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"Storytelling Therapy"
by Eric Miller

The time has come for Storytelling Therapy to take its place alongside Drama Therapy, Dance Therapy, Music Therapy, Visual Art Therapy, etc, as one of the Creative Arts Therapies -- and as a component of Expressive Arts Therapy.

Stories and storytelling have been like Cinderella, fixing her older step-sisters' gowns, but never being able to go to the ball herself.

Stories and storytelling are often credited in the literature about Expressive Arts Therapy (McNiff 2009). However, for some reason Storytelling Therapy is only now emerging as a field.

Stories and storytelling can be used therapeutically in a variety of ways. I would propose that "Storytelling Therapy" might serve as an umbrella term for all forms of therapy that utilise Narrative Psychology and story/narrative -- with or without consideration of the psychological and social processes of the client telling stories to at least one other person.

Narrative Psychology concerns ways people integrate facts and events, and weave them together to make meaning. The things one chooses to include in the story, and the way one tells it, can both reflect and shape who one is. Narrative is a primary mode of cognition of self and other ( https://en.wikipedia.org/wiki/Narrative_psychology ).

Stories help to give people senses of identity and direction. Self, community, and society are all conceived of and experienced largely in terms of story. Stories are manageable ways to package data and give it meaning, with relatively easy storage in, and retrieval from, memory.

Composing and telling any sort of story is an assertion of self.

Story can be defined as a series of events. These events occur in a chronological order, and may be connected to each other in various ways, such as: [A causes B, B causes C, etc.] Or, [A leads to B, B leads to C, etc.]

Storytelling can be defined as relating a series of events to at least one other person.
The words, "story" and "narrative" essentially have the same meaning. "Narrative" is more associated with adult experience and has a higher status in academia. "Story," on the other hand, is more associated with children. "Narrative" tends to mean that a person is recalling and explaining what one experienced in a relatively unprocessed way. In contrast, "story" tends to mean that a person has composed a work of art; involving a beginning, middle, and end; with meaning added. That is, a narrative could be processed into a story. However any narrative also involves shaping the remembered experiences (with a beginning, middle, and end). And inevitably a narrator finds or assigns meaning in what he/she is narrating. So finally, in reality there is little difference between narrative and story.

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Two manifestations of Storytelling Therapy are Narrative Therapy (a form of therapy) and Narrative Medicine (a way of approaching patients).

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Narrative Therapy has been developed since the 1970s, especially in Australia (https://en.wikipedia.org/wiki/Narrative_therapy). This method has primarily been limited to 1) use with teenagers and adults, 2) the use of personal-experience stories, and 3) conversational speech. Narrative Therapy may or may not be considered to be one of the Creative Arts Therapies.

Narrative Therapy especially involves reframing experience to emphasize how one has successfully used coping, survival, and resiliency skills -- and how one could use such skills in the future. Narrative Therapy is partly based on the idea that if one controls the story of one's life, one could then better control one's life.

Narrative Therapy, like most other forms of Storytelling Therapy, involves working with a client's Life Story. There is a difference between one's life, and one's Life Story. One is at the centre of one's life. Thus, one may not have very much perspective regarding aspects of one's life. At times in one's life, things may be "up in the air." It may at times be difficult to detach oneself from one's situation and view the situation in a cool and objective manner. One may not always have a clear sense of where one is going.

On the other hand, when one constructs one's Life Story, one is constructing an object, a story, that is distinct from one's self, and that can be viewed as a whole. One's Life Story -- like any story -- has a beginning, middle, and end. Thus, one's Life Story may seem more manageable, and at times may be more inspirational and less anxiety-provoking, than one's actual life.

If a client's life -- and Life Story -- is not going according to plan, the client may wish to engage in "Life-Story Repair." Such repair work takes the difficulties into account, makes the best of the situation, and charts a new course towards living as happily-ever-after as possible.

Globally, a social-cultural urge for intra- and inter-personal reconnection and wholeness emerged in the late 1960s. One aspect of this has been the Storytelling Revival. In the USA, the Storytelling Revival occurred in conjunction with the Civil Rights Movements, including with 1) African-Americans (some of whom held "rap sessions"); 2) women (some of whom held "consciousness-raising sessions" and "sister circles" in the process of developing the Women's Movement and feminism); 3) Gay/Lesbian/Bi-sexual/Transgender people; and 4) people with cognitive and physical challenges.

Telling one's stories to sympathetic others may help to empower one and give one a feeling of control over one's life. One may find that a personal experience may involve social issues that have also affected others. The process of telling, listening
to, and discussing such stories may lead participants to making plans to improve their selves and/or their environments.

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Narrative Medicine is a way of approaching people who are experiencing illness. Narrative Medicine provides a set of principles for training healthcare-givers. These principles involve encouraging patients to compose and tell stories of their illnesses and recoveries; and are designed to improve the quality and effectiveness of healthcare by helping healthcare-givers to develop their listening skills, including their abilities to "recognize, absorb, metabolize, interpret, and be moved by the stories of illness and recovery" (www.narrativemedicine.org).

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The form of Storytelling Therapy closest to my heart is practiced in the following way:

1) The client tells a brief version of his/her Life Story.

2) The client and therapist identify outstanding turning points and themes in the client's Life Story.

3) The client and therapist then create and/or recall, and share with each other, additional stories that relate to these turning points and themes in the client's Life Story. These additional stories can be from any realm of experience and culture.

Clients' dreams (material from the client's unconscious); and relevant Fairytales, Legends, Epics, and Myths (material from the client's culture) can be used in this process.

Storytelling Therapy has ancient roots. For example, telling folktales to give comfort and guidance is an age-old practice. One type of Storytelling Therapy is Fairytale Therapy (http://tinyurl.com/p3bah34).

Playing and working with stories from TV shows, movies, books, folklore, and mythology might give the client some sense of relaxation and fun, rather than facing the pressure of constantly thinking directly about his/her own situation.

The additional stories, which may also be called healing stories, may be supplied by the therapist or by the client. The client may be most powerfully affected when the client supplies his/her own healing stories, and when the client tells such stories to others, and leads discussions about these stories. It is good for the client to be in an active role -- as much as possible -- in relation to the Storytelling Therapy process.

Imagining, telling, and discussing one's Life Story and additional stories may, 1) help the client to work through challenges he/she may be facing in real life, and 2) give the client feelings and realisations regarding ways to envision and live the balance of his/her life.

This type of Storytelling Therapy is a form of Metaphor Therapy. It involves using the Projective Technique of having the client project him/herself into stories and characters that are external to the client's self.

Whether a story's characters are humans, animals, divinities, aliens, etc -- all stories are composed of situations. Storytellers and listeners can imagine themselves in a story's situations, and can consider if they might do things similarly or differently from how the characters are doing things. This provides the tellers and listeners with opportunities to, in their imaginations, experience past events, and practice what they might do in future events.
Projection, identification, empathy, imagination, and imitation are key processes when it comes to people and storytelling. People project themselves into story characters. They tend to identify, and feel empathy, with the characters. This occurs through the use of people’s powers of imagination. People may then imitate the characters of their favourite stories.

This form of Storytelling Therapy may involve delving into the client's unconscious, dreams, and memories of past formative experiences. The client and therapist may ask such questions as: What happened in the client's past? How did it feel? What did it feel like? What was it like? What did (and does) it remind one of?

In some cases, and to some degree, a client undergoing this form of Storytelling Therapy may feel a need for healing to occur through re-visiting formative experiences (relationships, etc), and coming to terms with these events and his/her reactions to them.

In one's Life Story, one may identify specific challenges. And/or one may identify persistent and recurring types of challenging situations. One may ask: In one's Life Story, has anything prevented, delayed, blocked one from experiencing happiness? If yes -- Has this been caused by internal or external problems? Have there been villain characters in one's Life Story? What have been, and what could be, some possible solutions to blocked situations?

One may find or create additional stories that relate to delays, blocks, and challenges. One may playfully, imaginatively, and creatively insert additional characters and episodes into one's Life Story. One may create alternative endings for episodes in one's Life Story, and/or for the additional stories with which one is working. In these alternative endings, difficulties may be overcome. In this way, possible solutions for real-life problems can be introduced and considered.

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Two founding thinkers in the field of Storytelling Therapy are the Psychologist Carl Jung, who focused on helping one to symbolically integrate aspects of one's psyche, especially through the use of images and stories (Jung 1971); and the Mythologist Joseph Campbell, who saw the stages of the hero's journey as representing the inner maturation and actualisation of the individual (Campbell 1949).

The Healing Story Alliance is helping to facilitate to the development of Storytelling Therapy (also known as, ”Therapeutic uses of Storytelling,” and ”Storytelling and Healing”). The HSA ( www.healingstory.org ) is a special-interest-group of the USA’s National Storytelling Network.

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Works cited


Dr Eric Miller helps to develop and deliver the storytelling-related training in the one-year Expressive Arts Therapy course in Chennai, India ( http://tinyurl.com/pkbch8 ).