

Putting Harry Potter on the Couch

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ABSTRACT

This article will explore J.K. Rowling's *Harry Potter* (2004) literary series from a psychoanalytical perspective. The author draws out the main themes of the *Harry Potter* stories to see if they can be employed clinically to assist in psychotherapeutic work with children and adolescents. The article begins by discussing Bettelheim's (1976) extensive work on children's fairytales and their therapeutic value, moving on to discuss Rustin and Rustin's (2005) more recent insights into narrative therapy and children's fiction. A clinical example is given of how the storylines were implemented to enhance a psychotherapeutic group process for adolescents. The author hopes to illustrate the power of symbolism and metaphor in the *Harry Potter* storylines and elucidate why these books may appeal to young people with mental health difficulties.

KEYWORDS

adolescents, children's literature, fairytales, Harry Potter, psychoanalysis

IN MY CLINICAL work with children and adolescents with mental health difficulties, I have become aware that the themes of the *Harry Potter* books seem to be almost universally known. There also appears to be a qualitative difference in their interest in these books compared to other crazes or fads. I can recall witnessing quite insightful discussions of storylines, where I could not help but draw parallels with the young person's own difficulties. I decided to explore these books for myself and 5 years ago sheepishly ventured to a bookshop to purchase the first instalment of the series. To my

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surprise I soon found myself, a seemingly sensible and mature adult, engrossed in a series of magical adventures involving witches, wizards, goblins and broomsticks. I felt compelled to explore the appeal of these stories to young people and adults alike.

I was interested in exploring the unconscious appeal of the storylines as I felt that the author, J.K. Rowling (2004), however unintentionally, displays a deep understanding of the difficulties experienced by many children today. Rustin and Rustin (2005) agree by suggesting that Rowling successfully 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 their readers. I wondered if I might be able to incorporate the use of the material in the *Harry Potter* stories to enhance some therapeutic approaches to treatment.

When Harry takes up the invitation to attend Hogwarts School, he embarks on a journey of self-discovery and adventure. This experience, although fantastical, might be comparable to the unconscious journey of many children through their real world. Harry must come to terms with his sense of self and must live up to and cope with high expectations, intense rivalries, wonderful friendships and evil enemies. Throughout the stories, Rowling depicts the value of making clear choices, creating one's own desire and developing meaningful relationships. Alongside these she wonderfully describes the power of jealousy and the ongoing struggle of overcoming anger and dealing with loss and intolerable guilt.

Why is everybody so wild about Harry?

The *Harry Potter* series has turned out to be one of the best-selling books in history. The first three books occupied the first, second and third places on the *New York Times* hardcover fiction best-seller list, something that no author in history had previously achieved. This popularity can be explained by enormous multi-million dollar advertising campaigns but one must also ask questions about the unique personal meaning that the books have for each individual reader. The books seem to have succeeded in appealing to people regardless of age or culture.

In his classic study of children's literature, *The Uses of Enchantment*, Bruno Bettelheim (1976) explores in great detail the effects literature has on the developing child. He denigrated most children's literature as mere entertainment and lacking psychological meaning, and he focused his energies on the study of fairytales to which he attributed something close to magical power.

Bettelheim suggests that our greatest and most difficult achievement is to find meaning in our lives. This is achieved through a series of stages where we seek to find a modicum of meaning congruent to our level of development. A child should learn at different ages to understand him/herself better in order to be able to understand others, and eventually he/she can relate to them in ways that are mutually satisfying and meaningful. The child should develop inner resources so that emotions, intellect and imagination can support and complement one another. Bettelheim (1976) argues that children's literature can develop the mind and personality and therefore equip the child with mechanisms to cope with difficult inner problems as well as encourage the reader/child to be attuned to anxieties and aspirations.

Rustin and Rustin (2003a, 2003b) also comment on the tradition of children's literature, which relates to children's emotional development and they suggest that it should contain psychological realism. They claim that the fantasy genre can allow the author to explore many aspects of the contemporary world and its problems, thus offering the reader an experience of intellectual as well as emotional adventure.

Bettelheim (1976) believed that it is beneficial for children to ruminate, rearrange and fantasize about suitable story elements in response to unconscious pressures. When unconscious material is to some degree permitted to be worked through in one's imagination, its potential for causing harm is much reduced and can be made to serve more positive purposes. Moreover, he argues that development of a conscious curiosity and wonder about feelings and relationships can help us work out emotional dilemmas and difficulties which might otherwise become inaccessible to direct thought and be expressed in other less adaptive ways, for example somatically. Hence, he indicates the therapeutic power and influence of certain literary texts.

Fairytales are unique because they usually contain a dark theme or evil character. Children are relieved to encounter dark characters because they know that they themselves are not all good and find difficulties in the portrayal of all people as inherently good. Dark characters work as symbolic representations of parts of ourselves and give us an insight into our internal struggles between good and evil. Fairytales allow the safe exploration of these conflicts where good emerges victorious.

Rustin and Rustin (2003a, 2003b) suggest that fiction can heighten and dramatize issues of gaining autonomy and independence, in contrast to the more mundane and confusing experience of everyday life. These elements of autonomy and independence are represented through adventures which require courage and invention in the face of danger.

Bettelheim (1976) suggests that many fairytales have a formula that impacts on the unconscious mind. This formula tends to include the death of parents, the presence of polarized evil characters (which are not without their own attraction) and a needy hero who begins in isolation and elicits sympathy from the reader. The fairytale must also show that if we try to escape separation anxiety and death anxiety by desperately keeping a grasp on our parents, we will only be forced out. This can guide the child to relinquish any dependency wishes and achieve a more independent existence, as the hero must go out and find secure places by acting with inner confidence. The message should demonstrate that even the meekest can succeed in life and are capable of forming meaningful and rewarding relations with the world around them. Rustin and Rustin (2005) concur that often in fantasy literature ultimate dependence on the care of adults is cast into doubt by parental absence, abandonment or even death, and is usually rediscovered or reaffirmed after a period of aloneness and risk, sometimes in metaphorical rather than literal ways. Perhaps the fact that the *Harry Potter* series contains so many of these 'formulaic' qualities, may go in some way to explaining why J.K. Rowling's recipe has been so successful. Rustin and Rustin suggest that although Rowling's work does bear traces of literary forerunners, the totality of the series is original, and repeatedly delights the reader as well as providing a more-than-adequate container for the exploration of Harry's personal development. They have explained the success of the series by the manner in which the stories evoke intense reader involvement and somehow connect deeply with the imaginative and unconscious worlds of children.

In her paper entitled 'Harry Potter's Oedipal Issues', Kelly Noel-Smith (2001) claims that the book's overriding success is due, in part, to the universal phantasies they contain, in particular those deriving from the Oedipal period. She hypothesizes that the reader is able to indulge in a wish fulfilment of the most basic phantasies, without the grief which may attach to them, because consciously we know the story not to be true. With the brave father and self-sacrificing mother, J.K. Rowling has in effect created a family romance for us to enjoy. Freud (1909/1970) describes a family romance as 'the child's 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' (p. 26). He suggests that, 'every child's imagination becomes engaged in the task of getting free from the

parents of whom he now has a low opinion, replacing them by others, who, as a rule, are of higher social standing'. Identification with Harry allows the reader to live out this phantasy because Harry finds out at age 11 that his parents did not die in a car crash (as he was led to believe) but were in fact illustrious and famous wizards who died trying to save his life. Harry's parents are perfect in fantasy: Father dying to preserve the mother/baby dyad; mother dying too but after giving her child love that will protect him for ever.

Lake (2003) also believed that common object-relations themes are presented in such an imaginative and resonant way in the *Harry Potter* series that the unconscious is readily engaged. Object-relations theory explains how intrapsychic representations – good and bad, of self and others – are created in the formative years and are retained in the developing ego. These representations are subject to distortions, and traumatic events can release these retained bad objects. Lake refers to a demon character in the *Harry Potter* books called the Dementors (Rowling, 2004). These are hooded creatures that guard the inmates in the magical prison. The function of the Dementors is to force the most horrific memories back into their victim's full awareness, while ruthlessly sucking up and destroying all the good feelings in their victims. They leave their victims with nothing but the horrors of their own psyches. Dementors activate repressed bad objects, resulting in Harry having to relive the horrifying experience of his parents' screaming, torturous death. Perhaps the description of these magical phenomena is not dissimilar to the experiences of real-life psychological trauma (posttraumatic stress symptoms or depressive disorders).

Other magical creatures described by J.K. Rowling (2004) are Boggarts. These are amorphous creatures that take on the shape of what terrifies you the most. Professor Lupin (the Defense Against the Dark Arts Teacher) tells Harry that the way to beat a Boggart is to use humour. You simply have to imagine the figure in a shape that can be proclaimed 'riddikulus'. This defence against the Boggart is conjured up by using one's power of imagination, concentration, and will. This message here is both reassuring and empowering, suggesting that conquering our most fearsome inner demons is merely a matter of perspective. Within a systemic frame, White (1985) describes a similar process of adapting positive thinking and the reframing of experiences in his technique of 'fear busting'. Here childhood fears are considered within an interactional context of the family. It is felt that survival of these fears is dependent upon the presence of a 'fear's life-support system'. Fear busting describes interventions to disrupt this participation, which include the introduction of a nonthreatening description of the problem and a structured ritual to challenge the fears lifestyle.

The return of good objects is a recurrent theme in the *Harry Potter* books, usually manifested in Harry's magical encounters with his lost parents. The most vivid example of this is the working of the 'Patronus' charm (Rowling, 2004), which is taught to Harry by Professor Lupin as an antidementor charm or a guardian that acts as a shield when faced by a Dementor. To activate the Patronus, Harry must recall his happiest memory (good object record). This is a difficult spell to conjure up and Harry initially is unsuccessful in fending off a Dementor (in Book 3). However, eventually the Patronus appears from across a lake to save Harry. Harry, at first, believes it was his father who had saved him, but it transpires it was actually Harry himself. In this way it is conveyed to the reader that our inner objects are part of us as much as they may derive from people they represent and remain resources of positive power to help us through life. In times of desperation children experiencing psychological disturbance find it very difficult to access positive memories or feelings and often fail to realize their own role in their recovery process. These examples describe a process that can sound

overcomplicated for the benefit of professionals, yet Rowling beautifully articulates it succinctly and clearly for the reader.

The theme of the battle between good and evil is central to the development of Harry Potter. Harry is consistently reminded of his likeness to his nemesis, Lord Voldemort, and this is a good example of the internal struggle of good and bad objects. The numerous indications of their likeness include the sharing of the same type of wand, the physical resemblance between Tom Riddle (a young Voldemort) and Harry, the fact of them both being orphans and their ability to speak to snakes (an unusual wizarding gift). Apart from their similarities Harry is told that when Voldemort tried to kill him he transferred some of his powers into Harry. So in quite a concrete manner Voldemort is part of Harry! It is Harry's attempt at confronting his inner demons and his striving for integration that forms the crucial plot to the story.

Harry Potter and clinical psychotherapy

Some authors believe that comparisons can be made between Harry Potter's inadvertent escape from abuse and neglect to Hogwarts School, and the patient's recovery from childhood abuse in psychotherapeutic treatment. Pahl (2001) suggests that Rowling demonstrates a sophisticated understanding of psychological processes in her vivid storytelling. The story begins with evidence of abuse and neglect of Harry, at the hands of the Dursleys. She states that the fearsome arrival of a giant (Hagrid) and Harry's hesitation in following him is similar to the decision facing the patient entering treatment, as it takes extraordinary courage to forgo what is familiar for the anxiety-provoking unknown. This is demonstrated in the book when Harry surrenders to Hagrid's benevolent kidnapping without knowing what changes will follow. Both Harry and the patient start their journeys, beginning the hard work of discovery and reconstruction, knowing only that they want to leave the pain behind.

Rustin and Rustin (2005) also liken the education at Hogwarts to a therapeutic structure. Claiming the substitute family of Hogwarts is close to the ideal of a child's imagination, providing food and warmth and attentiveness, they suggest that it is not until Harry is safely ensconced in school that he can start his emotionally turbulent inner journey.

Lord Voldemort personifies evil in Harry's world. The fact that Harry believes that Voldemort is part of him indicates, in clinical terms, that he represents the harsh introjects that won't die in a patient's life. Just like unconscious motivations and wishes, Voldemort reappears in different, but vaguely recognizable, forms in each sequel. Growing more secure and more aware, Harry starts to recognize and tune into signs that Voldemort is near: The pain in his scar and his recurrent nightmares of seeing things through Voldemort's eyes. As a result, Harry learns to seek help sooner. The most frightened wizards are the quickest to believe Voldemort has perished. They cannot even speak his name, thus they call him 'He-Who-Must-Not-Be-Named'. They live behind the defence of denial. In parallel fashion, neurotic individuals afraid of treatment deny that the unconscious exists; they cannot accept that they suppress, repress and deny painful realities. Harry learns to be sensitive to signs of Voldemort's reappearance and is not afraid to call him by name or to think about him. He does not repress dreams about Voldemort, but uses them to increase his awareness of present circumstances. Harry does not shirk from difficulties. Likewise, patients in treatment will develop a greater capacity to deal with what or who torments, challenges, perplexes and tempts them. Many psychotherapeutic treatments expect the young person to identify and become attuned to their fears and anxieties, so as to cognitively restructure and regulate the potential

harmful effects of these fears if allowed to continue to be repressed and fester. Once again Rowling's (2004) inadvertent advice to the developing child reader is to seek help and become aware of our feelings and experiences, so as to be in a position to confront and manage them.

Hogwarts School serves as a therapeutic structure. Like the holding environment created within the psychotherapeutic environment, Hogwarts defies clear definition and changes as the needs of its inhabitants change. The staircases move and hidden passages emerge, just as the analytic environment must evolve with the individual course of a patient's treatment. The feelings of loss Harry feels after each term is similar to how patients who have experienced early losses may feel when separations from the therapeutic structure occur. It is hoped that eventually Harry will feel secure outside of Hogwarts just as the patient will eventually internalize the safety of the treatment frame.

Harry Potter and group psychotherapy

Given the apparent evidence of therapeutic themes in the *Harry Potter* stories, I wanted to explore if these principles could be employed clinically in the treatment of young people with complex mental health problems. The technique of therapeutic story telling appeared to be a possible vehicle for their inclusion.

Most children do not seek out psychotherapy or psychological intervention for themselves but are typically brought to therapy. Very few express their wishes or intra-psychic conflicts and most are not at all receptive to the idea of therapy. Therefore there is a fundamental difference in the repertoire of treatment techniques between child and adult clinical populations. Brandell (2000) suggests that therapeutic storytelling (TSI) constitutes a very important activity in psychodynamically oriented group therapy for children.

TSI follows the adventures of a peer/hero facing common adolescent struggles, using external material for discussion. This is based on the experience that working with children with multiple problems, and encouraging them to reveal and discuss their problems, is often met with high levels of resistance and high drop-out rates, particularly for boys (Phillips, 2004). This may be due in part to the fact that during this developmental phase many youngsters place premium importance on being unremarkable, normal and the same as everyone else. The use of TSI as the basis of material for group work provides safety for oppositional, anxious or depressed adolescents and prevents the disintegration of the group due to a lack of material for discussion within a group session.

It is thought that the relatively low rates of treatment engagement among the child and adolescent population suggest that the recommended treatment, or the way in which it is delivered, fails to match the resources or needs of the adolescents and their families. Due to the lack of engagement of many adolescents with many therapeutic regimes, it is often necessary to be creative in how we deliver our therapies to young people. This can result in the facilitator abandoning the group manual and tailoring an approach to treatment that is attractive to the particular group. Many young people with severe mental health difficulties can become threatened by direct therapeutic interventions that appear to be 'problem' focused. In my experience many young people fear the group process and view it as a demand for a public disclosure of their private difficulties. Many display uncertainty about the expectations of clinicians as to how one must 'be' in a therapeutic group. Perhaps a flexible and adaptable approach to the group process can go some way to overcome this resistance.

Themes from the Harry Potter group

I will now explain, using some clinical vignettes, how I attempted to harness the popularity of the *Harry Potter* series and utilize it as a tool for allowing the young people to speak about themselves in therapy groups. This particular group of young people found individual and group psychotherapy very difficult and daunting, and had struggled with previous attempts at structured and nonstructured group work. However, the *Harry Potter* books and stories appeared to have captured their attention. I endeavoured to devise a discussion-based group around the stories. I hoped to engage the young people in discussions about the characters in the stories so that they might begin to make links to their own particular difficulties. I thought that the externalizing principles inherent in this type of approach might overcome their resistance and provide a safe method of thinking about and processing their own conflicts.

The group ranged in age from 12 to 16 years and presented with a variety of different psychological difficulties. The main presentations included Posttraumatic Stress Disorder, Tourette's Syndrome, Deliberate Self-harm and Mood Disorders. There was an even gender mix of 3 boys and 3 girls. Some of this group were more familiar with the *Harry Potter* stories than others but this engendered a sense of support in the group, as the more knowledgeable members were keen to tell other members the various themes and their meaning. The discussions of Harry's trials and tribulations were animated and were met with a new feeling of excitement. Over subsequent groups, the themes evolved to a point where the young people were encouraged to insert themselves in the story and to use the magical objects and characters to help them discuss their own difficulties. My role as facilitator was to attempt to assist the group to make possible links between significant discussions and their own experiences.

This very animated, or at other times very silent group, soon began to discuss their own difficulties and emotional problems out loud through the guise of the *Harry Potter* themes. This form of directed group storytelling allowed the young people to do something that previously they had found impossible to do: Speak.

Initially the group members commenced the group with a customary suspicion and the first group was characterized by arm folding, foot tapping and exaggerated sighs. On the initial request to discuss their thoughts on the themes of the books, there were very few volunteers to take on the task. I proceeded to begin with my own explanation of the story (to the group who had not read all of the books) and was promptly interrupted and informed that my account lacked accuracy. Two group members proceeded to inform the group of the 'proper' summary of the stories and the discussion began. From there the group appeared to take on a life of its own and the degree of engagement was vastly different to anything witnessed in this group prior to this point.

In one group, for example, we discussed what form the Boggart creature would take, should it appear to different group members. This allowed the group members to discuss their fears and anxieties and attempt to reframe them through using the power of visualization and perception. It also engendered a sense of support, as other group members would suggest different methods of making others' fears less threatening. We moved on to ask the group to access their most positive memories in order to conjure up a 'Patronus' charm. This group found accessing and sharing positive thoughts very difficult but with encouragement they began to make concerted efforts to do so. Although initially many were reluctant to share personal thoughts with the rest of the group, there was a general feeling that some insightful thought processes were being stirred.

We used the characteristics of the Dementor creatures to discuss what similarities existed in depression and some PTSD symptoms. The group aligned themselves with the

feeling of hopelessness described by the characters in the books when confronted by a Dementor, and also the powerlessness of the victim to overcome the flashback-type experience involved in a Dementor attack. The impressive aspect of the *Harry Potter* stories is that although the dangerous creatures are fantastical and magical, the strength and depth of character needed to overcome them are very real and pertinent to overcoming many adolescent challenges. Rowling (2004) creates Harry as a character who must dig deep into the depths of his psyche to find an inner strength to overcome his inner and outer demons. He must exercise will, determination and bravery to defend himself against both the magical world of wizards and the internal torments of a teenage boy who feels alone and different to his peers. This was discussed at length by the group, and the idea of activating their positive experiences or good objects to defend against the negative force of their difficulties or bad objects was essential to the group process.

Other helpful elements of the stories include the aptly named 'pensieve'. This is an object owned by Dumbledore (the Head Teacher at Hogwarts), which allows the user to examine a thought or memory in great detail without the distraction of other thoughts. We encouraged the group members to use this imaginary tool when they were accessing memories and feelings. A particular boy with attention difficulties used this tool most effectively. He previously struggled to stay on topic but could be reminded of the pensieve to assist him to recall memories and feelings around past events with greater accuracy.

The Mirror of Erised is a magical object that, when gazed at, reveals the desires and wishes of the onlooker. The metaphorical use of the Mirror of Erised allowed the group to name their dreams, aspirations and goals. This group had previously been unable to name goals or expectations for their treatment. Many had said that it was their parents who wanted them in treatment and not their own wish. Early in the group process we decided to write down what we imagined we would see in the Mirror of Erised. Some of the expectations remained in the realm of magical thinking, but some were more realistic. We decided to revisit the accounts of what we imagined we had seen in the Mirror of Erised after a number of weeks, to see if our opinions of our goals were any different. Many of the more magical aspirations remained outside of the influence of the therapeutic framework; however, some were altered significantly. This proved an unusual but effective way of viewing outcome measures, however unorthodox it may sound.

Overall themes of loss were recurrent throughout the group process. The group members would often connect to Harry's sense of feeling alone although surrounded by people. Many young people spoke of the celebrity status of his parents causing a burden for Harry. One young person spoke of his feeling that Harry was at a disadvantage having famous parents as that added to the expectations of him to do so much. Some of the young people spoke of the weight of expectation and how alone and unable to ask for help someone might feel with that responsibility. One young person in the group was adopted at birth and he and his sister would often fantasize about their real parents coming to rescue them, and imagine that their biological parents were celebrity heroes of whom they could be proud, therefore identifying with Harry and the 'family romance' theory previously mentioned. A boy with Tourette's Syndrome spoke of his identification with Harry and his scar. He claimed that the manner in which Harry's scar made him recognizable was similar to this boy's experience of his motor tics. He claimed that feeling different and knowing that people are looking at him is difficult to cope with as the staring public can often show an unwanted and uncomfortable interest in unusual characteristics.

The bullying episodes described in the books took a rather surprising back seat in the

discussions. Many of the young people described the bullying and name calling as very typical of the schoolyard environment. This came as a surprise to me but may be a measure of how commonplace such behaviour is. The young people were able to make links with modern-day incidents of racism, sexist remarks and jibes about social class. They remarked on the type of gangland mentality portrayed in the *Harry Potter* books as pretty usual in most school environments.

One of the most enlightening disclosures was that of a young girl who engaged in self-harm behaviours and struggled with a very poor sense of self. It was documented that she had regularly witnessed domestic abuse by her father in her early childhood. She had rarely spoken of her father while on the unit, but made a link in the group to Harry's struggle with his likeness to his nemesis, Lord Voldemort. This girl disclosed to the group that, although she had no conscious memory of her father, many of her mother's family would make whispered references to this girl's physical likeness to her father. She went on to liken her struggle to Harry's, for she would tell herself that she shared the same genes as her father did and that her father's blood ran in her veins. Through the group process and individual therapy we were able to access her fears of 'turning into her father' and reiterated Rowling's message that it is not our genes or past that define who we are, but our choices that reflect true meaning.

The books also mention Harry's need to pay attention to his dreams. In one of the groups we discussed the content of dreams and the young people were encouraged to pay close attention to their dreams and explore possible meanings of their content with their individual workers. A constant theme throughout the books is Harry's initial reluctance to ask for help from his peers or teachers. The group strongly identified with his hesitancy, which they viewed as a reluctance to disclose private thoughts, and fears that may be interpreted as 'madness' or 'being crazy'. The group felt that Harry's lack of a supportive parental presence was a large factor in this reluctance to discuss his thoughts and many reported feeling in a similar predicament.

Another theme that arose in the group was the imaginary relationships that young people conjured up between the characters of the *Harry Potter* stories. Some went to great lengths to discuss possible love interests for almost all the characters in the stories. They pondered whether Harry was sexually attracted to his best friend, Hermione, and whether Harry's mother had had an affair with Voldemort, and whether Harry was actually Voldemort's son. It has been documented that many of the fan websites pertaining to the *Harry Potter* series contain details of fan's fantasies about intimate relationships for the characters and perhaps this is a reflection of something important omitted from the texts. It is often the case that leaving something out creates more mystique and interest than that which is included and therefore the omission heightens the interest and the intrigue.

In another group I attempted to incorporate the wizarding skills of *Occulemency* and *Legimiency*. Occulemency is a wizarding skill to block intrusive thoughts from other people entering one's own mind. Harry is taught this skill by Dumbledore to defend himself against Voldemort's influence. Legimiency, on the other hand, is the skill of examining and tuning into others' affects and thoughts; Dumbledore is a renowned and skilled Legimiens. It was put to the group whether we could incorporate these skills to our group process. The members came up with the excellent suggestion that one could be encouraged to use legimiency skills to try to attune to how others in the group might be feeling and this proved vital to a group who had previously struggled to empathize and see things from another's point of view. The group members also suggested using the skill of Occulemency to attempt to block out negative views of themselves. The use of these metaphorical skills helped the group to master negative

thoughts about themselves and disempower the negative views of others, and encouraged each member to think triadically and attempt to see and understand situations from another's perspective.

I have used the *Harry Potter* characters with many groups and individuals. With each of the more recent books, J.K. Rowling (2004) continues to delight us by providing new material for discussion. When a group is collectively resistant, like the one I have described, the culture of the group process can become stagnant. Creative attempts at engaging young people through their interests and their agendas can help to remobilize the group process. I hope by sharing this experience that clinicians will be encouraged to follow their instincts and swap the safety of the group manual for the spontaneous pursuit of the young people's areas of interest. 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.

Conclusion

Some might think that examining a series of children's storybooks from this perspective must remove all the enjoyment that is essential to reading these fantasy books, but I would suggest the opposite. Whatever one's reason for reading these books, whether it's an interpretation of the script, the love of a fantasy storyline or the need for escapism from everyday worries or just to find out how it ends, one cannot deny that these books contain something special.

The *Harry Potter* series remains the most successful piece of children's literature ever written and continues to foster the same degree of fanaticism years after the first book appeared. The effect of these stories on children and adult readers around the globe (the books are presently available in most languages) can be described as something truly magical. Although this article has focused on the benefits of the literature for those with mental health problems, I believe there is potential therapeutic value for everyone in these books. As we all struggle with the trials and tribulations of everyday life, perhaps one could be asked to consider paying an imaginary visit to Hogwarts? One never knows, perhaps reading about Harry confronting a Dementor, or gasping as his friend Ron faces a giant spider, and cheering when Hermione outwits the wizarding paparazzi will provide us with the courage to face our own fears, aversions and personal threats.

Rustin and Rustin (2005) state that we think about books primarily as explorations of childhood anxieties. They give life to a child's point of view, at a time when our culture is being invaded by adult demands for children to be competent rather than exploratory. They suggest that we should welcome these novels into the psychoanalytic and systemic fields, since they encourage the lively minds and passionate feelings that both approaches seek to release in their therapeutic endeavours.

The *Harry Potter* books have a wonderful capacity to draw us in through the power of our imagination. Then, paradoxically, just as we think we have escaped from the world, they help us to find the power to live in it. The places and characters we imagine sustain us as we struggle with places and people who trouble us, including ourselves.

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