
Helping Clients Uncover Metaphoric Understandings of Bulimia

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Abstract

The written post-session responses of three women with bulimia were analyzed qualitatively for instances of metaphoric understanding of their difficulties with food during 20 to 24 sessions of therapy. Results showed a gradual deepening of the metaphoric understanding of what the troubled eating represented for each client. Metaphoric understandings included eating as a way of dealing with family, nurturing self, swallowing feelings, coping with societal pressures, and distancing other people.

Résumé

On a fait l'analyse qualitative des réponses écrites après des sessions de counseling par trois femmes souffrant de boulimie. On cherchait des exemples illustrant que ces femmes avaient, au cours des 20 à 24 sessions de thérapie, une compréhension métaphorique de leurs difficultés par rapport à la nourriture. Les résultats indiquent que la compréhension métaphorique s'est accrue progressivement en ce qui concerne la signification pour chaque client de son trouble alimentaire. Les exemples de compréhension métaphorique se rapportent à l'utilisation de la nourriture comme moyen de faire face à la famille, de se consoler, de supprimer des sentiments, d'affronter les contraintes sociétales et d'éloigner les autres.

While much research has focused on the many correlates of troubled eating (e.g., Kashubeck, Walsh, & Crowl, 1994; Mallinckrodt, McCreary, & Robertson, 1995; Pike, 1995), little research has examined the thought processes and experiences of change that occur for these women during counselling. Gaining an understanding of how clients with bulimia conceptualize the meaning of their difficulties with food and eating would be very helpful for counsellors. However, rather than examining the general thought processes of clients with bulimia, the present study will focus more specifically on metaphoric understandings that these women have for their troubled relationship with food. The reason for this focus is that a number of authors (Burstow, 1992; Friedman, 1993; Steiner-Adair, 1991; Zimberg, 1993) have noted that women with troubled eating patterns often speak symbolically and that a key to their treatment is to work with that symbolic language.

Metaphor comes from the Greek word, *metapherein*, where *meta* means change, and *pherein* means to bear or carry. Metaphors, then, involve a process of change that occurs when attributes ordinarily designating one entity are transferred to another entity (Kopp, 1995). For example, when a client talks about stuffing her feelings down with food, attributes for food are transferred to feelings.

Combs and Freedman (1990) expand this definition further by simply stating that a metaphor is something that represents something else.

Their definition broadens the concept of metaphor to move beyond the more common linguistic usage to include the following as potential metaphors: the symbols of body language, client stories, and client problems. By viewing client problems and stories as metaphors, counselors are encouraged to help clients discover the underlying meaning that may be hidden by a surface story. The present study is based on this broader definition of metaphoric understanding by focusing on bulimic women's difficulties with eating patterns and body image as being potentially symbolic or metaphoric representations for their underlying themes and core issues. This very specific use of metaphors represents just one of many possible uses of metaphors in counselling.

Current treatment approaches for bulimia, such as, cognitive-behavioural (e.g., Johnson, Tsoh, & Varnado, 1996; Smith, Marcus, & Eldridge, 1994) or psychoeducational (e.g., Kaminski & McNamara, 1996) do not emphasize the use of metaphoric understanding as a way of helping clients to gain clarity about the many meanings of their eating patterns. However, some psychodynamic (e.g., Bloom & Kogel, 1994), family (e.g., Griffith & Griffith, 1994), and feminist therapists (e.g., Burstow, 1992; Friedman, 1993; Steiner-Adair, 1991) place more importance on helping clients uncover the metaphoric or symbolic meaning of food as one way of understanding their difficulties with eating in order to facilitate the healing process.

More specifically, Burstow (1992) believes that when traditional approaches concentrate on helping clients learn to control food intake, the centrality of food is reinforced when food is already too central in these clients' lives. Because food is the metaphor through which these women are speaking, she advocates moving beyond the metaphor to co-explore what a client's preoccupation with food is disguising. As long as clients can obsess about food, they do not have to face the core issues being hidden by their constant thoughts about food.

Adler (1993) concurs by stating that metaphors can be symbolic representations of client conflicts and can provide a nonthreatening way of externalizing these conflicts. Unpacking the metaphors can be healing in that clients retain control of the process and speed at which the underlying, unconscious meanings of the metaphors are allowed into consciousness. Put another way, Steiner-Adair (1991) states that the body becomes the self that speaks symbolically for what cannot be said directly.

When specific metaphors for bulimia are considered, Laidlaw (1990) discusses food as a metaphor for love and nurturing, while at other times being a mask for emotional needs and feelings. Similarly, Burstow (1992) describes the metaphors of bingeing as stuffing down and swallowing painful feelings or as an attempt to fill an emotional emptiness inside of the woman. Two other authors (Barnett, 1986; Perlick & Silverstein, 1994) hypothesize that disturbed eating behaviour represents sex-role

strain that high-achieving women can experience when their career choices conflict with their sex-role socialization into femininity.

While the helpfulness of using metaphoric understanding in counselling with women who have troubled eating has been espoused theoretically, few empirical studies have been designed to examine the presence of metaphoric understanding in actual counselling sessions with bulimic clients. One study that did explore the feelings and experiences of one bulimic (Maddocks & Bachor, 1986) did not explore the underlying meanings of her behaviour.

In contrast, Brouwers (1994) begins with the assumption that food is a metaphor for core issues in clients and has her clients write letters to food. From these letters she extracted six themes (or metaphoric understandings) which food represented: (a) control and helplessness; (b) entrapment; (c) friendship and love; (d) hatred; (e) obsession; (f) sexuality; and (g) healing. She then helped clients relate these themes to their core issues.

Although the above study provides some information about the symbolic meaning of food, it did not track the development of metaphoric understanding over the course of counselling. If one accepts Steiner-Adair's (1991) belief that counselling clients with eating difficulties involves going deeper into layers of the self to discover the point of pain, one could expect that in longer-term therapy (more than six months), clients' understandings of the meaning of their troubled eating would deepen and broaden.

The goals of the present study were to identify metaphoric understandings of clients with bulimia and to describe the development of these understandings over time. More specifically, the research questions for the study were the following: (a) what are the specific metaphoric understandings of food and eating for clients with bulimia? and (b) what patterns of change, if any, in clients' metaphoric understandings occur over the course of counselling? If counsellors know some of the possible metaphoric understandings that food can represent to various clients, they then may be more able to assist in the uncovering process with their own clients. Because the purpose of the study was descriptive, a qualitative methodology was used to study the written, post-session responses of three clients receiving counselling for bulimia and related life issues. With such a small sample, this research can only be considered as an exploratory pilot study.

METHOD

Clients were three women who requested counselling for bulimia at a large, urban university counselling centre. The three clients were part of a larger, ongoing research project on important events in counselling and were the only clients in the research project who shared the common

issue of bulimia. Age range was 19-23 with a mean of 21. Clients received 20-24 counselling sessions over a seven-month period. Counsellors were three female psychologists working in the same counselling center. Age range was 30-45 years with a mean of 37. All counsellors had several years experience working with clients with bulimia and used an eclectic blend of feminist and cognitive-behavioural approaches.

At the end of each session, clients completed the Important Events Questionnaire (IEQ; Cummings, Martin, Hallberg, & Slemon, 1992), containing five different questions. However, only three of the questions were used for the present study: (a) What was the most important thing that happened in this session?; (b) What did you find yourself thinking about or doing during the time in between sessions that related in any way to the last session?; and, (c) Are you experiencing any change in yourself? If so, what? The first question is session-specific, while the last two questions tap client experiences and processes outside of counselling. The fact that none of the above questions on the IEQ were explicitly about bulimia or metaphoric understanding allowed for naturally occurring instances of both. If the questions had asked directly about metaphoric understandings, there would have been the possibility of inducing a response set where clients reported metaphoric understandings every session whether or not they occurred. Even though the questions did not ask directly about bulimia, they did elicit responses about clients' understandings about food because that was the essence of their counselling and, thus, appeared prominently in their responses. Neither clients nor counsellors knew that the written responses would be analyzed for metaphoric understandings. Any metaphoric understandings described by clients were most likely co-constructed between the client and her counsellor.

A research team of three counselling professors and a graduate student analyzed all of the one-page written responses (from a total of 68 sessions for the three clients) for instances of metaphoric understanding about food and troubled eating. Polkinghorne's (1991) guidelines for qualitative research were used: (a) read the data; (b) identify units of data that express a single theme (food and eating); (c) group together units with the same theme for common relationships among elements and a "best fit" description (analysis of development of metaphoric understandings over time); and, (d) locate evidence that could contradict the unity of the descriptions. Differences in interpretations among these judges were settled through consensus discussion.

Reliability in qualitative research has been defined by Lincoln and Guba (1985) as dependability or trustworthiness of the method. Enough details of the research process need to be reported so that readers can evaluate the dependability of the procedure. In following Polkinghorne's (1991) guidelines, all instances of client responses about food, eating

patterns, and body image were taken from the IEQ and typed in chronological order separately for each client. For some sessions, there was no mention of bulimia-related concerns in clients' post-session responses. The responses were grouped by each judge into two categories: (a) examples of metaphoric understanding about food, eating patterns, and body image (e.g., "I realized that I use eating as a form of control") and (b) statements about more concrete changes around food (e.g., "I've been trying to eat a bit more regularly, although it's still difficult"). The metaphoric understanding responses were then assessed by judges for change over time in counselling. The more concrete responses about food were used either to contradict or support the interpretations of the metaphoric responses. Team members continually checked their interpretations against the raw data.

At this point, the four judges engaged in lengthy discussions about their assessments of change in metaphoric understandings of food and body image to arrive at a consensus analysis for each client. The few disagreements in assessments were resolved through consensus discussion. Hill, Thompson, and Williams (1997) believe that consensus discussion by a research team aids dependability in qualitative research by providing a variety of perspectives that can be helpful in representing the complexity of the data.

Internal validity in qualitative research has been defined by Lincoln and Guba (1985) as credibility of the findings. One method of increasing internal validity recommended by them is to use triangulation by including another data source and determining whether the results of the two data sources are similar. In the present study, client responses about food and eating that are not metaphoric are also included in the client descriptions presented below to provide information about other aspects of change in eating patterns that might be occurring in these clients. Another method for addressing validity is to provide extensive excerpts from the primary data accompanied by the researchers' analyses to facilitate the readers' own evaluation of the appropriateness of the analyses (Reed, Patton, & Gold, 1993). This method will be used in reporting the findings of the present study.

RESULTS

Examples of metaphoric understanding about their troubled eating from the written responses for each of the three clients will be summarized and described below using some direct quotations from each client. In addition, accompanying behavioural and cognitive changes over the course of therapy will be briefly described for early sessions (1-8), middle sessions (9-15), and late sessions (16-24). Pseudonyms have been used for the clients.

For the first client, Melanie, difficulties with food were a central focus of all 22 sessions with metaphoric understanding being reported in all but two of the sessions. Early sessions involved uncovering many metaphors such as understanding her eating as a way of dealing with a difficult family situation, as feeling in control and not so vulnerable, and as an outlet for her suppressed or trapped emotions: "I realized that maybe through eating I allow myself to feel." Thus, eating was a metaphor for feeling. In reporting what change she was experiencing, she was starting to catch herself wanting food for reasons that were out of place and then finding means other than food to satisfy those needs.

In middle sessions, she discovered "that I will binge in order to seek revenge on all the outer pressures." She hoped that her self-destructiveness would destroy all of the societal pressures on her, but really knew that it would not work. She also understood eating as nurturing herself because of continually putting others' needs first. "I realized that I always put other people's needs ahead of mine, and the reason why I sort of went to food, was sort of a way of pampering myself." For Melanie, food appeared to be a metaphor for both revenge and self-nurturance. She now reported being able to look at food without craving it. Cognitively, she also understood the link between food and how she felt about herself: "The only way that I am going to be able to stabilize my eating is by feeling better about myself . . . I'm learning to take pride in myself instead of putting myself down all of the time."

In later sessions, she uncovered her troubled eating as trying to meet societal standards which resulted in feeling bad about herself. "I felt stupid because I was being 'suckered' into the world of media images . . . I never really thought these images and judgments of others had such a bearing on my opinion of myself." She also came to realize (with her counsellor's help) that she equated thinness with self-confidence, health, and sociability, while fatness was equated with being insecure, unhealthy, and unsociable. Instead, she worked to begin to accept herself at her current weight, and thus, to accept her whole self.

For Melanie, early metaphoric understanding concerned more immediate feelings of eating as dealing with family and controlling feelings. In middle sessions, a more complex layer of metaphoric understanding emerged of eating as revenge on outer societal pressures, as well as nurturing herself instead of putting other's needs first. At the same time, she made the important connection that stabilizing food was linked to feeling positive about herself, just as eating out of control was linked to feeling negative about herself. In later sessions, her understanding about societal pressures broadened again as she saw that they negatively influenced her opinion of herself and of her body image.

The second client, Cindy, also wrote about food or body image after 21 of her 24 sessions with examples of metaphoric understanding appearing

after 13 of the 21 sessions. In early sessions, food for Cindy was a metaphor for competition with her sister: "I had not realized how nice it could be if I weren't competing with her. This manifestation of my food obsession now seems very important and valuable." She also came to understand her troubled eating as attempts for control over her life, for not needing to depend on other people, and for nurturing herself. During these early sessions, she reports in her thoughts between sessions about feeling guilty about bingeing and not being able to follow her therapist's suggestion to chart her feelings and thoughts before bingeing.

In middle sessions, she confronted food as trying to control her feelings. "I have been really swallowing so much. It covers up a lot, stuffing things down with food. I think I'm learning to be more vulnerable and to let people know that I have needs too." She also seemed to view control of food as trying to control the bigness and ugliness that she felt when she was with small women. "We discussed my feeling of 'bigness' and the fact that I feel clumsy and awkward with small women. In some way my sense of myself as a woman depends on this." She was now at the point in her healing where she reported that she was more able to analyze her behaviour and intercept unhealthy behaviours, while also being less critical of herself.

In later sessions, she began to understand bingeing as a way of avoiding accepting who she was. "I realize that there is a difference between caring about yourself and obsessing about yourself." In other words, her preoccupation with food disguised her feelings about her true self. She also started to feel empowered to beat her food obsession and to help others struggling with troubled eating by speaking out about it. "I suppose that whenever I talk to someone about eating disorders, I am turning 'anger into action' as my counsellor says. I'm doing something about this illness and I feel more powerful because of it." Thus, the client was experiencing both self-acceptance and self-empowerment. The above examples also show the active involvement of the counsellor in co-constructing the metaphoric understandings through the client's frequent use of the word, "we," and direct references to the counsellor.

Like Melanie, Cindy had many metaphoric understandings for her troubled eating and also began with a metaphoric understanding about her more immediate feelings about family (eating as competing with her sister), as well as controlling her life, nurturing herself, and substituting for depending on people. In middle sessions, her metaphoric understanding included viewing her eating as a way of controlling her feelings and covering her negative body image of bigness. Finally, like Melanie, she understood the role of self-acceptance in her healing and the need to help others as well as herself.

The last client, Pam, had the fewest references to food or body image with only 8 of 20 post-session responses. Five of the eight references were classified as metaphoric understandings. Eating, for Pam in early sessions, appeared to mask her fear of not being feminine enough: "I felt relieved to be able to tell my counsellor of my fear of not being feminine . . . people often think that I can't possibly be a 'real' girl." Thus, an early metaphoric understanding was her troubled eating as a symbolic cover for sex-role strain. This statement was the most important event for session four when Pam's thoughts between sessions also noted that she had not vomited once that week.

By middle sessions, she was "feeling 'fed up'—who in our society has the right to tell me what I should think/do/look like to be worthwhile . . . I feel relieved that I don't feel as pressured to be totally thin." With the help of her counsellor, Pam had moved from fear to anger, and had moved beyond individualizing her eating to recognizing the influence of the society at large. She felt like she was "in front of a locked door with a handful of unmarked keys and you finally find the one that opens the door." At the same time, in response to what change was happening to her, she reported eating more regularly, being more honest about her thoughts and feelings when she talked with people, and starting to take charge of her life. The active involvement of Pam's counsellor in the co-constructions of her metaphoric understandings was evident in the following: "My counsellor made me realize that these are ways that I've (subconsciously?) taken care of my own needs and wants."

By the ninth session, she saw more clearly her parents' role in her troubled eating and realized that she could separate herself from their view: "Just because they're obsessed with weight doesn't mean I have to be." Concurrently, she reported a change in her feelings: "I feel more secure, happier. I feel FREE!!!" She no longer was locked in the cage of her troubled eating and parental expectations.

For Pam, understanding her difficulties with food appeared to begin with confronting her fears around what it meant to be a woman. This understanding seemed to broaden in later sessions to questioning societal views about how a woman should be. She then was able to look more personally at the role of her parents in her troubled eating and begin to individuate herself. Healing for this client seemed to involve ridding herself of messages about thinness from both society and her parents.

By session 11, this client had her eating under control and there were no more references to it in her post-session or interview responses. She, thus, had fewer examples of metaphoric understanding than the following two clients. Her counselling continued for 20 sessions in which she dealt with core issues underlying her troubled eating (e.g., allowing other people to control her, and gaining an understanding of her wants and needs).

In summary, these three clients produced a large number of metaphoric understandings about their troubled eating. For all three, metaphoric understandings about body image (and femininity), societal pressures for thinness, and family pressures were prominent. The first two clients also had additional metaphoric understandings about feeling in control, controlling painful feelings, dealing with vulnerability with other people (or putting others' needs first), nurturing self, and substituting for self-acceptance. When change in metaphoric understandings over time are considered, each client appeared to experience a slightly different journey beginning with more surface, immediate understandings and moving to more hidden understandings for that client.

DISCUSSION

The first goal of the study was to describe the metaphoric understandings of three clients with bulimia. The most striking aspect of the findings was the large number of metaphoric understandings for food and bingeing that were uncovered for each client, especially for Melanie and Cindy. This finding is helpful because in Brouwers' (1994) study identifying themes in women with bulimia, the themes were grouped so that it was not clear how many themes were present for each woman.

In comparing the client metaphoric understandings in the present study to Brouwers' (1994) study, her themes of control, friendship and love (nurturance), hatred of self, obsession with food, sexuality (what it means to be a woman) and healing were present in at least one or more of the clients' written responses, while the theme of entrapment was not present.

The second goal of the study was to describe the development of these metaphoric understandings over the course of counselling. By tracking what clients listed as being most important in counselling sessions, the judges were able to determine how each client, with the help of her counsellor, co-constructed and integrated different layers of meaning for her bulimia, arriving at a more complex understanding of her thoughts and behaviours by the end of counselling. This process was slightly different for each of the three clients because most likely different understandings were more hidden for each client. Accompanying this change in metaphoric understanding (although not necessarily caused by it) was a change in the clients' feelings and behaviour toward more positive self-acceptance and a return to more healthy eating patterns.

Because this study was exploratory and descriptive in nature, no generalizations can be made to other clients experiencing troubled eating. However, the preceding analysis does raise some interesting ideas that could serve as the basis for future research. First, as suggested by Bloom and Kogel (1994), having an understanding of food as a symbolic representation of unexpressed and often unconscious needs of the troubled

eater could possibly form the basis for a treatment approach. For example, does simply asking the client, "What is the food a metaphor for?" take the client to a deeper, underlying level of discourse. Also, would it be helpful for counsellors to use metaphoric language themselves to help clients in thinking more metaphorically? For example, "I wonder what feeling you are stuffing down with food."

Second, would it be helpful to explain to clients with eating difficulties that there may be many metaphoric understandings for their eating patterns? Too often, clients can be tempted to stop the search when they have uncovered "the one true" meaning for their problematic eating patterns. It may be helpful to prepare clients by describing the journey to healing through understanding their metaphoric understandings as being like peeling layers off an onion. As Adler (1993) points out, metaphors are not static and thus, they progress with the healing process.

Third, would it be helpful to prepare clients and counsellors by explaining that the uncovering process will most likely take time and that a different level of understanding for each client may emerge over time? For example, both Melanie and Cindy were able to see early in their therapy the metaphoric understanding of eating as dealing with family, controlling feelings, and nurturing self. However, it was many months later, that they were able to uncover the metaphoric understanding of eating as blocking positive body image and self-acceptance.

Finally, does gaining metaphoric understanding about food and eating difficulties help normalize eating patterns and help clients feel more positive about themselves? With the three clients in this study, their post-session writings appeared to show a relationship among their increasing clarity about the meaning of their bulimia, positive feelings about themselves, and an improvement in their eating behaviour. However, future research with larger samples is needed to determine if this relationship is causal.

This relationship between metaphoric understanding and more positive feelings about the self is consistent with the treatment approach advocated by Burstow (1992). She believes that therapy which deals with the control of food intake directly makes food too central in the counselling and advocates deemphasizing food by co-exploring its metaphors. Then when clients understand what their behaviour means, they are more likely to make different choices for themselves. The counsellors in the present study all used food diaries with their clients to try to bring accompanying feelings and thoughts during bingeing into their clients' awarenesses. Nonetheless, they generally did followed Burstow's direction of focusing more on the meaning of the troubled eating for each client than on controlling food intake. In addition, , all three clients were able to place their troubled eating within a sociopolitical context (e.g., being aware of the impact of media images, turning anger into action).

Although this study raises some possible ideas for future research, it does have a number of limitations. The small sample size limits the variability of metaphoric understandings that likely would have been present in a larger sample. In addition, the methodology of asking clients each week whether they were experiencing change could lead to a response set of reporting change simply because it was expected. However, given these limitations, it may still be possible to describe the process of metaphoric understanding for these three clients.

Adler (1993) believes that using metaphors in counselling is healing because clients can externalize their realities through the metaphor in nonthreatening ways. For the clients in the present study, the uncovering of the many layers of metaphoric understandings about food appeared to help bring into consciousness what had been unconscious motivations, while concomitantly understanding the role that societal norms had on their troubled eating. With this understanding, they appeared to be able to choose different ways of being with themselves and the world.

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