

A forward and backward look on co-research by Victoria Marsden

Dear David,

Thank you for sending me the documents of the co-research that Chloe, Lona, you and I engaged in around 2003. I have chosen to write to you about this in letter form as this is how our conversations went over that time. Some fourteen years later, this conversation definitely feels like a lifetime ago. In some ways it was, as I now live a very different life. My life is now my own, that is, my life is no longer controlled by anorexia, perfectionism or any of its other co-conspirators.

I often marvel at the impact the conversations that you, Chloe and I had on the shaping of a life outside of what anorexia had in store for me. When I think of what was most significant during that period of my life when I was wrestling with anorexia for my very soul.

'The three musketeers' as we called ourselves, holding anorexia's demands up to the light on a daily basis was definitely one of the most important. Although I am now astounded at how I managed to go about my daily life under such scrutiny from anorexia/perfectionism, I remember how much I looked forward to the sound that an email had arrived from you and Chloe.

The hours we spent 'talking' were some of the most profoundly shaping experiences of my life to date. Chloe and I were "the canaries in the mine" (Gremilion, 2003), living out the obsession our society has on weight and appearance. We had been ensnared by the most evil of nets, that of anorexia, and we were fighting side by side against it.

I was struck by the tentativeness at the very beginning of this conversation. Chloe, Lona and I, all educated and knowledgeable young women struggled to speak into this space that you were opening up David. I can hear the fear of anorexia and perfectionism's retribution sitting behind our initial words. I can also see the irony in perfectionism asking us to remain silent until we could contribute to this conversation perfectly.

Something that stood out for me though is how quickly we found our voices at the thought of perfectionism silencing the others. We all made use of the words 'morally outraged' at various points and experienced strength and courage when sharing in others standing up to perfectionism and refusing to remain silent. We also spoke of 'fury', 'anger' and 'outrage' at how anorexia and perfectionism were treating each of us. You called this "the secret weapon of narrative therapy" David and I think you were onto something important here.



Bearing witness (Weingarten, 2000) to the atrocities that anorexia subjected Chloe to over the five years that we talked offended me in such a way that I felt I had no moral choice other than to stand up for her. It was my standing up for her, and Chloe and Lona in turn taking a stand against anorexia and perfectionism for me, that eventually it gave me the courage to start to do so for myself. This is something that I often draw on in my practice when working with the problem of anorexia. For many that I meet with, activating moral outrage against abuse and harm done to others is so much easier than activating moral outrage against the abuse and harm done to themselves. I was reminded of how feminist theory teaches us that the personal is the political (Hanisch, 1970) – that the despair anorexia brings to the lives of others is personal to me too.

I think one of the richest learnings that I have taken with me from the conversations with you, Chloe and Lona is how important it is to take a stand against anorexia (and all the other forms that disordered eating takes) in both my practice and in the world as a whole. Speaking with Chloe and others certainly taught me the depths to which anorexia would go to abuse those it was attacking and that it had and has no limits. Taking a moral stand against anorexia is something I feel comfortable doing in the therapy room and find it helps position me in a way that not-speaking this would not. It aligns me with the person I am meeting with, rather than risking any unintended and unspoken collusion with anorexia somewhere along the way.

This position is one that has taken me a long time to find as there are so many discourses out there about the therapist remaining neutral in the therapy room. And, I am happy there are those who call on counselling as a site for social justice (Kahn & Monk, 2017), because speaking this moral position feels very important. As cited in Khan and Monk (2017, p.10), Waldegrave (1990) states,

"Therapy can be a vehicle for addressing some of the injustices that occur in society. It could be argued that in choosing not to address these issues in therapy, therapists may be inadvertently replicating, maintaining, and even furthering existing injustice."

This captures a fear I hold—that if I remain silent anorexia will convince those I am talking with that I agree with the plans it has for their lives (or deaths). Contributing in any way to the power anorexia holds over those it torments in something I want to actively resist.

David, you asked me how I might introduce my moral position to those I am working with. One way that I do this is that I often ask about what anorexia is saying to a person while we are talking. There is usually some hesitancy from people to respond to this question as anorexia is then exposed. Due to this I offer some possibilities - is it saying "Victoria doesn't know what she is talking about?", "She is full of it, what does she know?!" or "Don't listen to her, she is just trying to make you fat?"



I then ask for permission to speak for myself, rather than allowing anorexia to speak for me and this provides space for me to put my moral stand against anorexia into words. It also means that anorexia is not able to convince people that I agree with anything it is claiming or demanding of them. I take care not to centre myself in this conversation, and instead I speak directly to what anorexia might be telling people about them as we talk.

I am really interested in the fact that Lona and I have gone on to work as therapists. For me, I know these co-research conversations contributed the most to what I use today in the counselling room. I found that these knowledges, learnings, and ways of understanding both anorexia and the world at large quickly became a part of the way I think and breathe. It was a delight to learn about some of the theory that informs these discourses and knowledges when I began my formal counselling training. In some ways I did things backwards by living these before learning about the theories and knowledges that inform them. I found this to mean that I was positioned in what felt like quite an unusual way when I began my formal study to become a therapist, and it took me a while to realise that a lot of what I know and believe was quite different to my fellow students. Connecting with theory and formal knowledges about social constructionism, post-modernism and narrative ways of working almost felt like I had come home but in an educational setting. I had found my professional people!

Some years ago I was reminded of this in a somewhat painful way when submitting an article about hope and disordered eating to an online narrative journal. During the review process, one reviewer took offence at how I had not acknowledged the influence of the Archives of Resistance in my writing. This took me by surprise at the time as I had not gone to the Archives while writing it. The knowledges were and are such a part of the way I think that I had not thought to link them to those who have contributed to the Archives. This living and speaking anti-anorexically is so much a part of the way I view the world that I sometimes forget that this is not the way others think or view the world. When I reconsidered this matter, these thoughts and knowings were born and nurtured in the conversations Chloe, Lona and the others who joined us over those five years we shared.

Once I moved past the mortification I experienced at another professional thinking I had plagiarised the work of others, I realised that I might need to speak to how I have come to my learnings in my professional world and how I am taking these forward in my practice.

Lona and I making the choice to go on and practice as therapists also speaks to the incredibly pervasive discourse out there that if you have ever lived with disordered eating, you should not be a therapist in this field. This is something I personally disagree with as the knowings that I carry with me from my own journey position me differently in the counselling room. I do not routinely share my own experiences of anorexia with clients as I believe that doing so without careful consideration of the impact this might have on the person in therapy and on the therapy itself can shift the focus from the person in the room onto me as therapist.



However, this does not mean that there are not times when I do make this choice and as long as I am careful about how I have this conversation, I have found that making visible the shared understandings of living with anorexia adds a richness to the therapy. This can be as simple as sharing with people in counselling that I have had my own experience with anorexia. I take care to speak to how our experiences cannot and will not be the same but that I do have some understanding of how vicious and torturous living with its demands can be. I then shift the conversation back to the experiences of the person I am in counselling with. I am careful not to centre myself in this conversation as my intention is to close the space that anorexia might be creating between myself and the person I am talking with by telling them that I don't have a clue about what they are dealing with.

One of the most significant learnings for me as a person and as a therapist during this writing were the conversations David, Chloe and I had around strategic retreats and comebacks (see Chapter 13 in Maisel, Epston, & Borden, 2004). This was a powerful conversation that we shared and one that I often draw on in my conversations with people in therapy. One of the metaphors that we discussed was that of being caught in a riptide. Here in New Zealand, a country that is surrounded by water, many people have experience of the strong currents in the ocean and the danger one can get into by swimming directly against the current if you find yourself caught in a rip. Each year there are public education campaigns around what to do if you are caught in a riptide and how to identify them. The conversations you and I shared with Chloe about how directly challenging anorexia can sometimes mean you might experience a severe backlash from it as punishment. We likened this to being caught in a riptide and that, rather than fighting against the fierce current, it could sometimes be wise to allow yourself to be swept out to the back of the waves, rest to recover some energy, swim sideways and then make your way back to the shore, stopping to recharge if and when needed as you go. When comparing this to how vicious anorexia's response to a direct challenge can be, I took a lot of strength in knowing that I had the option to side-step the direct assault, rest and then make my way back to challenging anorexia when I had recharged.

Another metaphor that came out of these conversations was one based around cycling. Given your love of cycling David, this seems particularly fitting! Choosing when to slip into the wind stream created by the momentum of my 'sisters against perfectionism/anorexia' and letting them lead for a while was lifesaving at times. Resting occasionally and allowing myself to be carried along by the momentum of these women who were prepared to take the lead when one of us was flagging, created a very important community of strength for me. I wonder if taking the lead from each other from time to time also gave us permission to fall back when we needed to. The strength of this bond is captured in my reference to the "family-ness" of the League in this conversation. I still think of Chloe as someone who knew me more deeply than anyone else and I miss her a lot¹.

¹ Chloe sadly died in 2007



It is interesting to me that Chloe, Lona and I were navigating life under perfectionism's unforgiving gaze and David, you would throw in queries like "Were you even inadvertently doing imperfection?". I remember the thought of such an intentional act against perfectionism filling me with horror. I recall thinking, "David, how on earth could a person do this? How could they choose not to push themselves to achieve perfection?" However, a few days later I was doing just that with my decision to submit an obviously imperfect university paper for assessment as I had intentionally not followed instructions, thereby risk a failing grade.

Reading back over the witnessing you did and of the different ways Chloe responded to her Mum's and perfectionism's attempts to consume her around her exam marks, shows just how important celebrating those "sparkling moments" are in the lives of those we talk with in therapy. David, your recognition of these events in our lives was so heartfelt. I am moved rereading them today. It reminds me of the power of witnessing and I believe David that you witnessed the beginnings of the person I am today in the conversations we had.

I can also see the impact of witnessing and speaking to the effect this witnessing had on each other in our words. It speaks to the witnessing practices (White & Epston, 1989; White, 2007) I call upon in the therapy room to this day.

The other aspect that I carry with me into my work as a therapist from this writing experience with Chloe is that of 'translations and counter-translations'. To this day, I often recall the conversation that explored how anorexia and perfectionism translated every day expressions into criticisms from those around us. Recognising such anorexia translations allowed us to then critique them, undoing their effect. As an example, a friend might comment "Hi Victoria, you are looking so much better than when I last saw you!" Within a matter of seconds, anorexia had translated that to "Hi Victoria, you have put on so much weight it is quite disgusting!" Instead, we could together counter-translate that by considering what we knew of those who had spoken to us and what we assume their intentions were with the greeting. We could then come to the conclusion that it was unlikely, if not impossible, for that friend to be making any kind of comment about weight or disgust, and in fact, they were likely noticing the colour in our face, the spark in our eyes or the smile we had given upon seeing them.

Connecting this with what we knew of those who had spoken them became an important part of being in the world for me. I learnt to put in place a level of counter-translation that protected both myself and the relationship I had with the person who spoke. This is a practice I talk about with clients who are struggling with not only disordered eating but depression, despair and other such difficulties.

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² A synonym Michael White used from the mid 90s for unique outcomes



I am often amazed at how gracious you were David to continue talking with Chloe and I for such a long time. Teasing these ideas out with people who understood what it was like to live suffering the torment of anorexia and perfectionism meant we could short-cut the explanations that would have been needed had we been talking with someone who did not. I marvel David at the respectful, curious enquiry that you took up with us over these years. I never felt like we had to do much explaining to you about what it was like to live with anorexia. Your questions always opened up space for our voices to be heard, and this is sorely lacking in a life ruled by anorexia. I feel like these conversations were the ground upon which my identity grew. They provided a place where my thoughts and ideas were valued and I was seen as separate to the anorexia and perfectionism that took up my days and nights.

I truly wonder if I would be alive today if we did not talk so deeply, so often and so openly. It is with great sadness to me that Chloe is not around to share in life after anorexia. We spoke of sitting together in our grandmotherly years on a veranda in our rocking chairs, wrapped up warm and sharing stories of our lives as the sun set over the jetty. Instead I continue to think of her in the colours of the setting sun.

Yours against anorexia, Victoria

References

Gremillion, H. (2003). Feeding anorexia: Gender and power at a treatment center. Durham, NC, USA: Duke University Press.

Hanich, C. (1970). The personal is the political. Retrieved from: http://www.carolhanisch.org/CHwritings/PIP.html

Kahn, S.J. & Monk, G. (2017). Narrative supervision as a social justice practice. *Journal of Systemic Therapies*: 36, (1), 7-25.

Maisel, R., Epston, D., & Borden, A. (2004). *Biting the hand that starves you: Inspiring resistance to anorexia/bulimia*. New York: W.W. Norton.

Weingarten, K. (2000). Witnessing, Wonder and Hope. Family Process, 39:389-401.

White, M., & Epston, D. (1990). Narrative means to therapeutic ends. New York: Norton.

White, M. (2007) Maps of narrative practice. New York, London: WW Norton & company.