

Storytelling: an approach that can help to develop resilience

Relating personal experiences can help participants to cope with their conditions and improve research, explain Leah East, Debra Jackson, Louise O'Brien and Kathleen Peters

Abstract

Stories convey values and emotions, and can reveal the differences and similarities between people's experiences. Elucidating personal stories involves sharing which can help form bonds and supportive networks. With reflection, these can help to develop resilience. While the literature recognises the potential cathartic and therapeutic benefits associated with storytelling in research, links between the development of personal resilience and storytelling for research purposes have not been drawn. This paper argues that storytelling aids the development of personal resilience and provides opportunities to celebrate the hardiness of research participants who contribute to knowledge by recounting their stories of difficulty and adversity.

key words

- ▶ narrative
- ▶ research methods
- ▶ qualitative approaches
- ▶ nurse
- ▶ resilience

Introduction

Stories are a vital form of communication through which people, communities and society at large relay messages, entertainment, experiences and knowledge to others (Bowles 1995). Stories bring meaning into our lives, convey values and emotions, aid in reaffirming and validating our lives and experiences, and have the ability to connect us with our inner selves, with others and with society (Atkinson 2002).

The focus of qualitative research is the gaining of insight into people's experiences, so personal stories are valued. Responses to interviews that explore the

experiences of individuals are considered personal stories (Thomas 2003). In health care, stories are used to educate, inform, share and gain insight into personal experiences and phenomena (Steiner 2005, Hunter and Hunter 2006, Warne and McAndrew 2007): patients share their stories to illuminate aspects of their health and wellbeing; nurses convey their stories of knowledge about patients and situations to other healthcare professionals, potentially enhancing therapeutic care (Vezeau 1994, Banks-Wallace 1999).

Storytelling can be the basis for research through which greater understanding of human experience can be achieved (Bowles 1995, Benner *et al* 1997, Banks-Wallace 1999, Pennebaker and Seagal 1999, Cronin 2001). Participants' stories can provide insights into their backgrounds and experiences, giving a greater understanding of them in context. These enhanced understandings can significantly contribute to nursing knowledge and improve care delivery (Banks-Wallace 1999).

While literature has acknowledged the benefits in health care of narrative (Carlick and Biley 2004) and qualitative researchers recognise the value of stories, we argue there are beneficial aspects that have not been fully explored. Here, we present our arguments to support our assertion.

Stories and narrative

The terms stories and narrative are ambiguous (Polkinghorne 1988) and often used interchangeably (Riley and Hawe 2005). Frank (2000) asserts that people convey and tell stories rather than narratives, whereas Polkington suggests that narrative constructs events into a story form that contains 'beginnings, middles, and ends'. In health care, Wiltshire (1995) defined stories as informal and subjective accounts of personal experiences, with narratives conceptualised as being structured and more formal. Furthermore, in research, stories are the 'phenomenon' being studied and the narrative is the researcher's 'enquiry' (Connelly and Clandinin 1990). They add that 'people by nature lead storied lives and tell stories of those lives, whereas narrative researchers describe such lives, collect and tell stories of them, and write narratives of experience.' By contrast, Rubin and Rubin (2005) suggest that stories are efficient, structured accounts that are purposely relayed and may have been changed, whereas a narrative may be only a partial description of a larger story.

For the purpose of this paper, we define the two concepts as follows:

- **Stories:** research participants' personal accounts of experiences.
- **Narrative:** structured and formal accounts containing researcher additions and omissions.

The nature of personal stories

Personal stories can reveal the differences and similarities between people's experiences (Thomas 2003). Individual stories carry meaning and perceptions (Atkinson 2002) because when stories are relayed, individuals position themselves in the story to emphasise or diminish parts of the story or to prevent themselves from being perceived negatively by others (Frank 1995, Kitzinger 2004). Therefore, it is important to ensure that time is spent building rapport, and there is an atmosphere of acceptance in a suitable environment to enhance the comfort and safety of the storyteller.

Stories are subjective and may vary over time (Sandelowski 1993, Andrews *et al* 2004). They are influenced by environments, social situations, changing perspectives, the audience, and the purpose of relating the story (Sandelowski 1993, Chase 2005). Indeed, the fallibility of the human memory is such that people remember a story the way they wish to remember it, in the context of their lives (Kitzinger 2004).

To construct a comprehensive story, people make choices about what to include, making certain events and aspects visible, while omitting others (Bauman 2004). Without the selection, illumination, and exclusion of certain aspects, the account simply would not be a story. Hence, although the stories we tell are individual and subjective, stories of personal experience are original and hold meaning and value to the storyteller and listener. Therefore it is necessary to remember that stories, being subjective accounts, will differ, and that their purpose is to provide insight and understanding into a research focus area, rather than to produce generalisable results (Koch 1998).

Stories and resilience

Much research that tries to clarify personal stories – particularly in healthcare literature – portrays sad rather than happy experiences. In telling their stories, people are asked to relive experiences that were probably traumatic and

distressing, and that could involve uncomfortable emotions, such as sadness, anger, grief, shame and embarrassment. Storytelling has the potential to make hidden experiences visible (Reichert 1998) and can be the basis for the formation of relationships and support networks (Dean 1995, Banks-Wallace 1999). However, although not definitively stated, the literature also highlights how storytelling can help to develop personal resilience and celebrate the hardiness of research participants.

Resilience can be defined as the capacity for individuals to overcome adversity (Dyer and McGuinness 1996, Rutter 1999). It is influenced by individual and environmental factors, and is reflected through individuals and groups demonstrating positive outcomes and functioning in the face of adversity (Schoon 2006). That is, resilience refers to the ability of individuals and groups to develop and achieve positive outcomes following detrimental events and experiences that have the potential to generate adverse effects and outcomes (Dyer and McGuinness 1996, Rutter 1999, Hauser *et al* 2006).

Personal resilience consists of various traits and characteristics. These include: hardiness; the ability to draw on supportive networks and positive emotions, even in the face of adversity; reflexivity; and emotional insight (Jackson *et al* 2007). We will discuss these characteristics of personal resilience in relation to storytelling for research.

Becoming reflective

Healing after painful experiences can begin when our voices and stories are listened to and heard (Leseho and Block 2005). Frank (1995) asserted that personal stories have the ability to make sense of and increase understanding of personal experiences, while Murray (2003) found that new perspectives could be gained through the telling of personal stories to an interested researcher. Carlick and Biley's (2004) review highlighted how sharing and listening to stories can promote awareness of and reflection on life circumstances, while Cowling (2005) recognised the reflection and the desire for positive change that accompanies storytelling and dialogue.

Personal reflection is the ability of individuals to draw understanding and knowledge from their experiences (Jackson *et al* 2007). This can then be used

to improve outcomes in other experiences and events. Hauser *et al* (2006) asserted that insight into how people develop resilience can be gained through studying stories of personal experience as resilience is 'informed by a person's experience, and... how the stories that we use to manage experience shape it and point to new courses of action...'

Storytelling enhances resilience in research participants, as well as listeners and readers of the stories. Frank (1995) stated that 'storytelling is *for* another just as much as it is for oneself'. Personal stories can offer guidance to the listener or reader (Frank 1995): we can learn by reflecting on the personal stories of others. Through this reflection, we can gain understanding and insight into how others have overcome and worked through their adversity and hardship, and how we can incorporate these insights into our lives and experiences. Therefore, researchers and readers of research can develop their resilience by learning and reflecting on participants' stories.

Drawing on supportive networks and positive emotions

Supportive networks and relationships are important in developing resilience (Chadwick 2004, Tusaie and Dyer 2004). Individuals who are able to draw on others in times of hardship are receptive to support and can learn coping mechanisms from others who are more resilient (Dyer and McGuinness 1996). Support networks encompass the support that an individual gives and receives in a relationship (Tusaie and Dyer 2004); the interactions in these networks give individuals a sense of connectedness and belonging, essential to the development of personal resilience (Chadwick 2004).

The link between storytelling and personal resilience is demonstrated in Dean's (1995) work, which focused on stories in an HIV/AIDS support group. By sharing their stories, participants were able to form connections and bonds in a supportive environment from which they were able to make sense of their lives (Dean 1995). Humour was sometimes used to frame personal stories and appeared to have a therapeutic effect, making bearable the stories of illness that might otherwise have been too painful to share (Dean 1995). Storytelling in this and similar contexts can enhance personal and group resilience by drawing on positive emotions and creating support networks that foster a sense of connectedness.

Banks-Wallace (1999) found that storytelling among women forged strong bonds between participants and provided validation of their experiences. Participation in the research project provided the women with the opportunity to acknowledge and celebrate their strength, and to devise ways to resist further oppression together.

Developing and drawing on emotional insight

Emotional insight refers to the ability to acknowledge and understand one's emotions (Roberts and Strayer 1996). Storytelling and reflection can enhance and develop emotional insight. This was evident in a study that focused on exploring experiences of motherhood through personal stories (Jackson and Mannix 2003). Participation provided mothers with the opportunity to share their stories and reflect on their experiences to interested listeners in a supportive environment. After reflection, they gained insight into their emotions and responses (Jackson and Mannix 2003).

Similar studies have shown that storytelling can also help participants to:

- View their experiences from different perspectives and make sense of them (Murray 2003).
- Reflect on their past emotions and make sense of their feelings (Peters 2006).
- To grow and move on with their lives (Peters 2006).

Hardiness

Hardiness is a characteristic that offers protection against adversity (Bonanno 2004, Bartone 2006). Hardy individuals consider adversity a normal part of life (Bartone 2006); their ability to minimise this adversity comes from considering negative experiences not as threatening but as a meaningful component of life's journey (Bonanno 2004, Bartone 2006). Hardiness encapsulates striving to unearth a purposeful life, believing that one influences life events, and believing that life experiences offer opportunities to foster personal growth (Bonanno 2004). Additionally, hardiness influences thoughts and perspectives of how people view their world and experiences (Bartone 2006).

Leseho and Block (2005) used a storytelling approach to gain insight into the experiences of individuals who were oppressed through military dictatorship and who had family members taken, never to be seen again. Despite the

evident anguish and adversity, participants discovered an essential purpose in their lives and were determined to speak of their traumatic experiences and aim for 'social justice': to speak the truth, to be heard and to speak for the loved ones who had lost their lives.

Studies undertaken by East and others (East 2005, East *et al* 2006) found that the telling of stories helped with reflection by daughters on their experiences of absent fathers and how this affected aspects of their lives. Although they had often felt anguish and hurt by their fathers' absence, it was through the sharing of their stories and reflections that they gained greater understanding of their feelings and were able to explore the extent of the effects. Thus, participants were able to acknowledge their hardiness and celebrate their survival in the face of the adversity they had experienced.

Conclusion

Storytelling is not limited to gaining knowledge and understanding of life events. The relating of personal stories to interested listeners in an affirming and accepting environment can provide the foundation for the development of resilience. Storytelling is a powerful process and method that extends beyond research and has the ability to bring about strength and healing. Although all ethical research principles must be upheld and suitable processes put in place to mitigate the distress that can occur when relaying experiences, storytelling as a method has many benefits.

Nursing is a profession that bears witness to tragedy and human adversity, and it is for this reason that storytelling as a research method is particularly beneficial to nursing. It is an effective way of gaining insight, knowledge and understanding of events as they have been lived and experienced. It is also a method that can celebrate survival and contribute to the resilience of storyteller, listener and others who engage with the story in subsequent published accounts ■

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