How Our Society Can Benefit From Oral Narrative Practice

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It is recognized among most psychologists and many lay people that the way in which we respond to adversity and emotional pain has an impact on the quality of our lives in the present and the future. People who face their pain, process it and integrate it into their personalities or increase their well-being, while those who turn away from and try to ignore painful events and situations pay a price in terms of their mental health.

In the Western world, most therapists and counselors try to help people "deal" with painful past events to reduce the negative effects on their clients' quality of life in the present and future. In this paper, I argue that narrative psychology offers unique tools for those who are trying to make sense of the relationship between past and current events and circumstances, the distress they are currently experiencing, and their ongoing well-being. These strategies are discussed in the narrative literature but have not yet been brought to bear on the lives of average people.

One of the foundational tenets of narrative psychology is that our personalities are shaped by the stories we tell about ourselves and our lives. In a classic statement, Dan McAdams (2019) writes that "narrative identity provides human lives with a sense of unity, moral purpose, and temporal coherence." (p. 325). The principal features of an evolving but coherent narrative identity are a life of meaning, integration, and purpose. A principal means for gaining these benefits is autobiographical reasoning.

Naturally, not all the stories we can tell have equal weight in the formation of our identity. My description of yesterday's trip to the grocery store is insignificant next to my story about the sudden death of a close friend. This comparison highlights the unique importance of our experiences of adversity and suffering in shaping our identity. Hence, narrative psychologists are interested in how we respond to and "story" experiences and circumstances that upset our worlds and cause us emotional pain. The way in which we "process" emotional pain (or don't process it) has an impact on our happiness and well-being. Narrative psychologists and others have done extensive quantitative research showing that

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integrating painful events and feelings can help us reconstruct our identity for the better. Several psychologists, including Dan McAdams, Kate McLean and Jennifer Lilgendahl have fleshed out how we do this.

The primary way we process important events, whether in the past or the present, is by autobiographical reasoning. In one of the most complete descriptions of successful autobiographical reasoning Jennifer (Pals) Lilgendahl (2006) outlines a sequence of three steps. First, a person needs to fully absorb the pain and negativity of the event. This requires eschewing common psychological defenses like denial with which we often shield ourselves from discomfort and pain. In the second step, a person makes an explicit connection between the event and the self while endorsing the causality between them. In the third and final step, the individual brings their processing of the difficult event to a satisfactory conclusion, one that usually includes psychological growth. This growth is described in the narrative literature using terms like wellbeing, subjective well-being, maturation, psychological integration, contentedness, happiness, and new meaning. It is often the new meaning that draws the positive out of the negative. The individual now approaches their future with a fresh or rejuvenated purpose that takes them beyond their own concerns. This purpose usually includes contributing to the wellness of others, partly by ameliorating their suffering.

It is important to note that adverse events vary widely in their severity. Some adversities may be too severe to process. Some holocaust survivors, for example, never speak of their torment. One of the most common terms in recent psychology is "trauma recovery," even though there is no agreement about what constitutes trauma. A recent trend is to distinguish between "Trauma" with a big T and "trauma" with a small t. Another distinction is among three types of trauma—acute, chronic, and complex. Instead of sorting through this thicket, I use adversity to characterize events and situations that are emotionally disruptive and painful, while acknowledging that some are more so than others.

One issue that most narrative research leaves largely unexamined is the method that people use to carry out the three steps of autobiographical reasoning (adversity processing). How does the average, untutored person do it? This dearth of information needs addressing to serve psychologically healthy outcomes. This gap of actionable content stems from the quantitative, statistical, retrospective nature of most research in narrative studies. This is the nature of the beast, a beast that has established

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narrative psychology as a legitimate field of inquiry in the social sciences. Synchronous qualitative research of the kind I describe below offers innumerable, non-quantifiable variables that depend on the questions asked and the responses they elicit. Nevertheless, many quantitative researchers recognize its value in capturing because it captures autobiographical reasoning in action, as it is taking place.

Several years ago I was trained and credentialed to conduct life reviews. The term life review is used broadly to characterize various kinds of narrative interventions and modalities. The 25 individual reviews I have conducted over the last three years have consisted of between 10 and 15 one-hour sessions, spaced one week apart. The reviews lead a person through their life story, beginning with the earliest memories and ending in the present. The number of sessions required for each review depends on the age of the reviewer and the complexity of his or her life. I did not recruit life reviewers. I let people know that I was doing life reviews and people approached me with interest and questions. Reviewers were recruited by word of mouth and ranged in age from the mid-30s to the early 80s, and they were divided equally between male and female. Twenty of the reviews were conducted in person, two by telephone, and three over Zoom. Participants were not charged a fee.

As the listener, my role is to ask the reviewers questions, listen to their answers, and ask more questions. At the beginning, I tell reviewers that life reviews are often therapeutic but are not therapy (Haight and Haight, 2007), and that I do not counsel or offer advice. Most of the reviewers had been in therapy or were getting counseling at the time of their review. I did not record the sessions or take notes during our conversations, but later that day I logged a record of what reviewers discussed.

I ask reviewers three kinds of questions. One type of question is designed to open an area of inquiry. For example, "What was school like for you during these years?" A second type of query aims to elicit more details about an event or situation. Thirdly, I ask questions to help reviewers connect their experiences with feelings or to encourage a greater exploration of their feelings. Nearly all questions are open-ended. After the conclusion of a review I follow up with people at six months and in many cases for longer.

With the 25 life reviews, I have answered the question of how people most productively <u>do</u> autobiographical reasoning; that is, how they process their experience to good effect. People reason autobiographically; they make sense and meaning out of adversity and suffering by talking about it out loud with another person. This does not rule out the two other alternatives, thinking and writing. We can't observe or measure human thought processes, but many reviewers said that thinking about our sessions helped them to pull new insights together. Writing about difficulty and adversity, journaling, for example, has been studied and shown to benefit people, particularly in reducing stress and anxiety. But relatively few people are inclined to write regularly about themselves. Oral narration has other advantages over writing. First, in life reviews, for example, the narrator has another person who is probing and asking them questions that would not occur to them to ask of themselves. This expands the scope of their self-inquiry. More important, though, they are speaking about their lives, including adversities, to another human being. As Brian Schiff has noted (2012), the listener's act of witnessing brings the past into the present as an event. Thus, the past is not simply remembered but reenacted. The presence of an empathetic listener relieves the pain of the event(s) and effects healing through their ongoing presence. The act of speaking the past out loud to a person externalizes it and makes it graspable, and this, in turn, opens it up to new meanings and identity reconstruction.

The most common problem reviewers discussed was shame, though some did not have a label for it. As shame expert psychologist Brene Brown (2010) writes, everybody lives with some degree of shame. But many people are crippled by excessive shame, often rooted in their mistreatment or neglect in childhood and sometimes exacerbated by subsequent adult experiences. A shorthand description of shame compares it to guilt. Guilt, it is said, is about specific actions, while shame is about the whole person. A person with shame feels intensely and chronically unworthy of love and belonging. Shame often manifests itself in self-condemnation, self-destructive behaviors, and broken or unsatisfying relationships. In addition, shame suffocates a person's capacity to feel ordinary emotions and to use the past and present to build a new identity.

Coincidentally, as I was completing this article the New York Times published an article about psychiatrist Judith Herman, who in 1994 published her groundbreaking book, Trauma and Recovery, that the Times hailed as "one of the most important psychiatric works to be published since Freud." (NYT, April 24, 2023). The article goes on to say that Herman's book introduced to the public the notion that while trauma is often associated with the battlefield it also takes place inside middle class homes where children can be mistreated and neglected and in the ordinary stuff of life. Based on her clinical work, Herman outlines three stages of trauma recovery. First, the traumatized person needs to feel safe, second, to speak to a trusted person about the traumatizing event, and third, reestablish their embeddedness into society and relationships. The transition from the first to the third steps is the act and process of the person telling another person about their trauma events in fine detail. It is this clearing out process (one woman called it taking out the trash) with another person that creates space for change.

Three Life Reviews

Mistreated and neglected describes the childhood of an early 40s reviewer I will call Susan. After telling me about her painful childhood, Susan recounted a still traumatizing across-state-lines abortion she had when she was 20-years-old. Partly because of the questions I asked, this took four sessions and more than four hours. I heard about the circumstances that necessitated the abortion, her drive into another state, the casual callousness of the physician, and the aloofness of the other people in the office. Susan drove home physically battered, emotionally humiliated, and brimming with shame that she still carried with her the day we spoke. She spoke movingly about how her shame had compromised her professional life (in financial consulting) and crippled her relationship with her teenage daughter.

During the weeks following these four conversations Susan and I revisited the abortion and followed its footprints through the subsequent 25 years of her life. Gradually her intense shame subsided and this freed her to see clearly the harms it had done to her, including a level of self-esteem that could not go any lower. The first person to benefit from this evolution was her daughter, with whom she was now able to relate in a better way. Her professional life also began to improve. Her release from the worst of her shame released energy for positive attitudes, actions, and feelings. Freed from the grip of her fierce selfcondemnation, Susan gained meanings that had up until recently been only abstract and aspirational.

Before her life review Susan had spoken with others about her abortion, including several friends and a therapist. But she had not talked with these people about the details of her experience nor about her feelings of anger and self-contempt. When I asked her why not, she paused for several seconds and then said, "I guess nobody asked?" In this way, she was representative of other reviewers who had spoken about their difficulties, but not in detail or by expressing accompanying feelings. These two features of oral narrating need to be present for it to serve as a vehicle for new meanings.

Another reviewer, Brad, is a financial executive in his early 60s, and he was one of the few reviewers who began his review with an explicit goal. In our first session he said that for his whole life he had been obsessed with controlling every aspect of his existence and as much of the lives of others close to him as he could. As he had grown older, he realized that he paid a heavy price for this obsessiveness by feeling constant tension, anxiety, and an inability to feel ordinary human emotions. Brad was interested in seeing whether a close "examination" of his life might give him ideas about how to "loosen up." Instead, he found that it was the talking that did the loosening.

Brad's childhood was "cursed" by two afflictions. First, he was born with a lung condition that prevented him from engaging in common childhood activities like playing tag. This made him feel defective and ashamed at school and among his friends. His homelife offered no haven. His father was unremittingly and belittlingly critical of everything he did. If Brad brought home a report card with three A's, his father was incensed over the one B. His mother tried to counterbalance his father's harshness but went overboard in a way that left him feeling like an emasculated momma's boy. At the time we began our life review, Brad's mother had been dead for a decade. His father, from whom he was estranged, lived in a retirement community a three-hour plane ride away. Brad never visited.

In response to questions, Brad told me details of his early struggles, recounting specific incidents of alienation from his peers and the harsh treatment he received from his father. As I did with other reviewers, I asked him to visualize and describe specific scenes. This required several review sessions and helped connect Brad with the helplessness and anger he had felt when he was young.

As an intelligent man who had been in therapy for several years, Brad knew that his childhood feelings of powerlessness had led to an overweening need for control as an adult and that this had dampened his capacity to feel. In this way he laid out how his childhood shaped his adult life. Although he had been in therapy for several years in his 50s, he had only sketched out what he discussed in the life review, focusing on present problems that were never resolved. But perhaps partly because of this previous work, telling another person about his entire life, with detail and newly liberated emotions, had a revelatory impact on Brad. After his tenth session, Brad began to relax his control over himself and others and with this came "a new freedom and a new happiness." During the last five sessions of his review Brad's 96-year-old father suffered a heart attack. Several days later Brad was with him, holding his hand, as he died. During their last conversation the two men were peacefully reconciled; Brad returned home both sad and deeply content.

During several post-review conversations, Brad marvelled at the impact of our conversations and, being an analytical man, tried to figure out how and why it had happened. He ventured that telling his story out loud connected life patterns from childhood through the present on a visceral level that was liberating. His final word on the why and how question was, "You were here, you were right here with me." This captures the remarkable impact of oral narration to enact autobiographical reasoning in real time and its capacity to release in people a capacity to change. Ironically, given Brad's obsession with control, the life review lifted this need from him. When we spoke a year after his review he said he was still at work. Occasionally, a situation would reawaken his controlling instincts, but he often caught himself, or his temporary lapse was pointed out to him by a friend or family member. Around this time his 22-year-old daughter was diagnosed with cancer; Brad was awed by his capacity to love and support her. Brad could now integrate his adversities, becoming himself.

The last story I want to discuss belongs to a casual friend, Kevin. Over a casual lunch he mentioned to me that he was always angry. "What at," I asked. "Everything and everybody," he responded. I didn't press him at the time but indicated that we could sometime talk more about his anger if he thought it might help. This invitation turned into one of my first life reviews. I found out early on that Kevin's anger was of global proportions, and that it arose whenever he was confronted with an adversity, big or small, and that he rarely held back in expressing himself. This might have been why, at the age of 61, he had recently completed his third divorce. Kevin's difficulties began as early in his childhood as he could remember. He had not been abused, he wanted to make clear, but his parents paid no attention to him unless he misbehaved, and the reaction was immediate and harsh. He was an only child, born when his parents were in their late 30s. They had both died more than a decade ago.

Kevin denied that he had been abused, though he didn't remember a single conversation he had ever had with either parent. By the time he was 10 years old, he was "an angry little fellow." His was a childhood that leads psychologists to point out that extreme neglect can be a form of parental abuse. As the life review moved on I asked Kevin to zero in on a person or two with whom he was currently angry. That was easy, his girlfriend. Rather, he corrected, former girlfriend, who had recently broken up with him, but without saying so. This was around the time when we all began reading about ghosting in the media. He was irate that Jules, a woman in her mid-40s, had "lacked the guts" to tell him face-to-face. Through talking over this and other situations during our next couple of meetings, Kevin acknowledged that Jules had probably ghosted him because she was afraid of his anger. From here we worked around to the idea that Kevin routinely drove women away with his anger. Perhaps, he admitted, he should apologize to Jules for so often being nearly out-of-control mad at her. He didn't, but the notion marked his new awareness that he was responsible for his anger, and that it wasn't merely something that overtook him as a natural response to a hostile world.

The movement toward accountability happened with other reviewers, not through an abstract conversation about taking responsibility for one's own actions but by reviewers narrating situation after situation of identical or similar reactions to the same kind of event. This was a turning point in his anger career. He never got back with Jules. He still got angry, but over time he caught himself before exploding, and he experimented with milder and more situation-appropriate responses. By doing this, he acted himself to feeling less angry. The less he was angry, the easier it got to not be angry. Kevin narrated himself into the realization that he himself created most of his adversity, and that he wasn't locked into a life-long pattern of reactivity. Understanding that his anger was rooted in being neglected as a child enabled him to see that change was possible. When I spoke with Kevin two years after the end of our review, he said that he still "lost it" sometimes but not nearly as often. No longer did everybody identify him as "that guy who is always pissed off."

Compared to the three people I have just written about, several reviewers had comparatively uneventful childhoods and happy lives. At the end of their reviews they said that they had found the sessions to be interesting, enjoyable, and educational. But most reviewers had run up against adversities, some ongoing that had not been autobiographically processed or resolved. Some were struggling with problems of recent onset. These included the recent death of a spouse, sub-clinical depression and anxiety, the alienation of adult children, the aftereffects (shame) of childhood mistreatment, workplace conflicts, painful resentments, unhappy marriages, and undesirable, unwanted habitual behaviors. One middle-aged woman was diagnosed with metastatic breast cancer after our third session. She and I met for more than 20 sessions, followed by frequent post-review talks. Although I spoke with all the reviewers about the happy parts of their lives, we naturally zeroed in on what was making people unhappy. As word went around my community that I did life reviews, the people who talked to me may have had a greater number of dissatisfactions than others in our middle, upper-middle class area.

What I Have Learned From the Life Reviews

In preparation for making the transition to the question of what narrative practice can do for people who are not doing a life review, I want to mention five things that the reviews taught me.

First, the reviews showed that many people reason autobiographically by talking out loud, and they are critically helped in doing so when asked probing questions. These questions dig out the details about adverse events and circumstances, and then they probe for the feelings at the time of the event as well those the person is feeling as they are talking. This is the link between steps one and two that Lilgendahl believes is so critical to successful autobiographical reasoning. Of course, the success of this kind of reasoning is the presence of an attentive and empathetic listener.

Second, by processing their lives out loud, most of the reviewers found their way, as one person put it, to "a new freedom and a new happiness." An important part of this enhanced well-being is the discovery or creation of new meaning. These new meanings always included two features. One is gaining more rewarding connections with other people and the second is deriving purpose from a relationship with an entity greater than oneself. This could be a cause, an organization, a higher power, or all three.

Third, shame prevented people from accessing feelings and doing narrative work. Shame is most often instilled in childhood by inadequate parenting. The reviewers living with shame needed to talk about the negative aspects of their childhood that had pervaded their adult lives. Most of these people were aware of their shame, even when they did not have a name for it. Some thought of it as a deep lack of self-esteem. These people needed to talk about their childhood, sometimes for several sessions, before they could narrate their adult lives in order to get to their adult life. In other words, many reviewers attained self-honesty during the course of their review. It was not that they had previously tried to deceive themselves, but rather that in the act of telling their story they uncovered memories and new truths about themselves. Few of these people could have written about their shame; it would have driven them further into their self-contempt. But talking about shame dissolved or ameliorated it because shame flees from being exposed the way vampires flee sunlight.

Fourth, narrative practice—that is, speaking narratively about one's life with another person—leads to positive and prosocial outcomes. It defuses anger and resentment, promotes accountability, and develops empathy and compassion. Reviewers became more accepting and less judgmental of others—and more inclined to forgive those they felt had hurt or harmed them. In conflicted relationships, they pursued reconciliation. These positive outcomes of oral narration align with the consensus among most psychologists that our well-being is grounded in meaning and connection.

Fifth, every year hundreds of books and articles are written about how we can change our personalities. Some of these efforts are inspiring and helpful. Oral practice underscores two ingredients of meaningful and lasting change. The first is that it is important to flesh our story out with another person to identify what about ourselves we want to change, why we want to change, and a strategy for how we will do it. In the wake of their life reviews several people enacted substantial change in areas that had previously resisted their best efforts. By discussing the behaviors with which they were dissatisfied, they felt less bound by these patterns, and they cleared the space for more positive actions. Second, once people make room for change, people are most successful in acting themselves into change rather than waiting for inspiration. Thus, autobiographical reasoning leads to actions that construct new features of our narrative identity that reprocess the past and evolve us toward a better future.

How Can We Use Narrative Practice in our Personal Lives?

These prosocial values and actions are much needed today. America, and much of the rest of the world, are beset by two intertwining problems. First, our political life and our public square are riven with conflict, fake news, lies, conspiracy theories and antagonism. Second, an increasing number of people feel lonely and disconnected from the people around them. The life reviews I did show that narrative practice can play a role in both the restoration of civility to the public square and meaningful conversation and connection in our personal relationships.

Is our situation worse than in the past? We don't need to paint American history in idyllic colors. After all, two of our founders, Thomas Jefferson and Alexander Hamilton, were at each other's throats, albeit through proxies. In his second term, not even George Washington was immune from vitriolic attacks. But the 21st century marks a dramatic and qualitative change from our history up to this point. For reasons of space and concision, I can only sketch this two-fold transformation wrought by new technologies for communications. They have been described by dozens of journalists and social commentators as increasingly affecting every aspect of our lives. First, in his recent book Max Fisher (2022) empirically documents how the algorithms of Facebook and other social media sites prioritize profit above all else by galvanizing extremism, hatred, misrepresentations and lethal violence to whip up a toxic brew of chaos, not just in America but around the world. The NYU social psychologist Jonathan Haidt invokes the biblical image of the Tower of Babel from the book of Genesis to characterize our current political and social culture as one of fragmentation and alienation. We no longer speak the same language. In an April 22, 2019 article, Haidt and his colleague Tobias Rose-Stockwell write about the consequences of Babel:

"Compared with Americans in the 18th century—and even the late 20th century—citizens are now more unconnected with one another, in ways that increase public performance and foster moral grandstanding, on platforms that have been designed to make outrage contagious, all while focusing people's minds on immediate conflicts and untested ideas, untethered from traditions, knowledge, and values that previously exerted a stabilizing effect."

Our lives and relationships are so fragmented that we often lack a factual base to ground discussions of differences that push us away from each other. By way of illustration, I recently spoke with an acquaintance about our contrasting political views. But a discussion was impossible because he attributed everything I said to the influence of fake news, the deep state, and the "woken" consciousness that is undermining our freedoms (to carry firearms into our local grocery store, for example). Since we shared no common reality, exchange was brief.

To quote Haidt (2022), no wonder that many experience America "as a place where everything is going haywire." This condition exacts a heavy price in the erosion of the forces that make democracy possible—high levels of trust, resilient institutions, and common, shared stories.

Second, when we turn to our personal lives, the view is correspondingly grim. In her most recent book, Reclaiming Conversation, MIT professor Sherry Turkle (2015) examines how social media and the ubiquitous cell phone have shrunk our attention span and focus down to keeping up with an ever-replenishing deluge of the latest trivialities about the lives of people we don't know well and perhaps don't care to know at all. It is a cutthroat world of competition, with its participants posturing and performing for attention, control, prestige and, of course, money. If they tire of counting their "likes" and monitoring the indexes of their up-to-the-minute popularity, they can in seconds tap a couple icons that will transport us to the most recent news and photos from the party across town. Living in this artificial world people lose track of what is real, and they are woven into a cocoon of self-absorption. Turkle encountered one young man who blurted out, "You ask what's wrong with conversation? I'll tell you what is wrong with conversation! It takes place in real time and you can't control what you're going to say" (p. 22). So people carry out prolonged emotional disputes with their significant other through texts, and when they get bored or

weary they just stop or move on. In an age when we can communicate with others in more ways than ever before, ghosting is an easy way to sever relationships while avoiding feelings and accountability. And it is not just the kids.

Under these conditions, it is no surprise that social scientists are documenting the skyrocketing loneliness pervading our wired world. (See Ezra Klein, NYT. April 18, 2023). In his book, *Together: The Healing Power of Human Connection in a Sometimes Lonely World* (2020), our Surgeon General, Dr. Vivek Murthy, chronicles the crisis of loneliness. Murthy told CNN that "We are called to build a movement to mend the social fabric of our nation." This movement should be constructed on six pillars, the sixth of which is the cultivation of "values of kindness, respect, service, and commitment to one another." (May 2, 2023). If we forsake our capacity for authentic interactions with one another, loneliness will continue to rise, along with its consequences for our mental and physical health.

The tagline to Haidt's article is, "It's not just a phase." For years many people have looked toward the maturation of computer technology as the panacea to many of our ills. But the recent release of ChatGPT and Bard have sparked concern even among those who have spent their lives in the computer industry. At the very least, generative AI will likely undermine and degrade authentic communication in ways that today are not predictable. As AI evolves in its sophistication, the less we will be able to manage its unintended consequences, and the more available it will be to whomever possesses or can pay for the technology. Given the trends noted here and the vast forces at work (Google, Microsoft, governments, private enterprise), the fact that when new technologies are introduced they are always maximized, and with the impossibility of controlling access to AI, is there anything that the solitary person can do aside from voting and lending our voice to the humane values uplifted by narrative practice?

We can't discuss all the possible countermeasures here, but two possibilities need to be mentioned. The first is to join organizations that embody narrative discourse. The second is to participate in programs where real conversation and narrative practice are taking place. Outside of psychology, some of the most exciting work is getting done in the field of narrative medicine.

Columbia University has a distinguished program that offers both a master's degree and a certification in the field. Other medical schools with narrative medicine programs include Baylor University, The University of California San Francisco, The University of Utah, and The University of Chicago.

One of the most ambitious applications of narrative practice takes place under the aegis of the Health Story Collaborative (healthstorycollaborative.org), which is based in Boston. The organization is co-directed by Annie Brewster, MD, who practices at Massachusetts General Hospital and teaches at Harvard Medical School, and by Professor Jonathan Adler, a narrative psychologist at Olin College outside Boston. The collaborative describes itself as "patient-centered, research-based, and committed to the therapeutic power of storytelling. We strive to create a space where story sharing is valued and honored within the healthcare system." Dr. Brewster recently published a book with journalist Rachel Zimmerman (Brewster, 2022) entitled "*The Healing Power of Storytelling: Using Personal Narrative to Navigate Illness, Trauma, and Loss.*" I believe it to be the best book about the use of oral narration with ordinary (though often sick) people. It is written for a lay audience and speaks about how autobiographical storytelling by patients and health care providers brings a healing dynamic into all levels of healthcare. The Collaborative sponsors live events and virtual workshops that are open to the public and free.

Since retiring several years ago, I have been active with hospice and people in recovery from drug and alcohol misuse. In hospice, I speak and listen to people who are dying-they usually have only weeks to live. Depending on the illness, hospice patients may not be able to talk much, but some can and do. In response to questions, they talk about memorable parts of their lives, how they have tried to live, and any regrets they have. Expressing sadness or regret can be particularly important for people near death, just as it was for the life reviewers. It helps them approach their death with greater peace of mind. Oral narration is also a large part of what helps people in bereavement groups where people share with others the good and not so good about life with their recently deceased loved one. Here the group sharing and mutual identification are particularly powerful.

Men and women in recovery are faced with the need for making comprehensive changes in their lives. They need to acknowledge and come to terms with their former life and sometimes mourn its ending. They do this through oral narration, telling their story again and again. At the same time, they must build a new life that is dramatically different from the old one. This usually takes years, and the changes they make are solidified by talking to others about how they are living differently. Much of this talking is done in a group session with others going through similar experiences, and some of it is done with their sponsor.

Third, there remains what we can do in our personal lives by initiating and participating in significant and meaningful conversations—conversation about how we live, how we meet adversity, and where we find meaning. This does not mean that all conversations need to be deadly serious nor that our human interactions need to be modeled on the structure of life review. But we can listen more attentively to one another and can ask questions that show we care about them and are open to hearing more.

In November of 2020 New York Times columnist David Brooks (2020) wrote an op-ed piece about "Nine Nonobvious Ways to Have Deeper Conversations." Brooks did not mention personal narrative but caught its spirit when he discussed several of these nonobvious strategies such as not fearing the pause and asking "elevation" questions. He concluded his article by saying, "Deeper conversations help people become explicable to each other and themselves. You can't really know yourself until you know how to express yourself and find yourselves in another's eyes. Deeper conversation builds trust, the oxygen of society, exactly what we are missing right now."

I agree with Brooks as I consider how far away our society is from valuing conversations that make us explicable to ourselves and others. Every year dozens of books and articles are published about listening, ranging from the instructive to the exhortatory. Careful listening takes practice but is not a complicated skill to learn. More demanding is for people to develop the desire, intentionality, and discipline needed to find our bearings in a noisy, distracting culture that deliberately tries to render us obsessive and compulsive. Habituations and addictions separate us from reality and meaning. The first of the two most common reasons people give for not being a good listener is that they are preoccupied with the next thing they want to do, which is often to check their cell phones. Second, many people are averse to listening to people talk about their adversity and misfortune. They want to fix the problem so the person feels better. When there is no fix at hand, the listener feels powerless and exposed to the other person's suffering-and perhaps to their own. They don't realize that simply attending to another person's struggle and serving as a validating witness is a powerful act of solidarity that helps the distressed person feel better, even when the problem is not solved.

People are also reluctant to ask questions; they don't want to pry or risk opening the person to more pain. But asking questions can be done in a way that does not impose a requirement that others respond. And, surprisingly, research has shown that most people are receptive to questions from others, even strangers. Once a relationship is established, many are willing to talk about themselves on a deep level, perhaps because they are lonely. Serious conversations about adversity, even between acquaintances, help people do autobiographical reasoning and work their way toward the positive outcomes we have discussed.

This may sound naïve, even silly, and naturally we can't turn every encounter into a life review, but with effort, we can push through our rush and distraction and attend to other people. We can help people to make sense of their lives through finding greater meaning and purpose. We can even do this with those of contrary political views because we are all looking for meaning and authenticity.

Our social and political problems are enormous, and some people I know have retreated into discouraged isolation. This is understandable. But my experience conducting life reviews convinces me that the oral narrative practice of listening and asking questions models a way of interacting with others that can bring healing to those around us and give us grounds for hope in the future.

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