



# Linking Lives: Invitations to Clients to Write Letters to Clients

Julia Gerlitz

*At the time of writing this article, the author worked as a mental health and addiction counsellor in Squamish, B.C., Canada. The agency that employed Julia is publicly funded and partners with the Squamish Nation, the region's First Nation group. Julia can be contacted c/o juliagerlitzcounselling@gmail.com or 5740 Boylen Rd, Nelson, BC, V1L 6Y3, Canada.*

## Abstract

This article describes an innovative form of therapeutic letter writing in which clients are invited to write letters to each other, rather than the more traditional narrative practice of therapists writing letters to clients. Two clients who both struggle with chronic pain and caregiver stress are consulting with the same counsellor and begin to write therapeutic letters to each other anonymously, with their counsellor passing the letters between them. Examples of the client-written letters are included in the body of the article as well as the clients' responses about their experiences with this innovative form of narrative letter writing. The author describes the intention behind this practice and offers suggestions based on her experience of how to facilitate the process. Most notably, this form of client generated letter writing decentres the therapist and highlights the client's voice, provides an opportunity for clients to strengthen their preferred narrative, and creates communities of concern in which clients build relationships with each other that assist with decreasing the isolation and influence of problems in their lives. The article aims to inspire fellow narrative practitioners to link the lives of their clients through client-written therapeutic letters.

**Key words:** *therapeutic letters, narrative documents, communities of concern, insider knowledge, chronic pain, caregiver stress*

## Introduction

Therapeutic letters are what initially captivated me about narrative therapy. The first introduction I had to narrative ideas was reading *Narrative Means to Therapeutic Ends* by Michael White and David Epston (1990). The numerous examples of therapeutic letters outlined in this groundbreaking book emanated a beauty, skillful playfulness, and dignity for the client that I had not yet come across in my professional training as a counsellor. In the ensuing 5 years since immersing myself in the study and practice of narrative ideas, I have written therapeutic letters to clients, sought consultation to improve my letter writing abilities, read as many letters as possible written by other narrative therapists, read articles on letter writing, and taken workshops on the theory behind the construction of letters. In particular, David Nylund's<sup>1</sup> skillful letter writing has informed my learning. However, the types of letter writing I have come across have traditionally been letters written by therapists or, more recently, letters written by family and friends of the client, as in Stephen Madigan's creative letter writing campaigns (Madigan, 1997, 1999). This article describes an innovative approach to letter writing that provides an additional way to include letters in therapy in which clients are the ones writing therapeutic letters to each other. With this use of letters, the client is the author, and not solely the recipient of therapeutic letters. I will describe how this idea came about, how it was implemented, and provide examples of client-written letters. The article will conclude with clients' reflections on their experience of participating in this novel letter writing project.

Working as a narrative therapist in a busy rural Mental Health and Addiction centre in Squamish, B.C., Canada, I have the opportunity to hear many people's stories about how they are standing up to problems in their lives. The resourcefulness and creativity that is shared often makes me reflect how it is somehow not entirely fair that I should be the only one benefiting from hearing these stories. I have had the frequent experience of sitting and listening to a client share something wise and helpful and think to myself, 'I wish my other client could hear this right now, because these two clients are really dealing with similar problems'. I would try to remember what my clients said in order to share with other clients, but I found when I passed on these wise words, they lost some of their zest and impact. This situation led me to start inviting my clients to write letters to each other so they could share with each other their hard-won knowledge about how to decrease the influence of problems in their lives. I wanted my clients to benefit from each other and thought linking their lives through letter writing may be a simple yet powerful way to do so. Many narrative therapists have demonstrated that therapeutic letters written by therapists to clients are an effective, impactful, and cost-efficient way to support and strengthen

the development of a new story for people, and I was curious to know if clients writing their own letters to each other could produce the same benefits.

To provide an example of this new letter writing practice, I would like to introduce you to 'Rita' and 'Naomi' (names changed to protect confidentiality). Rita is a 55-year-old First Nations woman who has advanced rheumatoid arthritis (RA). She also is the matriarch of her family and her two grown children and three grandchildren live with her. She takes on the lion's share of parenting, household duties, and managing the family's finances. She also is a huge supporter and assistant coach of her two granddaughters' elite soccer careers, and an advocate of Aboriginal education for children in her community. The RA makes everything challenging for her, chronic pain is an everyday reality, and the stress of managing the household and being the main caregiver to her grandchildren exacerbates the severity of the RA and chronic pain.

Naomi is a 28-year-old Canadian woman of European descent who struggles with intense migraines and fibromyalgia. She is unable to work due to the pain and spends most of her time at home. Flare-ups cause her to have to lie in a dark room for days, and tasks such as unloading the dishwasher exhaust her. Her young husband has terminal brain cancer and she is his primary caregiver. The stress of caregiving and the grief of slowly losing her husband magnify the chronic pain. She is also the creator and administrator of a number of very successful online support groups, Facebook pages, and blogs for caregivers and for folks living with chronic pain. She has several hundred followers on these sites.

Both of these woman were consulting with me to find creative ways to not let the chronic pain get them down and hold them back from life, as well as to develop strategies to manage the stress of being full-time caregivers to family members. I wanted very much for them to benefit from the resourcefulness, courage, and skills of the other, so I invited them to write letters to each other. This is how I introduced the idea of writing letters to one another:

*'What you are saying reminds me a lot of this other person I am working with right now. You both have different stories, but some of the problems you are up against seem similar to me. She deals with chronic pain and is also the main caregiver in her home. I keep thinking that she would benefit so much from hearing you right now, but I know I wouldn't get it all right if I passed on your words. Would you be interested in sharing with her what you know about chronic pain and being a caregiver, and maybe hearing what she has to say about it? I was thinking I could pass letters between the two of you.'*

Both Rita and Naomi responded with excitement and openness to this invitation. Rita wrote a letter first, which I then passed on to Naomi, and before the week was over, Naomi had already

written a response. I then called Rita to let her know a letter was waiting for her at our next meeting and she emailed to say, 'I can't wait. Thank you so much for connecting us.'

## *The Letters: Rita's first letter*

Dear Naomi,

I'm looking forward to writing to a person who will understand The Pain. Because when I talk about pain with those I love, they don't understand and only somebody who deals on a daily basis with chronic pain will understand and feel how I am feeling. It makes me sad when loved ones don't understand. They get this blank look on their face, like they don't know where I am coming from.

For the most part, I cope with The Pain, but I don't have a support group of other people who live with chronic pain. The Pain gets so bad that I want to run away from it. But I don't know where to go. It would be helpful to know how you cope with The Pain. Because what I do is hide in my room. I'd like to hear what it's like to walk in your footsteps for the day. What do you go through? I'd like to experience your pain only because then I would know there is someone else out there who goes through what I do.

Have you ever played the role of caregiver? I've been a caregiver all my life and at the age of 55 I have realised that I don't need to play that role any more. As children, we take on the roles given to us by our family, but as adults we can choose if we want those roles or not. That is what I am working on right now. I want to know how do I turn the caregiver role around and have others care for me now? I need to love myself and open myself up to have others care for me and love me.

Reflecting on my life, I have seen the negative effects that being a caregiver has had on my body and emotional state of mind. For me now, choosing to love myself is the biggest thing. Saying I am worth it lets me know I don't need to take on that role of caregiver any more. My hope would be that you can learn from me and decide to not take on the role of caregiver (if you are one). So that it won't carry you to a place that allows the disease and pain to take over. My hope is we can both learn to allow ourselves to be loved and to take care of ourselves and let those that love us take care of us.

I look forward to hearing from you.

Sincerely,  
Rita

## *Naomi's response*

Hi Rita,

I was very happy to get your letter; so much of it could have been written by me.

I can relate so much to family not understanding the pain. I don't know about you, but my chronic pain is due to migraines and fibromyalgia, so for the most part, my pain is entirely invisible to those around me. They can't see it so it must not exist or be as bad as I say it is. It's so isolating when no-one else seems to recognise something that colours and often dictates every aspect of my life. I'm sure another part of the problem is that I don't see people very often, so when I actually do, I do my best to mask the pain as best I can and talk about more pleasant things. I have a very good mask, I've been perfecting it as long as I can remember, but I can't keep it up for long and I pay for it later. I wear it because I'm afraid to talk about my

pain too much and risk being that person who always brings everyone down and loses them, but it's also a rare opportunity for me to pretend that I feel okay and am part of the real world again. If I'm lucky, I can even trick myself into believing it for a little bit, so that makes it worth it.

One difference between us is that I do have a support group, a couple actually. I never thought that a support group would be for me, but it has been such a great outlet. They're just on Facebook, so I didn't have to deal with getting dressed, leaving the house, talking to people face-to-face, or waiting for the next group meeting to connect again if I wanted to; it was a way for me to ease into the whole support group idea. I could share as much or as little as I wanted or just hang around reading other people's posts and comments, and it was available to me whenever I needed it. Not only that, it seems like there are groups for every condition possible, so finding people who understood each individual issue was surprisingly easy. I've made some great online friends who help me so much.

For the most part, I cope with the pain pretty well by being kind to myself and not pushing my limits, and using my 'tools' as needed. When it starts getting bad, I start going through my 'toolbox' of things that may help: meds, hot shower, ice packs, heat packs, dark room, water, food, squared breathing, meditation, massage, soft music, lavender, nerve blocks, the list goes on and is always being added to. Something that I learned through some of the groups is the spoon theory. A girl came up with it trying to explain to her friend what it was like to live with lupus, but it has been adopted by other chronic diseases as it explains them all pretty well. Basically, she grabbed a bunch of spoons, handed them to her friend and told her she had lupus. She then walked her through a typical day, taking a spoon away (or more than one) for every single thing she did, even the most simple, explaining that most people start the day with an unlimited amount of possibilities, the 'spoons' to do whatever they desire, and expect to have a never-ending supply. But when you're in chronic pain, once your spoons are gone, they're gone. Sometimes you can borrow against tomorrow's spoons but tomorrow will be even harder with even less spoons. I think it sums it up pretty well, and try to pay closer attention to what I use my spoons on and it has really helped me slow down.

It's strange you mention being a caregiver as I currently am caring for my husband. The other difference between us being that I'm not done yet, but all the negative physical and emotional effects are all there for me too. I'm 28 and have no idea how much longer I will be a caregiver, my husband's cancer is incurable so it all could end at any moment or continue on for many years. As much as I sometimes wish I hadn't taken it on or could walk away, there's no way I ever could. But if you figure out how to turn it all around to have others care for me, be sure to let me in on it. For now, I'm just doing my best to focus on myself more, making sure that my needs are also getting met, and that I'm doing all I can to keep the pain from taking over.

I hope, if nothing else, you can be assured that you are most definitely not alone and that maybe this can be an outlet for you to express yourself to someone who understands where you're coming from. I know everyone has their own story and methods, so maybe you can help me add some tools to my toolbox too.

Wishing you pain-free days,  
Naomi

## The Intent of Linking Lives through Client-written Letters

The intentions behind this innovative letter writing practice are purposeful and varied. First, it allows communities of concern (Madigan & Epston, 1995) to grow and develop. What we know about problems is that one of their main tactics is to isolate people from their friends, families, and communities. Problems try to convince us that we are the only ones dealing with this, and that we are somehow different, defective, or alone. By linking clients through writing letters to each other, they have access to each other's stories and realise they are not the only

ones up against a particular problem. Naomi highlights this idea of building communities of concern and fighting against the problem's use of isolation when she writes: *'I hope, if nothing else, you can be assured that you are most definitely not alone and that maybe this can be an outlet for you to express yourself to someone who understands where you're coming from.'*

Second, the intention of inviting clients to write letters to each other is to encourage them to step into a place of 'expertise'

about how to deal with problems. This is also known as consulting your consultants, in which the therapist asks questions that intend to highlight what the client knows about the particular problem they are dealing with. This de-centers the therapist, so that clients' knowledge and meaning-making is privileged in the therapeutic conversation (White, 1997). In narrative practice, it is important for therapists to be aware of the operations of power in the counselling relationship (Stevens, 2010), and to take a curious, respectful posture that privileges the person's experience, and not the therapist's (Nylund, 2002). I see handing the proverbial pen over to clients to write their own letters as a way to minimise power differentials and put clients' voices at the centre of the therapy. The process of clients writing their own letters provides an opportunity to privilege insider knowledge, rather than professional knowledge. Epston (2014) describes how the foundation of narrative therapy was built on privileging knowledge that persons and communities have about themselves. Epston writes, 'Such knowledges (insider) have something of the sacrosanct about them and as such, should be given unusual respect as they are particular, local, nonidentical and usually emerge out of the very vicissitudes of life in which necessity was the mother of their invention', (p. 106). Rita and Naomi were no longer coming to a therapist to be 'fixed', they were instead tapping into their skills and abilities of living with these problems (insider knowledge) by articulating in their letters the strategies they had honed. This is illustrated by Naomi's description of her toolbox as well as by her sharing of the theory of spoons: *'When it starts getting bad, I start going through my toolbox of things that may help ... when you're in chronic pain, once your spoons are gone, they're gone. Sometimes you can borrow against tomorrow's spoons but tomorrow will be even harder with even less spoons.'*

'Consulting your consultants' and building 'communities of concern' or 'leagues', such as the Anti-Habit League (Epston, 1998) or the Anti-Anorexia League (Madigan & Goldner, 1998), are historical narrative practices that the work described in this paper relates to. Epston explains that providing clients and their families membership to a League that has formed in relation to the shared experience of a particular problem then gives them the authority to tell others about the problem and what they have done to stand up to it. Epston uses the term 'therapist-archivist' (1998, p. 176) to describe the role of collecting letters, videotapes, audiotapes, and stories from these consultations, and then sharing them with other persons or families who may be newcomers to the League. My sense of the therapist-archivist role that Epston discusses is that over time the collection of records builds a central bank of supportive information to be drawn from when the therapist encounters another person or family who has a similar predicament to attend to. The process of linking lives that I am describing here is similar in that information is being shared between clients, however the focus in this article is on developing a two-way

relationship between the linked clients that deepens over time and in which consecutive personal letters are written that are addressed to a specific partner client rather than intended for a more distant or future audience.

A benefit of therapeutic letters is that they break down the distinction between therapy in the office and therapy outside of the office (Nylund & Thomas, 1994). The advantage with letters is that the therapeutic work continues every time the letter is read, whether the person is at the grocery store, at home, or in the office. Nylund states that, 'They (letters) provide the message that being in the world is more important than being in the therapy office. When therapeutic activity continues even after the therapy visit, clients are more likely to rely on their own knowledge and less on the expert knowledge of the therapist.' (1994, p. 5). By engaging clients in the act of not only reading, but also in the authoring of letters at home, I intend to multiply or enhance the effect of therapeutic activity continuing outside the therapy session. I would even go so far as to hope that as the letter writing relationship developed between Rita and Naomi, they began to rely more on their own and each other's knowledge, rather than on any knowledge seen to be located within me, their counsellor.

Third, this particular letter writing practice intends to help clients thicken the preferred story and move away from re-tellings of the problem story. White and Epston (1990) suggest that we cannot have direct knowledge of the world, but rather what we know of life is through the meaning we make of it or, what many social scientists have labelled 'lived experience'. White and Epston explain that, 'In order to make sense of our lives and to express ourselves, experience must be "storied" and it is this storying that determines the meaning ascribed to experience' (1990, p.11). When Rita and Naomi are writing to each other about chronic pain and caregiving, they are putting meaning on the experience of these problems and are therefore shaping their experience of them. I have found that when clients are invited to write to each other, they tend to share (write the story of) what they have learned, how they have responded to problems, and their values and hopes, along with other such elements of preferred stories. This is demonstrated with Rita's expression of her preferred story: *'My hope is we can both learn to allow ourselves to be loved and to take care of ourselves and let those that love us take care of us ... For me now, choosing to love myself is the biggest thing. Saying I am worth it lets me know I don't need to take on that role of caregiver any more.'* You will notice that although both Rita and Naomi acknowledge the dire effects of the problems in their lives, they do not dwell there with long descriptions of how hard caregiving can be or how terrible chronic pain is (which would be understandable and maybe even expected). On the contrary, their letters, to me at least, have the distinct flavour of a preferred story with ingredients of hope, resistance, and strength, and noticeably lack the despair and powerlessness typical of a problem story.

I believe the process of writing these letters to each other is shaping Rita and Naomi's lived experiences of the problems in a helpful way.

In a similar vein, White (1988) used the following therapeutic question to guide his work and theoretical thinking about how problems operate in people's lives: Is the talk about the problem gaining more influence over the person or is the person's talk gaining more influence over the problem? Rita and Naomi's letters are full of talk that I consider to be moving them towards gaining more influence over the problem. In fact, I would argue that the physical act of writing the letters provides fertile ground for this helpful kind of talk to develop and grow. I would also hypothesise that writing letters to another person who is dealing with similar problems brings out helpful talk, in contrast to personal writing, such as journaling, where the tendency may be to tell and re-tell the problem story. Naomi did say to me that she purposefully did not linger on how despairing and hopeless the pain made her feel at times, because she did not want to 'bring Rita down'.

Fourth, inviting clients to write letters is intended to generate the creation of a permanent document that contains their experiences and knowledge about the effects of the problem, and how to respond to the problem in helpful and creative ways. Conversations have a way of slipping out of our memory; however, a letter has a permanence that clients can return to in times of need. As narrative therapists, we want preferred stories to have sticking power, and one of the key purposes of written documents is to record knowledge and preferred stories in permanent form (Fox, 2003). Both Rita and Naomi indicated to me that they would read and re-read each other's letters; but interestingly, they also reported reading their own letters numerous times, actually more frequently than the letters written by the other, especially when they were having a hard day. Fox suggests that written documents allow access to 'particular knowledges that a person needs to have available to them at times of crisis, whether these knowledges are knowledges of particular skills or knowledges of preferred identities' (2003, p. 26). Fox is referring to written documents that have been created by the therapist or someone in the client's social circle. Yet in this case, the clients are returning to words they have authored themselves.

## Suggestions when Linking the Lives of Clients

How the idea of exchanging letters is introduced to clients is of the utmost importance. Merely telling a client to write a letter to someone else may result in that letter never materialising. What I have found most helpful in inviting the exchange of

letters is to stress the idea that clients will be helping another person through their letters by sharing experiences of living with a specific problem. This repositioning of the client as a person who has valuable information, knowledge, and advice to give to another, rather than being a person who *needs* help from a therapist, is highly motivating and will increase the likelihood of client-written letters. To create the context for a meaningful exchange such as Rita and Naomi's correspondence, the therapist must be more than just a postman. Facilitating brainstorming conversations beforehand about what the client may want to include in their letters as well as always talking about problems using externalising language, allows the therapist to gently influence the content and style of the letters so that they follow narrative principles. The use of narrative questions to invite the brainstorming sessions encourages the client to first think about, and then to write about the problem they are up against from a relational rather than an individualised stance. Other than these gentle nudges, I tend to allow the client to have full authorship over the content of the letters. With Rita and Naomi, I did not ask them to change or edit anything in their letters before they were given to each other.

Based on my experience of inviting clients to write letters to clients, here are some additional suggestions I have gathered that will improve the likelihood that clients will want to continue writing letters to each other. Be flexible as to when, where, and how the letter is written based on your client's preference. Letters can be written in session or at home when the client is with or not with the therapist. The client can type, write, or dictate the letter. I have found some clients to be intimidated by the idea of writing (my spelling is not great, how would I start, etc.), and at this point I typically offer to take notes while the client dictates what they would like in the letter. This draft is then given to the client to edit or change as they see fit before passing it on to their partner client. Rita chose to dictate her letters to me due to the RA making it difficult to hold a pen or type, while Naomi chose to type her letters on her own at home. Giving clients as much choice and flexibility as possible will allow them to take ownership over the project, feel more comfortable, and contribute to a longer lasting letter writing relationship.

The following is a small detail, but I will include it here. I have gotten into the habit of putting clients' letters in sealed envelopes that I then hand to the partner client at her next session, with her name printed on the front. My thought is that a sealed envelope (rather than just a piece of paper) provides a formality and sense of specialness, reminiscent of receiving a letter in the mail. Similarly, it's good to be flexible in how, where, and when response letters are read, to give the client the choice to open the envelope in session and read it together, or to take the letter home and have the pleasure of opening the sealed envelope and reading the letter with time to ponder it on

her own. Rita chose to read the responses together in session, while Naomi preferred to take the letters home to read them by herself. In this case, I knew the content of Rita's letters to Naomi because Rita had dictated her thoughts to me. I think it is important for the therapist to know the content of each letter in order for the letter to be used as a tool in sessions to deepen the therapeutic process and thicken the preferred story. Clients have always given me the letters beforehand, which we read together in our sessions (before the client who the letter is for has ever laid eyes on it), and then I put the letters in a sealed envelope for the partner client to either read with me at their next session or at home alone, such as Naomi preferred.

Another point that will help this process flourish is to encourage clients to include a question or two (or three or four) in their letters. I have found this increases the likelihood and punctuality of a response and helps with the flow of communication. For example, Rita wrote in her first letter to Naomi, *'I'd like to hear what it's like to walk in your footsteps for the day. What do you go through?'* and, *'It would be helpful to know how you cope with your pain'*, and, *'Have you ever played the role of caregiver?'* Questions open up space for new possibilities and meaning and help the alternate storyline develop (Nylund, 1994).

Additionally, use externalising language when talking with clients about the contents of their letter, with the intent that they will pick up this practice and start writing about problems in a relational, rather than in an individualised way. White and Epston (1990) explain that in the process of externalising,

'The problem becomes a separate entity and thus external to the person or relationship that was ascribed as the problem. Those problems that are considered to be inherent, as well as those relatively fixed qualities that are attributed to persons and relationships, are rendered less fixed and restricting.' (p. 39).

Externalising also moves clients away from speaking about themselves as if they have something wrong with them or are deficient in some way (re-telling the problem story). Most other psychological therapies view problems in an internalised manner, and many clients have taken up the perspective that the problem is, in fact, within them and/or created by them. To counteract this, when speaking with Rita and Naomi about the chronic pain, I would say 'The Pain' rather than 'your pain', and, 'How has the caregiver role tricked you into not thinking it is important to take care of yourself?' rather than, 'What gets in the way of you taking care of yourself?' As Rita and Naomi spent more time in therapeutic conversations with me and as more letters were written, I observed more externalising language being used.

I have also found reading the client-written letter aloud in session before handing it over to the partner client to be

immensely helpful. A whole session can develop around the letter where the therapist uses it as a rich template or starting point to ask narrative questions or highlight unique outcomes hidden in the words on the page. The beauty of this is that the therapist is using the client's own thoughts, beliefs, stories, and experiences recorded in the letter to guide the therapeutic conversation, which again places the client in the role of expert in her own life.

Likewise, going over the response letter with the client (after she has had the opportunity to read it at home alone if she so chooses) has provided many generative conversations. A particularly helpful approach I have found is to ask a series of questions that invite the client to reflect deeply on the content of the letter. A common series of questions I use are variations on outsider witness reflection questions developed by Michael White, as shared by David Denborough (2012).

- What stands out to you about this letter?
- Why does that part strike a personal chord with you?
- What difference does it make to you to hear this?
- Does it spark a new idea in you or give you food for thought?
- What might you write back in response?

I have found that this avenue of questioning opens up even more unique outcomes and possibilities to therapeutically explore. Denborough (2012) explained in his workshop that by responding to these questions, people are engaged in a telling and a re-telling of stories that help them develop a stronger and much richer understanding of what they already know, thereby strengthening the development of the preferred story.

From my perspective, linking Rita and Naomi through letter writing helped along the process of therapy. I observed both women spending less time immersed in the problem story in session and reporting unique outcomes in their lives with more frequency as the weeks and letter writing progressed. As for me, the excitement of reading the letters written by Rita and Naomi, the anticipation of hearing what they thought of each other's letters, and the amazement at the richness of their words on the page, enlivened my work as a therapist. As a side note, my reality of working at a public health agency with long waitlists often included some stress and a potential for burnout, and linking my clients through letter writing was a much needed antidote to the sometimes pressurised work climate. Most importantly though, I wanted to hear from Rita and Naomi what their experiences had been like writing letters to each other. After several letters had been passed between them, I interviewed each woman to ask for her reflections on the process.

## Naomi's Response to the Linking Lives Letter Writing Project

This is Naomi's verbatim response about her experience of writing and receiving client-written therapeutic letters:

*'Getting letters from Rita was really nice. It was important for me to get a physical piece of paper in an envelope, not just an email. Getting a letter felt like the equivalent of adult Christmas to me. Getting Rita's letters and reading them led to me being able to write my own letters back to her. Her words inspired mine. I would go back and forth between her letter and the one I was writing. I would reread hers over and over before I decided what I wanted to write back. It was nice to write the letters too. They took me a lot of time, but I took my time writing them purposefully. Putting my thoughts down on paper was good for me; it was therapeutic. I liked being able to take my time with it because it allowed me to work at my own pace and really think about what I meant and wanted to write. You don't get this time in a conversation with someone. I wrote those letters for Rita, but in a way I also wrote them for myself. I would reread my own letters a million times and think WOW, I wrote that? My words and perspective were fresh and not bogged down by the problems I'm facing. I would also reread the letters I wrote when I felt I needed to get back to that healthy place of acceptance I was in when I wrote them. It was also important that Rita and I are both dealing with chronic pain. Because of this I felt really understood right away and like I didn't have to qualify or defend my feelings. It also helped me say a whole lot more to her than I would my best friend because Rita faces the same issues I do. The anonymous factor was really good too. It gave me the flexibility to say things to Rita I might not say otherwise if I had known her. It helped me not censor myself like I sometimes do with family and friends. Family and friends often try to solve the problem for me, which isn't helpful. The anonymous factor allowed me to say and mean whatever I actually do mean without worrying if people are going to understand where I'm coming from. I think writing letters to Rita and getting letters in return helped along my therapy with Julia because it helped me connect everything we had been working on in therapy. Because I took my time to respond to the letters, they let me explore below the surface and put more thought into what we talk about in therapy. I would recommend that other counsellors link their clients in this letter writing way.'*

### Observations about Naomi's response

- Putting the letters in an envelope created a sense of excitement and anticipation. ('It was like adult Christmas.')
- She talks more about writing the letters than about receiving them. This suggests that the act of writing

the letters is particularly helpful for clients. It appears that Naomi used the letters she had written to move away from the problem story ('not get bogged down by the problem') and to give her a reminder of hope and progress ('get back to that healthy place I was in when I wrote them'). The observation that writing the letters was particularly impactful has implications for how important it may be to invite clients to write their own letters so they are not just the receiver of letters, as is more common in traditional therapeutic letter writing practices.

- It is essential to link clients who share comparable stories or who are up against similar problems, rather than link clients facing unrelated situations. ('It was also important that Rita and I are both dealing with chronic pain. Because of this I felt really understood right away and like I didn't have to qualify or defend my feelings.')
- Keeping the clients anonymous to each other may be important. I initially maintained anonymity between these two women to adhere to workplace confidentiality policies. Yet, the fact that Rita and Naomi did not know each other, and that they remained anonymous to each other through the entire project, seemed to facilitate an openness and decrease any self-censorship in the letter writing. ('The anonymous factor allowed me to say and mean whatever I actually do mean without worrying if people are going to understand where I'm coming from.')
- The letter writing allowed Naomi to remain engaged in a re-authoring conversation outside of our sessions together, which seemed to have helped the therapeutic process move more quickly for her. ('It helped me connect everything we had been working on in therapy. . . let me explore below the surface and put more thought into what we talk about in therapy.')

## Rita's Response to the Linking Lives Letter Writing Project

This is Rita's verbatim response about her experience:

*'What was most attractive to me about the idea was that it would help me to develop a connection with somebody who would understand where I was coming from. It was really good to be able to write a letter to another person who is going through the same problem as me. I would look forward to receiving the letters and hearing from her. With the first letter I got, I didn't know what to expect. But when I read it, I thought, oh my God, it was like looking in the mirror and seeing a reflection of myself. I felt she understands me. Writing my own letters to Naomi was very helpful because I felt*

that I could say what I want because she understands where I am coming from. It also was helpful because it made me realise how many tools I actually have in my basket to deal with this problem. Until writing them down for Naomi, I never realised how many tools I actually utilise. I also liked thinking I could help her by giving her some information and sharing ideas about how to cope with chronic pain. It felt like we were sitting in a circle, kind of like a dialogue, where we could give info and receive it. Through this, a new perspective was given to me. The letters helped me share my pain with another person for the first time in my life. It was important to share what I go through on a daily basis with someone who would get it and understand me. When I voice my pain to my family, they have sympathy but also a lack of understanding. But Naomi gets it. The fact that we are writing anonymously doesn't bother me at all. Putting a face to a name isn't important. The only thing that is important to me is that we share a common experience.'

## Observations about Rita's Response

- Rita reiterates that one of the most essential elements of being linked to Naomi was that they were both up against similar problems in their lives. It appears that for Rita, she felt able to express herself without fear of being misunderstood. (*'It was like looking in the mirror and seeing a reflection of myself. I felt she understands me.'*)
- Writing the letters allowed Rita to see her own influence over the problem and the numerous skills and abilities of living she already possesses, which helped counter the problem identity. (*'Until writing them down for Naomi, I never realised how many tools I actually utilise.'*)
- Rita seems to value the opportunity to share her expertise with Naomi about ways to manage the problem, pointing to the significance of allowing clients to sit in the 'expert seat' and share insider knowledge. (*'I also liked thinking I could help her by giving her some information and sharing ideas.'*)
- The letter writing process created an opportunity for a conversation to emerge in which new possibilities were unveiled, which to my understanding is a key goal of narrative therapy. (*'It felt like we were sitting in a circle, kind of like a dialogue ... through this, a new perspective was given to me.'*)
- Rita appears to deeply appreciate how the relationship she formed with Naomi helped to combat the isolation that the problem of chronic pain creates in her life. (*'The letters helped me share my pain with another person for the first time in my life.'*)

## Conclusion

Linking the lives of clients through anonymous client-written therapeutic letters has been a highlight of my work as a counsellor and narrative therapist. Somebody asked me how linking lives is any different from two clients being pen pals. To me, the difference is significant. With linking lives letter writing practices a trained narrative practitioner facilitates the process, the letters intentionally follow narrative ideas and theory, the clients share a common concern or problem that they are consulting a counsellor about, and the letters are used as a tool in sessions to thicken the development of the preferred story. The letters are not the end point; rather they are a catalyst to open up new possibilities in clients' lives and an opportunity to get out from under the influence of very serious problems. If the linked clients indicate they would like to continue writing to each other after they have stopped consulting the counsellor, I would highly encourage the extension of this 'conversation through letters' by suggesting exchanging email or postal addresses. My hunch is that the letters would continue to be extremely therapeutic and contain narrative ideas and language even without the eyes of the therapist on them. Additionally, the counsellor could invite a one-time face-to-face meeting with the two linked clients if both wanted to pursue a less anonymous relationship with the other so they could discuss in person how it might work to continue writing one another without the facilitation of their therapist.

In addition to linking Rita and Naomi in their struggles against chronic pain and caregiver stress, I have linked a 14-year-old boy who was starting a lifestyle of gang involvement with a 58-year-old man who was working on getting free of gang activity and trouble with the law. I have also linked a younger and older woman who were both dealing with sizism, or stigma about being bigger, and working on moving closer to self-love. The possibilities of linking clients' lives through letter writing are countless. Recently I spoke with a colleague about linking a client of mine with a person she is working with, which would add an additional practitioner's perspective on the letters, providing another reading of the new story being written. I also plan to add an additional letter writing layer to the linking lives process by writing letters to the relationship formed between the two linked clients; an idea inspired by Stephen Madigan's practice of writing letters to the relationship in his relational work with couples (Narrative Therapy Advanced Practice Workshop, Vancouver, Nov. 2014). The purpose of writing a letter to the relationship between the two linked clients will be to share my reflections on their process and what I have learned from their written words. This letter would then be given to both clients to read and would contribute to the development of the preferred story line by making explicit their positive impact on me. There are many ways to engage in this innovative form of narrative letter writing. I hope this article has inspired in the reader some

new and creative ideas to try out other versions of linking lives. The last word must be for Rita and Naomi: I enjoyed our work together immensely and was inspired by your letters. Thank you for giving me permission to share your words and experiences with others. I have learned so much from you both and valued every minute of our conversations.

## Note

- <sup>1</sup> I would like to thank David Nylund for his interest in the work outlined in this article and for his support and encouragement in the writing of it.

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