

Kitchen Conversations: Dialogic Space in a Culinary Setting for Adolescents Facing Anxiety

Josephine Paul
Houston, Texas, United States

Abstract

This article chronicles how a culinary setting co-creates a collaborative-dialogic space that enriches the identity stories of adolescents who struggle with anxiety; often seeing themselves as failures with little self-worth. Adolescence brings extraordinary cognitive and physical growth; however, it's also a high-risk time for the onset of mental health disorders (Grant, 2013). Anxiety is among the most prevalent psychological disorders among adolescents ("World Mental Health Day," 2017). The number of adolescents facing anxiety has drastically increased as the Covid-19 pandemic negatively impacts their psychological well-being (Guessoum, 2020). We must reverse this trend by finding new, effective ways of providing treatment to this vulnerable population. Emerging data indicates that cooking, as therapy, is successful in disease prevention and for benefitting adolescents' nutritional profiles (D'Adamo, et al., 2015). Drawing on nine years of experience using culinary therapy for mental health care, culinary therapy, while novel in the therapeutic domain, provides practitioners a unique and effective way to invite collaborative dialogue in an environment that is natural and nurturing for adolescents whose identity stories may be imperiled.

Key Words: *culinary therapy, collaborative-dialogic practices, adolescence, anxiety*

Kitchen conversations: From memories to realization

My earliest and most precious memory as a child is as a three-year-old sitting atop my grandfather's kitchen table that had been pulled over close to the stove, while together we made potato soup. I looked forward to each Tuesday when my mother went to work and I would spend the whole day, all by myself, with my Papa, "helping" him cook. While my only tasks were to add potatoes and stir the soup, my Papa had a way of communicating the importance of my contribution, my inherent value, and his gratefulness for me; He said he just couldn't make soup without me! When finished, we would sit down together, and each enjoy a bowl of our potato soup. It was the best soup. The connection we shared in these private moments, the way Papa and I were "with" each other, had a profound effect on me. Though my Papa passed away when I was just four years old, the relationship we shared left an indelible impression on me as well as a longing for more of those special kinds of conversations and connection. This established the foundation for my future relationships and set the stage for a kitchen to become the setting and cooking together to be the channel through which these conversations would flow.

Finding connection again

Having worked as a cake decorator during my teenage years and as a European trained pastry chef for 30 years, the kitchen became a place where I spent much of my time and where I noticed that in this particular space, relational and conversational processes were often occurring. These conversations took place in bakeshops during the very early morning hours when the world around us was asleep and those of us who worked in that quiet stillness enjoyed an unhurried, peaceful,

and significant amount of time daily to engage with the other about our curiosities and to reflect on thoughts, dreams, ideas, the world, and our place in it. The uniqueness and the intimacy of this space invited conversations and connections that likely would otherwise not have occurred. These were the conversations I had longed for and it was there that many of the most important conversations in my life, those that created change and those that created space for other perspectives and possibilities, took place. I refer to these significant dialogues and those with my Papa, as “Kitchen Conversations.”

The Impact of kitchen conversations

When I was 16 years old, I experienced a significant, positive, change in my own identity story as a result of conversations with the bakery owner and head baker. From his spoken words of confidence in me and his encouragement while teaching me new recipes and skills, to conveying the value and importance of my work ethic and integrity, I began to see myself as capable, creative, and became confident in my own self-worth. There is no doubt that my life was improved and that this shift helped to create the very foundation on which I have built my career.

The most profound conversation I can remember was early one morning, about half-way through my shift, while working alone with a much older German-Swiss pastry chef, who had been my mentor years earlier. Our conversation had led to relationships when I asked him when he would marry his live-in girlfriend of 20+ years. At that moment, and without changing his gaze to look up, he froze, his rolling pin suddenly coming to complete halt on the dough he was rolling. Recognizing that something significant had just happened, I too stopped what I was doing and looked at him for some sign that everything was okay, that I had not offended him. After a moment of quiet reflection and with his un-moved downward gaze, he quietly, in a near whisper, said, “I can’t, I was a Nazi.” Neither of us moved or uttered another word. Though it was only seconds, it felt like an eternity and the silence was deafening. In that moment, my previous known truth about Nazis as being immoral, evil people was being challenged. My mentor was neither immoral or evil, but rather was a gentle and generous man who had taken me under his wing very early on in my career; he was my friend. While I don’t remember what I asked or said next, I do know that I was the first to break the uncomfortable silence. With tears running down his face, he recounted the story of when the SS stormed his family home when he was just 15 years old. As the oldest sibling, and with his father not home at the time, they asked him to join their ranks. Because he did not agree, they raped his mother at gunpoint in front of all the children. They then asked him that fateful question again, this time advising him that they would rape all of his sisters if he refused. He did not refuse again. He said that he decided during that time, while baking bread for the SS soldiers 16 hours a day, that he would never marry or have children of his own so as to prevent something like this from ever happening to him again.

From this conversation I was forever changed. I understood that there were many perspectives for even the most difficult situations and discourses and that a single, absolute truth did not exist. From that moment on, my life was not as simple or easy as I began questioning all that I thought I knew. I started de-constructing previously known “truths,” searching for missing voices, and holding lightly my knowing to leave room for multiplicity of perspectives. In recognizing how little I “knew” and loosening my grip on “truths” I freed myself to learn so much more from so many others. For my mentor and I, our relationship deepened, and we were mutually transformed. For him, sharing his story filled with trauma and shame, and being understood and shown compassion,

helped to lift the burden and fear around this long-held secret. He no longer had to carry this secret alone. For me, it firmly established my social constructionist views and expanded my world as I knew it.

Dialogic similarities

In my later training as a Marriage and Family Therapist, I noticed the similarity between those particular Kitchen Conversations and Collaborative-Dialogic Practices. At the center of collaborative-dialogue is the practitioner's philosophical stance or "way of being" (Anderson, 1997). It is a way of relating and "being with" another that communicates their importance and that they are recognized, valued, and appreciated (Anderson, 2012a). This philosophical stance invites a particular kind of relational and conversational process, one that leads to the potential for transformation and generative change. As I reflected on the most important Kitchen Conversations in my life, I recognized that in those particular moments of connection and conversation, were "being with" each other. The mutual respect and care that we showed for each other, our ability to be vulnerable and trust the other, and the capacity to respond or pause in the moment, invited intimate dialogue that otherwise might not have occurred. As I noticed more similarities, I began to think about the possibility of merging these disciplines; mental healthcare, through a collaborative-dialogic lens, and culinary arts.

Collaborative-dialogic practices

Collaborative-dialogic practices are informed by a set of guiding assumptions that are drawn from social construction, post-modern philosophy, and dialogue. These assumptions: maintaining skepticism; avoiding generalization; and privileging local knowledge, invite us to consider language and knowledge in different ways. The manner in which we think about and relate to ourselves, others, and our world, in a spontaneous way, is referred to as "perspective-orienting" and reflects an attitude that differs from theoretical assumption, techniques, and devised methods from pre-knowing modalities (Anderson, 2012a). These perspective-orienting assumptions invite critical reflection on our current ways of thinking and categorizing and encourage a different way of hearing and seeing, which becomes our "way of being". These assumptions support a distinctive attitude in regard to our clients, our relationship with them, and how and what we want to accomplish.

The philosophical stance for collaborative-dialogic practices includes seven interconnected features (Anderson, 2012b) serving as action-orienting characteristics that jointly create a particular kind of philosophical stance, one that underscores a specific kind of sensitivity from which a therapist's words and actions become known in response to the other and highlight a move away from the concept of "guiding". The philosophical stance of collaborative-dialogic practices conveys a way of being with that includes an attitude toward another that they are special, unique, recognized and appreciated as having something worthy of saying and hearing. It is a way of thinking with, talking with, acting with, and responding with the other instead of talking at them, to them, for them, or about them (Shotter, 2012). Witness is a way of orienting oneself to the other person as a participant within the therapy system, rather than as an observer interpreting from the outside. Witness is a dialogical activity in which we are spontaneously and relationally responsive to the other as an alternative to only thinking, seeing, and responding in terms of what is already familiar: that which we already think we know (Shotter, 2011). This philosophical stance

as well as witness relationships and conversations invites and encourages a therapy system, process, and relationship that is less hierarchical. People participate on a more equitable basis and therapy becomes more participatory and mutual (Anderson, 2012a, 2012b).

This philosophical stance becomes an expression of value and belief. This way of being offers a congruency as a person, a way of integrating the professional and personal. This allows us to be fully present with the other and to respond and interact in the moment and do what the occasion calls for (Anderson, 2012a, 2012b). The seven interconnected features of the philosophical stance include: the therapist and client becoming conversational partners through a common activity or mutual inquiry; recognizing that the client is the expert on themselves and their world; having an unassuming attitude with regard to what the therapist thinks he or she may know; being open and generous with our internal thoughts; being spontaneous and comfortable with uncertainty; understanding and accepting that both therapist and client are vulnerable to change due to their relational and dialogic practice; and that collaborative-dialogic conversations resemble the way we talk and interact in our everyday ordinary lives.

Culinary therapy

Culinary therapy is therapy that focuses on cooking as a way to teach and communicate as well as a way for a client to express themselves. It has been used for mindfulness cooking, as a way to explore client creativity, and could also help discover more about a client's culture, rituals, and relationship with food. Culinary therapy has been shown to be effective in the prevention of metabolic disease and obesity and is also beneficial for the adolescents' nutritional profile (Gatto, et al., 2015; D'Adamo, et al., 2015). However, culinary therapy specifically for mental healthcare is novel in the therapeutic domain and also in the culinary domain. I wondered if merging these two disciplines, therapy and culinary arts, would foster the potential to produce important change in different ways. I had a belief that the process of teaching and learning skills in the kitchen would offer a unique environment for transformative dialogue and that the focus of our shared experience of baking together as a common activity would serve to invite connection, collaboration, and conversation.

Participants, adolescence, and anxiety

The most recent population that I chose to focus on in culinary therapy is adolescents facing anxiety. Adolescence is a developmental stage that transitions an individual from childhood into adulthood, but it is also a time of unprecedented cognitive and physical growth and of new thoughts, feelings, and ambitions (Chaudhary & Jain, 2014). This period of intense learning and development is also a high-risk period of time for impulsive, reactive behavior and for the onset of mental health disorders. The adolescent period is one of significant change that occurs at the physiological and psychological level and where the adolescent is increasingly vulnerable to the development of anxiety disorder symptoms (Grant, 2013).

Anxiety is among the most prevalent psychological disorders among school age children and adolescents and affects more than 260 million youths globally and is considered to be the sixth leading cause of disability ("World Mental Health Day," 2017; Olofsdotter, et al., 2016). Anxiety has recently become the most common form of mental illness in the United States (Anxiety and Depression Association of America, 2019; National Alliance on Mental Illness, 2017). The

phenomenon of anxiety in adolescents is a rising epidemic that deserves alternate therapeutic approaches or strategies for efficacious treatment of vulnerable, developing adolescents. Many adolescents that struggle with anxiety experience feelings of failure or fear of failure and low self-worth preventing them from success in school or attending at all. Common amongst these adolescents is irrational thought, which keeps their negative identity story intact and perpetuates the anxious symptoms. In addition, as the Covid-19 pandemic negatively impacts the psychological well-being of adolescents there has been a remarkable increase in anxiety symptoms amongst adolescents. While their symptoms are an emotional and physical response to a very real occurrence and their fear well-founded, it in no way diminishes the severity of their struggle. Due to their vulnerability, adolescents need careful consideration and healthcare adaptations to allow for mental health services during the pandemic and lockdown or social distancing practices (Selim, et al., 2020).

Drew's experience

The first adolescent to participate in culinary therapy with me was Drew, a 16-year-old male who had paralyzing anxiety that rendered him homebound for a year and a half. Though Drew had been in therapy for more than a year, he was not progressing and remained unable to attend school. Initially, the plan was for me to meet Drew on his high school campus, but I recommended that since school was a stressful place to be, that we might consider meeting somewhere else where his anxiety level would likely not be increased. I suggested to Drew that some of the people I am talking with enjoy having conversations in the kitchen while we work together to create a product of their choosing. Drew, who had some previous experience baking, decided he would like to move our conversations to the kitchen while learning how to temper chocolate and create hand-molded French chocolates.

The process of teaching and learning about chocolate in the kitchen offered a unique environment that was both natural and nurturing. Our focus was not on “the problem” but on the “doing together”, the co-creating of chocolates and possibilities. During the first two to three sessions together, we learned our way around the kitchen, locating ingredients and tools, bumping into each other, and finding ourselves in each other's way, discovering our individual working styles as we negotiated our particular kitchen processes. There is a keen focus on proper measuring, knife skills, sanitation, and safety. Our conversations are centered around favorite flavors, foods, textures, restaurants, best desserts ever, milk chocolate or dark chocolate, and other important culinary curiosities. As I learned about Drew's preferred flavor profiles, I also learned about where, when, and with whom he shares these culinary experiences. This knowledge further helps determine what products I might propose we co-create in future sessions. Following this initial time of getting to know each other and ourselves in this context, our movements in the kitchen became more like that of a well-choreographed dance. Our relationship was improved by the way we oriented ourselves to be and the way we responded to and acted toward the other person, both in dialogue and in co-creating a tangible product. Drew took the lead while I tentatively followed, quietly, assisting the process by organizing the necessary equipment, offering instruction when it was requested, and keeping our workspace clean, while actively listening and observing. There were many times when no words were spoken, but our communication continued. As we worked together creating, Drew and I responded to each other through movement, gestures, and expressions. There was a certain synchronicity, not planned or prescribed that communicated a

spontaneous, attentive, and genuine connection. These moments of meditative self-expression and resonance created a pause, a way to enter the space between us.

The focus of our shared experience of doing together invited connection, collaboration, and unique communication. During our sessions, our individual thoughts and curiosities would weave their way into the conversation naturally and organically, like the threads in a beautiful tapestry. There were no prescribed lists of questions or techniques, just two ordinary people in ordinary conversation “with” each other, sharing their thoughts and inner conversations. Often once a product was baking or cooling and the focus was relaxed, we would just chat, unhurriedly and mindfully about our day, upcoming plans, what he’s been reading, and his favorite parts or understandings. During these conversations it appeared as though whatever was on his mind, whatever was most pressing, would find its way into the conversation with Drew introducing it. Through our dialogue and the creativity of doing together, meaning was created, and other perspectives and understandings were generated. These were our unique kitchen conversations. I became aware of a dramatic shift for Drew when he shared an essay with me that he had written for college admission. With Drew’s permission, I will share that essay here:

“My extracurricular activities are drawing, writing, and creating hand-made French chocolates. Growing up, I was unable to practice drawing as my overwhelming anxiety immobilized me. This was also true for my writing. I love how drawing and art can transmit emotions through either the most simple or complex mediums. I also truly love the written word with all the clever and intricate phrases one can create. Drawing and writing seemed locked inside me, along with the emotions that such expression might reveal. As I studied French chocolate making over the past two years, our conversations ranged from tempering chocolate and chocolate as an art form to deconstructing learned ideas about anxiety. As my skill level increased, I began making chocolates for friends, family, and some to sell during the holiday season. As I unlocked this unique form of self-expression and learned new ways to think about anxiety, I also unlocked the artist and writer within.”

When I first read Drew’s college essay, I was moved by his words but even more that he allowed me to read something he had written, since prior too that, I had not seen any of his written word or artwork. Drew had expressed many times that he would write and rewrite papers, inevitably not turning it in because it wasn’t “perfect.” Despite his brilliance, Drew believed whole-heartedly he as a failure academically and was sure he would be embarrassed if anyone read his writings. I was so honored that Drew allowed me to read his essay and to understand more about him through the intimate details of his love for writing and art. I read it over and over again, making sure I didn’t miss a word. I loved that the conversations he remembered were about chocolate and deconstructing learned ideas about anxiety. It was such a beautiful way to acknowledge what caught his attention and what made a difference. However, it was Drew’s comments about his increasing skill level allowing him to share his chocolate with friends and family and even valuing his own work enough to charge for his chocolates that stood out to me. As I continued to reflect, it occurred to me that while this was a technically challenging and difficult skillset and Drew had reached mastery, he benefitted most from not having anyone to compare himself to and thus diminish his achievement to fit his failure narrative. This allowed him to acknowledge his own effort and success and consequently, his confidence and self-worth improved. Drew’s identity story had changed; he could now see himself as successful. As he became more comfortable with his new identity, he began writing and drawing. The problem of anxiety and perfectionism getting

in the way Drew's ability to write, was not solved, but rather was dissolved through the process of building skill and mastery, challenging dominant discourses, and ultimately enriching his identity story.

Throughout these culinary therapy sessions, I used a collaborative-dialogic lens as my theoretical foundation as it aligns with my natural curiosity about things and wonder about other ways of understanding that which I think I might know. The process of self-reflexivity helped me create shift in my way of thinking, moving away from accepting and reinforcing the dominant discourse of what it means to be an adolescent struggling with anxiety and questioning the contextualization of the situation and broadening the context. I was public and generous with my inner conversations and curiosities, offering them to generate conversation and explore other perspectives and understandings. Through this process the story was expanded and new possibilities for moving forward were generated (McNamee, 2015).

Concluding thoughts

Many of the principles that inform collaborative-dialogic practices perspective orienting assumptions and philosophical stance are mirrored in my therapeutic process of baking, pastry, and chocolate work. There is a congruency in the viewpoints and attitudes of each practice that allow for a parallel process of creation within these two disciplines. Thus, these two different processes are happening simultaneously, spontaneously, weaving the experiences and understandings of each into a beautiful new experience, created together and previously unknown.

Collaborative-dialogic practices in a culinary setting is an effective treatment for anxiety in adolescents with its focus not on the problem, but rather on new possibilities that are created through relational dialogue. For vulnerable, anxious adolescents, many of the identified symptoms, such as: poor social skills, avoiding social interaction, loneliness, low self-esteem, perceptions of rejection, and decreased ability to solve problems, would be well served through this collaborative process of transformational conversations (Anderson, 2012a), practical skill building, and mastery in a culinary setting. Through dialogue and the creativity of doing together, meaning is created, and other perspectives and understandings are generated. For anxious adolescents, their problems may no longer be problems to be solved as they are dissolved or resolved in language (Anderson, 2007, 2012a). Given the current pandemic, lockdowns, and the need for adaptable therapeutic services for adolescents struggling with anxiety, culinary therapy, though it takes more preparation as a participant must prepare ingredients and equipment prior to the session, can be successfully modified for teletherapy sessions, and provide an important dialogic space for vulnerable adolescents.

Being able to combine my two passions, baking and collaborative-dialogic practices, in a therapeutic setting, is a privilege and feels as though I have come full circle, returning to a very special yet simpler time when cooking together invited conversation and genuine connectedness. Thank you, Papa, for giving me my start with my first kitchen conversations, for being fully present for me, and for valuing my contribution to our soup. It really was the best soup.

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Author Note:

Josephine Paul, LMFT-S
Houston, Texas
Doctoral Candidate, Vrije University Brussels
josiepaul@kitchenconversations.me