

## Life Review as a Way to Enhance Personal Growth in Midlife: A Case Study

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Life review may not only be beneficial for people in the last stages of their lives but for middle-aged people as well. Memories are the building blocks of life stories as imaginative and creative productions that each of us constructs and reconstructs as we move through our adult years. When peoples' narratives are stagnated and, consequently, their self-development, life review may be helpful in reconstructing meaningful life-stories that enable people to cope with negative life-events and to find new meaning in their lives. In this paper an intervention which aims at enhancing personal growth in midlife by revising one's life-story is described. Nomothetic research has shown the efficacy of the intervention. Considering the need of more idiographic research within the domain of reminiscence and life review, a case study of a middle-aged woman who participated in the intervention is presented. The paper ends with a tentative description of the effective components of life review within a narrative therapeutic framework.

*Key Terms:* Life Review; Narrative Therapy; Depression; Case Study; Midlife

### Introduction

The process of reviewing one's life has long been exclusively related to the last stage of life (Butler, 1963). However, in the last few decades there has been a growing interest in the processes of reminiscence and life review in earlier periods of adult life as well (e.g. Parker, 1999; Pasupathi, Weeks, & Rice, 2006; Webster, 1993 Webster & McCall, 1999). Several factors have contributed to this life-span approach. There is growing interest in "meaning in life" as a central dimension of aging (Park, 2010) and of psychological health (e.g., Zika & Chamberlain, 1992; Steger, 2009). Reminiscence has been discussed as one important activity in making and restoring meaning in life (Randall & McKim, 2008; Westerhof, Bohlmeijer, Beljou & Pot, 2010; Wong, 1995). Another factor is the conceptualization of identity as a life story (e.g., Giddens, 1991; McAdams, 2008) and memories as building blocks of life stories (Bluck & Alea, 2002). McAdams (2009) defined life stories as "imaginative and creative productions that each of us constructs and reconstructs as we move through our adult years" (p. 389). Defining the storied nature of the core of one's personality falls within a growing and broader scholarly recognition of the story as being an important

metaphor for understanding human development (e.g., Bruner, 1990; Polkinghorne, 1988; Kenyon, Clark, & de Vries, 2002). A major challenge for adults in modern times is "to keep a particular narrative going" (Giddens, 1991, p. 54). Stagnation of our narratives and, consequently, our self-development, may be caused by such factors as having to confront negative life events and adversity (Frank, 1995; Korte, Bohlmeijer, Westerhof, & Pot, 2011; Kraaij & de Wilde, 2001), not being able to live up to one's ideals (Freeman, 2000), and dominant discourses about aging (Bohlmeijer et al., 2011). Our life stories may then become chaotic (Frank, 1995), contaminated (McAdams et al., 2001), problem-saturated, focusing on pessimism and a perceived inability to master challenges (Payne, 2000), or prematurely foreclosed (Bohlmeijer et al., 2011; Freeman, 2000). Life review can be defined as a structured intervention that helps adults to integrate negative events, dissolve conflicts between our ideal and real selves, and reconstruct meaningful and empowering life stories that enhance personal growth (Bohlmeijer, Kramer, & Smit, van Marwijk, 2009; Cappeliez, 2002; Wong, 1995). In this paper we discuss an intervention which aims at enhancing personal growth in midlife by revising one's life story and present a case study which illustrates how it may work.

### Life Review Within a Narrative Therapeutic Framework

In a comprehensive review of reminiscence and mental health, Westerhof, Bohlmeijer, & Webster (2010) proposed a model for interventions that consists of reminiscence, life review, and life-review therapy. In this paper we will focus

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on life-review therapy. Life-review therapy is mostly applied within a therapeutic setting for people suffering from mental health problems such as depression and a sense of meaninglessness. The goals are to induce self-change and alleviate symptoms of mental illness. People with distress will typically be inclined to tell life stories that express bitterness or dissatisfaction with current self and life. A dynamic life-review intervention is needed to curtail these negative styles of reminiscing (Korte, Cappeliez, Bohlmeijer, & Westerhof, 2012). Intervention protocols must be explicit about the way in which more meaningful and empowering life stories are constructed. Watt & Cappeliez (2000) developed a life-review therapy for depressed older adults, which integrates life review with a cognitive therapeutic framework, also called integrative reminiscence.

A promising new approach involving life-review therapy is the integration of life review into a narrative therapeutic framework that links up with the above-mentioned theories about the role of life stories in identity and meaning-making. Narrative therapy is based on the theory of social constructivism that emphasizes the inter-subjective influences of social groups and culture and how meanings are continually based on social interactions (e.g., Gergen & Gergen, 2000). It adopts the postmodern worldview that realities are socially constructed, constituted through language, organized and maintained through narratives, and that there are no essential truths (Freedman & Combs, 1996).

Some important starting points and practices in narrative therapy are that the client is the expert on the preferred direction of his or her life and that the client is not the problem (White & Epston, 1990; White, 2007). The therapist listens actively for expressions and sentences that allow contradictions and exceptions (unique outcomes) to the dominant problem-saturated stories of a client and that allow the construction and re-authoring of (alternative) stories based on preferred lives. Integrating life review into a narrative therapeutic framework does not imply that all the narrative therapeutic “techniques” can be, or have to be, applied in the intervention. Narrative therapy is a complex therapy that is radically different from many other therapies (in its underlying theory and in its practices). It requires therapists to undergo comprehensive training. However, on a basic level, a narrative therapeutic framework can enhance the integration of negative events and the restoration of meaning, which is the main focus of life review, in different ways. First, it stimulates the adoption of a therapeutic attitude of curiosity and not-knowing (the client is the expert). In this way, space is created for clients to explore alternative stories and preferences and the danger of imposing values or authority is minimized (Randall & Kenyon, 2001). Secondly, counselors will be able to ask questions that may be helpful in constructing alternative, more agentic stories about negative life events and life periods (e.g., How did you cope? Were there any exceptions to the story you just told? Would you say that the particular

time and place in which the story took place played a role, and, if so, in what way?). Thirdly, by always focusing on the preferences of the clients and relating these preferences to other memories, clients are continually invited to express their values and past experiences in bringing these values about. In this way both meaning and mastery in reaching goals that are related to meaning in life are promoted. Fourthly, alternative stories are reinforced by relating them to identity (e.g., What does this say about the person you are today?) and to future goals and actions (What can you do in the near future to live by this value or meaning?). So even without applying specific components, such as *externalizing discussions* and *remembering practices*, a narrative therapeutic framework and attitude may be beneficial in bringing about the aims of life review, such as integrating negative life events and the restoration of meaning and mastery.

### A New Intervention Combining Life Review and Narrative Therapy

An intervention combining life review and narrative therapy has now been developed. The intervention entitled “*The Stories We Live By, One’s Autobiography as a Source of Wisdom*” is a program combining life review and narrative therapy and comprising seven sessions (Bohlmeijer & Westerhof, 2011). The manual starts with a general introduction about the importance of reminiscence and autobiographical memories, how autobiographical memory works, and the way in which life review and constructing alternative stories may be helpful in integrating life events. Sessions one to four have different topics, i.e., youth and family, adolescence and becoming an adult, work and care, love and friendship, but have a similar structure. First, participants are invited to answer some general questions about the relevant topic, to describe a specific, positive memory, and to describe a self-defining memory (Singer et al., 2007). Secondly, the participants are asked to choose one event they are still struggling with, noticeably by still having strong emotions, e.g. guilt, anger, or sorrow. They write down their memory of this event and are then asked to answer questions that may help them to construct alternative stories. These questions are about coping with the event, exceptions to black-and-white conclusions or interpretations, thinking of alternative explanations for the behavior of a person involved, lessons they learned afterwards, and the context and time period in which the event took place. They are then asked to reflect upon the meaning and significance of their answers. All sessions end with an invitation for a creative expression of a memory (e.g., a poem, a drawing, writing a curriculum vitae of the hands, composing a letter in the future).

Session five and session six are about important goals and projects in the current lives of the participants. Session five was adapted from a chapter in the manual entitled *Memories that Matter* by Jefferson Singer (2005). Participants are asked to write down important goals and

ongoing activities in their lives and relate them to different life domains (e.g., performing, intimacy, personal growth). They are also asked to rate their goals on desirability, difficulty, and commitment. The participants then reflect upon their wishes to reduce their commitment to some goals and to commit to new goals. Goals are also related to self-defining memories. Exercises are introduced that show how self-defining memories can be helpful in attaining important goals. Participants are asked what important values are expressed in their self-defining memories and if their current goals are related to these values. Session six discusses the importance of timely disengagement from goals and engaging in new goals. Participants are asked to assess all their current goals, irrespective of whether they provide inspiration and are meaningful or whether they primarily cause frustration. In another exercise participants are asked to make a list of all their talents and to assess whether they use their talents enough or wish to start new activities that reflect some of their talents. In the seventh and last session participants are invited to compare their lives to a book and to read their lives as if they were books. First, an exercise is introduced that aims to discover important themes. Secondly, participants are asked to divide their lives into chapters and to give each chapter a title. For each chapter they have to name the most important life event, the most important persons in that chapter and the role they played, the theme, the development of the story, and the ending of the story of that chapter. Thirdly, the participants are given the assignment to reflect upon the chapter they now wish to start.

The program has been implemented as a group program in the Netherlands and has been studied in a large, pragmatic randomized controlled trial. Positive effects were found on depression (Bohlmeijer et al., 2009; Korte, Bohlmeijer, Cappeliez & Westerhof, 2012), and it was shown that these effects were mediated by reduced negative reminiscence styles, such as bitterness revival and boredom reduction (Korte, Westerhof, & Bohlmeijer, 2012). There has been a plea for balancing nomothetic research with idiographic studies (e.g., Barlow & Nock, 2009; Molenaar, 2004). Idiographic science may focus on the more intensive study of individuals over time (e.g., single case experimental studies) and on the meaning of an intervention to the individual and the processes of change (e.g., case study). In this paper we present a case study of one participant in the randomized controlled trial.

### Case Study

The following case study is based on the autobiographical writings of a 53 years old woman who participated in a study in which “The Stories We Live By” program was implemented as guided self-help. Every two weeks the participants would receive the introductory texts, autobiographical questions, and exercises by email. After two weeks they would send their stories and exercises back to their facilitator, accompanied by an email. After a few

days the facilitator would send his or her feedback to the participants, together with the materials for the next session. All autobiographical writings and reflective texts, as well as all exercises and emails of the participant, were collected. During the first step, all of the written accounts (i.e., autobiographical writings, reflexions and exercises, and the emails) of each participant were closely read to get a general idea of the background of the participant and the processes that had taken place during the intervention. In the second step, all of the texts referring to important themes in the life story were selected and analyzed. In the third step, all texts referring to the process of integration were collected and analyzed. All quotes were marked in which the participant reflected about difficult events and wrote about new insights into the meaning of these events. Particular attention was given to texts that started with phrases like: “maybe...,” “now I that I rethink this...,” “it seems like...,” “I think that...,” “I have become conscious that...,” and “I have discovered that...”. In the fourth step, the selected texts on both themes in the life story and integration were categorized and clustered. The participant gave consent for her stories to be used for research. However, her name was changed for privacy reasons.

Esther is 53 years old. She works as a manager in a hospital and has two children. Four years ago she met a new man, John. From the beginning she felt a deep connection with him. John has never been accepted by her entire family, only by her brother. She even lost contact with her son, because her son did not want to have anything to do with John. Two years ago John died from cancer. Her reason to participate is that she is still mourning this loss. Esther was twice divorced in the past. These marriages were unhappy. In retrospect she says “*I always put myself in second place in these marriages and in relationships in general.*” She described her childhood as “*happy and unconcerned.*” She was the third child of five. She had a very good relationship with her father. “*We were hand in glove,*” she said. However, she always felt as if she was an outsider. She married her first husband, mainly to distance herself from her family. Although it soon became clear that, as a couple, they did not connect very well, she decided to have children to “*give her love an outlet.*” First a son and then a daughter were born. At the age of 26 she decided to divorce her husband. She focused all her efforts on living independently with her two children. Later, she met her second husband. Although this was not a bad marriage, they had different opinions about having children together. At that point, she decided to resume her education and, at the age of 33, started working in health care. She was subsequently promoted on several occasions. From 2000 onwards, the relationship with her second husband deteriorated. He cheated on her and in 2005 she decided to divorce him. Until she met John, she had a very hard time. Two years ago John died from cancer. When she decided to take part in the pilot project she was still grieving. The loss of John seemed to have triggered a review of her life and her past relationships and relations with her family as well. A red thread throughout her life story, until only very

recently, has been that in order to avoid conflicts she always put herself in second place and let others make important decisions.

From her stories, it became clear that the marriage with her first husband had not been integrated into her life story. She gives a completely negative picture of this marriage and she still feels a lot of anger. In response to the question about whether there was also a positive memory about this marriage, she first writes down “*I cannot think of anything.*” But later she writes “*We had children together and they were created and born in love.*” She writes the following sentences in response to the questions aimed at opening up alternative stories. In response to the question “*Did you also learn anything?*” she responded:

*Through these difficult times and the divorces I have learnt to let others know what I want and especially what I do not want. After my divorce I worked on this. Before my divorce I made others directors of my life. Now I think I am here and I am worth it.”*

And later she writes: “*I learnt that I will not have a relationship any more with someone who puts his own self esteem before mine...I prefer to be alone above being unhappy with someone.*” When asked “*Can you think of other reasons for his behavior?*” she responded: “*I think that my husband had also been damaged in his upbringing. His father was a dictator. He ruled with an iron fist. Possibly my husband has become insecure. In his family there were no conversations, he never learnt to talk.*” And in response to the question about whether time and context could have played a role, she answers: “*I was very young at that time and had never been taught by my parents to be assertive.*”

When the counselor writes in her feedback that Esther has endured a lot and has always given a lot of support to others, but in the end started to support herself, Esther writes:

*When I read these sentences I could only cry. I never thought of it in this way, but I think it is true. It now becomes clearer to me. These days I make it very clear to others what I can and cannot bear. And others accept this. I don't care what others think about it, it is now about me (without becoming selfish).*

In response to the question about whether or not Esther finds it difficult to take time to express her sorrow, she writes:

*My conclusion is that at the most vulnerable time in my life I clamped to a man. This was not always positive for me and gave me problems. I know I am very vulnerable now and I have to take care I do not clamp to someone. That is the trap I tend to fall into. I must not make choices on the*

*basis of vulnerability but on the basis of my strength and power.*

Her goals and the new chapter in her life relate to renewing friendships she has lost in the past due to her marriages. Summarizing the effects of the intervention, Esther writes: “*It has been instructive to see why things have happened as they happened; to see threads in my life. It helped me to bring order to my life story and to come to terms with my life story.*” And: “*I can now better understand and accept how events took place and developed in my life, and also how others have coped with them.*” She also seems to feel that she can cope better with her present situation: “*Despite the fact that I am still mourning the loss of John and that my mother has a terminal illness, I experience much more rest.*” And she goes on to write: “*Both positive and negative memories are very instructive. When I feel down in the dumps on some days I force myself to think of something positive that happened that day. Looking for different perspectives on a bad period...made me more compassionate, at ease...it is alright.*” She finishes her account by saying: “*...I want to let go without forgetting. I will read my stories again, to learn.*”

## Discussion

The case study shows how life review can be beneficial to people who experience distress in mid-life. Esther clearly stated that the self-help life review had been a positive and helpful experience. She felt more empowered to cope successfully with present life situations. The intervention enabled her to find new and authentic ways to grow as a person and meaningful values to live by. Analyzing the autobiographical writings of Esther, a clear though tentative picture emerged of how life review within a narrative therapeutic framework may work. First, people may experience difficulties in coping with recent life events (in Esther's case the death of a partner). These life events trigger memories about other negative events in the past (e.g., bad marriage). This may lead up to an increase in reminiscence characterized by bitterness revival (Webster, 1993). Memories about negative life events in the past trigger dominant negative stories about one's self and the world. The major themes were uncertainty, isolation, and insecurity. These themes were central in stories with a victim plot (Polkinghorne, 1996), e.g., “*I was not seen as a child,*” “*I had a very insecure youth,*” and “*my husbands never loved me.*” These stories may then have a negative impact on feelings of mastery, competence, and meaningfulness in the current lives of people. The resulting feelings of depression and anxiety could enhance the retrieval of negative memories over positive memories (Williams et al., 2007), thereby further negatively influencing the life story (Conway, 2005). The dominant, negative stories could easily become self-fulfilling prophecies by promoting stagnation in actual life; such as fleeing into another bad relationship, as in the case of Esther. Apparently, participating in the intervention helped

Esther to develop an alternative story with a more agentic plot. Esther revised the script of her life as she learned to express herself and become more and more autonomous. The focus in each session on the retrieval of specific positive memories could function as unique outcomes (White & Epston, 1990) that counter the dominant negative life stories. These unique outcomes are linked to create new themes that give new meaningful coherence to the stories of the lives of the participants, e.g., learning to become independent, bringing up children in a safe and warm environment, and self-development. The alternative stories help them to end the stagnation in their lives, to cope with recent life events successfully, and to act upon more desirable possibilities in life. One could say that the ability to read their lives and discover new themes has made the participants sadder but wiser (Randall & McKim, 2008). This theme is beautifully phrased by Esther when she expresses in the last week that she has learnt from both positive and negative events and that she wants “to let go without forgetting.” Esther feels the power again to live her life as an independent woman.

Having discussed a model that shows how recent negative life events may cause a negative chain reaction, it becomes possible to show how the components of the intervention positively transform this chain reaction. First, negative memories are integrated by asking questions that may result in new stories about these events (e.g., coping, competences, lessons and meaning). This results in alternative, more agentic life stories. This results, in turn, in an increase in mastery and meaning in life, a decrease in depression, and an increase in well-being. The training and focus on the retrieval of specific positive memories support this process either by functioning as unique outcomes to the dominant negative life stories or by enhancing a positive mood. The alternative life stories are further reinforced by letting go of activities and goals that correspond with the former dominant negative life story and, instead, adopting goals and activities that fit in with the new life story (sessions five and six). Acknowledging positive themes in their life stories and improving their level of mastery will result in an increase in practical wisdom and an ability to cope effectively with the recent life event.

Naturally, the presented theory is based on just one case study and is very tentative. Further studies are needed to (dis)confirm the hypothesized processes. However we believe that, at present, there is a scarcity of case studies within the literature on reminiscence. Most papers present quantitative data on the effects of reminiscence and life-review interventions. Case studies can give more information on how interventions work for particular persons. This may be helpful in building theories about the working processes and elements of life review. They may also be helpful in informing practitioners about models that assist counselors to implement interventions in effective ways. Lastly, we hope that the case study of Esther shows how rewarding and inspiring reminiscence can be, not only

for the person doing a life review but for the facilitator or counselor as well.

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