kiki began to speak of the period before she was trapped in Hell, 'when then The Guy didn't have the upper hand'. As she was describing this time, many stories emerged that represented her connection with her values. Kiki was excited to share stories of 'joy' and 'freedom' that included 'loving family moments', 'happy gatherings with friends' and 'experiences of playfulness with my boyfriend'. When I asked Kiki to connect all these stories into one common plot for an alternative direction in life that suited her, the idea of 'reclaiming my happiness and carefreeness' emerged. The next sessions were focused on enriching the preferred story of 'reclaiming happiness and carefreeness' (past, present and future). Kiki's decision to come to our first session, as well as the disclosure of her 'secret' to George and her parents, were recognised as significant steps towards the achievement of this preferred story.

These hard-won steps were summarised in a letter I wrote in collaboration with Kiki. Using her own words and language, we wrote a letter to her parents to inform them of Kiki's commitment to this new story. With the use of the letter, her parents acted as an audience who would support a declaration of Kiki's preferred identity. In re-affirming her story to an audience (her parents), Kiki's claims became authenticated and gained strength.

To invite further support for Kiki's preferred story, I asked her a series of questions after she had given the letter to her parents:

- What was important to let your parents know about when you gave them the letter, and why?
- What do you think your parents may have appreciated in you as they were reading the letter?
- What could this letter show them about the importance of the steps you took?
- Do you think they felt surprised when they read about your achievements?
- Do you think they might have predicted that you would find a way of taking all these steps?

- What might you have known about your parents'
 willingness to stand by you, or their ability to understand
 you, that made you hope it would be helpful to give them
 the letter?
- Tell me a story that would help me understand ways in which they have supported you.
- You've allowed your parents to become more engaged.
 What difference do you think this could make to the sense you have about yourself, your endeavour and your life?
- What might it mean to your parents that you decided to inform them about your achievements and involve them in this critical point in your life?

Therapist's challenge

How can I, as a therapist, contribute to the illumination of the preferred story, when the practices of resisting the problem seem unimportant to the client or are undermined by the problem itself?

Despite the developments, it was not been easy for Kiki to ignore The Guy's voice. In cases like this, treating my position in the therapeutic context as not only 'de-centred' but also 'influential' (White, 2000), has proven crucial for the recovery of fragile stories of resistance. Below is an example of how one of the most central narrative concepts about a therapist's positioning drove the therapeutic conversation when some of Kiki's steps were at risk of remaining invisible.

Kiki: I threw up and I don't know how to tell George...
I want to tell him, but I can't...

Kas: Why is it important to you to tell George?

Kiki: Because we've agreed that we'll say everything to each other, the entire truth, that we'll be completely honest with each other.

Kas: Let me ask you something. Out of the 24 hours of the day, how much time did you spend on throwing up?

Kiki: One hour.

Kas: And out of the other 23 hours, for how long was The Guy telling you that you have to watch your weight, stop eating, throw up what you eat, weigh yourself, and generally imposing all the laws that you have described to me?

Kiki: He's always there, near me, telling me what to do.

Kas: And what about the remaining 23 hours? Did you obey him?

Kiki: No...

Kas: Out of the seven days of the week, how many did you throw up?

Kiki: Only one, the one I told you about.

Kas: What about the rest of the days? Didn't you throw up? Didn't you obey him?

Kiki: No, I didn't obey him.

Kas: If you didn't obey him, then what would you say that you did? You resigned? You resisted?

Kiki: I resisted.

Kas: Which of your abilities and strategies that we talked about the previous time, helped you resist him? [She describes them to me].

Kas: So, you're telling me that out of the 24 hours of the day and the seven days of the week during which The Guy keeps telling you what to do, you managed to resist him 23 hours of one day and the 24 hours of the remaining six days?

Kiki: Yes, I had never thought about it like that.

Kas: If you tell George that you threw up this one hour and you don't mention that the remaining hours and days you managed to resist, would you tell him the entire truth or half of it?

Kiki: Rather half of it. I had never thought about it this way.

Kas: If George learns half the truth, would that honour or undervalue your effort?

Kiki: It would undervalue it.

Kas: What do you think The Guy would want? Would he want your effort in taking steps to reclaim your happiness and carefreeness to be honoured or undervalued?

Kiki: To be undervalued...

Kas: What do you prefer? Would you want your effort to be honoured or undervalued?

Kiki: To be honoured

Kas: Then what could you say to George about your week

in a way that would bring out the *entire* truth of the story, not half of it, and that would honour your effort in taking steps towards reclaiming your happiness and carefreeness? About which things should George be informed?

Kiki: I could tell him about all these things I achieved during the week, that sometimes I might throw up when The Guy takes control, like this time, but I'm human and I'll rise again.

Therapist's challenge

How can I respond as a therapist when problems ally with other problems?

Another challenge that tried to poke its nose into my sessions with Kiki is represented by structural reasoning. According to structural reasoning, Kiki came to me with one problem and if, over the course of our work, she came to describe additional problems, this would call my work into question. However, from a narrative point of view, problems often ally with other problems and go on to develop a network of mutual support.

Kiki took me by surprise the day she said 'I don't want to believe that I'm 100 per cent worth reclaiming happiness and carefreeness because I'm afraid that this will make me gain weight'. Using externalising language I asked Kiki if 'the *Fear* of gaining weight' was familiar with The Guy. She told me that they knew each other very well and that they've been working closely for a long time on the project of 'making Kiki's life difficult'. Here are some of the questions that shed light on the cooperation between The Guy and Fear.

- Who introduced you to Fear? Or did you go out looking for him by yourself?
- How did The Guy introduce you to his partner, Fear? How did he make him attractive to you?
- Were there any instances, circumstances or situations in your life or in general that The Guy may have exploited to promote Fear as an allegedly sensible choice? What did he tell you about his profile?
- What kinds of promises did the The Guy and Fear make to you to convince you to cooperate with them during the hard times you've gone through?
- · To what extent did they keep their promises?
- Why didn't they keep them? What other plans do they have for you? When will they be able to say that their mission has been accomplished that their partnership has reached its end?

- When The Guy and Fear promised you all these things during a time when you were in a vulnerable position, would you say that they sounded friendly, polite, hostile or anything else to you?
- What things did Fear have to convince you of regarding your value as a young woman, a girlfriend, a friend, a daughter, a student and a person, in order to obtain more space in your life?
- What other societal ideas are The Guy and Fear's collaboration founded on?

According to Kiki, the use of externalising language in questions like these made it possible for her to locate 'the Fear of gaining weight' as separate from her own identity. Externalising language also assisted her to unpack the strategies that Fear and The Guy were using. For instance, the unmasking of fake promises: claims that Fear and The Guy would make her like what she saw in her mirror, that she would be more esteemed by her friends and that she would be more attractive in George's eyes. Their ultimate promise was that they would make her very happy.

Contrasting the problem's example of friendship with preferred versions of friendship

After exploring the collaborative relationship between Fear and The Guy, I interviewed Kiki about her position on the version of friendship they offered her. Kiki explained the practices that Fear and The Guy used and stated that she does not trust their friendship anymore. They approached her when she was vulnerable, when she was facing challenges presented by school, friendship and love. They used a disguised face to take advantage of these circumstances and seduce her into believing their promises of shaping her into a more lovable, more attractive and happier person. In times of despair they demanded that Kiki invest her hopes in them.

However, they did not warn her in advance about the 'package of laws' they had prepared for her. Nor of the 'losses' that would follow. Never had they asked her permission for these losses. The terms of their friendship had a concealed footnote, none of the promises that Fear and The Guy made would be kept if Kiki didn't obey without any complaints. Finally, although Kiki made every possible effort on a daily basis not to disappoint her 'friends', they never gave her credit. Kiki said, 'I thought that if I reached the magic number 52 I would be satisfied with myself. But when I did it, The Guy told me I had to lose two more kilos'.

As Kiki had distanced herself from the friendship with Fear and The Guy, I invited her to present alternative stories of preferred experiences of friendships that she might have in her life. We then had powerful conversations about her relationship with her friend Teta. Kiki reported values and qualities in their connection such as: a lack of criticism, mutual understanding, spontaneity, love and laughter. Qualities that stood in stark contrast with The Guy's ideas and beliefs about friendship.

Our following meetings were particularly productive regarding the documentation of new unique outcomes and steps towards resisting the fear. Kiki said, 'I went on a walk instead of dealing with the fear', 'I thought, what I need is only some time to digest my food', 'I created my own diet program that got me out of The Dilemma'. For the rich development of all these initiatives, I utilised the 're-authoring map' (White, 2007), which highlighted Kiki's abilities, skills, special knowledges and strategies in the context of what was important to her in life.

The fear-o-meter

As Kiki was stepping into a preferred life through the counselling process, I asked her to mark on the fear-o-meter Fear's power and intensity of influence at four stages:

- 1. before we started our work together
- 2. halfway through our meetings
- 3. currently
- her estimation of the period after the end of our meetings.

The fear-o-meter is an instrument that measures people's fears on a scale of zero to ten. Kiki was very glad to announce the weakening power of Fear from ten to six, then eventually down to three (where she could tolerate it staying in the future). One of the purposes of this metaphor was to emphasise that Fear does not visit Kiki exclusively, rather, he introduces himself to a lot of people, taking different forms. The metaphor also emphasised that Fear's intensity is not stable, and that its intensity could become an object of ongoing assessment by Kiki.

Therapist's challenge

How can I support the client's preferred identity when their environment, despite good intentions, reproduces structural, taken for granted ideas that support the problem? One day, Kiki came to see me quite disappointed. Her boyfriend had told her that The Guy she was referring to was in fact not separated from herself: 'you are The Guy, so why are you doing these things?' This reminded her of the attitude of a psychologist she had consulted in the past who had stressed that her situation was really serious and that she might need pills. Kiki explained to me that the way they talked about what was happening to her made her afraid.

It is not uncommon for people in a client's environment to fall into the trap of reproducing dominant ways of thinking about problems. That is, locating the problem within the person. From a narrative perspective, there are many ways to speak about identity and some ways are more empowering than others. In this case, I chose to support a narrative approach that locates the problem outside the person, an approach that privileges people's own knowledges and invites people (as authorities on their own lives) to lead the meaning-making with respect to their own identity and story.

I put a simple question to Kiki: 'out of all the available ways one can find out there to talk about what you are dealing with, which do you prefer? The way suggested by George, the way suggested by the psychologist, or the way you came up with, that is referring to The Guy? And why do you prefer this way?' The purpose of this question was to invite Kiki to dislodge the hegemony of 'professional knowledge'. This narrative question also worked as an antidote to pathologising explanations of her experience.

Therapist's challenge

How can the client be prepared for the possibility of problems returning even more strongly?

As Kiki had established a preferred 'casual' and 'distant' relationship with The Guy and Fear, I found it important to forecast a possible return of them in Kiki's life when conditions allowed. I was careful to prepare the ground so that if Kiki succumbed to The Guy and Fear's demands, she would not construct a story of failure. I asked:

- What obstacles or dangers do you think you might find on your way or in the future?
- Which strategies do you think The Guy and Fear might use this time to trick you? Which situations might they exploit?
- Do you think that The Guy and Fear will have an impact on you with the same intensity or will certain aspects of your experience be different this time?
- What might have changed for you this time when they try to reach you? What have you learnt? What different strategies will you have this time?

Document of lists

Our discussions about preparing for a possible return of The Guy resulted in the production of a document in the form of five lists:

- 1. The Guy's tactics
- 2. The Guy's allies
- dangerous places, thoughts, ideas, situations and conditions
- Kiki's allies
- 5. Kiki's strategies.

Kiki appreciated the collaboration involved in producing this document, which summarised notes and transcripts that we kept together during the therapeutic journey. Here are those lists:

1. The Guy's tactics

- · imposing the idea that 'you have to lose weight'
- · imposing the laws
- imposing The Dilemma that 'you will either eat nothing or • eat something and then throw up'
- undermining my sacrifices or losses (he steals my strength, my concentration for studying, my good mood. I've also had bowel problems, wounds on my hands and more)
- · not accepting my right to give up his laws
- attacking my personality when I honour my other desires such as hunger
- disregarding my values (carefreeness, freedom, open relationship with my parents and George, an uncritical attitude and more)
- taking advantage of my hard times, my hopes and my dreams for company and joy
- introducing himself as a friend by making promises to me such as:
 - I will help you to not lose your friends
 - I will make you perfect and then you will be happy
 - I will fix you in a way that means you will like yourself and others will like you too
 - I will make you even more attractive to George's eyes
 - I will make you feel comfortable in front of your school's girl athletes

2. The Guy's allies

- · The Fear of gaining weight
- Dangerous places, thoughts, ideas, situations and conditions
 - · an unstructured diet and eating at unstable hours
 - comparing myself to my thin friends mainly when they are close to George
 - · weighing myself daily
 - · talking to my friend about our bodies and diets
 - · the thought of 'having to fit into these jeans'
 - the thought that 'I need to have a thigh gap'
 - · comparing myself to the girl athletes at my school
 - · sticking to magazines and blogs with thin girls
 - the most dangerous season is summer, with the shorts, swimsuits, etc.
 - · the most dangerous place is the beach
 - the ideas that are promoted out there: 'a thin body means happiness and leads to success' and 'they will perceive me as nicer if I'm thin'

4. Kiki's allies

- my parents
- George
- · my friend Teta and my other true friends
- Kassandra
- · the people out there who don't like judging others
- the knowledge that the practice of vomiting is just one part of the Hell together with the other cogs in the cycle of its work
- the knowledge I have on health and nutrition, for example that eating every three hours helps our metabolism
- my ability to distinguish my voice from the voices of The Guy and Fear, my ability to concentrate on studying, my cleverness, the power of my will, my sensibility, my insistence and my determination

5. Kiki's strategies

- · make my own plans for my diet
- · avoid forbidden food such as ice-cream and pizza
- · remind myself that my body needs time to digest

- · sit at the table to eat
- · do not think whether The Guy is angry at me
- · do not deal with what he says and his issues
- do something to keep myself busy, for example, go for • a walk, read or talk to my friends
- · remind myself that I don't need to overdo it
- remind myself that The Guy and I do not have the same plans for my life
- remind myself that I don't want to be manipulated by The Guy
- think that 'even if I'm not perfect, so what?'
- think of all the things I care about (e.g. carefreeness, freedom) and the allies I have (e.g. my parents, George, my friends)
- remember the words of my favourite people telling me l'm just fine.

Linking lives and making contributions to other people facing similar challenges

Three months after the conclusion of our sessions, Kiki informed me of the latest positive developments in her life. Kiki had managed to move away from The Guy's practices: she had a great summer with her boyfriend and friends, she was happy to regain her stolen enthusiasm and concentration at school, and she was grateful to reconnect with her parents. Because of these promising developments I was surprised when, a year later, she called to invite me for a coffee. I asked her if the reason for our meeting would have to do with The Guy and she made it clear that it partly had to do with him but mostly she had news to share with me. At that moment, my curiosity had reached its peak!

The next afternoon we met at a quiet coffee shop. After we sat down Kiki informed me that she was made even more aware of the advantage of having the archive of her learnings available when The Guy attempted to come back into her life about two months ago. She explained that she was going through a stressful period preparing for exams and that changes in her schedule had disrupted her nutritional habits.

During this time of stress, she used the lists as a reminder of her accomplishments and skills and this re-energised her. It put her in touch again with the preferred territory of her identity and enabled her to reclaim an understanding of her competence that The Guy was once again trying to steal.

Something else happened at this time as well. Kiki saw a girl at school talking and acting in ways that reminded her of the attitude and the tactics of The Guy. Kiki decided to approach the girl and talk to her about her own experience, hoping that the girl would trust her and do the same. Kiki decided to pass the lists on to her in order to open up opportunities for the girl to reclaim her life. Finally, Kiki expressed her wish to help other people who face similar challenges. I assured Kiki that, with her permission, I would spread her legacy and use the list with other people I meet in my counselling work. We also agreed that Kiki would be welcome to come whenever an 'outsider witness' was needed to share her story and support the lives of others.

Reflections

In this paper I have tried to convey the range of challenges I met as a therapist in the process of supporting Kiki to reclaim her life from the voice of Bulimia, and escape from the 'Hell' in which it imprisoned her. Along with these challenges came a profound opportunity to reflect on the narrative ideas and practices that played a key role in opening possibilities

for useful therapeutic conversations. I have also attempted to describe the process of deconstruction that took place during Kiki's therapeutic journey regarding the operating system of 'Hell', Bulimia's strategies and allies and the supportive frame of development.

The process of developing alternative storylines around Kiki's skills, methods of resisting, values, hopes, aspirations and support system have also been presented. Kiki's commitment to share her hard-won knowledges and realisations provided me with plenty of motivation while I was writing this paper. My work with Kiki has been a landmark for me on a professional and personal level. The challenges I met as a therapist led me to cultivate a systematic internal dialogue with myself about the intentions behind each question I posed. It became clear to me that these questions were grounded in a philosophical framework. This introspective investigation helped me understand that narrative therapy is not only defined by its techniques, but by a belief system. It is as much a philosophy as a form of therapy. In this way, I feel that this therapeutic journey with Kiki had different passengers: Kiki, George, Kiki's parents and me, who were sometimes exploring unmapped areas together, and sometimes exploring separately but in parallel.

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