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 Oldford   
 –   
 *Harry   
 Potter*   
 and   
 Fairytales   
 in   
 Narrative   
 Therapy   
   
 1

**The   
 Use   
 of   
 *Harry   
 Potter*   
 and   
 Fairytales   
 in   
 Narrative   
 Therapy**

Laura   
 Oldford

*Laura   
 Oldford   
 is   
 a   
 recreation   
 therapist   
 who   
 is   
 currently   
 living   
 in   
 Fredericton,   
 New   
 Brunswick. Laura   
 is   
 a   
 certified   
 therapeutic   
 recreation   
 specialist   
 who   
 graduated   
 from   
 Memorial   
 University   
 of Newfoundland   
 in   
 2008   
 with   
 a   
 Bachelor   
 of   
 Recreation   
 (Honours).   
 Laura   
 currently   
 works   
 in   
 tertiary neurological   
 rehabilitation   
 and   
 long-­‐term   
 care.   
 She   
 is   
 passionate   
 about   
 delivering   
 individualized care   
 focused   
 on   
 providing   
 quality   
 of   
 life   
 through   
 leisure.*

**Abstract**   
This   
 article   
 explores   
 the   
 use   
 of   
 narrative   
 therapy   
 in   
 the   
 psychoanalytic   
 field.   
 In   
 particular,   
 the article   
 examines   
 the   
 use   
 of   
 fairytales,   
 specifically   
 the   
 *Harry   
 Potter*   
 series,   
 as   
 a   
 valuable   
 tool   
 to promote   
 acceptance   
 and   
 change   
 for   
 various   
 illnesses   
 in   
 the   
 post-­‐modern   
 era.   
 The   
 author   
 focuses on   
 discussing   
 why   
 fairytales   
 are   
 a   
 valid   
 tool   
 within   
 narrative   
 therapy   
 and   
 discusses   
 the   
 work   
 that has   
 been   
 done   
 on   
 analyzing   
 the   
 *Harry   
 Potter*   
 series   
 from   
 a   
 narrative   
 therapy   
 perspective.   
 The author   
 hopes   
 to   
 increase   
 the   
 readers’   
 understanding   
 of   
 the   
 role   
 literary   
 tools   
 can   
 play   
 in   
 clinical practice   
 and   
 how   
 a   
 clinician   
 can   
 adapt   
 to   
 the   
 changes   
 of   
 the   
 post-­‐modern   
 society.

**Keywords:** Fairytales,   
 narrative   
 therapy,   
 psychoanalysis,   
 *Harry   
 Potter*,   
 children’s   
 literature

**Introduction**   
The   
 post-­‐modernist   
 era   
 of   
 psychotherapy   
 is   
 trying   
 to   
 capitalize   
 on   
 the   
 therapeutic   
 potential   
 of fairytales   
 within   
 the   
 field   
 of   
 narrative   
 therapy.   
 Narrative   
 therapy   
 focuses   
 on   
 the   
 power   
 of communication   
 through   
 storytelling   
 (Noble   
 &   
 Jones,   
 2005),   
 helping   
 a   
 person   
 tell   
 her   
 or   
 his personal   
 story   
 and   
 then   
 devise   
 and   
 live   
 a   
 more   
 positive   
 life   
 (Biggs   
 &   
 Hinton-­‐Bayre,   
 2008). Fairytales   
 are   
 sometimes   
 used   
 as   
 a   
 literary   
 tool   
 within   
 narrative   
 therapy   
 to   
 allow   
 a   
 person   
 to   
 fit story   
 themes   
 to   
 personal   
 experiences   
 to   
 increase   
 one’s   
 understanding   
 (Howard,   
 2001).

According   
 to   
 Freedman   
 and   
 Combs,   
 focusing   
 on   
 “the   
 meaning   
 of   
 that   
 story   
 helps   
 assure that   
 the   
 story   
 is   
 an   
 experience   
 that   
 matters”   
 (as   
 cited   
 in   
 Kondrat   
 &   
 Teater,   
 2009,   
 p.   
 301).

Through   
 fantastical   
 literature,   
 such   
 as   
 the   
 popular   
 *Harry   
 Potter* series(Rowling,   
 2003), individuals   
 requiring   
 clinical   
 narrative   
 therapy   
 can   
 begin   
 to   
 recognize   
 themes   
 and   
 integrate them   
 into   
 their   
 own   
 lives.

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 L.   
 Oldford   
 –   
 *Harry   
 Potter*   
 and   
 Fairytales   
 in   
 Narrative   
 Therapy   
   
 2

This   
 paper   
 examines   
 the   
 use   
 of   
 fairytales,   
 specifically   
 the   
 *Harry   
 Potter*   
 tales,   
 as   
 a valuable   
 tool   
 within   
 narrative   
 therapy.   
 The   
 first   
 section   
 begins   
 by   
 providing   
 an   
 overview   
 of narrative   
 therapy   
 and   
 the   
 main   
 processes.   
 Second,   
 research   
 on   
 the   
 use   
 of   
 fairytales   
 within narrative   
 therapy   
 will   
 be   
 highlighted.   
 The   
 final   
 section   
 explores   
 the   
 use   
 of   
 the   
 fantastical   
 *Harry Potter* series   
 as   
 a   
 narrative   
 therapy   
 tool.

**Narrative   
 Therapy**   
 **Basic   
 concepts:** The   
 concept   
 of   
 narrative   
 therapy   
 began   
 with   
 theorists   
 such   
 as   
 Jerome Bruner   
 (1986),   
 who   
 focused   
 on   
 the   
 idea   
 that   
 human   
 beings   
 need   
 to   
 have   
 a   
 meaning   
 attached   
 to their   
 lives,   
 and   
 through   
 narratives   
 this   
 meaning   
 can   
 be   
 built,   
 developed,   
 and   
 modified   
 as necessary   
 (in   
 Machato   
 &   
 Goncalves,   
 1999).   
 White   
 (2000)   
 added   
 to   
 the   
 above   
 idea,   
 emphasizing that   
 individuals   
 make   
 sense   
 of   
 their   
 lives   
 through   
 both   
 the   
 cultural   
 narratives   
 of   
 their   
environment   
 and   
 the   
 personal   
 narrative   
 they   
 create   
 (in   
 Leahy   
 &   
 Harrigan,   
 2006).

White   
 and   
 Epstein   
 took   
 these   
 ideas   
 and   
 developed   
 concrete   
 guidelines   
 for   
 therapists   
 in 1990,   
 consequently   
 developing   
 a   
 narrative   
 approach   
 model   
 (Gutterman   
 &   
 Rudes,   
 2005).   
 They suggest   
 that   
 their   
 model   
 empowers   
 individuals   
 to   
 move   
 from   
 a   
 uni-­‐directional,   
 blaming   
 view   
 of their   
 lives   
 to   
 a   
 fuller   
 vision   
 of   
 both   
 the   
 future   
 and   
 alternatives   
 to   
 their   
 situation,   
 and   
 thereby   
 to create   
 greater   
 control   
 in   
 their   
 lives   
 (Biggs   
 &   
 Hinton-­‐Bayre,   
 2008).

The   
 central   
 focus   
 of   
 the   
 narrative   
 therapy   
 model   
 is   
 that   
 the   
 past   
 is   
 not   
 seen   
 as   
 fixed   
 and irreversible,   
 but   
 is   
 based   
 on   
 the   
 individual’s   
 interpretation   
 of   
 the   
 events.   
 This   
 interpretation   
 is based   
 on   
 the   
 fact   
 that   
 individuals   
 understand   
 their   
 lives   
 through   
 sequencing   
 experiences   
 across timelines   
 to   
 build   
 an   
 account   
 of   
 what   
 has   
 occurred   
 (Kondrat   
 &   
 Teater,   
 2009).   
   
 An   
 individual’s interpretation   
 of   
 her   
 or   
 his   
 life   
 is   
 known   
 in   
 the   
 narrative   
 therapy   
 world   
 as   
 her   
 or   
 his   
 story   
 or “self-­‐narrative.”   
 Growing   
 from   
 the   
 concept   
 of   
 self-­‐narrative   
 is   
 the   
 main   
 vehicle   
 for   
 narrative   
 therapy,   
 the art   
 of   
 storytelling   
 (Noble   
 &   
 Jones,   
 2005).   
 According   
 to   
 Biggs   
 and   
 Hinton-­‐Bayre   
 (2008),   
 through storytelling   
 individuals   
 can   
 reinterpret   
 their   
 past.   
 Kondrat   
 and   
 Teater   
 also   
 assert   
 that   
 through “re-­‐authoring”   
 their   
 personal   
 narratives,   
 individuals   
 can   
 rework   
 their   
 narratives   
 to   
 examine their   
 lives   
 in   
 a   
 more   
 positive   
 light   
 (2009).

From   
 a   
 clinical   
 perspective,   
 Hogan   
 (1999)   
 asserts   
 that   
 the   
 personal   
 narratives   
 people live   
 by   
 are   
 essential   
 components   
 of   
 mental   
 health   
 and   
 illness.   
 Consequently,   
 the   
 main   
 objective of   
 narrative   
 therapy   
 in   
 a   
 clinical   
 context   
 can   
 be   
 seen   
 as   
 transforming   
 a   
 disabling   
 and   
 restrictive narrative   
 into   
 an   
 integrated   
 narrative   
 full   
 of   
 hope   
 and   
 possibilities   
 (Hogan,   
 1999;   
 Noble   
 &   
 Jones, 2005).   
 Noble   
 and   
 Jones’s   
 (2005)   
 research   
 also   
 supports   
 the   
 above   
 viewpoint,   
 adding   
 the   
 view that   
 persons   
 with   
 dementia   
 are   
 more   
 likely   
 to   
 reach   
 a   
 stage   
 of   
 ego-­‐integrity   
 when   
 they   
 can   
 tell their   
 life   
 story   
 and   
 attach   
 positive   
 meanings   
 to   
 it   
 if   
 they   
 can   
 be   
 assisted   
 to   
 do   
 so.

The   
 field   
 of   
 psychotherapy   
 was   
 not   
 only   
 affected   
 by   
 the   
 narrative   
 therapy   
 movement   
 in the   
 post   
 modern   
 era—it   
 became   
 the   
 central   
 medium   
 for   
 the   
 “diffusion   
 of   
 the   
 narrative

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 Oldford   
 –   
 *Harry   
 Potter*   
 and   
 Fairytales   
 in   
 Narrative   
 Therapy   
   
 3

metaphor”   
 (Machato   
 &   
 Goncalves,   
 1999,   
 p.   
 1175).   
 According   
 to   
 Lee   
 (2004),   
 postmodern   
 ideas have   
 led   
 to   
 a   
 greater   
 recognition   
 of   
 the   
 role   
 of   
 narrative   
 in   
 both   
 human   
 understanding   
 and   
 self-­‐perception.   
   
 In   
 the   
 postmodern   
 surge,   
 a   
 large   
 percentage   
 of   
 psychoanalytic   
 therapists   
 began practicing   
 narrative   
 therapy,   
 as   
 they   
 quickly   
 realized   
 that   
 narrative   
 therapy   
 was   
 at   
 the   
 actual core   
 of   
 their   
 therapeutic   
 practice.   
 Machato   
 and   
 Goncalves   
 point   
 out   
 that   
 humans   
 use   
 language and   
 narratives   
 in   
 all   
 activities;   
 thus   
 it   
 makes   
 perfect   
 sense   
 that   
 psychologists   
 use   
 narrative   
 in most   
 areas   
 of   
 their   
 practice   
 (1999).

**Specific   
 processes   
 in   
 narrative   
 therapy:** According   
 to   
 several   
 theorists,   
 narrative therapy   
 is   
 typically   
 seen   
 as   
 having   
 two   
 main   
 stages,   
 the   
 deconstruction   
 stage   
 and   
 the reconstruction   
 stage   
 (Bohlmeijer,   
 Westerhof,   
 &   
 Emmerik-­‐de   
 Jong,   
 2008;   
 Kondrat   
 &   
 Teater, 2009).

The   
 first   
 process   
 to   
 be   
 considered   
 is   
 the   
 deconstruction   
 phase.   
 During   
 this   
 phase,   
 the primary   
 objective   
 is   
 for   
 the   
 therapist   
 to   
 elicit   
 the   
 individual’s   
 “problem   
 saturated   
 stories” (Kondrat   
 &   
 Teater,   
 2009).   
 “Problem   
 saturated   
 stories”   
 is   
 a   
 narrative   
 therapy   
 term   
 from   
 White and   
 Epston,   
 defined   
 as   
 stories   
 with   
 a   
 focus   
 on   
 negative   
 memories,   
 victimized   
 plots,   
 and depressing   
 worldviews   
 (Bohlmeijer,   
 Westerhof,   
 &   
 Emmerik-­‐de   
 Jong,   
 2008).   
 Kondrat   
 and   
 Teater (2009)   
 assert   
 that   
 individuals   
 experience   
 problems   
 of   
 clinical   
 significance   
 when   
 their   
 self-­‐narratives   
 become   
 problem   
 saturated.

During   
 the   
 deconstruction   
 phase,   
 the   
 narrative   
 therapist   
 prods   
 as   
 the   
 individual’s   
 self-­‐narrative   
 emerges,   
 in   
 order   
 to   
 gain   
 a   
 full   
 and   
 complete   
 understanding   
 of   
 the   
 person’s   
 unique perceptions   
 of   
 her   
 or   
 his   
 problems,   
 life,   
 and   
 personal   
 reality   
 (Kondrat   
 &   
 Teater,   
 2009).   
 Of importance   
 is   
 the   
 fact   
 that   
 the   
 individual,   
 not   
 the   
 therapist,   
 defines   
 the   
 problem.   
 The   
 narrative therapist’s   
 role   
 in   
 the   
 deconstruction   
 phase   
 is   
 to   
 help   
 individuals   
 become   
 aware   
 of   
 their cognitive   
 processes   
 while   
 relaying   
 their   
 self-­‐narratives   
 (Kondrat   
 &   
 Teater,   
 2009),   
 making   
 no judgments   
 until   
 he   
 or   
 she   
 has   
 heard   
 the   
 entire   
 story   
 (Noble   
 &   
 Jones,   
 2005).

The   
 second   
 component   
 in   
 the   
 deconstruction   
 phase   
 is   
 the   
 externalization   
 of   
 the problem   
 (Noble   
 &   
 Jones,   
 2005).   
   
 In   
 this   
 phase   
 the   
 therapist   
 works   
 with   
 the   
 individual   
 to   
 assist   
 in separating   
 her   
 or   
 him   
 from   
 personal   
 problems.   
 This   
 concept   
 is   
 explained   
 succinctly   
 by   
 Noble and   
 Jones,   
 who   
 state   
 it   
 is   
 a   
 process   
 of   
 “emphasizing   
 the   
 principle   
 that   
 the   
 person   
 is   
 not   
 the problem,   
 the   
 problem   
 is   
 the   
 problem”   
 (2005,   
 p.332).   
 Through   
 externalizing   
 conversations, individuals   
 can   
 begin   
 deconstructing   
 their   
 beliefs   
 and   
 assertions   
 that   
 are   
 fuelling   
 the   
 problem itself,   
 and   
 examining   
 how   
 these   
 beliefs   
 affect   
 their   
 lives.   
 This   
 allows   
 individuals   
 to   
 have   
 a different   
 perspective   
 on   
 the   
 problem,   
 which   
 enables   
 them   
 to   
 challenge   
 their   
 self-­‐narrative   
 and its   
 respective   
 “truths”   
 (Weber,   
 Davis,   
 &   
 McPhie,   
 2006).   
 For   
 example,   
 when   
 adolescents   
 with anorexia   
 nervosa   
 can   
 externalize   
 their   
 problem,   
 they   
 are   
 enabled   
 to   
 gain   
 control   
 over   
 the problem   
 to   
 begin   
 the   
 healing   
 process,   
 rather   
 than   
 being   
 immersed   
 in   
 the   
 illness   
 (Weber,   
 Davis &   
 McPhie,   
 2006).   
   
 This   
 externalization   
 through   
 the   
 narrative   
 therapy   
 process   
 is   
 done   
 through

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 L.   
 Oldford   
 –   
 *Harry   
 Potter*   
 and   
 Fairytales   
 in   
 Narrative   
 Therapy   
   
 4

the   
 exploration   
 of   
 issues   
 that   
 may   
 have   
 played   
 a   
 role   
 in   
 constructing   
 an   
 individual’s   
 self-­‐narrative,   
 objectifying   
 the   
 power   
 of   
 the   
 eating   
 disorder   
 and   
 issues   
 that   
 have   
 supported   
 the illness.   
 Consequently,   
 through   
 the   
 identification   
 of   
 the   
 issues,   
 the   
 individual   
 can   
 begin   
 to separate   
 herself   
 or   
 himself   
 from   
 the   
 eating   
 disorder   
 and   
 is   
 ready   
 to   
 explore   
 possibilities   
 for change   
 (Weber,   
 Davis   
 &   
 McPhie,   
 2006).

Additionally,   
 Noble   
 and   
 Jones   
 (2005)   
 mention   
 that   
 deconstructing   
 and   
 externalizing   
 the problem   
 challenge   
 the   
 meaning   
 the   
 individual   
 gives   
 to   
 a   
 problem,   
 as   
 well   
 as   
 allowing   
 her   
 or   
 him to   
 place   
 the   
 problem   
 in   
 the   
 context   
 of   
 her   
 or   
 his   
 whole   
 life,   
 as   
 opposed   
 to   
 the   
 present   
 state solely.   
 Biggs   
 and   
 Hinton-­‐Bayre   
 (2008)   
 assert   
 that   
 this   
 shift   
 into   
 externalizing   
 and   
 deconstructing the   
 problem   
 facilitates   
 the   
 opportunity   
 for   
 the   
 individual   
 to   
 change.

Once   
 the   
 individual   
 has   
 externalized   
 the   
 problem   
 and   
 is   
 ready   
 to   
 view   
 it   
 from   
 an objective   
 perspective,   
 the   
 therapist   
 begins   
 the   
 reconstructive   
 process   
 of   
 narrative   
 therapy.   
 In this   
 phase,   
 the   
 individual   
 is   
 encouraged   
 by   
 the   
 therapist   
 to   
 explore   
 stories   
 that   
 he   
 or   
 she   
 has ignored   
 or   
 forgotten   
 in   
 his   
 or   
 her   
 self-­‐narrative.   
 These   
 stories   
 are   
 known   
 in   
 the   
 narrative therapy   
 realm   
 as   
 “unique   
 outcomes,”   
 defined   
 by   
 Guterman   
 and   
 Rudes   
 (2005)   
 as   
 “those behaviours,   
 thoughts,   
 and   
 feelings   
 that   
 contradict   
 the   
 dominant   
 story”   
 (p.   
 4).

The   
 purpose   
 of   
 unique   
 outcomes   
 is   
 to   
 allow   
 the   
 individual   
 to   
 focus   
 on   
 exceptions   
 to   
 her or   
 his   
 identified   
 problems   
 (Guterman   
 &   
 Rudes,   
 2005).   
 Hogan   
 (1999)   
 explains   
 this   
 concept   
 is through   
 an   
 examination   
 of   
 the   
 dominant   
 story   
 line,   
 also   
 known   
 as   
 the   
 individual’s   
 self-­‐narrative.   
 Hogan   
 asserts   
 that   
 when   
 an   
 individual’s   
 dominant   
 story   
 line   
 becomes   
 oppressive, other   
 “faintly   
 etched   
 story   
 lines   
 may   
 be   
 more   
 promising”   
 (1999,   
 p.   
 22).   
   
 Thus,   
 looking   
 at   
 the faint   
 etchings   
 may   
 permit   
 a   
 new   
 story   
 to   
 emerge.

For   
 example,   
 research   
 by   
 Biggs   
 and   
 Hinton-­‐Bayre   
 (2008)   
 reveals   
 one   
 patient   
 with   
 a traumatic   
 spinal   
 cord   
 injury   
 who   
 identified   
 a   
 problem   
 of   
 being   
 unable   
 to   
 play   
 football   
 with   
 his son   
 any   
 longer.   
 Through   
 the   
 narrative   
 therapist’s   
 questioning,   
 the   
 patient   
 was   
 able   
 to   
 identify that   
 watching   
 his   
 son   
 play   
 football   
 (the   
 unique   
 outcome)   
 decreased   
 his   
 feelings   
 of   
 depression and   
 anxiety.   
 The   
 patient   
 reconstructed   
 his   
 life   
 to   
 watch   
 his   
 son   
 play   
 football,   
 gaining   
 the   
 same quality   
 as   
 when   
 he   
 was   
 playing   
 with   
 him.   
 Unique   
 outcomes   
 such   
 as   
 that   
 above   
 may   
 be introduced   
 using   
 questions   
 such   
 as   
 the   
 following:   
 When   
 was   
 a   
 time   
 you   
 did   
 not   
 experience   
 the problem,   
 and   
 when   
 was   
 a   
 time   
 you   
 were   
 able   
 to   
 overcome   
 it   
 (Guterman   
 &   
 Rudes,   
 2005)?

Once   
 unique   
 outcomes   
 have   
 been   
 identified,   
 the   
 final   
 process   
 in   
 the   
 reconstruction phase   
 is   
 called   
 “re-­‐authoring.”   
 This   
 component   
 entails   
 strengthening,   
 thickening,   
 and   
 merging unique   
 outcomes   
 into   
 the   
 self-­‐narrative   
 (Bohlmeijer   
 et   
 al.,   
 2008).   
 The   
 primary   
 belief   
 that   
 drives the   
 re-­‐authoring   
 component   
 is   
 that   
 the   
 disregarded   
 narratives   
 of   
 an   
 individual   
 (unique outcomes)   
 offer   
 alternative   
 interpretations   
 of   
 experience.   
 When   
 those   
 disregarded   
 narratives are   
 identified,   
 the   
 problematic   
 and   
 hurtful   
 meanings   
 the   
 individual   
 has   
 derived   
 from   
 the   
 self-­‐narrative   
 can   
 be   
 built   
 into   
 a   
 positive   
 and   
 empowering   
 story   
 (Leahy   
 &   
 Harrigan,   
 2006).

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 L.   
 Oldford   
 –   
 *Harry   
 Potter*   
 and   
 Fairytales   
 in   
 Narrative   
 Therapy   
   
 5

Through   
 creating   
 a   
 self-­‐narrative,   
 externalizing   
 the   
 problem   
 from   
 the   
 self,   
 identifying strategies   
 to   
 minimize   
 the   
 problem,   
 and   
 re-­‐writing   
 the   
 narrative   
 using   
 those   
 strategies, individuals   
 can   
 overcome   
 problems   
 inhibiting   
 their   
 quality   
 of   
 life   
 (Machato   
 &   
 Goncalves,   
 1999). There   
 are   
 also   
 other   
 considerations   
 that   
 intertwine   
 with   
 these   
 processes,   
 including   
 social   
 and cultural   
 concerns   
 to   
 ensure   
 a   
 successful   
 re-­‐authoring   
 of   
 the   
 self-­‐narrative.

**Social   
 and   
 societal   
 considerations:** A   
 vital   
 basis   
 to   
 the   
 field   
 of   
 narrative   
 therapy   
 is   
 that   
 a person’s   
 “reality”   
 is   
 socially   
 constructed   
 through   
 language,   
 and   
 maintained   
 through   
 narrative (Hogan,   
 1999).   
 This   
 reality   
 can   
 be   
 divided   
 into   
 two   
 sections:   
 stories   
 related   
 to   
 who   
 the individuals   
 thinks   
 they   
 are   
 as   
 people,   
 and   
 their   
 interpretation   
 of   
 these   
 stories   
 to   
 signify   
 where they   
 fit   
 in   
 society   
 (Cashin,   
 2008).   
 Consequently,   
 clinical   
 problems   
 such   
 as   
 anorexia   
 or   
depression   
 are   
 seen   
 from   
 a   
 narrative   
 perspective   
 as   
 having   
 roots   
 in   
 cultural,   
 familial,   
 and   
 social contexts   
 and   
 experiences.   
 Disorders   
 and   
 illnesses   
 are   
 not   
 seen   
 as   
 a   
 mark   
 of   
 personal   
inadequacy,   
 but   
 based   
 more   
 in   
 experiences   
 and   
 self-­‐interpretations   
 (Weber   
 et   
 al.,   
 2006).

Freedman   
 and   
 Combs   
 have   
 asserted   
 that   
 narrative   
 therapists   
 must   
 develop   
 attitudes that   
 are   
 congruent   
 with   
 a   
 postmodern   
 and   
 narrative   
 world   
 view.   
 They   
 have   
 listed   
 four   
 main essential   
 beliefs   
 intrinsic   
 to   
 this   
 viewpoint:   
 (a)   
 realities   
 are   
 socially   
 constructed,   
 (b)   
 realities   
 are established   
 through   
 language,   
 (c)   
 realities   
 are   
 organized   
 and   
 maintained   
 through   
 narratives, and   
 (d)   
 there   
 are   
 no   
 essential   
 truths.   
 (Lee,   
 2004).

Consequently   
 the   
 use   
 of   
 literary   
 tools   
 has   
 been   
 found   
 to   
 be   
 a   
 useful   
 and   
 creative approach   
 in   
 narrative   
 therapy,   
 as   
 it   
 allows   
 stories   
 to   
 be   
 shared   
 through   
 a   
 culturally   
 appropriate tool,   
 literature.   
 According   
 to   
 Biggs   
 and   
 Hinton-­‐Bayre   
 (2008),   
 the   
 therapist   
 can   
 act   
 as   
 a   
 literature critic,   
 exploring   
 new   
 worlds   
 with   
 the   
 client   
 to   
 create   
 new   
 meanings   
 and   
 significance   
 to   
 her   
 or his   
 story.   
 In   
 sum,   
 Howard   
 (1991)   
 describes   
 the   
 value   
 of   
 the   
 literary   
 intervention   
 ideally: A   
 life   
 becomes   
 meaningful   
 when   
 one   
 sees   
 himself   
 or   
 herself   
 as   
 an   
 actor   
 within   
 the context   
 of   
 a   
 story—be   
 it   
 a   
 cultural   
 tale,   
 a   
 religious   
 narrative,   
 a   
 family   
 saga,   
 the   
 march   
 of science,   
 a   
 political   
 movement,   
 and   
 so   
 forth.   
 Early   
 in   
 life   
 we   
 are   
 free   
 to   
 choose   
 what   
 life story   
 we   
 will   
 inhabit-­‐   
 and   
 later   
 we   
 find   
 we   
 are   
 lived   
 by   
 that   
 story.   
 (p.   
 196)   
Due   
 to   
 the   
 importance   
 of   
 culture   
 and   
 social   
 context   
 in   
 today’s   
 society,   
 many   
 narratives   
 from society   
 are   
 directly   
 intertwined   
 with   
 personal   
 narratives   
 of   
 individuals,   
 allowing   
 literary   
 tools describing   
 metaphors   
 related   
 to   
 these   
 narratives   
 to   
 be   
 valid   
 interventions.

**Fairytales**   
 One   
 such   
 literary   
 tool   
 that   
 has   
 been   
 utilized   
 in   
 narrative   
 therapy   
 is   
 the   
 fairytale.

According   
 to   
 Howard   
 (1991),   
 most   
 North   
 American   
 children   
 learn   
 through   
 fairytales   
represented   
 via   
 television   
 or   
 literature   
 from   
 a   
 very   
 young   
 age.   
 Howard   
 also   
 asserts   
 that   
 many of   
 these   
 pieces   
 of   
 fictional   
 literature,   
 such   
 as   
 *Cinderella*,   
 *Sleeping   
 Beauty*,and *Pinocchio,* play out   
 conflicts   
 and   
 issues   
 such   
 as   
 good   
 versus   
 evil,   
 living   
 and   
 dying,   
 and   
 love   
 and   
 hate.   
 The   
 fact

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 L.   
 Oldford   
 –   
 *Harry   
 Potter*   
 and   
 Fairytales   
 in   
 Narrative   
 Therapy   
   
 6

that   
 these   
 stories   
 are   
 “not   
 real”   
 and   
 may   
 be   
 deemed   
 impossible   
 is   
 not   
 seen   
 as   
 an   
 issue   
 to children,   
 and   
 therefore   
 fictional   
 stories   
 are   
 an   
 ideal   
 modality   
 for   
 learning   
 (Howard,   
 1991).

**The   
 acquisition   
 of   
 life   
 skills:** Several   
 facets   
 of   
 fairytales   
 make   
 their   
 use   
 ideal   
 in   
 the   
 field of   
 narrative   
 therapy,   
 mainly   
 from   
 a   
 psychodynamic   
 perspective.   
 First   
 of   
 all,   
 the   
 reader, specifically   
 a   
 child   
 or   
 an   
 adolescent,   
 may   
 learn   
 life   
 skills   
 through   
 metaphors   
 and   
 themes   
 within fairytales.   
 According   
 to   
 Bruno   
 Bettelheim,   
 who   
 explored   
 the   
 effects   
 of   
 literature   
 on   
 the developing   
 child,   
 everyone’s   
 greatest   
 yet   
 most   
 difficult   
 accomplishment   
 is   
 to   
 finding   
 meaning   
 in her   
 or   
 his   
 life   
 (as   
 cited   
 in   
 Noctor,   
 2006).   
 Bettelheim   
 asserts   
 that   
 within   
 specific   
 stages   
 of development,   
 the   
 individual   
 strives   
 to   
 find   
 appropriate   
 meaning.   
 To   
 accomplish   
 this,   
 the individual   
 must   
 develop   
 inner   
 resources   
 to   
 balance   
 and   
 accommodate   
 emotions,   
 intellect,   
 and imagination   
 (Noctor,   
 2006,   
 p.580).   
 Bettelheim   
 has   
 found   
 that   
 children’s   
 literature   
 can   
 assist   
 in accomplishing   
 this   
 feat,   
 equipping   
 the   
 individual   
 with   
 coping   
 mechanisms   
 and   
 increasing   
 her   
 or his   
 self-­‐awareness   
 of   
 anxieties   
 and   
 ambitions   
 (as   
 cited   
 in   
 Noctor,   
 2006).

Fairytales   
 are   
 a   
 type   
 of   
 children’s   
 literature   
 that   
 can   
 be   
 an   
 effective   
 tool   
 for   
 meeting   
 the child’s   
 needs.   
 According   
 to   
 Noctor   
 (2006),   
 compared   
 with   
 other   
 literature   
 sources,   
 fairytales   
 are unique   
 because   
 they   
 usually   
 include   
 a   
 dark   
 character   
 or   
 theme.   
 Noctor   
 believes   
 that   
 children are   
 relieved   
 to   
 come   
 across   
 these   
 characters   
 and   
 themes   
 because   
 “they   
 know   
 that   
 they themselves   
 are   
 not   
 all   
 good   
 and   
 find   
 difficulties   
 in   
 the   
 portrayal   
 of   
 all   
 people   
 as   
 inherently   
 good (p.   
 581).”   
 Noctor   
 also   
 emphasizes   
 that   
 the   
 dark   
 character   
 can   
 be   
 a   
 symbolic   
 representation   
 of the   
 child   
 and   
 give   
 greater   
 insight   
 into   
 unconscious   
 struggles   
 between   
 good   
 and   
 evil   
 (2006).

Other   
 important   
 research   
 relevant   
 to   
 the   
 area   
 of   
 life   
 skills   
 through   
 fiction   
 focuses   
 on gaining   
 autonomy,   
 increasing   
 independence,   
 learning   
 about   
 parental   
 absence,   
 issues   
 of abandonment,   
 and   
 issues   
 concerning   
 death.   
 Many   
 of   
 these   
 skills   
 are   
 brought   
 about   
 in   
 a metaphorical   
 rather   
 than   
 literal   
 way   
 within   
 the   
 piece   
 of   
 fictional   
 literature   
 (Noctor,   
 2006).

**The   
 importance   
 of   
 fantasies:** A   
 second   
 facet   
 of   
 fairytales,   
 and   
 one   
 that   
 is   
 inherent   
 to their   
 concept,   
 is   
 the   
 fact   
 that   
 they   
 are   
 based   
 on   
 fantasy.   
 This   
 has   
 a   
 distinct   
 psychoanalytical association   
 as,   
 according   
 to   
 Jungian   
 therapist   
 Hillman,   
 adults   
 are   
 not   
 motivated   
 by   
 reason   
 or reinforcement.   
 Rather,   
 they   
 are   
 motivated   
 “by   
 fantasy   
 and   
 theimages   
 and   
 myths   
 with   
 which we   
 have   
 grown   
 up”   
 (as   
 cited   
 by   
 Howard,   
 1991,   
 p.   
 193).   
 Howard   
 (1991)   
 supports   
 this   
 and highlights   
 that   
 many   
 of   
 the   
 narrative   
 and   
 story   
 elements   
 by   
 which   
 adults   
 live   
 are   
 deep   
 within their   
 unconscious   
 and   
 connected   
 with   
 great   
 myths   
 and   
 fairytales   
 that   
 have   
 been   
 ingrained   
 in them   
 since   
 they   
 were   
 children.

Noctor   
 (2006)   
 adds   
 that   
 the   
 fantasy   
 aspect   
 of   
 fairytales   
 allows   
 the   
 author   
 to   
 explore many   
 aspects   
 of   
 society   
 and   
 relevant   
 issues   
 through   
 metaphors   
 in   
 a   
 safe   
 environment.   
 This offers   
 the   
 reader   
 both   
 a   
 pleasurable   
 and   
 an   
 emotional   
 adventure.

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 L.   
 Oldford   
 –   
 *Harry   
 Potter*   
 and   
 Fairytales   
 in   
 Narrative   
 Therapy   
   
 7

**Feelings   
 of   
 safety   
 and   
 security:** Subsequently,   
 the   
 next   
 facet   
 of   
 fairytales   
 to   
 be   
discussed   
 is   
 the   
 element   
 of   
 safety.   
 Environments   
 such   
 as   
 Never-­‐Never   
 Land   
 and   
 Wonderland are   
 seen   
 as   
 “unrealistic   
 representations   
 of   
 the   
 real   
 world”   
 (Noel-­‐Smith,   
 2001,   
 p.   
 201).   
 According to   
 Bettelheim,   
 it   
 is   
 this   
 unrealistic   
 nature   
 that   
 provides   
 the   
 reader   
 with   
 a   
 safe   
 place   
 in   
 which   
 to explore   
 her   
 or   
 his   
 fantasies   
 (as   
 cited   
 in   
 Noel-­‐Smith,   
 2001).   
   
 Because   
 the   
 world   
 is   
 fictional,   
 the author   
 can   
 focus   
 on   
 the   
 message   
 and   
 inner   
 processes   
 being   
 conveyed,   
 rather   
 than   
 on   
 taking   
 a realistic   
 approach   
 (Noel-­‐Smith,   
 2001).

Noctor’s   
 (2006)   
 research   
 also   
 showed   
 that   
 the   
 realm   
 of   
 fairytales   
 allows   
 for   
 safe exploration   
 of   
 inner   
 conflicts,   
 where   
 the   
 good   
 character   
 always   
 emerges   
 the   
 victor.   
 For example,   
 many   
 fairytales   
 create   
 situations   
 in   
 which   
 the   
 main   
 character,   
 often   
 a   
 child,   
 has   
 lost   
 a parent.   
 While   
 the   
 main   
 character   
 may   
 have   
 difficulties,   
 he   
 or   
 she   
 always   
 manages   
 to   
 gain   
 the confidence   
 to   
 become   
 independent   
 and   
 secure   
 in   
 the   
 end.   
 The   
 message   
 conveyed   
 in   
 this situation   
 is   
 one   
 of   
 hope   
 and   
 confidence   
 to   
 succeed   
 in   
 life   
 despite   
 setbacks,   
 as   
 well   
 as   
 to   
 become less   
 dependent   
 on   
 one’s   
 parents   
 (Noctor,   
 2006).

**The   
 role   
 of   
 the   
 unconscious:** While   
 the   
 message   
 above   
 may   
 not   
 be   
 completely   
 obvious without   
 conscious   
 thought,   
 Bettelheim   
 believes   
 that   
 these   
 messages   
 travel   
 to   
 the   
 reader’s unconscious   
 automatically   
 (as   
 cited   
 in   
 Noctor,   
 2006).   
 He   
 argues   
 that   
 fairytales   
 may   
 be   
 an   
 ideal avenue   
 to   
 work   
 out   
 emotional   
 dilemmas   
 unconsciously   
 and   
 reduce   
 their   
 potential   
 to   
 cause harm.   
 This   
 has   
 been   
 found   
 to   
 be   
 especially   
 useful   
 for   
 children   
 and   
 adolescents,   
 whose unconscious   
 thoughts   
 and   
 desires   
 may   
 not   
 be   
 accessible   
 in   
 traditional   
 ways   
 (as   
 cited   
 in   
 Noctor, 2006).

Bettelheim   
 attributes   
 the   
 fairytale’s   
 power   
 to   
 a   
 formula   
 he   
 believes   
 structures   
 many fairytales,   
 including   
 such   
 issues   
 as   
 the   
 death   
 of   
 parents,   
 the   
 presence   
 of   
 evil   
 characters   
 in   
 the storyline,   
 and   
 a   
 needy   
 and   
 isolated   
 hero   
 who   
 draws   
 sympathy   
 from   
 the   
 reader   
 (as   
 cited   
 in Noctor,   
 2006).   
 For   
 example,   
 in   
 the   
 fairytale   
 *Cinderella*,   
 the   
 title   
 character   
 is   
 an   
 orphan   
 living with   
 her   
 evil   
 stepmother   
 and   
 stepsisters.   
 This   
 fairytale   
 has   
 all   
 three   
 of   
 Bettelheim’s   
 ingredients: Cinderella   
 is   
 an   
 orphan,   
 she   
 has   
 an   
 evil   
 stepmother   
 and   
 two   
 evil   
 stepsisters,   
 and   
 she   
 has   
 been isolated   
 as   
 a   
 servant   
 in   
 her   
 stepmother’s   
 castle.

**Societal   
 and   
 cultural   
 needs:**   
 The   
 final   
 facet   
 supporting   
 the   
 use   
 of   
 fairytales   
 in   
 narrative therapy   
 is   
 their   
 ability   
 to   
 interest   
 children   
 and   
 adolescents.   
 Noctor   
 (2006)   
 asserts   
 that   
 most children   
 and   
 adolescents   
 are   
 brought   
 to   
 therapy,   
 and   
 thus   
 usually   
 do   
 not   
 want   
 to   
 be   
 there. Consequently,   
 they   
 may   
 not   
 want   
 to   
 talk   
 or   
 participate   
 in   
 traditional   
 therapy   
 sessions.   
 Because of   
 the   
 low   
 levels   
 of   
 engagement   
 within   
 treatment,   
 it   
 has   
 been   
 suggested   
 that   
 the   
 interventions being   
 utilized   
 may   
 not   
 match   
 the   
 needs   
 of   
 the   
 child   
 and   
 adolescent   
 populations.   
 According   
 to Noctor   
 (2006),   
 this   
 suggestion   
 challenges   
 therapists   
 to   
 be   
 creative   
 in   
 tailoring   
 an   
 intervention   
 of

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 L.   
 Oldford   
 –   
 *Harry   
 Potter*   
 and   
 Fairytales   
 in   
 Narrative   
 Therapy   
   
 8

interest   
 to   
 the   
 child   
 and   
 adolescent   
 population   
 groups,   
 in   
 order   
 to   
 enable   
 them   
 to   
 become engaged.

According   
 to   
 Noctor   
 (2006),   
 one   
 creative   
 intervention   
 is   
 the   
 use   
 of   
 fairytales   
 in   
 the therapeutic   
 environment,   
 using   
 the   
 story   
 as   
 a   
 vehicle   
 for   
 the   
 child   
 or   
 adolescent   
 to   
 discuss   
 her or   
 his   
 own   
 narrative.   
 He   
 states:   
 “I   
 have   
 found   
 that   
 veering   
 off   
 the   
 well-­‐worn   
 path   
 of   
 tested group   
 programmes   
 into   
 the   
 dubious   
 terrain   
 of   
 a   
 fictional   
 world   
 of   
 witches   
 and   
 wizards,   
 can   
 take a   
 group   
 to   
 the   
 most   
 surprising   
 and   
 fruitful   
 of   
 places”   
 (Noctor,   
 2006,   
 p.588).   
 Howard’s   
 (1991) findings   
 appear   
 to   
 coincide   
 with   
 those   
 of   
 Noctor’s:   
 Howard   
 states   
 that   
 fairytales   
 are   
 simply “psychologically   
 heavy   
 material   
 packaged   
 in   
 a   
 medium”   
 (p.   
 193)   
 that   
 is   
 attractive   
 to   
 children and   
 adolescents.

As   
 a   
 result   
 of   
 their   
 ability   
 to   
 teach   
 valuable   
 life   
 lessons,   
 allow   
 the   
 reader   
 to   
 become immersed   
 in   
 a   
 comfortable   
 and   
 safe   
 world   
 of   
 fantasy,   
 reach   
 the   
 unconscious,   
 and   
 hold   
 the interest   
 of   
 difficult-­‐to-­‐reach   
 children   
 and   
 adolescents,   
 fairytales   
 are   
 an   
 excellent   
 and   
 valid intervention   
 in   
 narrative   
 therapy   
 with   
 younger   
 populations.   
 The   
 following   
 section   
 comprises   
 a discussion   
 of   
 one   
 particular   
 piece   
 of   
 fantastical   
 literature,   
 the   
 *Harry   
 Potter* series,   
 and   
 its application   
 to   
 narrative   
 therapy.

***Harry   
 Potter* in   
 Narrative   
 Therapy**   
 The   
 literary   
 works   
 in   
 the   
 *Harry   
 Potter*   
 series   
 have   
 been   
 international   
 best   
 sellers.   
 The first   
 three   
 books   
 in   
 the   
 series   
 sat   
 in   
 the   
 first   
 three   
 places   
 of   
 the   
 *New   
 York   
 Times*   
 hardcover fiction,   
 something   
 that   
 has   
 never   
 been   
 previously   
 achieved   
 (Noctor,   
 2006).   
 All   
 books   
 within   
 the series   
 have   
 been   
 sought   
 internationally,   
 each   
 having   
 been   
 translated   
 into   
 more   
 than   
 twenty-­‐five   
 languages   
 (Noel-­‐Smith,   
 2001).

According   
 to   
 Noctor   
 (2006),   
 the   
 *Harry   
 Potter* series   
 (Rowling,   
 2004)   
 has   
 fostered   
 a degree   
 of   
 fanaticism   
 among   
 persons   
 of   
 all   
 ages.   
 Noctor   
 also   
 notes   
 that   
 there   
 appears   
 to   
 be   
 a qualitative   
 difference   
 between   
 the   
 series   
 and   
 other   
 similar   
 literary   
 tools.   
 Noel-­‐Smith   
 (2001) asserts   
 that   
 this   
 different   
 is   
 due   
 to   
 the   
 unconscious   
 appeal   
 of   
 the   
 storyline   
 and   
 the   
 ability   
 of   
 the author,   
 Rowling,   
 to   
 portray   
 issues   
 that   
 many   
 children   
 experience   
 within   
 actual   
 society.   
 Rustin and   
 Rustin   
 agree,   
 believing   
 that   
 the   
 stories   
 evoke   
 conscious   
 and   
 unconscious   
 responses   
 that connect   
 deeply   
 with   
 children   
 and   
 adolescents   
 (as   
 cited   
 in   
 Noctor,   
 2006).

Due   
 to   
 its   
 popularity,   
 the   
 themes   
 within   
 *Harry   
 Potter* are   
 internationally   
 known.   
 Noctor (2006)   
 feels   
 that   
 Rowling’s   
 storylines   
 are   
 insightful   
 and   
 allow   
 readers   
 to   
 draw   
 parallels   
 between the   
 world   
 of   
 Hogwarts   
 and   
 their   
 own   
 lives.   
 Rustin   
 and   
 Rustin   
 suggest   
 that   
 Rowling   
“incorporates   
 the   
 broader   
 social   
 world   
 that,   
 often   
 implicitly   
 and   
 metaphorically,   
 becomes   
 part of   
 the   
 stories   
 and   
 gives   
 them   
 much   
 of   
 their   
 capacity   
 to   
 surprise   
 and   
 delight   
 the   
 reader”   
 (as   
 cited in   
 Noctor,   
 2006,   
 p.   
 580).   
 According   
 to   
 Noel-­‐Smith   
 (2001),   
 the   
 exceptional   
 success   
 of   
 the   
 series   
 is due   
 in   
 part   
 to   
 the   
 Oedipal   
 fantasies   
 they   
 contain.

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 L.   
 Oldford   
 –   
 *Harry   
 Potter*   
 and   
 Fairytales   
 in   
 Narrative   
 Therapy   
   
 9

Noctor   
 (2006)   
 utilized   
 the   
 *Harry   
 Potter* series   
 in   
 group   
 narrative   
 therapy   
 sessions   
 with adolescents.   
 He   
 reports   
 that   
 “the   
 form   
 of   
 directed   
 group   
 storytelling   
 allowed   
 the   
 young   
 people to   
 do   
 something   
 that   
 previously   
 they   
 had   
 found   
 impossible   
 to   
 do:   
 Speak”   
 (Noctor,   
 2006,   
 p.585).

**Important   
 themes   
 in   
 *Harry   
 Potter*:** Several   
 resounding   
 themes   
 in   
 the   
 *Harry   
 Potter* series relate   
 to   
 children’s   
 and   
 adolescent’s   
 daily   
 lives,   
 making   
 the   
 series   
 a   
 great   
 literary   
 vehicle   
 in bringing   
 issues   
 to   
 the   
 forefront   
 during   
 therapy.   
 Basic   
 themes   
 include   
 (a)   
 the   
 value   
 of   
 making clear   
 choice;   
 (b)   
 the   
 importance   
 of   
 developing   
 relationships;   
 (c)   
 the   
 power   
 of   
 jealousy;   
 (d) dealing   
 with   
 loss,   
 abuse,   
 and   
 neglect;   
 (e)   
 self-­‐discovery/learning   
 about   
 oneself;   
 (f)   
 trusting others;   
 (g)   
 paying   
 attention   
 to   
 dreams;   
 and   
 (h)   
 the   
 battle   
 between   
 good   
 and   
 evil   
 (Noctor,   
 2006).

Adolescents   
 who   
 participated   
 in   
 a   
 narrative   
 therapy   
 group   
 with   
 Noctor   
 (2006)   
 also   
 saw   
 the *Harry   
 Potter* series   
 as   
 having   
 links   
 to   
 modern   
 issues   
 they   
 face   
 daily,   
 including   
 racism,   
 sexism, and   
 issues   
 with   
 social   
 class.

As   
 previously   
 described,   
 the   
 theme   
 of   
 good   
 and   
 evil   
 is   
 one   
 that   
 resounds   
 throughout many   
 pieces   
 of   
 fantastical   
 literature,   
 including   
 the   
 *Harry   
 Potter* series.   
 Lord   
 Voldemort epitomizes   
 evil   
 in   
 the   
 storyline.   
 Harry   
 is   
 consistently   
 reminded,   
 through   
 the   
 scar   
 on   
 his forehead,   
 of   
 the   
 dark   
 character.   
 Harry   
 also   
 finds   
 that   
 they   
 have   
 many   
 likenesses,   
 including   
 a physical   
 resemblance   
 as   
 children,   
 the   
 use   
 of   
 the   
 same   
 wand,   
 and   
 their   
 unusual   
 aptitude   
 for communicating   
 with   
 snakes   
 (Noctor,   
 2006).

Another   
 theme   
 surrounding   
 Lord   
 Voldemort   
 is   
 uncovering   
 unconscious   
 motivations   
 and learning   
 to   
 interpret   
 one’s   
 thoughts   
 and   
 emotions   
 (Noctor,   
 2006).   
 As   
 Harry   
 progresses   
 through the   
 series   
 and   
 begins   
 to   
 grow   
 as   
 a   
 person,   
 he   
 is   
 able   
 to   
 objectify   
 signs   
 that   
 predict   
 Lord Voldemort’s   
 imminent   
 arrival,   
 such   
 as   
 pain   
 in   
 his   
 scar   
 and   
 nightmares.   
 Subsequently,   
 Harry learns   
 to   
 ask   
 for   
 others’   
 help   
 more   
 quickly   
 and   
 does   
 not   
 repress   
 thoughts   
 and   
 dreams   
 about   
 his enemy;   
 rather,   
 he   
 learns   
 to   
 use   
 these   
 as   
 a   
 tool   
 for   
 survival.   
 Noctor   
 (2006)   
 draws   
 similarities between   
 this   
 example   
 and   
 the   
 psychotherapy   
 treatments   
 that   
 entail   
 identifying   
 and   
 dealing with   
 fears.   
 Noctor   
 uses   
 Harry’s   
 situation   
 to   
 provide   
 a   
 concrete   
 example   
 and   
 illustrate   
 the importance   
 of   
 seeking   
 assistance   
 and   
 of   
 becoming   
 aware   
 of   
 our   
 thoughts   
 and   
 feelings   
 rather than   
 suppressing   
 them.

Pahel   
 (2001)   
 has   
 also   
 used   
 the   
 *Harry   
 Potter* series   
 in   
 psychotherapy,   
 focusing   
 its   
 use   
 on children   
 and   
 adolescents   
 dealing   
 with   
 childhood   
 abuse   
 (as   
 cited   
 in   
 Noctor,   
 2006).   
 The   
 first   
 book in   
 the   
 *Harry   
 Potter* series   
 (Rowling,   
 2004)   
 begins   
 with   
 Harry   
 suffering   
 from   
 abuse   
 and   
 neglect with   
 the   
 Dursley   
 family.   
 Harry’s   
 world   
 then   
 turns   
 upside-­‐down   
 with   
 the   
 arrival   
 of   
 Hagrid.   
 Harry must   
 make   
 a   
 decision   
 to   
 leave   
 a   
 familiar   
 environment,   
 or   
 to   
 trust   
 a   
 stranger.   
 Pahel   
 relates   
 this moment   
 to   
 the   
 anxiety   
 of   
 a   
 person   
 beginning   
 psychotherapy,   
 as   
 it   
 is   
 also   
 extremely   
 anxiety-­‐provoking   
 and   
 unknown.   
 As   
 both   
 Harry   
 and   
 the   
 individual   
 take   
 that   
 first   
 step,   
 it   
 begins   
 “the hard   
 work   
 of   
 discovery   
 and   
 reconstruction,   
 [in   
 which   
 they   
 know]   
 only   
 that   
 they   
 want   
 to   
 leave the   
 pain   
 behind”   
 (as   
 cited   
 in   
 Noctor,   
 2006,   
 p.   
 583).

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 L.   
 Oldford   
 –   
 *Harry   
 Potter*   
 and   
 Fairytales   
 in   
 Narrative   
 Therapy   
   
 10

These   
 are   
 only   
 two   
 examples   
 related   
 to   
 the   
 themes   
 listed   
 above.   
 Many   
 examples   
 within each   
 theme   
 are   
 prevalent   
 throughout   
 the   
 *Harry   
 Potter* series   
 (Noctor,   
 2006).   
 While   
 these themes   
 are   
 vital   
 to   
 the   
 success   
 of   
 the   
 book,   
 the   
 examples   
 are   
 illustrative   
 in   
 an   
 examination   
 of their   
 potential   
 linkages   
 to   
 narrative   
 and   
 psychotherapy.

***Harry   
 Potter* from   
 a   
 psychotherapeutic   
 perspective:** Another   
 area   
 that   
 must   
 be considered   
 within   
 the   
 use   
 of   
 the   
 *Harry   
 Potter* series   
 is   
 its   
 relationship   
 to   
 the   
 psychotherapy principles,   
 particularly   
 the   
 unconscious,   
 the   
 reality   
 principle,   
 and   
 the   
 Oedipal   
 complex.Noel-­‐Smith   
 (2001)   
 asserts   
 that   
 works   
 of   
 fiction   
 appease   
 the   
 reality   
 principle,   
 defined   
 in   
 the psychoanalytic   
 field   
 as   
 when   
 one   
 defers   
 instant   
 gratification   
 when   
 necessary   
 because   
 of obstacles   
 due   
 to   
 reality.   
 The   
 reality   
 principle   
 is   
 appeased   
 due   
 to   
 the   
 fact   
 that   
 readers   
 are consciously   
 aware   
 that   
 what   
 they   
 are   
 reading   
 is   
 not   
 real.   
 Thus,   
 one’s   
 id   
 (immediate   
 pleasure-­‐seeking   
 drive   
 in   
 the   
 psyche)   
 fantasies   
 can   
 be   
 realized   
 through   
 immersion   
 in   
 the   
 book,   
 without any   
 dangers   
 that   
 may   
 be   
 associated   
 with   
 actually   
 acting   
 out   
 the   
 fantasy.

A   
 primary   
 example   
 of   
 this   
 in   
 the   
 *Harry   
 Potter* series   
 is   
 when   
 Harry   
 must   
 find   
 Platform   
 9¾ at   
 Kings   
 Cross   
 Station   
 to   
 catch   
 the   
 train   
 that   
 will   
 take   
 him   
 to   
 Hogwarts.   
   
 According   
 to   
 Noel-­‐Smith   
 (2001),   
 Harry’s   
 stepping   
 onto   
 the   
 train   
 that   
 takes   
 him   
 to   
 the   
 fantastical   
 world   
 of   
Hogwarts   
 also   
 allows   
 readers   
 to   
 leave   
 the   
 external   
 world   
 and   
 suspend   
 their   
 reality   
 principle, because   
 they   
 know   
 that   
 Platform   
 9¾   
 is   
 fictional.   
 This   
 allows   
 readers   
 to   
 give   
 full   
 rein   
 to   
 the pleasure   
 principle   
 once   
 they   
 are   
 inside   
 the   
 world   
 of   
 Hogwarts   
 (Noel-­‐Smith,   
 2001).

Another   
 psychoanalytic   
 principle   
 inherent   
 to   
 the   
 world   
 of   
 *Harry   
 Potter* is   
 the   
 occurrence of   
 Oedipal   
 fantasies   
 (Noel-­‐Smith,   
 2001).   
 At   
 the   
 age   
 of   
 eleven,   
 Harry   
 finds   
 out   
 that   
 his   
 mother and   
 father   
 were   
 not   
 killed   
 in   
 an   
 automobile   
 crash,   
 but   
 rather   
 died   
 attempting   
 to   
 save   
 his   
 life (Rowling,   
 2003).   
 Harry’s   
 father   
 died   
 trying   
 to   
 save   
 his   
 son,   
 and   
 Harry’s   
 mother   
 died   
 after   
 giving Harry   
 a   
 love   
 that   
 would   
 protect   
 him   
 from   
 evil   
 forever   
 (Noel-­‐Smith,   
 2001).   
 The   
 love   
 that   
 Harry’s mother   
 gave   
 him   
 saved   
 him   
 from   
 evil   
 Voldemort’s   
 attack   
 that   
 night,   
 causing   
 his   
 spell   
 to   
 reverse.

According   
 to   
 Noctor   
 (2006),   
 through   
 this   
 familial   
 environment   
 Rowling   
 has   
 created   
 a family   
 romance   
 in   
 which   
 the   
 reader   
 can   
 find   
 enjoyment.   
 Freud   
 describes   
 a   
 family   
 romance   
 as “‘the   
 child’s   
 noblest   
 longing   
 for   
 the   
 happy,   
 vanished   
 days   
 when   
 his   
 father   
 seemed   
 to   
 him   
 the noblest   
 and   
 strongest   
 of   
 men   
 and   
 his   
 mother   
 the   
 dearest   
 and   
 loveliest   
 of   
 women”   
 (as   
 cited   
 in Noctor,   
 2006,   
 p.   
 581).

Noel-­‐Smith   
 (2001)   
 firmly   
 believes   
 that   
 a   
 component   
 of   
 the   
 popularity   
 of   
 the   
 *Harry   
 Potter* series   
 hinges   
 on   
 its   
 Oedipal   
 fantasy   
 content.   
 She   
 asserts   
 that   
 Harry’s   
 parents   
 are   
 ideal   
 parents, both   
 brave   
 and   
 self-­‐sacrificing   
 on   
 their   
 child’s   
 behalf.

Noel-­‐Smith   
 (2001)   
 also   
 offers   
 several   
 other   
 indicators   
 of   
 oedipal   
 fantasies   
 within   
 *Harry Potter*.   
 She   
 mentions   
 that   
 (a)   
 Harry’s   
 mother’s   
 name   
 is   
 Lily,   
 a   
 name   
 that   
 represents   
 all   
 that   
 is pure;   
 (b)   
 the   
 last   
 thing   
 Harry’s   
 father   
 highlights   
 before   
 dying   
 is   
 the   
 importance   
 of   
 the   
 mother-­‐son   
 relationship;   
 and   
 (c)   
 Harry’s   
 scar   
 is   
 a   
 significant   
 mark   
 that   
 is   
 evidence   
 of   
 his   
 mother’s   
 loving

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 L.   
 Oldford   
 –   
 *Harry   
 Potter*   
 and   
 Fairytales   
 in   
 Narrative   
 Therapy   
   
 11

sacrifice   
 to   
 protect   
 him   
 from   
 all   
 that   
 is   
 inherently   
 evil.   
 Because   
 so   
 many   
 aspects   
 of   
 the   
 *Harry Potter* series   
 have   
 components   
 of   
 Oedipal   
 fantasies,   
 Noel-­‐Smith   
 (2001)   
 believes   
 the   
 reader   
 is able   
 to   
 indulge   
 in   
 “wish-­‐fulfillment   
 of   
 the   
 most   
 basic   
 phantasies   
 without   
 the   
 grief   
 which   
 would ordinarily   
 attach   
 to   
 them:   
 we   
 know,   
 at   
 a   
 conscious   
 level,   
 that   
 the   
 story   
 is   
 not   
 true   
 (p.   
 202).” Additionally,   
 Noel-­‐Smith   
 (2001)   
 sums   
 up   
 her   
 position   
 by   
 asserting   
 that   
 the   
 death   
 of   
 Harry Potter’s   
 parents   
 allows   
 unconscious   
 fulfillment   
 of   
 Oedipal   
 fantasies,   
 through   
 the   
 intense   
 love he   
 shared   
 with   
 his   
 mother   
 and   
 the   
 death   
 of   
 his   
 father.

**Conclusion**   
 One   
 of   
 the   
 primary   
 focuses   
 in   
 narrative   
 therapy   
 involves   
 separating   
 the   
 person   
 from   
 her or   
 his   
 problems   
 and   
 objectifying   
 those   
 problems   
 (Richert,   
 2003).   
 According   
 to   
 one   
 of   
 the founders   
 of   
 narrative   
 therapy,   
 Epston,   
 it   
 is   
 crucial   
 to   
 employ   
 the   
 belief   
 that   
 “[t]he   
 person   
 isn’t the   
 problem;   
 the   
 problem   
 is   
 the   
 problem”   
 (as   
 cited   
 in   
 Richert,   
 2003,   
 p.   
 188).

Research   
 has   
 supported   
 the   
 use   
 of   
 stories,   
 specifically   
 fairytales,   
 to   
 promote   
 therapeutic healing   
 in   
 narrative   
 therapy   
 (Noble   
 &   
 Jones,   
 2005).   
 Narrative   
 therapy   
 includes   
 the   
 adamant belief   
 that   
 individuals   
 shape   
 their   
 lives   
 through   
 personal   
 stories   
 and   
 narratives,   
 and   
 re-­‐  
authoring   
 a   
 story   
 therefore   
 can   
 be   
 powerful   
 in   
 shaping   
 an   
 individual’s   
 life   
 (Noble   
 &   
 Jones, 2003).

Howard   
 (1991)   
 provides   
 an   
 illustrious   
 opinion   
 on   
 the   
 importance   
 of   
 stories,   
 which emphasizes   
 the   
 importance   
 of   
 fantastical   
 works   
 such   
 as   
 *Harry   
 Potter* and   
 their   
 influence   
 on everyday   
 life:   
 Stories   
 are   
 habitations.   
 We   
 live   
 in   
 and   
 through   
 stories.   
 They   
 conjure   
 worlds.   
 We   
 do   
 not know   
 the   
 world   
 other   
 than   
 as   
 story   
 world.   
 Stories   
 inform   
 life.   
 They   
 hold   
 us   
 together   
 and keep   
 us   
 apart.   
 We   
 inhabit   
 the   
 great   
 stories   
 of   
 our   
 culture.   
 We   
 live   
 through   
 stories.   
 We are   
 *lived* by   
 the   
 stories   
 of   
 our   
 race   
 and   
 place.   
 It   
 is   
 this   
 enveloping   
 and   
 constituting function   
 of   
 stories   
 that   
 is   
 especially   
 important   
 to   
 sense   
 more   
 fully.   
 We   
 are,   
 each   
 of   
 us, locations   
 where   
 the   
 stories   
 of   
 our   
 place   
 and   
 time   
 become   
 partially   
 tellable.   
 (Howard, 2001,   
 p.   
 192)   
Fairytales   
 contain   
 powerful   
 messages   
 that   
 are   
 extremely   
 valuable   
 tools   
 for   
 narrative   
 therapists. As   
 the   
 postmodern   
 era   
 continues,   
 fantastical   
 and   
 fictional   
 environments   
 such   
 as   
 Hogwarts   
 will continue   
 to   
 provide   
 creative   
 and   
 socially   
 applicable   
 contexts   
 for   
 therapeutic   
 learning.

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 L.   
 Oldford   
 –   
 *Harry   
 Potter*   
 and   
 Fairytales   
 in   
 Narrative   
 Therapy   
   
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 H.,   
 &   
 Hinton-­‐Bayre,   
 A.   
 (2008).   
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 tales   
 to   
 end   
 wails:   
 Narrative   
 therapy   
 techniques and   
 rehabilitation   
 counselling.   
   
 *Australian   
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 Counselling,   
 14*(1), 16-­‐25.

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 Westerhof,   
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 Jong,   
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 effects   
 of   
 integrative reminiscence   
 on   
 meaning   
 in   
 life:   
 Results   
 of   
 a   
 quasi-­‐experimental   
 study.   
 *Aging   
 and Mental   
 Health,   
 12*(5),   
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 therapy:   
 A   
 psychotherapeutic   
 approach   
 in   
 the   
 treatment   
 of adolescents   
 with   
 Asperger’s   
 disorder.   
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 and   
 Adolescent   
 Psychiatric Nursing,   
 21*(1),   
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 A   
 narrative   
 approach   
 to   
 strategic   
 eclecticism.   
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 27*(1),   
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 therapy   
 in   
 rehabilitation   
 after   
 brain   
 injury:   
 A   
 case   
 study.

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 13*,   
 21-­‐25.

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 tales:   
 A   
 narrative   
 approach   
 to   
 thinking,   
 cross-­‐cultural   
 psychology, and   
 psychotherapy.   
 *American   
 Psychologist,   
 46*(3),   
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 &   
 Teater,   
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 An   
 anti-­‐stigma   
 approach   
 to   
 working   
 with   
 persons   
 with   
 severe mental   
 disability:   
 Seeking   
 real   
 change   
 through   
 narrative   
 change.   
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 Work Practice,   
 23*(1),   
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 &   
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 narrative   
 therapy   
 in   
 sport   
 psychology   
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 to   
 a   
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 body   
 image   
 program.   
 *The   
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 and   
 Purpose   
 in   
 narrative   
 therapy:   
 Questioning   
 the   
 postmodern   
 rejection of   
 meta-­‐narrative.   
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 and   
 Theology,   
 32*(3),   
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 &   
 Goncalves,   
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 Narrative   
 in   
 psychology:   
 The   
 emerging metaphor.   
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 55*(10),   
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 A.,   
 &   
 Jones,   
 C.   
 (2005).   
 Benefits   
 of   
 narrative   
 therapy:   
 Holistic   
 interventions   
 at   
 the   
 end   
 of life.   
   
 *British   
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 330-­‐333.

Noctor,   
 C.   
 (2006).   
 Putting   
 Harry   
 Potter   
 on   
 the   
 couch.   
 *Clinical   
 Child   
 Psychology   
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